


Police and Crime Commissioner for Gwent Decision	
PCCG-2016-053	Police and Crime Commissioner for Gwent Decision Session
Subject	Gwent Integrated Recovery Interventions Service (Gwent IRIS) Annual Review, May 2015 to March 2016
Summary	To record the decision of the Police and Crime Commissioner regarding the monitoring of the Gwent IRIS performance.

DECISION

1.	The Gwent IRIS has submitted its first annual review report. The Gwent IRIS is the criminal justice element of the Gwent Drug and Alcohol Service (GDAS). The report covers year one of the service and the data will provide a baseline for future comparison.
2.	I commend the report and the excellent work of the Gwent IRIS service in supporting my priorities.
3.	I have received and monitored the information contained in the report.

Jeff Cuthbert B.SC, MCIPD, Police and Crime Commissioner for Gwent	
I confirm I have considered whether or not I have any personal or prejudicial interest in this matter and take the proposed decision in compliance with my code of conduct. Any such interests are recorded below.	
The above request has my approval.	
Signed 	Date 12/7/16

Contact Officer	
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Background papers	None



Gwent Integrated Recovery Interventions Service (Gwent IRIS)

Annual Review: May 2015 to March 2016

Introduction

This year has been pivotal in the mobilisation of the unique commissioning of adult substance misuse services across Gwent by Gwent Drug and Alcohol Service (GDAS), funded by the Gwent Substance Misuse Area Planning Board with pooled funding from the Gwent Police and Crime Commissioner and National Offender Management Service.

The Gwent IRIS Service is the criminal justice element of the Gwent Drug and Alcohol Service. It is provided by G4S within a consortium led by Kaleidoscope Project. There has been a high degree of change management this year for all service providers and stakeholders, with key challenges being overcome collaboratively to provide:

- Management of the TUPE process from the outgoing service provider.
- Integration of community and criminal justice adult treatment services.
- Continuity of services during transition.
- Service restructuring and facilitation of a shift out of challenging and long standing cultural practices.
- Criminal justice substance misuse services fit for purpose.
- Reduced silo working and duplication.
- An evidence base to demonstrate the service contribution to the reduction of substance misuse and offending in Gwent.

Service Integration

The Gwent IRIS staffing team have moved to a co-located model within GDAS to provide a Gwent-wide resource based in seven main buildings, and satellite resources in Abergavenny and at Blaenau Gwent Probation Office. The staff have embraced this change very positively and are working well in partnership with their new colleagues. Initial cultural and silo working differences have gradually been resolved over the past year, and the staff teams work very collaboratively as part of normal practice.

GDAS Integration Milestones

- Implementation meetings with commissioners, contract review and finance meetings.
- Refinement of GDAS policies and processes through Task and Finish groups e.g. integrated Human Resources policies, Assessment Tools, Care Plans etc.
- Joint case management processes, Joint Allocation Meetings, regional and local service manager meetings.
- Buildings manuals development and Health and Safety meetings.

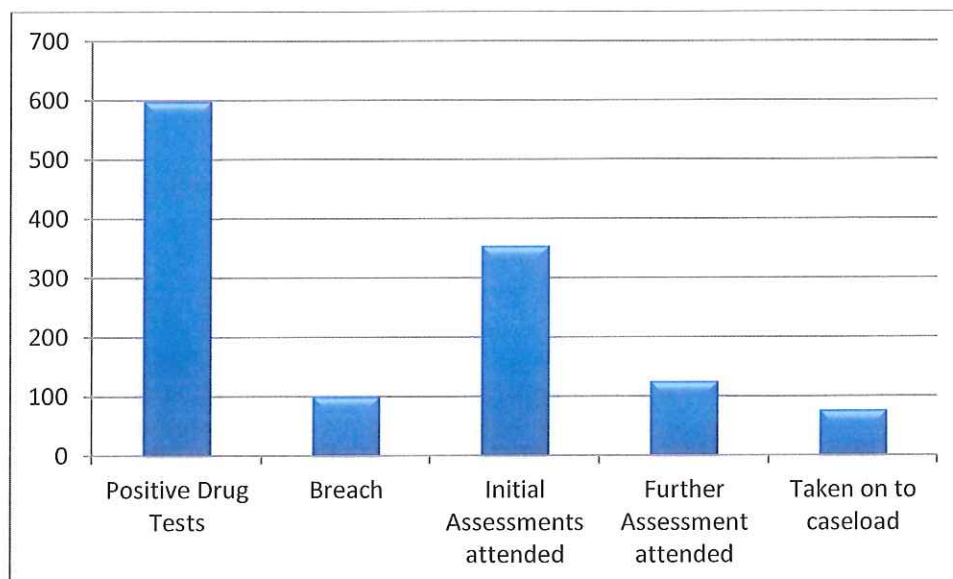


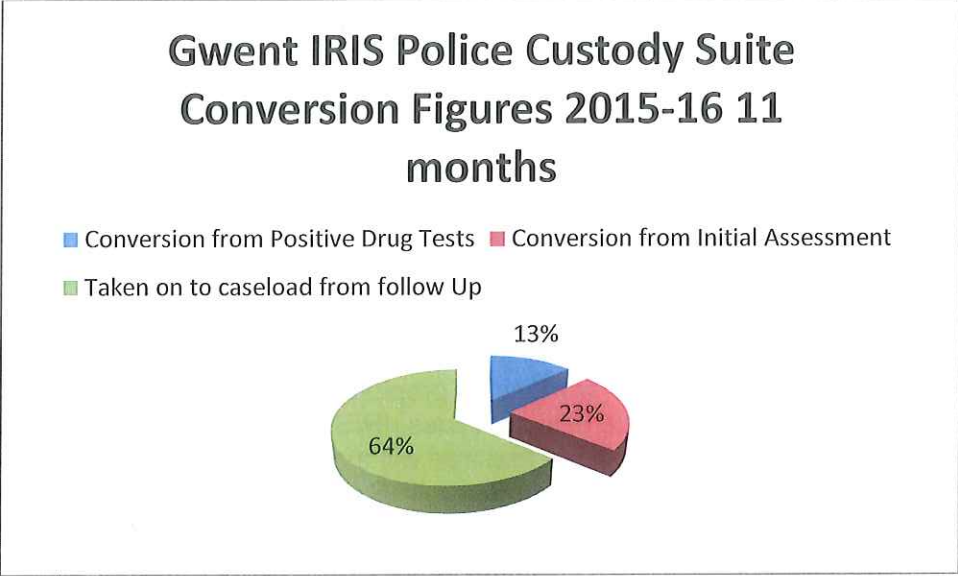
- GDAS Strategic Board meetings.
- IRIS and GDAS staff are now fully co-located in the front of Chambers House.
- Working on STEP's motivational course.
- Joint work in preparation groups and offering substance specific group work.
- IRIS Staff deliver Naloxone training to all service users on induction to the service as an integrated part of the GDAS harm reduction drive.

Arrest Referral

The IRIS management team have worked closely with the Gwent Police Custody Inspectors to ensure that the service is more fully integrated into custody systems. We are providing drug and alcohol arrest referral staff into the main police custody suites and expanded the service to provide weekend and bank holiday cover to triage individuals with substance misuse issues. They are either signposted or referred to GDAS or other local community based services and we provide assessment information to the Courts.

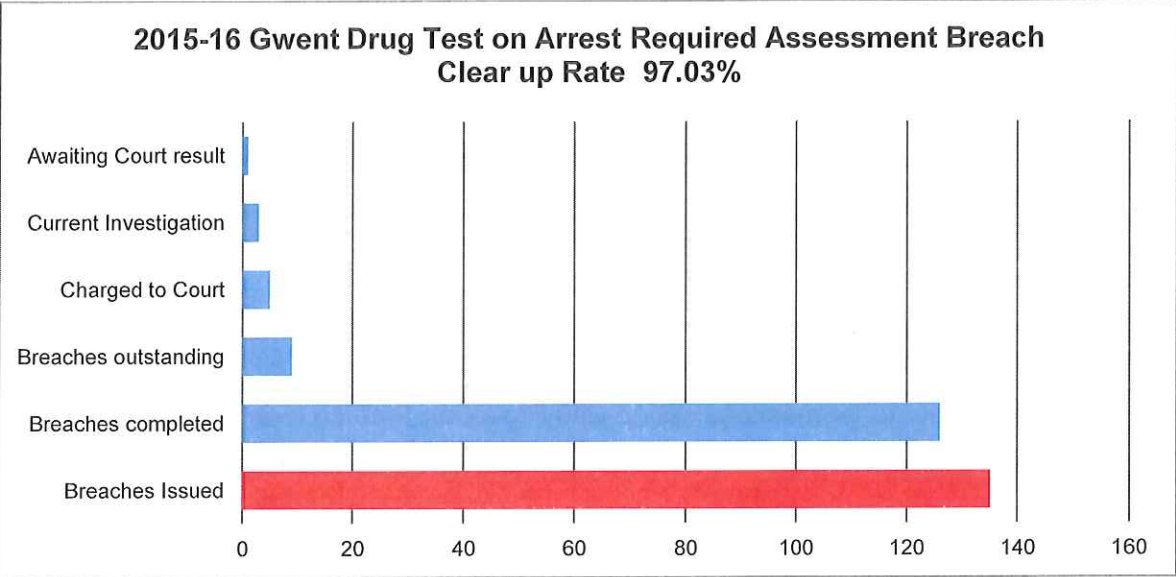
The service provides assessment and follow-up provisions under the Drug Test on Arrest provisions of the 2005 Drugs Act, with 598 tests showing positive to opiates or cocaine, Gwent IRIS staff undertook 354 triage assessments from the overall Required Assessment process and of these a further 125 assessments were conducted in the community with 76 individuals entering treatment.





We have demonstrated flexibility in reconfiguring and our Arrest Referral profile and developing the service outreach provision to capture individuals who are on the Gwent Police voluntary attendance scheme.

Gwent IRIS work closely in partnership with the Drug Interventions Programme (DIP) Drug Testing Officer and Gwent Police to ensure breaches of required assessments under the Drugs Act are reported immediately and assist in bringing breaches to court. This has been a positive piece of work this year with an excellent clear up rate.



Custody workers are now following up detainees into Court with a view to providing information and assessments to the National Probation Service (NPS) and Court in an effort to improve statutory requirement numbers.

We have collaborated with Gwent Police to improve the data capture mechanisms within the custody suite and NICHE, so that we can evidence the work undertaken more fully. Work on Breach figures has been a key element of improvement this year.



The service has reinforced links made with Gibran to identify and refer sex workers into the peer support service.

Gwent IRIS continues to work collaboratively with the Women's Pathfinder Diversion Scheme at Newport Custody Suite and IRIS Caseworkers are attending fortnightly pathfinder case conferences. The IRIS Manager attends the Pathfinder implementation group chaired by the CRC lead.

Court Services

We have expanded the remit of the staff to provide information directly to the Courts and National Probation Service to inform sentencing proposals for individuals who may require a statutory order to address substance misuse issues. IRIS staff will provide triage information from the Police Custody Suite and where required will triage detainees in the court cells to provide information to the Courts Probation team. IRIS Court Workers undertake morning briefings with Probation Court staff to ensure consistent communication and input to report authors. IRIS Manager and Probation Court Manager have agreed that teams need to meet to better understand roles and functions whilst understanding paperwork used during IRIS screening and assessments and this will be an ongoing development over the next period.

Statutory Caseload

There has been early liaison with Probation colleagues to agree service parameters and we have developed processes to ensure the statutory caseload and completions are correct - we regularly review a list of IRIS active clients and closures monthly and respond with any discrepancies. During the year the team has developed the relationship with National Probation Service and Community Rehabilitation Company (CRC) through

- Attendance at Probation Liaison Meetings.
- Attendance at Magistrates Drug Rehabilitation Review Panel Meetings.
- Strengthened partnership work with Multi-Agency Public Protection Arrangements (MAPPA) – attendance at MAPPA and Multi-Agency Public Protection (MAPP) Strategic Boards.
- Integrated Offender Management (IOM) operational partnership work and attendance at steering and management groups.
- Multi-disciplinary team meetings set up with Probation Staff on monthly basis.
- Late evening appointments rota for Probation service users with IRIS.

Statutory Requirement Caseload

Between May 2015 and March 2016 the team conducted 137 statutory assessments.

National Probation Service colleagues have also indicated a trend by Sentencers to utilise the recent Offender Rehabilitation Act provisions to create 12 month post sentence supervision following the imposition of short term sentences.

This has impacted on the IRIS service in two main areas:

- There was a reduction in Drug Rehabilitation Requirements (DRR) made in the year, particularly in Quarter 3, which correlates with a large number of requirement



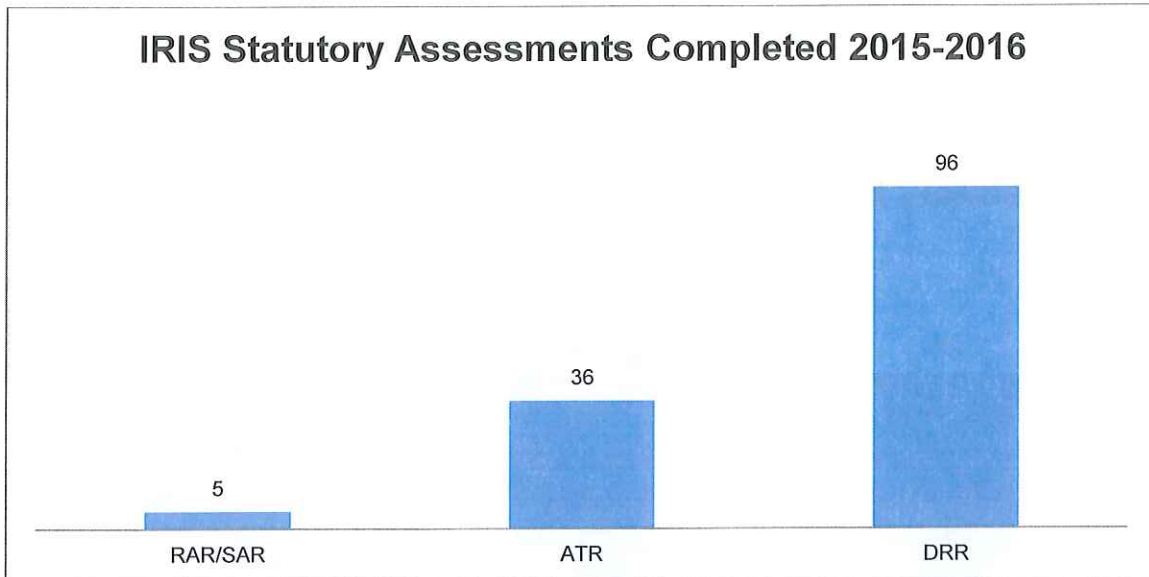
completions, and reduction in the number of new requirements imposed by Sentencers.

- A significant increase in the number of post sentence licence case and prison referrals to GDAS IRIS across the period which appear to evidence this view.

We have raised the trend with National Probation Service and HMCTS colleagues, and increased IRIS staff input into National Probation Service Court triage and assessment, to provide increased information to report authors and sentencers. This has led to a small increase in Requirements imposed in Quarter 4.

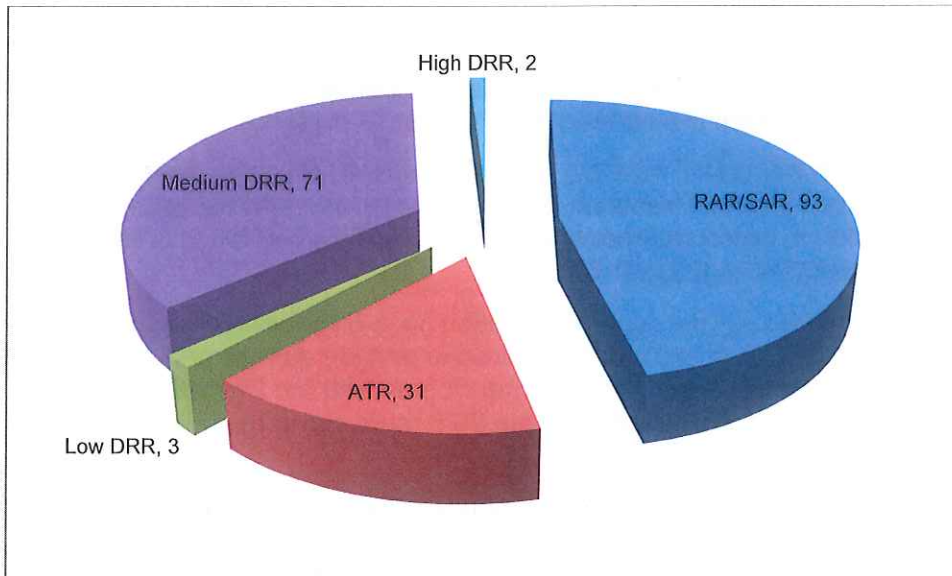
As National Probation staff determine the recommendation for a Rehabilitation Activity Requirement (RAR) directly, IRIS staff are rarely required to provide assessment information hence the low number of assessments. We are working closely with the Probation Court Manager to look at ways of utilising the information the IRIS team can provide more effectively.

Alcohol Treatment Requirement (ATR) completions are much improved due to the integrated service provision which has created direct access to alcohol treatment and detoxification by the GDAS Active Treatment and Clinical team supported by IRIS Caseworkers.

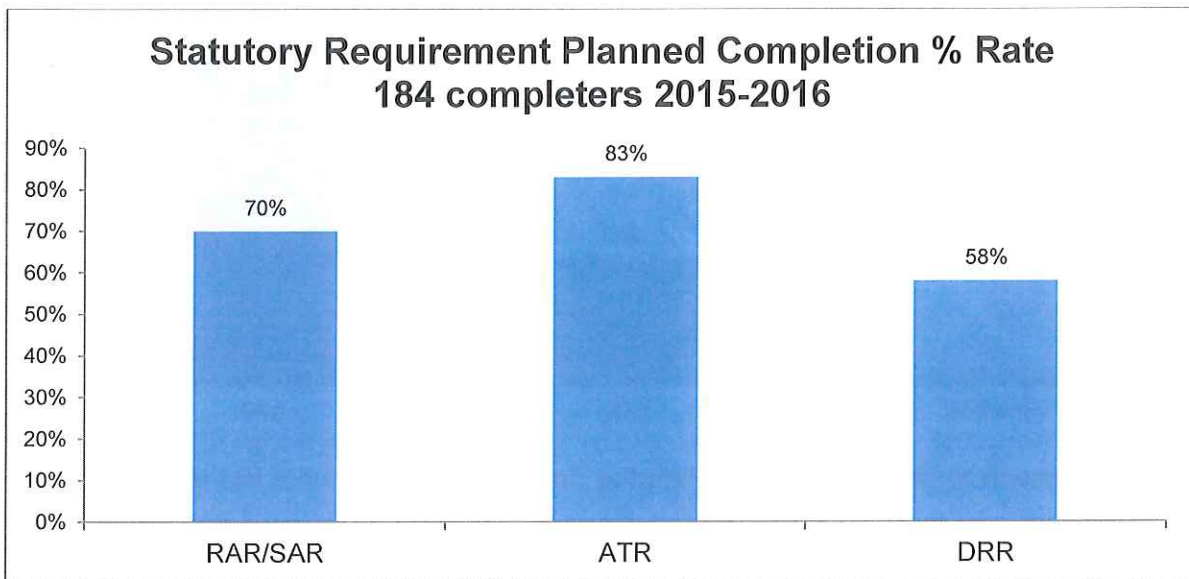


Statutory assessments are either completed at Court or following a brief bail assessment period.

193 Statutory Requirements were imposed by the Courts between May 2015 to March 2016 with the following composition of Drug Rehabilitation Requirements (DRR), Alcohol Treatment Requirement (ATR) and Rehabilitation Activity Requirements (RAR/SAR):



We have achieved a very good rate of planned requirement completions this year with service users feeding back positively on the additional supports in place to move into recovery and after-care provisions within GDAS. This reduces the risk of service users re-offending to maintain a place in a criminal justice provision.



The courts have expressed satisfaction with the increased resourcing of Gwent IRIS staff at review and generic courts. We have attended the Probation Liaison Committee and DRR Panel meetings with NPS and CRC managers to raise the service profile and to raise awareness of the treatment requirement options available through the service.

Late Probation appointments are provided in Ebbw Vale, Pontypool, Newport and Caerphilly to enable access for service users who are working.

Integrated Offender Management

Regular operational meetings have taken place with Local Delivery Unit (LDU) managers and Gwent Police and regular liaison is evident at management, administrative and practitioner level. 20% of the Gwent IRIS caseload is currently IOM cases (see caseload



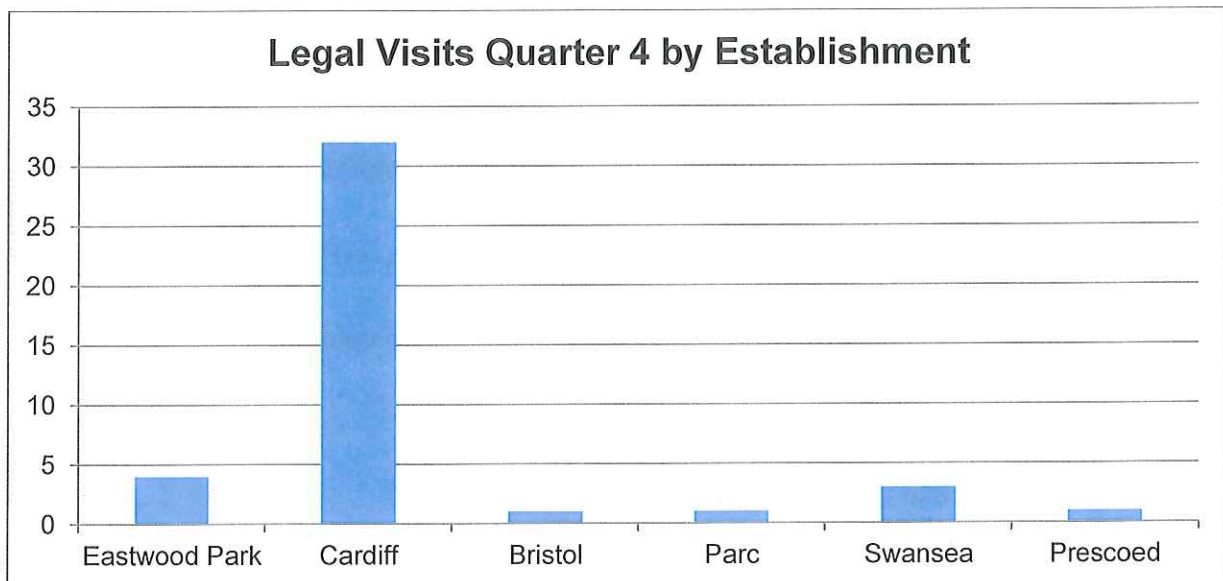
chart). Gwent IRIS IOM Leads continue to ensure attendance at tasking and migration and daily communication with IOM Police and Probation and managers attend IOM sub groups and IOM Regional Strategic Board meetings. There has been some excellent partnership work in evidence this year, with positive feedback from IOM statutory partners on the levels of intervention provided by GDAS and IRIS staff.

Prison Link Work

Our Prison Link Worker received 314 referrals in the year with levels of referrals increasing significantly during the latter quarters.

Month	Torfaen	Newport	Caerphilly	Blaenau Gwent	Monmouthshire	Total
May-June	4	27	3	10	1	45
July - September	2	32	11	14	17	76
October -December	1	55	9	12	10	87
January - March	8	70	26	1	1	106
TOTAL	15	184	49	37	29	314

Since May 2015 the IRIS Service successfully referred 144 prisoners for continuation prescribing to the clinical service and provided gate pickups for 20 vulnerable female offenders from HMPS Eastwood Park.



Clinical Referrals – Prison to GDAS via IRIS.

The process for this element of the service has improved immensely over the year with the integration of the services. We have seen evidence of good partnership work and collaboration to ensure prisoners with healthcare prescribing needs for substance misuse have received continuity of care. The service has acquired new portable drug testing machines which enable staff to test in a variety of locations using a sample of oral fluid, alongside urinalysis.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
28	29	36	51	144



Data and Performance

The service has had significant challenges in developing good quality data and performance information. There was initially significant work undertaken by commissioners on the PalBase system to adapt it to the requirements of GDAS as a combined service, and to the specific requirements of criminal justice reporting. This delayed some service data being input on PalBase, particularly information on the split of the NPS and CRC cases up until September. There are also data requirements which are not met by PalBase recording, particularly in the areas of Prison Link, Arrest Referral and Court Assessment which have required refinement, and to adapt changing reporting needs which we have worked on closely with the Commissioner.

A number of new reports have been developed to enable PalBase data input exception reporting, and to at the time of writing there is still some work to be undertaken to fully develop the system and train staff.

A significant number of the staff did not use PalBase in the previous contract, and have had to undertake extensive training and support in the use of the system. There are still areas of work to be undertaken to improve performance, and the role of the Effective Practice Lead is crucial in developing a culture of data input reliability.

An exception PalBase report has been developed to assist in identifying data input deficits, and we have concentrated on the Welsh Government Treatment Outcome Profile (TOP) tool in particular where we have demonstrated a service improvement.

Positive Developments:

- TOPS management reports now in place on PalBase and files audited to ensure all TOPS are completed as required to meet NHS Wales Informatics Service (NWIS) requirements.
- We can now differentiate between CRC and NPS cases on PalBase in the legal section of PalBase.
- NWIS data uploads are being completed monthly and to date are currently successful and free from errors.

Positive outcome profile – primary outcomes

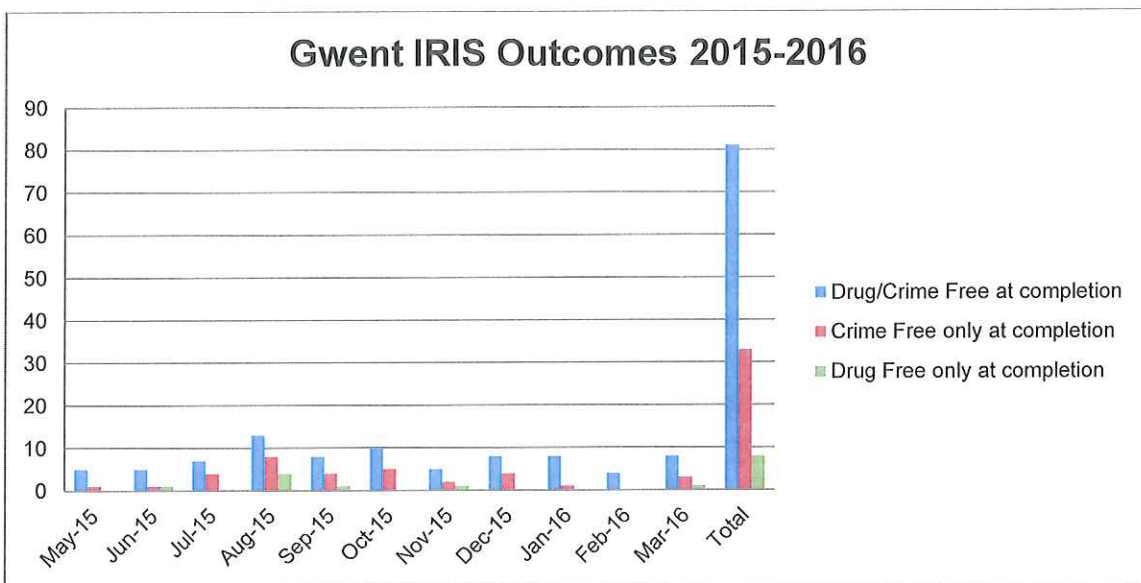
The IRIS client group are particularly chaotic and entrenched with problematic substance misuse, and much of IRIS work is involved in stabilising illicit drug use and preparing individuals to enter longer term treatment and recovery provisions. This client group are much less likely to engage in services due to poor choices, lifestyle and a cultural acceptance of the cycle of re-offending linked to problematic drug use. The group are also presenting to the service due to involvement with the Criminal Justice System and the varying requirements and sanctions that can be imposed as opposed to those who attend the GDAS mainstream service on a voluntary basis who are actively seeking treatment.

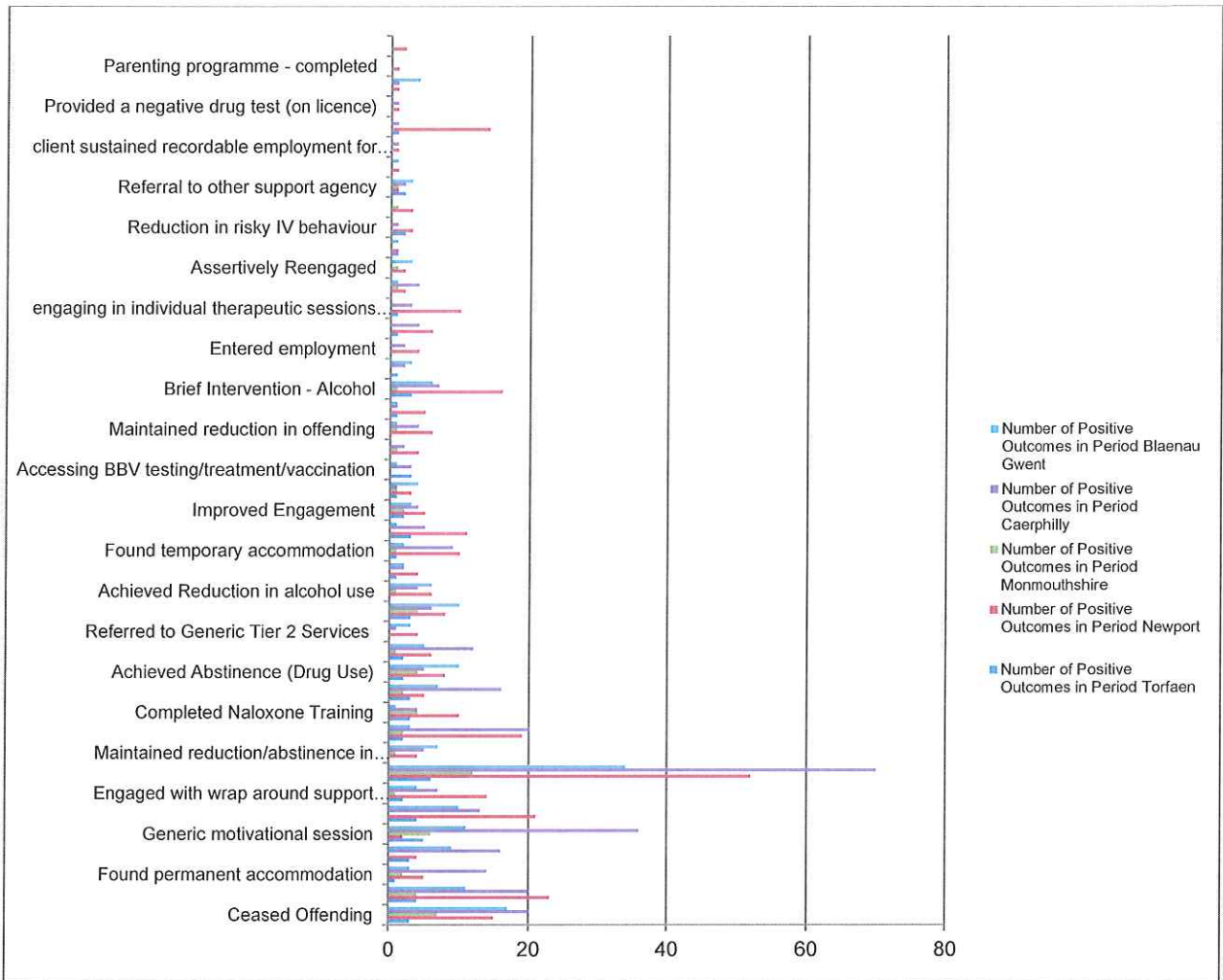
Offenders engaged in IRIS whilst on bail and awaiting sentence may get custodial disposals which impact the data as well as voluntary IRIS service users on post release supervision who are also subject to recall in the event of further offences committed. The target group generally will take up to 3 months to stabilise their drug use and may commit further offences during the period which can affect outcomes.



Outcomes are measured through entry on to the outcome section of PalBase following review of clinical drug test data, self-reporting and checking of criminal activity with police and probation colleagues at episode completion. This year 22.4% of completed episodes were reported drug and crime free at episode completion.

This is a significant positive figure which compares well with the other Criminal Justice Substance Misuse services in Wales (South Wales 23.9%), and against National figures of 38% for mainstream community treatment services. (Profile of Substance Misuse in Wales 2012-13 Welsh National Substance Misuse Database)

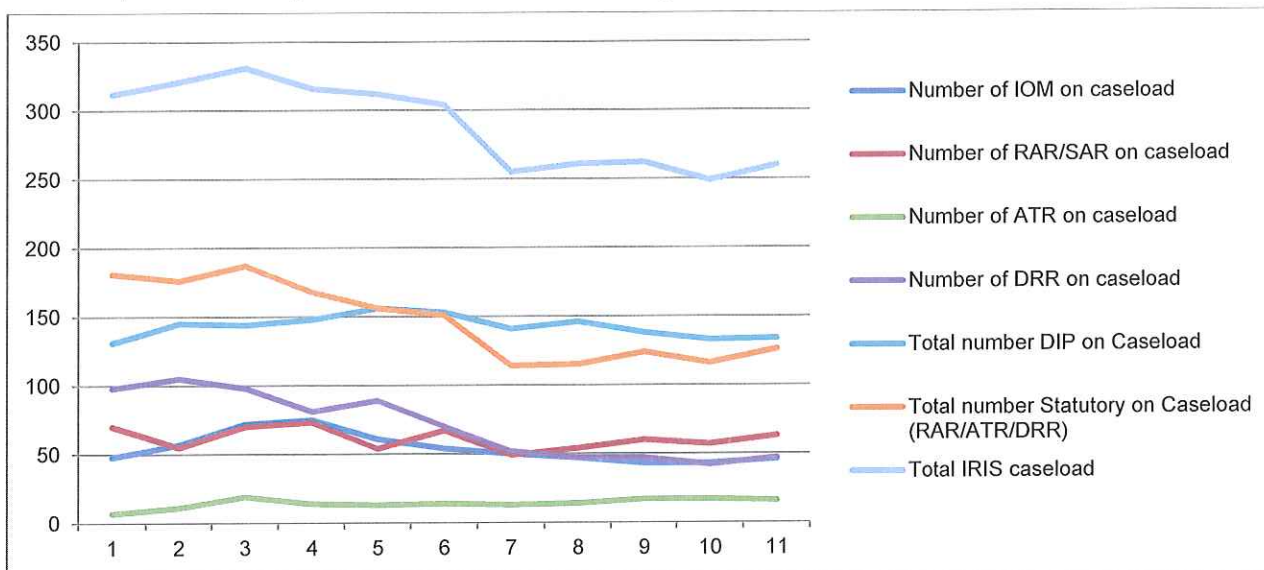






Caseload

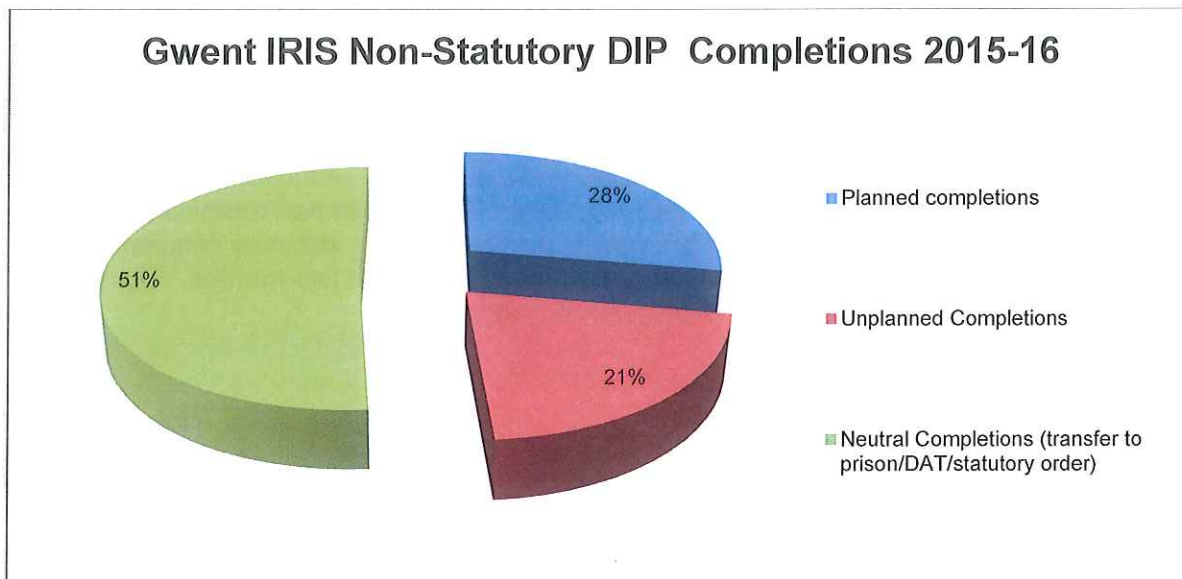
The IRIS caseload showed a reduction this year attributable to reconciling the caseload to move suitable cases to GDAS generic services, and a significant reduction in the number of DRR statutory orders made in Gwent. The voluntary DIP caseload has remained largely consistent through the year. IRIS staff are now actively promoting statutory requirements at Court and we have seen an upturn in new orders made in the last two months. The profile remains predominantly white male between 30-39 years of age.



IRIS Caseload - Snapshot - 31st March 2016

	South	North	Total
Number of IOM on caseload	28	21	49
Number of RAR/SAR on caseload	31	32	63
Number of ATR on caseload	10	6	16
Number of DRR on caseload	35	12	47
Total number DIP on Caseload	82	52	134
Total number Statutory on Caseload (ATR/DRR)	76	50	126
Total IRIS caseload	158	102	263

Of the 223 non-statutory DIP completions this year, 28% of service users completed planned treatment to care plan which is encouraging considering the chaotic nature of this cohort which has been engaged without court sanctions.



Staff retention, development and training

Since May 2016, the service has seen restructuring to fit the proposed model of service following the TUPE of existing staff from the outgoing provider. We have lost 2 staff due to restructure and resignation, but have 5 new staff and 4 volunteers in place. We conducted 4 occupational health interventions following high initial sickness levels, however all staff are currently in work.

Effective Practice Lead (EPL)

Our EPL has been focussing on reviewing current practice on an individual to look at case recording and caseloads. We have identified training requirements is PalBase recording, particularly related to the Area Planning Board (APB) Key Performance Indicator (KPI) points where we are working with the GDAS data manager to improve process information.

Phase 1 – Practice reviews for all staff – new paperwork developed for safeguarding and risk processes, gatekeeping, case file processes, KPI reviewed with data manager to ensure development on an operational level. Caseworker performance reporting is now in place and the care-plan template has been reviewed.

Phase 2 will include observed practice and further work on KPI.

CJS Referral and assessment pathways into health provisions, and access to community prescribing

There has been a great deal of activity this year with the integration of the clinical service with IRIS, which has shown increasing liaison with prison healthcare teams and the IRIS prison link worker to ensure continuity of care for returning prisoners. The IRIS team attend the weekly Gwent joint allocations meeting, working with the clinical team and Gwent Specialist Substance Misuse Service (GSSMS) to identify the correct clinical care pathways for individuals, including those with complex health or mental health issues.



IRIS clinical caseload May to March 2016

	May	June	July	August	September	October	November	December	January	February	March
No. Prescribed Caseload Statutory (DRR)	50	48	42	39	38	30	32	23	23	24	24
No. Prescribed Caseload Non-Statutory (DIP)	110	107	106	117	125	109	139	130	141	127	122
Total Number IRIS on Active Treatment Prescribed Caseload	160	155	148	158	163	139	171	153	164	151	146

Safeguarding

The following table indicates the number of live Safeguarding cases as of 31st March 2016:

Area	North	South
Child at Risk	6	8
Looked After Children	0	2
Child in Need	11	11
Case Conferences attended	4	6
Home Visits	2	1

Throughout the year the team have completed home visits, and attended case conferences and core groups. We have introduced new processes for assessment and recording of safeguarding issues, including a parental assessment tool. Safeguarding lead training and safeguarding training has been completed, and the team regularly liaise with social services, police and probation teams.

Service User Work

We have been involved in the development of integrated service user engagement within GDAS and have promoted the development and engagement in recovery Hubs at Blackwood and Newport. IRIS Service users regularly attend service user activities and events organised through GDAS and the IRIS staff.

IRIS staff have given out 91 food parcels this year in Newport which relieves service users waiting for benefits and reduces the need to offend for food.

AWSUM

On 24th March 2016 IRIS attended the Annual Wales Service User Meeting take place at City hall in Cardiff. The IRIS team provided an information stand which was manned by Aiden Terry and Helen Jenkins. GDAS Service users were impressed by the number of fellow service users who attended. The venue was a great choice and gave the service users a feeling of importance and empowerment.

A variety of different services provided stands giving information and friendly feedback regarding the support each service could provide. Many service users gave voice to their



thoughts and feelings around information given and how they thought information could be disseminated.

During the lunch break a film provided by the Police service was shown providing service users stories, a motivational and inspiring film; this resulted in great discussion amongst those who viewed it. After an enjoyable lunch, service users were given the opportunity to speak of their experience, which was emotional and well received by all present

A second opportunity to engage with workshops was provided. The closing speeches were encouraging and motivational and created a feeling of inclusion.

The event proved to be a great opportunity for service users and services to provide information for each other and provided an opportunity to forge new working partnerships for the ultimate benefit of the service user recovery

Food Bank

IRIS Staff have been trained by the Newport food bank and offer food vouchers, and we are providing food packs for appropriate service users. Food parcels have been provided to 91 service users since 17th November when the scheme commenced in Newport reducing the need to offend for whilst waiting for benefits.

Naloxone

Gwent IRIS fully embraces the Welsh Government take home naloxone programme, and Gwent IRIS staff train all new and returning service users and carers to use Naloxone to prevent potential opiate based drug related poisonings. These sessions are recorded on the Welsh Government NEO database and this year we have trained:

South Gwent: 127
North Gwent: 51

Service users and carers are provided with naloxone to take away by the clinical service.

Challenges for 2017

1. To flexibly manage changes in Arrest Referral service provision due to the restructuring of police custody suites in Gwent including the closure of the Ystrad Mynach Custody Suite.
2. To develop an intelligence led approach to drug testing on arrest with Police colleagues to reduce unnecessary costs incurred by blanket testing.
3. To improve on data recording requirements and ensure robust underpinning methodology in achieving outcome data,
4. To work with commissioners and the Welsh and English Prison estate in the positive development of use of the PalBase system by substance misuse and healthcare teams in prisons.
5. To input into the Gwent Safeguarding Board
6. To refine good practice in collaboration with GDAS colleagues.



Quarter 4 Summary

This quarter has focused on completion of the restructuring process to achieve the tender model, and this is now completed.

We have spent time looking at KPI data and recording this quarter. Since training staff on using 'TOPS' last quarter has shown a marked improvement to 80% returns. Managers are now targeting effective case management and data input, identifying staff requiring further training or performance assistance.

The service undertook, with the Commissioner, to develop an information film on the service which was a significant piece of work, and featured in the All Wales Service User Movement (AWSUM) conference. Further achievement to note:

- Staff visits to other DIP services to improve links and explore good practice.
- Stimulant Group work module completed.
- Outreach process developed for each area following service specification review.
- Core Standards Meetings attended to review Welsh Government Standards.
- Review of IRIS against service specification.
- Increased collaboration with South Wales contract and with HMP & YOI Parc.

Quarter 4 Staffing and Training Summary

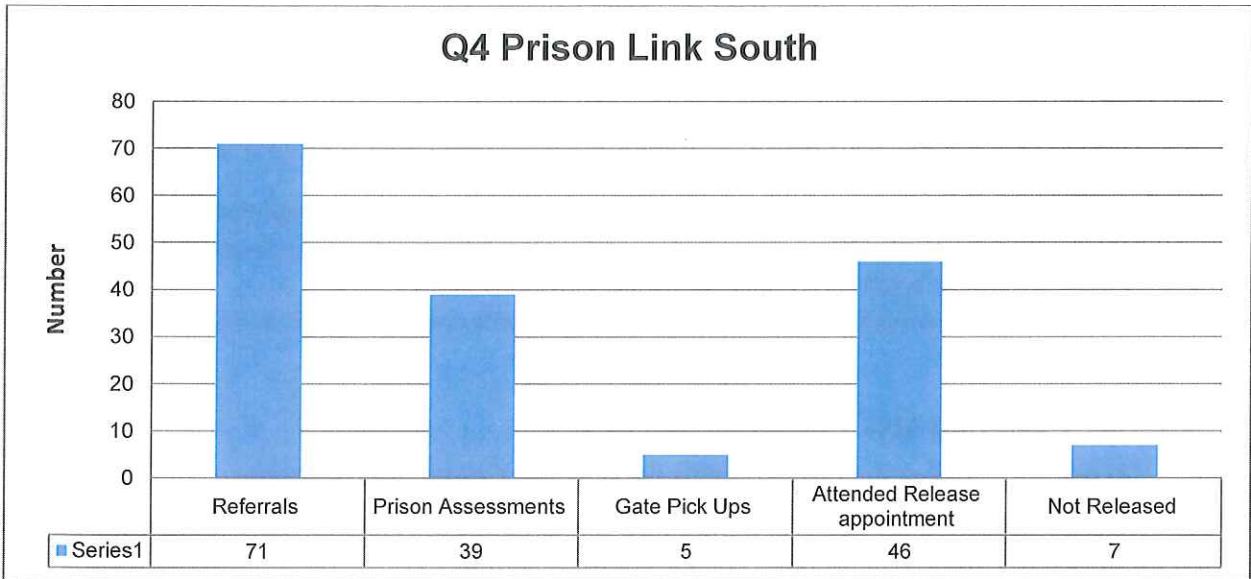
- Vanessa Wrather has been confirmed as North Gwent IRIS Manager.
- Restructuring to the service model was completed with Victoria Baker confirmed as Effective Practice Lead and has commenced ILM 5.
- We have recruited three caseworker staff to vacancies in line with our spend proposal.
- Prison Link role - Gemma Pervoe commenced her role in September 2015 is taking maternity entitlement from March 2016. Nathan Grieg will be back filling the role and Joanne Milne is temporarily covering his position.
- There was no long term sickness during Quarter 4 and we have one Occupational Health provision in place.
- Administration training took place to improve systems and understanding of data processes.
- We currently have four IRIS volunteers in place with further volunteers currently in generic training and awaiting placement.
- IRIS Risk Management PaIBase Process training delivered
- Training this quarter has also included Safeguarding, Motivational Interviewing (MI), Protection of Vulnerable Adults (POVA), Sexual Violence, Domestic Abuse and Sexual Harassment (DASH), Domestic Abuse training, Outcome Rating Scale (ORS)/Session Rating Scale (SRS) Training and G4S Organisational Induction training.



Quarter 4 - Clinical referrals

IRIS DIP	IRIS DRR
104	14

Prison link activity



Quarter 4 - Prison to Clinical Referrals

Number of IRIS DIP referrals for Quarter received from Prison	Number of Prescribing Referrals Received from Prison	Number of Clients Released from Prison	Number whose scripts were continued
57	54	51	51



Appendix 1: Case Study

Background / History

LW is a 42 year old male, who disclosed having long term substance misuse issues, reporting that he had been using illicit substances most of his adult life. LW began using heroin at the age of 18, and since this time has engaged with drug services, (criminal justice and open access), on several occasions.

During this engagement, LW has had periods of abstinence, lapse and relapse. LW has predominantly been involved with criminal justice agencies as a result of his offending behaviour, linked to funding his substance misuse issues. LW is managed by the Integrated Offender Management, (IOM) scheme as a result of the prolific nature of his offending. LW has been issued with several custodial sentences, and his pattern of offending behaviour has been predominantly dwelling and non-dwelling burglaries. As part of being managed by IOM, LW was case managed by a probation officer, and PPO Police officer, DC 426 Paul Pritchard.

Engagement with IRIS

Following breach of his community order, LW was recalled to prison in 2014, and was released in September 2014, with two weeks remaining on his probation order. LW's Offender Manager completed a referral to criminal justice drug services two weeks after LW's release from prison following a disclosure made by the client that he had been using heroin daily since his release. An initial assessment was completed with the client, who reported daily heroin use, smoked and IV. A care plan was developed around the client's needs, and a clinical referral completed in order for the client to access prescribed substitute medication. The client was allocated a treatment space, and offered several clinical appointments, however failed to engage, and his treatment space was closed.

Partnership working

Through discussions held between case worker and PPO Officer, and at tasking and migration, it was identified that the client had faced several issues that had impacted upon his ability to attend appointments offered by the service. LW had had difficulty in accessing benefit payments, and had also been made homeless following eviction from supported housing in the Tredegar area. LW had returned to live with his mother in the Ebbw Vale area, and due to financial difficulty was unable to travel to appointments.

Home visits were completed by IRIS case worker and PPO officer in an attempt to re-engage the client, and a formal appointment was issued to attend The Citadel. Due to client's financial difficulties, PPO Officer DC 426 Paul Pritchard provided transport to the client in order for him to attend. All future appointments were arranged through client, case worker and PPO officer in order to increase engagement.

Treatment

In January 2015, LW commenced a buprenorphine prescription through the service, and was offered regular one-to-one key working sessions and clinical support. LW engaged well with the service, where psycho-social interventions were delivered, and a comprehensive care plan created and continually updated to ensure that the client was receiving appropriate



support. By the end of January 2015, the client had achieved abstinence to all illicit substances and was providing regular negative test results. The client had received support with accessing finances and housing and had settled well.

Future Goals

Once the LW had achieved abstinence, obtaining employment was his primary focus. LW was issued support regarding CV writing and offered the use of computers at The Citadel, in addition to support offered through the Job Centre. In February, LW commenced a 16 week unpaid training programme with the hopes of gaining employment. In order to support the client in this, arrangements were made to move the client's pharmacy closer to his place of training, and take outs arranged to reduce the need for the client to attend the pharmacy.

Case worker and clinical appointment were offered first thing in the morning or at latest opportunity in the day in order to reduce impact upon service users training. PPO Officer DC 426 Paul Pritchard also liaised with IOMU management to provide a bus pass for the client in order to attend and engage in the training programme. Upon completion of the training programme, LW was offered full time employment working in a construction role.

Moving On

As the client approached the end of his 24 week DIP programme, an onward referral was completed to the Active Treatment Team (ATT) of the GDAS service. LW remained on substitute medication throughout the transition period from IRIS criminal justice service to the Active Treatment open access service. Joint appointments were held between IRIS, ATT and clinical case workers, with the support of PPO Officer, Paul Pritchard.

Today

LW continues to engage with the ATT and is accessing substitute medication. LW is in full time, permanent paid employment, and continues to provide negative test results to all illicit substances. LW has not committed any further offending since commencing his prescribed substitute medication.



Appendix 2: Case Study

Our story starts in October 2014 when this client was banned from Generic Services. He was under the radar for a year until he accessed a treatment space with the Criminal Justice team.

Background

Client has been known to services and living a chaotic lifestyle since 2011 following arrests for fraud and possession. A lifestyle consisting of heroin use and offending behaviour brought the client to services and as a result his journey has started to change.

Identified needs

During the assessment stage at the start of the Order it was identified that relapse prevention, harm reduction and accessing opiate substitution medication were priority targets for the client. Following the Recovery and Challenge Models we ensured that the client was seen jointly with his Probation Officer in addition to weekly attendance at IRIS.

Summary of work

A clinical referral was submitted to the clinical team and after extensive discussions and, advocating for the client, it was agreed that the client could access dispensing from a local chemist near to where he lived as he had previously been excluded from Powell's Place due to behaviour issues.

Weekly sessions were set consisting of weekly joint sessions with Offender Manager and IRIS allocated worker. During these sessions we explored and discussed harm minimisation, overdose awareness, coping techniques and triggers. We also identified long term goals, refusal skills, cravings and social support systems.

Unfortunately in November 2015 the client was diagnosed with a blood clot and was advised that there was a possibility of amputation but due to significant support and guidance from the IRIS team he was able to stop using illicit heroin and has maintained negative test results ever since. The client completed ITEP work books in relation to setting goals that were important to his recovery.

Recently the client achieved three months of negative test results and has now attended his final DRR review, where he was commended by the bench. We discussed the case again with the lead doctor and were able to secure weekend take out doses for the client. This has meant improved relationships with his mother as she can see visible signs of his recovery.

IRIS successes/outcomes

- Cessation of use of illicit substances.
- Cessation of offending.
- Increased knowledge around relapse prevention, triggers and psycho-social interventions.
- Take out doses secured.
- Successful reintegration in to the community.

