



ANNUAL REPORT 2010

Drug Concern is a charity involved in the delivery of services for those whose lives are affected by drug misuse within the Bailiwick of Guernsey, through education, information, advice, support and counselling.

Directors

Jim Le Pelley

Chairman

Chris Sackett

Treasurer

Judy Beaugeard

David Leafe

Mike Watson

Philip Eyre

Staff team

Tracey Rear

Manager

Nathan Miller

Education & Training Drug Worker

Gill Ogier

Criminal Justice Drug Worker

Sarah Fellowes

Prison Substance Misuse Worker

Staff Profiles



Tracey Rear BSc (Hons), Dip DD, Dip CPC
Manager

Tracey has been working for Drug Concern for eleven years, having started her employment with the organisation as the under 21s Drug Worker. She has worked in each area of operations. Underpinning her work experience in the field she has a degree in addictions management, a diploma in drug dependency, a diploma in clinical and pastoral counselling and is a practitioner of auricular acupuncture.



Gill Ogier RGN, H dip AN, Dip HG
Criminal Justice Drug Worker

Gill has been working for Drug Concern for eight years and has a background in nursing. Whilst with the organisation she has completed a diploma in human givens therapy, and is a practitioner and trainer of auricular acupuncture.



Sarah Fellowes Dip CCJ
Prison Substance Misuse Worker

Sarah joined the team in August 2010 bringing with her a wealth of experience working with homeless substance users within the criminal justice system in the U.K.

Sarah has a diploma in community and criminal justice and completed the NVQ training with the UK Probation Service. Sarah is well versed in the delivery of evidence-based practice.



Nathan Miller
Drug Education and Training Worker

Nathan joined the team in September 2010 having spent eight years developing and leading youth and community work locally.

Nathan is adept at delivering engaging presentations both in a formal and informal setting and has a good rapport with young people. Nathan's creative streak complements much of the theory-based practice of our work.

Manager's Report

The past year has been challenging for Drug Concern. I reported last year on the difficulties in appointing a suitably qualified Prison Substance Misuse Worker for a five-year period. I am pleased to report we made a full-time appointment for this post in August 2010, easing the burden on existing staff and ensuring that our ability to provide a service to its full capacity was resumed within the prison.

The reclassification of emerging drugs of concern (previously known as legal highs) to class B controlled substances has resulted in a significant reduction in the number of people presenting specifically for these substances. However, use of a newly-available test for the emerging drug, mephedrone, resulted in a higher number of breaches of probation orders imposed under the Criminal Justice Drug Service.

At the beginning of 2010 we introduced a new database to record case-sensitive information securely. The system incorporates statistical data collection and analysis.

The most significant statistical data for 2010 relates to the use of emerging drugs of concern, specifically the reduction of people seeking help for these substances. The number of new clients stating "legal highs" as their drug of choice reached a peak in the third quarter of 2009 when 32 users sought help. The number has since declined rapidly and in the final quarter of 2010 there was only one such case. Some caution is needed in the interpretation of the statistics because of the inherently chaotic nature of drug misuse, with various drugs often used in combination. There has been an increase in such polydrug use, with emerging drugs often featuring in the mix.

Year	Total number of new clients	Clients seeking help for emerging drugs.				
		Total	Qtr 1	Qtr 2	Qtr 3	Qtr 4
2009	202	65	9	13	32	11
2010	240	24	8	8	7	1

The reclassification of emerging drugs occurred in April 2010, by which time Drug Concern was already noticing the effects of the import/export ban which had been implemented towards the end of the third quarter of 2009.

Drug Concern recognises as a core principle the value of working with other organisations to achieve mutual goals. In consultation with the Sexual Health Clinic, the Director of Public Health and the Drug and Alcohol Strategy, Drug Concern reviewed the dissemination of the harm reduction message relating to the transmission of blood-borne viruses, in particular Hepatitis C and its transmission amongst the injecting drug-using population. We used a variety of educational harm reduction materials and methods to raise awareness for this at risk group, and we will continue to provide this level of information. In addition to this and as part of our ongoing staff development programme Drug Concern sourced some Strategy-funded training specifically focussing on interventions with our injecting drug users. This was a valuable piece of work which we extended to our colleagues in the social work department with the intention of promoting shared learning and encouraging the referral of drug-using parents to Drug Concern.

Following the success of the scheme last year Drug Concern is again providing final-year placements for Social Work students in conjunction with the Institute of Health Studies. This is seen as promoting multidisciplinary working and shared learning and understanding between organisations working with an overlap of client groups.

An area identified for investigation relates to prisoners released into the community who have been referred to our community support programme. Historically the pattern has

been enthusiasm for continued support from the prisoner immediately prior to release but poor results for attendance post-release. More details of the prison programme (and other contracted services) are in the main body of this report.

Other developments are in the area of outreach work with young people in various parts of the Island. Our Drug Education and Training Worker is working with the Sports Commission in support of its initiative to engage young people in sport. Although in its infancy with respect to our involvement we can demonstrate this as being an effective method of providing unplanned brief interventions.

Drug Concern is extremely careful to concentrate its resources on those areas which produce the greatest benefit, ensuring that there is a clearly demonstrated need for services before implementing new ideas. We are encouraged that the States continue to recognise the need to prioritise the tackling of substance misuse in its social policies. At the same time we continue to depend on the generosity and social conscience of the local community to subsidise these services. Drug Concern is grateful to all of our supporters who understand the need and see the value of the services we deliver in the local community.

I would like to thank the directors of Drug Concern for their support, and the Drug Concern staff for their skill, expertise and commitment in dealing with the challenging issues presented by substance misuse.

Core services

Drug Concern is a local charity involved in addressing the needs of those whose lives are affected by substance misuse. This is achieved both in preventative ways, such as education or training, and by means of a variety of harm-reduction measures and treatments, including targeted psychosocial interventions, information, advice and support, and the provision of a needle exchange programme. We are strong supporters of a multi-agency approach to the problems of drug misuse and we recognise and support the work of the Bailiwick Drug and Alcohol Strategy Group in coordinating the efforts of a number of organisations in both the public and voluntary sectors.

Support services are specifically designed to help people who are struggling to change behaviour. The focus is on problem identification and problem management, motivational work in relation to cessation of drug use, and specific relapse prevention techniques. Drug Concern also provides support to other charities, businesses and organisations.

Advice and information extends to all in the community who have queries relating to substance misuse, the effects of substances, treatment routes, where to go for help and more general enquiries.

The needle exchange is specifically a harm-reduction measure. Its introduction was a response to concerns that a growing number of users were injecting drugs, often with used and shared needles, thereby putting themselves at risk of contracting a number of blood-borne viruses. The needle exchange enables drug users to collect clean injecting equipment, and receive safer injecting advice, thus reducing the risk of transmission of certain viruses.

At Drug Concern we work hard to engage with needle exchange users, with the aim of building therapeutic relationships that can lead to behaviour change. Our evening opening times have allowed service users access outside their working day, which means there is more opportunity to engage them in conversation and build relationships.

Auricular acupuncture is used as a treatment to reduce the discomfort of withdrawal from substances by helping to reduce the symptoms of anxiety. It is also provided for individuals who have successfully changed their drug use but benefit from receiving the treatment on a regular basis to promote relaxation.

Education and Training

The drug education programme delivered in Guernsey and Alderney schools is one of our well-established services. The programme covers all secondary schools from years seven to eleven, together with the sixth form centres and the College of Further Education. The programme addresses the issues and choices relating to substance misuse and its associated risks and potential consequences. Since 2009 there has been the need for a particular focus on emerging drugs of concern (previously known as "legal highs") as they encouraged a culture of experimentation among young people, who were not aware of the harms associated with their use. Information sessions are also provided for parents and teachers.

The education and training delivered to youth organisations and private business has been maintained throughout 2010, as has the input with the Karabiner Project which aims to get young people ready to enter employment. The focus for 2011 will be on outreach work in specific community areas, building relationships and getting to grips with key issues facing young people.

Education, wherever it is delivered, is a key factor in prevention, particularly amongst young people. Hence we are keen to further promote this aspect of our work within the

community, and to develop our work with other agencies in promoting the social and emotional wellbeing of young people.

Criminal Justice Drug Service

The *Criminal Justice Drug Service* (CJDS), introduced eight years ago on the initiative of the States Chief Officers Drug and Alcohol Strategy Group, is a partnership between Drug Concern and the Probation Service. The primary purpose is to provide the courts, prison, and Parole Board with the facilities necessary to enable them to impose treatment as a condition of supervision.

We see the partnership work between the Probation Service and Drug Concern as fundamental to the success of the CJDS. There was a slight increase in the number of referrals to the service compared to 2009 although there was also an increase in the number of clients considered unsuitable for the service. There was an increase in the number of breached orders for the year. This relates specifically to the use of mephedrone for which tests are now available following the introduction of new technology.

Arrest referral is a partnership between Drug Concern and the Guernsey Police. The aim is to raise awareness of services available to drug-using offenders at the point of arrest. Involvement in the scheme is voluntary and not an alternative to prosecution or due process. The Criminal Justice Drug Worker makes regular visits to the court and the custody cells to make contact with potential service users, with the aim of their engaging with a service that they would not otherwise access. During the year there was a reduction in the referrals to the service which we understand has been a direct result of having to direct resources towards the prison in the absence of a full-time worker. Of the total of 38 referrals, 7 related to alcohol, 12 to drug use, and 18 related to both drug and alcohol issues 1 was substance free. Of the 12 drug related referrals, 11 went on to work in a structured way with Drug Concern Clients reporting alcohol specific problems are referred to the Guernsey Alcohol and Drug Abuse Council.

Shared care between the Criminal Justice Drug Worker and the Substance Misuse Worker in the Prison enables continuity of care. Joint meetings for clients who are either entering or leaving custody are arranged to decide upon the best treatment options for them, from arrest through to release.

Prison

The scope of our work in the prison focuses on drugs and alcohol, and acts as a conduit to some of our other community-based services upon release. Drug Concern is considering how to improve support after release from prison into the community, although this will depend upon the resources.

The Substance Misuse Worker (SMW) contributes to the activities of prison administration in a variety of ways including:

- Risk Management Board – dealing with prisoners who are at risk of self-harm or suicide and putting into place individual plans of care to safely manage times of crisis, thus reducing the risk of death or injury in custody.
- Prison Therapeutics Committee – dealing with the logistics and practice of prisoners' healthcare needs, focusing on best practice within the Prison, and safe and healthy outcomes.
- Offender Management Unit (OMU) – The SMW has a significant input in the OMU, which concentrates on the individual cases within the Prison, specifically prisoners' needs whilst in custody and ensuring these needs are adequately met.

- Interagency forum – dealing with issues that affect the various organisations which have an input into the Prison system.

A key objective is to assess every prisoner received into custody within 48 hours, or at most a week, of reception to establish his or her need for continuing therapeutic input. This gives an opportunity for prisoners to discuss confidentially their individual needs with the SMW as some do not wish to disclose their drug-use issues to prison or healthcare staff, feeling they risk incriminating themselves further. The first hours and days are also statistically the time when new inmates are at most risk of self-harm and suicide so this also provides a service to those with no identified drug or alcohol misuse issues to speak to an external, non-judgemental, agency during this difficult time.

The majority of prisoners released into the community having worked with the SMW in prison generally do not maintain contact with their allocated drug worker in the community. This is an area of work Drug Concern would like to consider for further investigation, but which currently is restricted by resource limitations.

Thank you

As ever we remain appreciative and grateful for your support. Our services would not operate if individuals and organisations did not give generously.

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