

TEDS

Treatment & Education
Drug Services
across
Rhondda Cynon Taff

Jean Harrington MBE

Established in 1985

Voluntary Sector

Registered Charity

Company limited by
guarantee

35 paid staff

15 volunteers

Services Provided

- One to one support/advice
- Childcare
- Counselling
- Needle exchange
- Home detox
- GP shared care
- Rehabilitation
- Relapse prevention
- Young person's service

- Criminal Justice
 - Arrest Referral
 - Probation
 - Youth Offending Team
- Community development
- Family support
- Progress2Work
- Prevention/Education
- Accredited training
- Acupuncture
- Looked After Children

Funded By:

- Welsh Assembly Government
- Community Safety Partnership
- Rhondda Cynon Taff
 - Local Authority
 - Local Health Board
- South Wales Police
- National Probation Service
- Charitable Trusts
- Youth Justice Board
- Youth Offending Team
- Jobcentre Plus

Currently 23 funding streams!!!

Client Base

April 2003 - March 2004

N° of contacts	12627
N° of individuals	1969
N° of new clients	1001

Male	730
Female	271

Alcohol	396
Heroin	202
Amphetamine	140
Cannabis	131
Other	132

Age

15 & Under	48	5%
16 – 20	179	18%
21 – 25	200	20%
26 – 30	157	16%
Over 31	360	36%
N/K	57	6%

Treatment Services in Rhondda Cynon Taff

- Community Drug & Alcohol Team
- Voluntary Sector agencies
- G.P. Shared Care
- Rhondda Integrated Substance Misuse Service (RI SMS)
- Supervised Consumption
- Access to In-Patient Detox (for Alcohol)
- Drug Treatment & Testing Order

Issues Affecting Service Delivery

- Waiting lists
- Capacity
- G P's
- Accommodation
- Recruitment/Retention
- Targeted funding
- Management

Capacity

- Demand for services increasing
- Staff carrying high caseloads
- Impact of Child Protection cases
- Frustration over prescribing services – no fast track
- Ever increasing demands from WAG, CSP and other funders

Waiting Lists

- CDAT - from 6 to 18 months
- TEDS - for home detox
- RISMS - approx 6 months
- ADFER - approx 3 months
alcohol only
- G P shared care - waiting list
in some practices
- Pharmacies - issues around
supervised consumption

Recruitment

- Shortage of qualified or experienced staff
- “Recycling” existing staff
- No time to “grow our own”
- DANOS implications

Targeted Funding

- Criminal Justice driven
- Health targets v's crime reduction
- No funding for core generic work
- Prevention & Education needs investment
- Goal posts changing mid funding streams

Common Areas of Concern

- Lack of understanding in the field about SMART
- Consultation overload!!
 - Needs to be effective
 - Need to have feedback
- Voluntary sector seems to be under scrutiny far more than statutory sector

- Harm reduction agenda – how does it fit within criminal justice funding
- Funding made available very late in the financial year
- Substance Misuse Action Plan – needs to be locally owned
- Unified assessment – implications to existing practice

PRIORITIES

- Children of substance misusing parents/carers – Families First
- Co-occurring substance misuse & mental health
- Hard to reach young people
- Long term funding strategies

IN CONCLUSION

- Excellent work being done in difficult circumstances
- Lots of goodwill in the field
- Commitment from WAG
- New initiatives coming - T & A
- Recognition of good practice within the voluntary sector
- Innovative schemes being developed
- Improved joint working between all agencies.