



CHRYSALIS
COMMUNITY DRUG PROJECT

Annual Report 2023 for 2022

CEO's INTRODUCTION

2022 was an exciting year for Chrysalis. Our services were busier than ever; we continued to see an increase in demand for our activities from both service users and professionals. In 2022, 822 clients availed of keyworking, case management, counselling and groupwork, and 8875 sessions were provided.

After years of searching, we secured a second building on Manor Street – adjacent to 33 Manor Street – which allowed us to expand our service provision. Chrysalis is now in the advantageous position to have an administration building and a building reserved for frontline service provision.

2022 also saw the launch of our Strategic Plan 'Ensuring Excellence' in the Irish Human Rights Equality Commission in the presence of Minister Frank Feighan and former Governor John Loneragan. The event was extremely well attended, and the feedback was very positive. The key priorities for the period 2023 to 2025 will be as follows:

- Priority 1: Reflect, and respond to, the needs of all service users within our service provision from low to high threshold and all the continuum of care.
- Priority 2: Ensure that the Service is accessible to all through varying levels of engagement from appointment-based service provision to general outreach.
- Priority 3: Continue to ensure compliance excellence through ongoing staff training and regular internal policy review.

2023 looms ahead, it will be Chrysalis 25th Anniversary, a milestone for an addiction service. The occasion will be marked by various events including the launch of a book celebrating the extraordinary work of our past and current volunteers and staff. However, our core focus will continue to be responding to the needs of service users experiencing multi-forms of marginalization in a pragmatic, compassionate and respectful way.

I would like to thank our dedicated team of staff, volunteers, and Board Members for supporting the needs of people who are often not seen, and not heard. I would also like to acknowledge our colleagues across the statutory, voluntary and community sectors who work collaboratively ensuring the best outcomes for the service users. Finally, I would like to thank our funders, the HSE, for their ongoing financial support and commitment.

Passerose Mantoy/CEO

MISSION STATEMENT

Our mission is to deliver a safe, compassionate and quality service to individuals and families living with problem substance use in our local community.

We do this to reduce harm and empower people to live healthier and more fulfilled lives.

VISION

Chrysalis believes that everyone living with problem substance use should be empowered to fulfil their full potential and have access to the same opportunities and rights as others.

SERVICE PROVISION

Chrysalis is a person-centred, harm-reduction service offering a range of therapeutic interventions to individuals and family members in the North Inner City.

Chrysalis can be split into 3 service provision areas:

- Chrysalis Dublin 7
- Chrysalis Dublin 1
- Peer Led Initiatives

CHRYSALIS DUBLIN 7 & 1

- Assessments are carried out with 1-2 weeks for all service users contacting the service.

Service users can avail of the following services:

- Case Management is a core element of our work. Case Management is the practice of coordinating and managing the range of services involved in the care of the individual. Each individual will have a personalised care plan. 8 Case Managers are employed in Chrysalis.
- Community Detox Support is an initiative which supports the service users to reduce or stop their use of methadone or benzodiazepines within the community in partnership with their G.P.
- Chrysalis provides free addiction and generic counselling to drug/alcohol users and their families. Currently 10 therapists are volunteering within our service.

The Teams in Dublin 7 and 1 have also specific remits:

Clinic Teams

Our team of Case Managers, who work from Amiens Street City Clinic, The Thompson Centre Clinic, Tolco Clinic and The Mews Clinic provide in reach formal Case Management to the individuals who access clinics. They will work alongside the individual to assist them to address ongoing problems relating to substance use, housing, medical supports as part of a shared careplan working alongside other practitioners.

Probation Team

We have allocated Case Managers who work alongside the North Dublin Probation Team. The Case Managers who work with the Probation Team aim to identify service users impacted by substance misuse and/or who are experiencing homelessness, and responding to their needs in conjunction with their probation officer.

Dual Diagnosis Team

In addition, the Case Management team work alongside a multi-disciplinary Dual Diagnosis team which is located in Summerhill Dublin 1. It is a platform in which Case Management team and Dual Diagnosis team actively work with the individual to determine both mental health supports, and addiction supports that suit the service user's needs.

Drug Treatment Court Team

We have allocated Case Managers to work within the Drug Treatment Court. The Case Managers work as part of a multidisciplinary team to address ongoing issues which are presenting for service user such as substance misuse, mental health, housing and social needs.

PMVT Barrymore Residential Stabilisation Unit Team

Our team are the allocated Case Management team for service users living in the Dublin 1 (NEIC) and Dublin 7 who are seeking to access PMVT residential stabilisation program. Our team of Case Managers actively work with the service user prior to admission, and post admission to Barrymore. During this time, we work with the service user to identify barriers to accessing the service in addition to focused key working sessions to ensure the readiness to access residential stabilisation.

PEER LED INITIATIVES

Peer Support is central to the development of our services. In the last few years there has been an increase in peer run service provision within Chrysalis. Peer Led Initiatives available are: Recovery Coaching and Peer Led Recovery Evenings.

Recovery Coaching. We currently have 1 recovery coach within Chrysalis. Recovery coaches are mentors who assist and support individuals in early recovery. The recovery coach is a graduate from the Recovery Coaching and Addiction in the Community Diploma/DCU School of Nursing and Human Sciences.

Peer Led Recovery Evenings. In 2022 the Evening Recovery took place every Tuesday, Wednesday and Thursday evening from 6.00 to 8.00pm. It is a Peer led evening with a check-in group. It is aimed at drug free service users. The Evening Recovery provides support, enhances well-being and strengthens connectedness amongst individuals in recovery.

Peer led initiatives have had a positive impact on the knowledge, personal and clinical recovery of service users.

TEAM LEADER REPORTS

Ross McNulty

Policies and Compliance

2022 was the year we launched our latest strategic plan 2023 – 2025 – Ensuring Excellence. This offered a number of new challenges to be addressed in terms of aligning our policies to the new initiatives proposed for the period covered by the plan. One of the main aspects of the strategic plan was to regain the low threshold ethos that Chrysalis was known for. In order to facilitate this our policies will need to be reviewed to ensure the inclusion of recognised best practice in the areas of outreach, peer-led initiatives and developing new therapeutic interventions aimed at current drug users.

During 2022 we also completed our new comprehensive staff handbook which allows for better and more seamless integration of new staff in the organisation and gives current staff easy access to essential policies. IBEC were instrumental in preparing the document and ensuring we are compliant with the most up to date employment practices. We are constantly reviewing our policies and procedures considering new developments in the field of service provision and changes to statutory employment obligations.

Training

As an organisation we prioritise upskilling in areas relevant to our work. Over the last number of years, we have been very aware of the growing need for training in responding to the various mental health issues our service users present with. This has, along with the rest of the country, been exasperated by the COVID 19 pandemic. With this in mind we undertook two training programmes to increase our skills – Mental health first Aid delivered by the St. John of Gods and “Learn 2 Listen” delivered by the Samaritans.

During 2022 we also completed as an organisation Emergency First Aid and Professional Boundaries delivered by Urrus. Many of our staff took part in other training throughout the year such as Restorative Practice, Trauma Informed Care, Meitheal, HIV Ireland Training, Responding to Sex Trafficking Training, Anti-Stigma Training, SafeTalk & ASIST, IHREC Human Rights and Equality and many more. We apply for all available grant funding to allow us to continue to boost our skills as a frontline organisation.

The focus of our training audit for 2023 will be all mandatory training required to be compliant with HSE guidelines. This will include SAOR, SafeTalk & ASIST, Children First, Open Disclosure, LGBTQI+ Training and Intercultural Awareness. We will review this as 2023 progresses and avail of any training that are required and available.

Information Management and Record Keeping

In Chrysalis we are constantly improving the type and quality of information we can capture to inform the development of our services. In 2022 we have made a concerted effort to engage with the Health Research Board to improve the accuracy of our yearly NDTRS returns. This information is extremely useful when recorded accurately to allow us to identify trends in areas such as demographics, drug use patterns and emerging trends.

During 2022 we also upgraded our IT equipment and information security to ensure the safe storage of service users' data. New laptops, PCs and an upgraded firewall means increased safety for all our service users' data. We have also adopted multifactor authentication where necessary which gives an added layer of protection and makes certain we are compliant with best practice.

Kind regards,

Ross McNulty
Team Leader

Sarah McGillivray

The year of 2022 saw many exciting resumptions of services in Chrysalis alongside new developments of service. With society returning to normal and restrictions of living due to COVID-19 being lifted, Chrysalis took advantage of this opportunity to re-evaluate its service provision and learn from the needs of our clients.

The launch of our strategic plan “Ensuring Excellence” saw us strive toward offering the most efficient, inclusive, and innovative service. We recognised the need to create care pathways for the most vulnerable of clients treating both Mental Health and Substance use. This service is unique in its nature and complex to deliver, requiring constant upskilling of our Case Management team and ensuring the appropriate support systems for our team to effectively carry out their role. We played an active and integral role throughout the year working alongside DCU Recovery College who pioneered a community effort to integrate services working with Dual Diagnosis.

This resulted in the development of our new Dual Diagnosis group based on the model of ‘Seeking Safety model’. This group will be starting early 2023. The intensity of the group requires finetune of skills both in facilitation of group work to a comprehensive understanding of the treatment of Mental Health and Substance use. This group will continue to be delivered throughout the year.

Our team of dedicated Case Managers continue to offer services working as part of multidisciplinary teams in the HSE Methadone clinics of CHO9. These teams work at full capacity, this aspect of our service focuses on working with the teams from the HSE to determine pathways for client care progression. We work closely with the medical teams and in turn, with this in mind it makes progression for clients more attainable with less room to become overwhelmed. This is an exclusive facet of our service delivery and without the effort of both HSE staff and Chrysalis Case Management team, the rate of progression for clients and success to interagency working would not have been possible.

In 2023 Chrysalis will also co-host weekly Crack-Cocaine groups within the Thompson Centre and City Clinic. This is an initiative of the HSE and we were delighted to be offered the opportunity to be part of this initiative responding to changing drug trends at the centre of harm reduction.

Equally, our Community Case Management team in Summerhill Primary Care Centre and Summerhill Inclusion Health hub have continued to work beyond expectations. Our Community Case Managers embrace and reinforce our links with other Community organisations. Specifically working closely with the NEIC events to promote our service and ensure every person has access to care. They work alongside Probation teams, Drug Court, Prisons, in addition to Homeless organisations and other Addiction services.

Through our collaboration work with Probation services, we further developed a weekly Probation Chrysalis group hosted in 33 Manor Street; this group will also start early 2023. This group aims to cohesively deliver content based on ‘reduce the use’ to clients of both Chrysalis and Probation service. It reinforces an interagency approach to care at the core of Case Management and demonstrates our core principle of working from a harm reduction approach and inclusivity to recovery for all, no matter what that looks like practically.

Social activities are part of the core of what Chrysalis provide. In 2022, we hosted several events throughout Recovery month including our first Open Day in several years. This is something we were delighted to be able to do and welcome others back to 33 Manor Street. We hosted weekly local walks to raise awareness for recovery in the NEIC and we participated in a football tournament hosted by our friends in Soilse. We have made efforts to raise our profile on social media platforms exercising our aims from our Strategic Plan to not only 'Ensure Excellence' but, to be innovative and accessible.

We have had the opportunity to reinstate hosting NA (Narcotics Anonymous) in 33 Manor Street. Furthermore, our Social Nights will be back in March 2023 offering a place of safety and a place where a range of activities including holistic treatments will be on offer. The voice of our clients has always and will always be a voice we hear. At Chrysalis, we want our clients to have a say in the care they receive; this saw the introduction of our Service User Working Group. Facilitated by our Case Management team, providing a platform for feedback and advocacy on behalf of our clients.

In the year coming, we hope to solidify the developments we have achieved with a view of working towards excellence in both service delivery and compliance. The year of 2023 will see us celebrate our 25th year Anniversary providing services at the forefront, and it is fitting to state that Chrysalis given its success over the years will use this opportunity to reflect, learn and grow on our continued progression.

I would like to thank the efforts of our Case Management team which has not gone unrecognised, at every turn they again demonstrated willingness, commitment, and professionalism.

In gratitude and pride,

Sarah Mc Gillivray
Team Leader

PROJECT STATISTICS 2022

Chrysalis CDP's services are facilitated in a wide number of ways to the community.

The main ways are:

- Assessments
- Keyworking/Care Planning
- Case Management
- Community Detox Support
- Addiction Clinics
- Evening Recovery
- Recovery Coaching
- Addiction and Generic Counselling

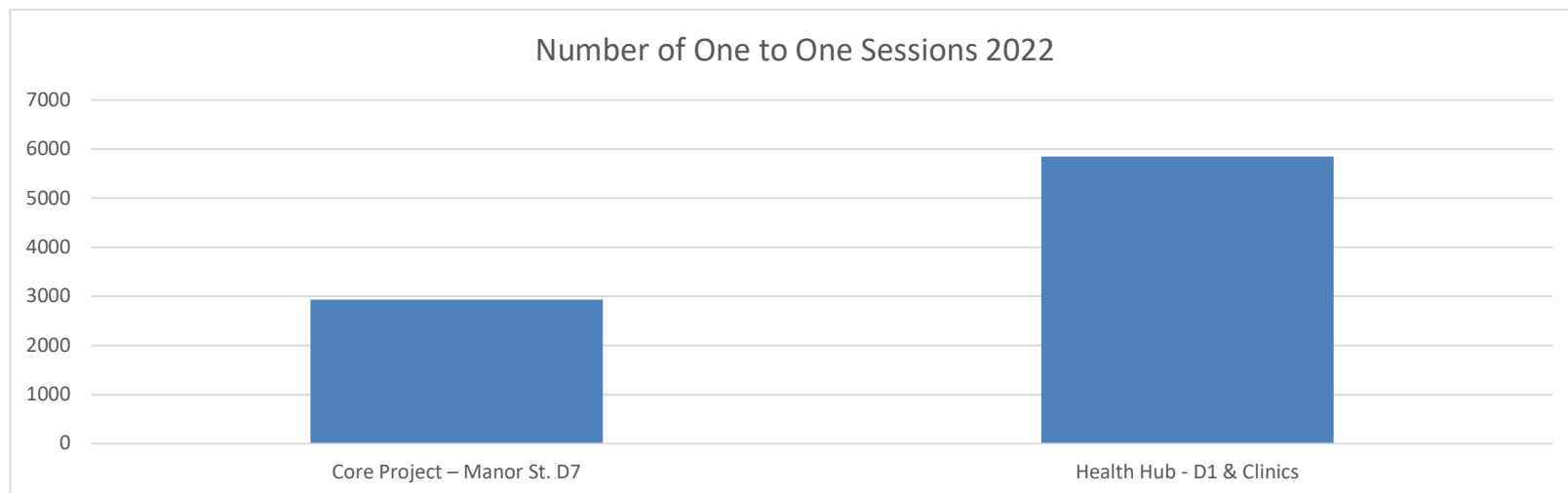
The majority of people availing of these services fall in the catchment of the NICDATF, a small amount coming from outside the area.

In 2022 we had 710 referrals to Chrysalis. A total 8,875 sessions were recorded across all of the individual services provided by Chrysalis.

The main services attended were:

Activity	Sum of Attended	Attendees
Case Management	6,900	685
Key Working	719	167
Counselling	1,172	69

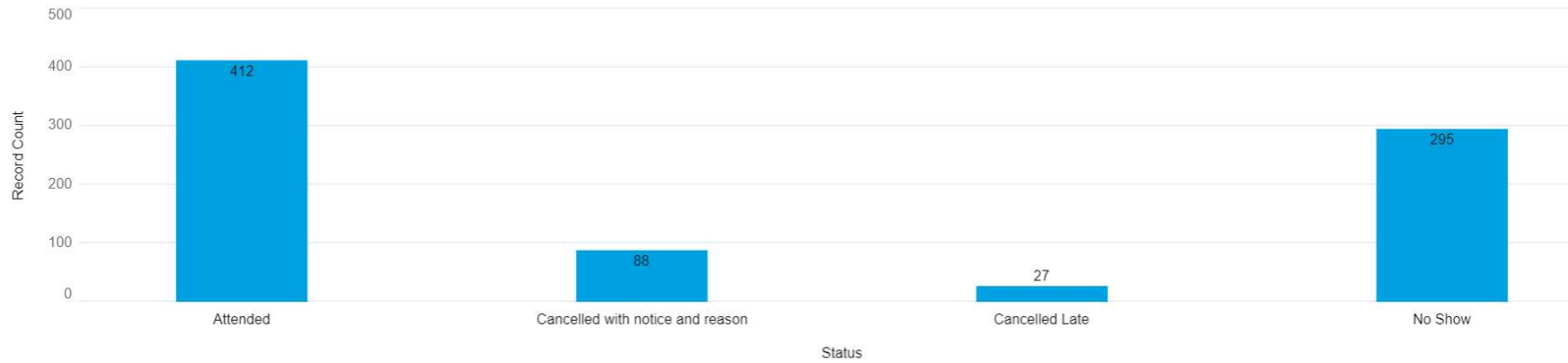
In order to properly service our service users Chrysalis staff, volunteers and peer workers continue to invest considerable amount of time into their wellbeing.



Report on Groups and One to One Sessions 2022

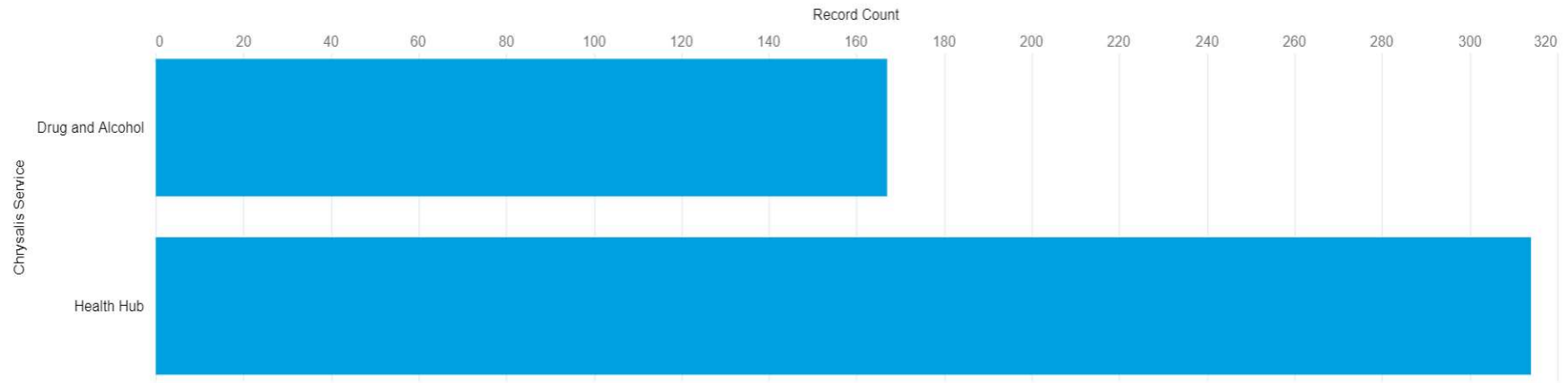
Programme	Activity Type	Number of Service Users	Number of Sessions
Core Project – Manor St. Dublin 7	Key Working	16	72
	Case Management	218	1696
	Counselling	69	1172
Subtotal		275	2940
Health Hub – Dublin 1 & Clinics	Key Working	151	647
	Case Management	467	5204
Subtotal		480	5851
Recovery Group		103	84
Subtotal		103	84
Total		822	8875

Assessments 2022

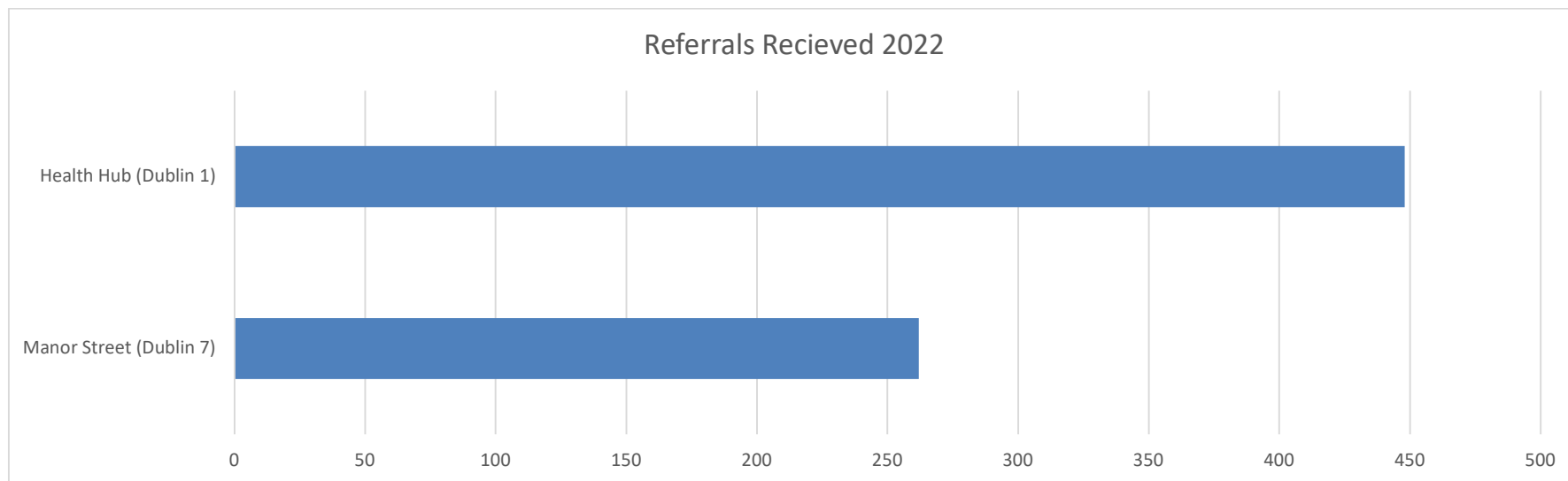


Assessments 2022		
Programme	Status	Number of Assessments
Assessment	Attended	412
	Cancelled with notice and reason	88
	Cancelled Late	27
	No Show	295
Total		822

Disengaged Service Users 2022

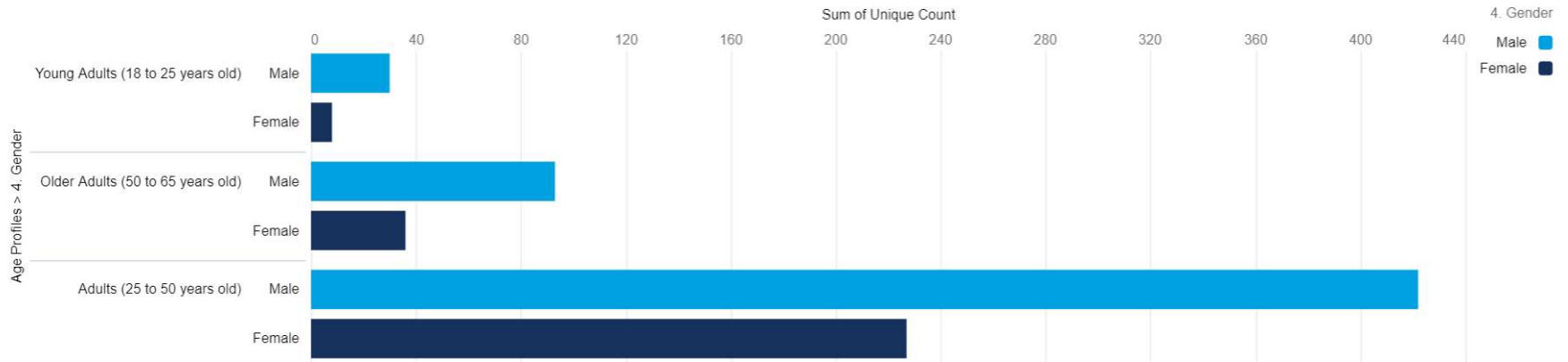


Disengaged Service Users 2022	
Chrysalis Service	Disengagements
Drug and Alcohol (Manor Street, Dublin 7)	167
Health Hub (NEIC, Dublin 1)	314
Total	481



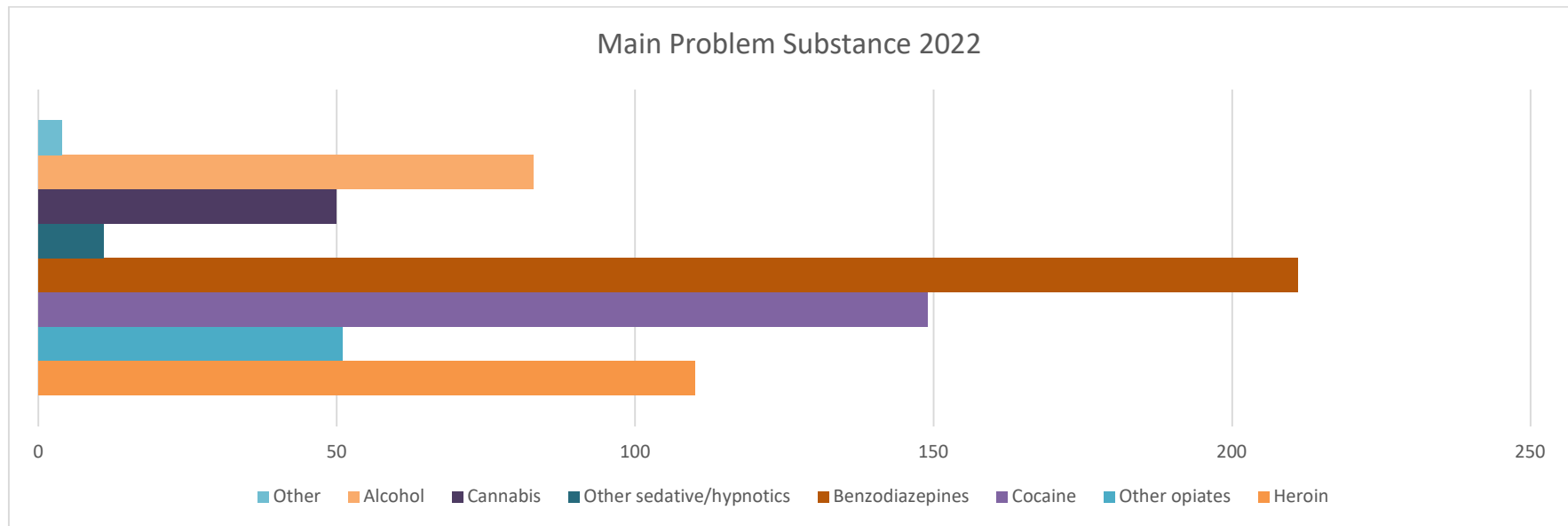
Referrals Received 2022	
Chrysalis Service	Referrals Received
Drug and Alcohol (Manor Street, Dublin 7)	262
Health Hub (NEIC, Dublin 1)	448
Total	710

Clients Age and Gender in 2022

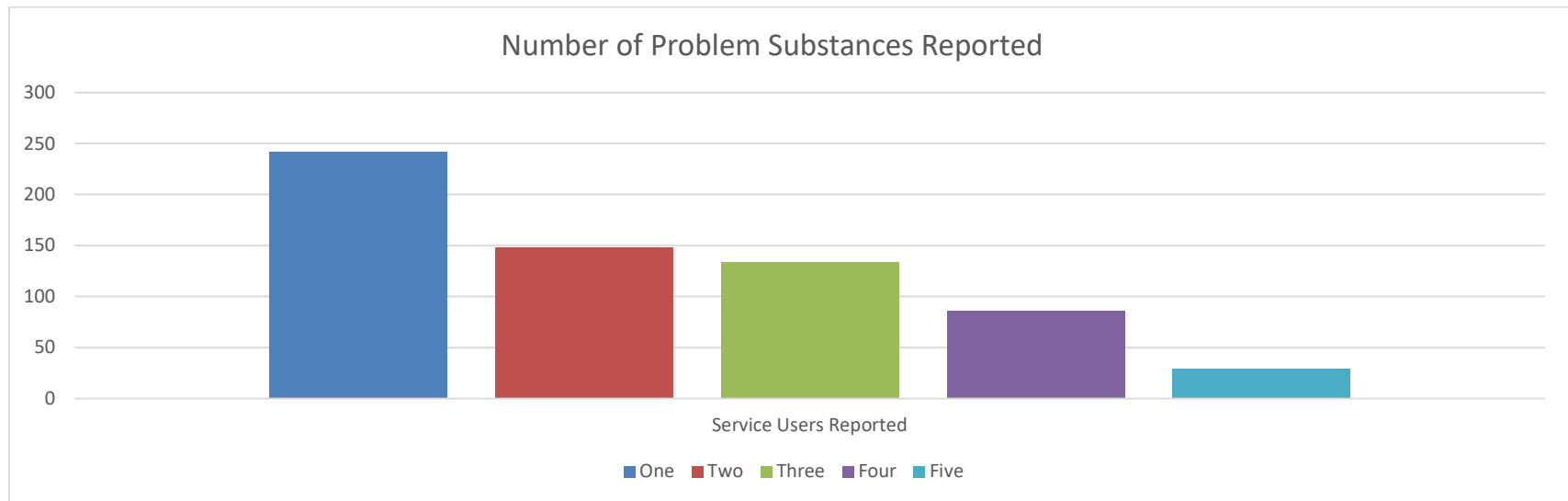


Clients Age and Gender in 2022

Gender	Age Profiles	Number of Service Users
Male	Young Adults (18 to 25 years old)	30
	Older Adults (50 to 65 years old)	93
	Adults (25 to 50 years old)	422
Subtotal		545
Female	Young Adults (18 to 25 years old)	8
	Older Adults (50 to 65 years old)	36
	Adults (25 to 50 years old)	227
Subtotal		271
Total		816



Main Problem Substance 2022	
Substance	Service Users Reported
Heroin	110
Other Opiates	51
Cocaine (Crack & Powder)	149
Benzodiazepines	211
Other sedative/hypnotics	11
Cannabis	50
Alcohol	83
Other	4



Number of Problem Substance Reported 2022	
Number of Problem Drugs	Service Users Reported
One	242
Two	148
Three	134
Four	86
Five	29

CLIENT SATISFACTION SURVEY

Feedback from clients of Chrysalis for the year 2022

John Llamelo & Clive McGinn

12 May 2023

Research Background

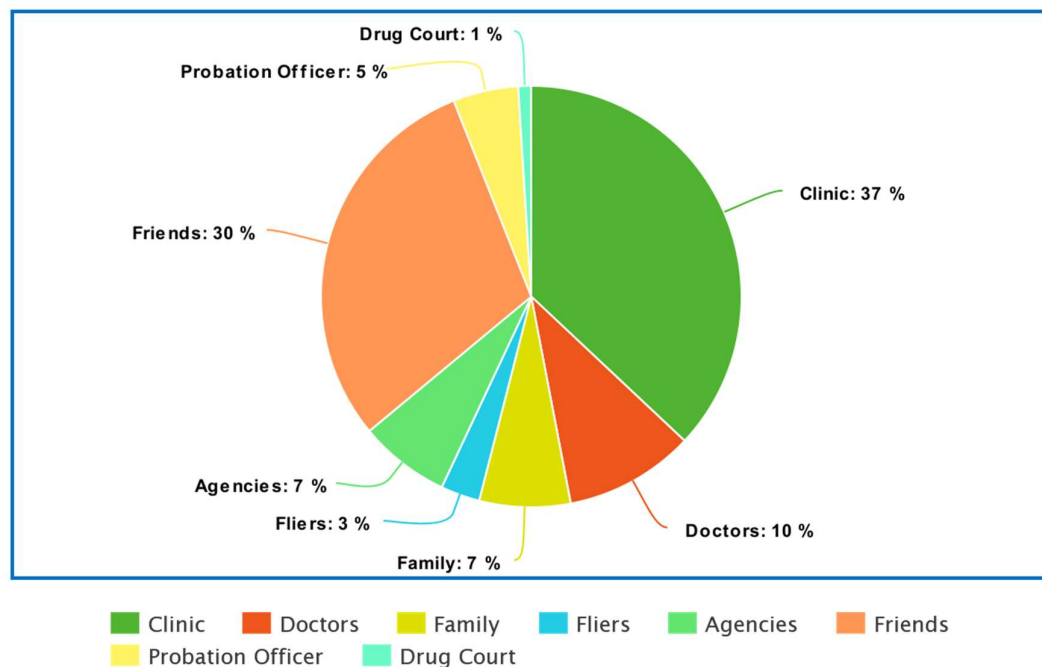
The aim of the Client's Satisfaction Survey was to receive feedback from clients who were assessed in the year 2022. The survey is essential to gain information regarding the services provided by Chrysalis, and their awareness of the organization.

The survey is considered a quantitative research form and was operated through phone calls. Each client who participated was asked 5 questions. These questions were short and kept simple so as to not cause confusion, and were mostly closed questions aside from one question. 114 clients in total were intended to be called. 73 have answered and partook in the survey, accounting for 64% of the clients.

Clients were informed that they were taking part in a survey and that they had the option to decline if they wanted. Clients were also informed that this survey was conducted to improve the service at Chrysalis by receiving their feedback, be it good or bad. All clients were informed that the survey was confidential.

The following information is compiled of data received from clients who have taken part in the survey.

1. How were you referred to Chrysalis?

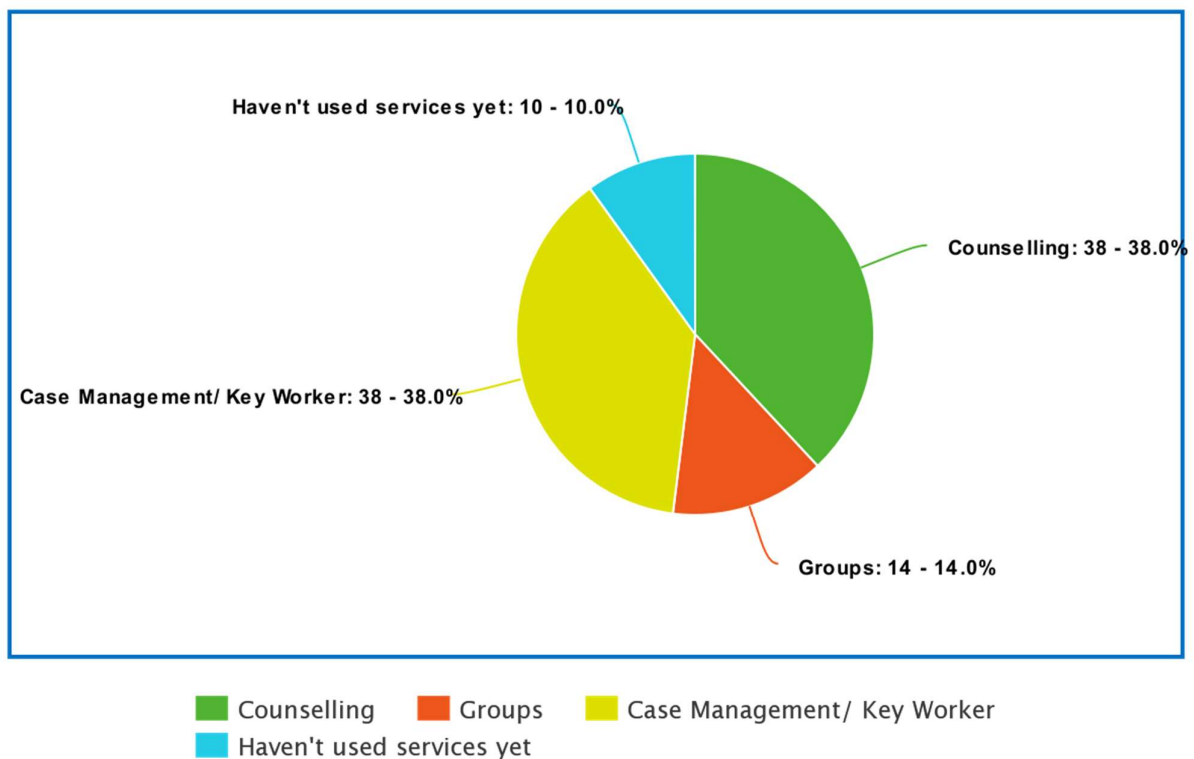


- 37% of clients have been referred by a clinic

- 30% through friends
- 10% through Doctors
- 7% through agencies such as homelessness services
- 7% through family
- 5% through a probation officer
- 3% through fliers, these clients may be self-referred
- 1% through the drug court

2. What services have you used with Chrysalis?

The survey reveals the number of people who used these services:

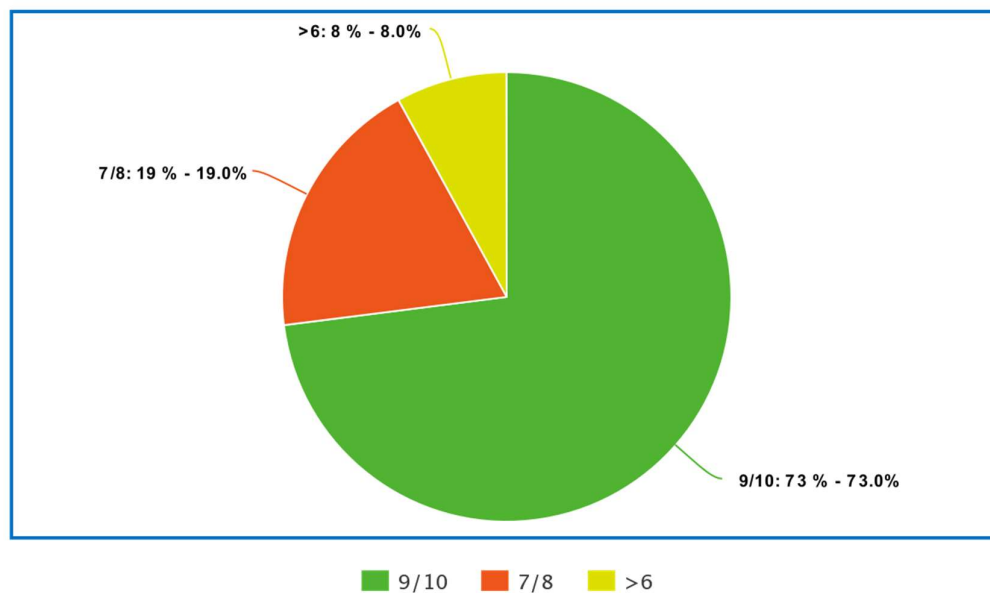


- Counselling: 38%
- Case Management/ Key Worker: 38%

- Groups: 14%
- 10% of respondents have been linked in but have not used any of the services yet

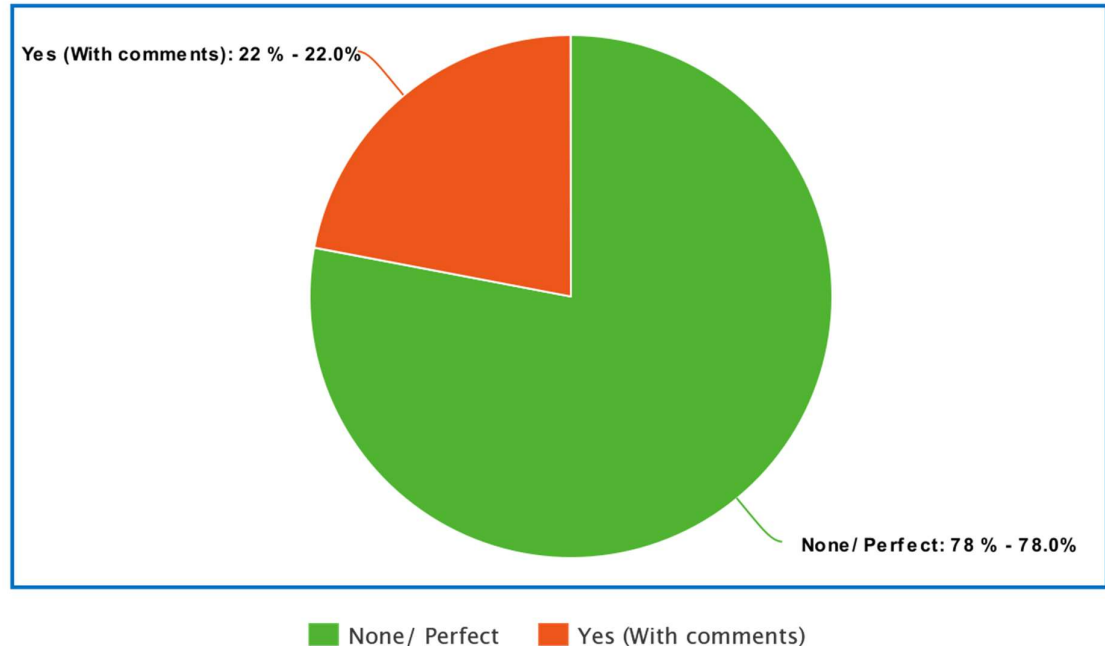
Note: Some respondents self-reported that they have used more than one service.

3. Were you satisfied with the service you received? How would you rate it from 1-10 (1 being the lowest rating and 10 being the highest rating)



- 73% of respondents have rated a 9 or a 10
- 18% have rated a 7 or an 8
- 8% have rated 6 and below

4. How would you improve the service? Any recommendations (location, hours, service provision, staff etc).



78% of respondents thought there would be no improvement needed at Chrysalis.

22% had made comments which mentioned the following points:

- Inform schools (i.e colleges, and local primary/ secondary schools) about the service
- Have a choice of Zoom calls, or person-to-person meetings
- Too many Case Manager changes in 6-month period
- Have the building upgraded and refurbished
- Let people know more about the service via leaflets and awareness
- Perfect for me, saved my life
- More clinics and facilities
- See Case Manager and Key Worker more than once a week
- More information is needed in the reception
- Have a designated waiting room away from reception
- Lack of engagement from staff

5. Would you recommend the service?

92% have reported yes

8% have reported no

EXTRACT FROM DRUGSNET IRELAND

ISSUE 81 SPRING 22

The experience of Chrysalis Drug Project in providing case management

Chrysalis is a community drug and alcohol service which has been operating for almost 25 years in Dublin's north inner city.^{1,2} The service has grown significantly since then, especially in more recent years; having started as a counselling service it has moved on to provide a range of other services. Its vision is that 'everyone living with problem substance use should be empowered to fulfil their full potential and have access to the same opportunities and rights as others'.³

Chrysalis has been incorporating case management (CM) into its work since 2007. Based as it is in Dublin city, many of the Chrysalis service users present with complex needs, addiction, mental health problems, homelessness, legal or family issues, for whom CM can be most effective. In 2019, Chrysalis extended this service to the service users of the newly set up Inclusion Health Hubs. Since then, it has extended the service to other agencies. It now also provides training on CM and the comprehensive needs assessment tool to other addiction services.

The experience of Chrysalis working with CM may be useful for other services, as it has embraced and successfully embedded the model into its work and expanded the service in recent years.

For more information on CM, see the article 'Overview of case management related to work with people who use drugs' on page 18.

The Chrysalis experience

Suitability of service users

Chrysalis strives to ensure the service user is always at the centre of the process; however, its ethos is that participation must always be the choice of the service user. While CM can be most effective for service users with complex needs (addiction/legal/dual diagnosis/housing, etc.), not all service users will benefit from it, as they require a level of motivation

to make some changes in their life, to engage, and commit to the process. For example, they have to be active in all the associated processes, such as care planning and attending their appointments. For some service users, CM will not be appropriate at that point in time, but they are reassessed periodically for suitability, as their situation or motivation changes. However, when implemented properly, CM can often provide a service user with clarity and define a pathway for them to navigate the services they need in order to meet the objectives of their care plan.

Role of case manager

In the experience of Chrysalis, the case manager requires a high level of skill to ensure that the CM process is successful for both the service user and all the agencies involved. As CM is used to coordinate the service user's care plan across many services, the case manager needs to be able to coordinate, organise, advocate, build networks, and negotiate on behalf of their service users in order to progress their care plans. In this regard, the case manager must have the authority to build strong working relationships across all agencies, not just in health but also social services and justice. The term 'broker' is sometimes used in this context and does convey the need to 'put the pieces together'. The Chrysalis team acknowledges that to be an effective case manager involves much administration, IT skills, and time management. This combined workload can be considerable and, according to Chrysalis, the job functions better as a standalone post. This also ensures that the role of case manager is clearly delineated for other staff and service users.

CM in other settings

When providing CM in other settings, the Chrysalis team tries to get an understanding of the unique culture of the service, while the service user also needs to adapt to this new approach. Therefore, it can take a considerable amount of time to build up a relationship of trust with service users so they come to understand the role of the Chrysalis team, CM, and how the process could help them to progress. For Chrysalis, its work over time can help to improve the relationships between the service users and the staff in the clinic.

Even though CM has been operationalised in addiction services for a number of years, the team still finds that some services are not always clear on what CM entails, and/or the extent of the process, and/or is implemented slightly differently in different services. There can be uncertainty about the scope of the role of the case manager and how CM differs from key working, for example.

During the public health crisis of the Covid-19 pandemic, CM was impacted because of the public health restrictions on addiction services, which limited referral options for service users.

The experience of Chrysalis Drug Project in providing case management continued

Challenges and streamlining

If all services could share the same assessment tool, which would be securely available to all relevant staff, it would help to streamline the CM process for everyone. It would also be useful if the salary and scale of the case manager could be reviewed, given the high level of skill required. In addition, a formal certified and accredited training for CM for addiction services would allow project workers to upskill and also to ensure a standard level of competency of case managers across all addiction services.

Final thoughts from Chrysalis team

The Chrysalis team feels that CM has been successful for them as an organisation. It is an easy framework to follow: from assessment where the needs are identified to care planning where the responses required are identified, along with regular care planning review.⁴

One of the key values for Chrysalis as an organisation is to be person-centred; therefore, CM fits in with its ethos as person-centred, client-led, and always driven by the client's

needs. The voice of the service user is central to the care plan and CM is about empowerment and self-efficacy. CM is also about coordinating resources; when successful it is an example of interagency practice at its best. It involves linkage and brokerage and tapping into local and nationwide resources in response to the identified needs of the service user. A multidisciplinary team all working together in unison on an integrated care plan will have positive outcomes for the service user.

Suzi Lyons

- 1 Chrysalis Community Drug and Alcohol Team (2018) *Strategic plan 2019-21: treatment in partnership*. Dublin: Chrysalis Community Drug and Alcohol Team. Available online at: <https://chrysalisproject.ie/wp-content/uploads/2019/09/Strategic-Plan-Brochure-2018.pdf>
- 2 This article was based on discussions with Chrysalis CEO Passerose Mantoy and team leader Sarah McGillivray, with a contribution from Yvonne Byrne. For further information on Chrysalis, contact passerose@chrysalisdrugproject.org
- 3 For further information on the Chrysalis vision, visit: <https://chrysalisproject.ie>
- 4 For an example of an initial and comprehensive assessment protocol, see Cork and Kerry Drug and Alcohol Services (2017) *Case management manual 2015*. Cork: Cork and Kerry Drug and Alcohol Services. <https://www.drugsandalcohol.ie/26727/>

FINANCIAL REPORT

Results for the Year Ended 31st December 2022

The main funder this year as with previous years is the Health Service Executive (HSE). Amounts received in 2021 were €984,866 an increase on 2021 €75,292 due to the increased growth of the team and increased grants for set projects.

Income for 2022 totalled €985,016, an increase on 2021 (€912,11). Total resources expended amounted to €953,145 (2021: €896,409).

The following is an excerpt from our audited accounts 2022:

Incoming Resources:	€	€
HSE	985,016	
Other	150	
Total Incoming Resources:		985,016
Resources Expended:		
Expenditure	953,145	
Total Resources Expended		953,145
Surplus		31,871

Chrysalis had a surplus of **€31,871 (2021: (€15,702))**, this was mostly due to costs committed in 2022 being unable to be carried out due to time constraints and have been committed in 2023. There was an overall increase in expenditure in line with income. Chrysalis carried a reserve of €133,683 into 2023. As our funding has substantially increased, we will be working towards building our surplus over the next few years to ensure it is sufficient to support the amounts needed.