



Greystones-Delgany & Kilcoole Local Area Plan Submission - Report

Who are you:	State Body
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East Coast Regional Drugs and Alcohol Task Force

Submission to

Wicklow County Development Plan 2022-2028

Greystones-Delgany & Kilcoole Local Area Plan

January 2024

The East Coast Regional Drugs and Alcohol Task Force (ECRDATF) has been established since 2003 by the Department of Health Drug Policy Unit. Its primary aim is to assess the extent and nature of the drug/alcohol problem in the Dublin South, Dublin Southeast and Wicklow areas and coordinate action at local level so that there is a targeted response to the drug/alcohol problem in local communities. The towns of Greystones, Delgany and Kilcoole fall within the region of this Task Force.

In an attempt to provide drug/alcohol support services at community level in this North Wicklow region, we have attempted to source suitable premises in this region on numerous occasions and have little results to show. We are catering to a very marginalised and disadvantaged group who would have limited access to private transport and thus, the ECRDATF would be focusing on providing services which are close to public transport options. Contact with the local council office has been of little assistance as they only direct us to the local HSE health centre in Greystones which is fully utilised by the HSE staff exclusively and thus cannot be used for other services. Similarly, local church centres can only be booked on a once-off basis and cannot give a permanent facility to such services.

Currently, our provider has a temporary facility which does not allow expansion and can only work with one drug/alcohol client (or family member or provide counselling to one person) at a time. This limits our reach in the community and is generating large waiting lists in this North Wicklow region. Ideally we would need the minimum facilities (see **Appendix I**) to keep up with current need and not including expansion plans in the future. Our outcome proposals have been achieved elsewhere and are outlined (see **Appendix II**).

I have read through the last G-DKLA Plan 2013-2019 and note the distinct lack of understanding, attention and action towards the Social Care Infrastructural needs of this region. With the clear increase in population in this North Wicklow region (Census 2022) a range of better and more robust objectives need to be developed to assist some of the most vulnerable, marginalised and disadvantaged members of our communities. This is within the Social Inclusion strategies (nationally and regionally) and the need to address the specific responses of these very vulnerable (often voiceless) groups within our communities is paramount.

Following much consultation across this North Wicklow region, we have found that there are no “community facilities ... financially and geographically accessible” (pg 33) to these specific Social Inclusion groups. I have also consulted with other similar ‘care in the community’

projects, agencies and not-for-profit services who are funded to deliver care/ assistance free to these core groups and understand that we are not the only ones affected here. In fact, some services cannot find a suitable location currently and this is delaying the establishment and integration of their 'provision of care in the community' response.

There are a great number of national and regional strategies which such a Local Area Plan need to take cognisance of and I see no evidence in the former plan that this has happened. There are numerous county plans that are also not linked into this work previously. Even Wicklow County Council (WCC) has a number of plans and groups (e.g. LCDC, LECP) and any plan for a sub-area of County Wicklow (as this would be) needs to be more integrated into all such plans. Also, WCC has recently established a number of other groups and plans e.g. SING (Social Inclusion Network Group) and a 'Tenancy Sustainment Team'. Both of these initiatives are very welcome and needed and the ECRDATF is working closely with both. However, we see no 'joined up thinking' with these service and the community planning and trust the new plan will be better interlinked and considered.

The ECRDATF propose that WCC establish a location for a range of locally provided and available social care supports to the communities named for the better consolidation and integration of such a range of services. This location/venue would ideally be situated where it is well-served by public transport and be fully accessible. The co-location of a range of Social Inclusion services would greatly assist with ease of access and the possible sharing of some of the facilities (e.g. group work rooms, specialist areas) is a definite possibility. This would also assist with the better integration of such a range of core services to the most vulnerable and marginalised in these communities. Bearing in mind that the services/agencies/projects are predominantly free (or at low cost) at point of access, we would anticipate that these facilities would be provided and supported at community rates. The ECRDATF work with our core clients in a bid to provide education/training/employment which has a role in a full recovery plan. Nothing in the named local area is set up to assist this presently.

The ECRDATF is also a partner and part-funder of a ***Planet Youth Wicklow Team*** (in conjunction with the Icelandic Planet Youth Model) whereby evidence of needs will be collected and collated for the identification of services to the youth across the entire county of Wicklow. With this in mind, any plan for part or all of County Wicklow will need to be cognisant of the outcome of this work. WCC is also a partner and part-funder in this initiative and all plans need to be adaptable to the results and recommendations received from this work over the next five years.

I call on the Elected Representative and Wicklow County Council to step up and do more than lip service to assist the ECRDATF in the delivery of the National Drugs Strategy's "health led response" to our client groups and also all other Social Inclusion group who need much better services and assistance to engage in and provide valuable support to their communities.

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Appendix I

Minimum facilities required in the Greystones/Delgany/Kilcoole local area for the ECRDATF to support its clients, their families and the community

Two separate one-to-one rooms for individual client work. (minimum)

Space that can be used as a waiting area with/without administration staff area

Appropriate sanitary facilities

Appropriate canteen space for staff

A large room to assist with group work and group programme delivery (or access to/share of)

Eliminate the risk for lone working and safety of all concerned

Appendix II

The main focus and achievable aims of the provision of frontline drug/alcohol services to individuals, families and communities are:

1. To provide appropriate services in the community at point of need
2. To achieve better service integration
3. To create pathways to access available services
4. To create pathways for services to make referrals in the interest of the clients need
5. To tackle addiction at the outset and make rehabilitation and recovery an easier option
6. To set up a local 'recovery group' as an example to others to aspire to and to be assisted by
7. To collect and collate all data on clients presenting, work supported and outcomes achieved in a timely manner
8. To address and provide a holistic approach to drug/alcohol problem users in the community across all domains
9. To provide ongoing aftercare and supports to this vulnerable cohort
10. To indirectly address any negative effects of drug/alcohol use on the communities
11. Potential to contribute to a wider learning and replication of approach