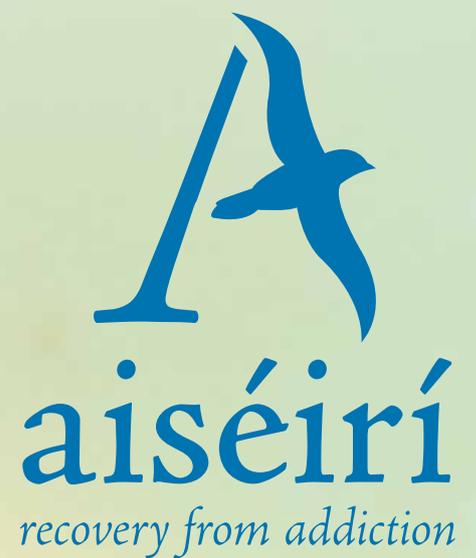


Keeping it Simple
A Strategic Plan
2014 to 2017.



We believe that:

Everyone can recover.

Everyone can have a fulfilled future.

Everyone can live without addiction.

Aiséirí is fully accredited by CHKS, the internationally recognised healthcare quality standards accrediting body. We are also recognised by all of the main health insurers. We work closely with the HSE, the Probation Board, employer bodies, representative and other state organisations.

Aiséirí Cahir Ltd is a limited liability company, recognised by the Revenue as having charitable status, which is wholly owned by Aiséirí, a charitable corporation.



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Introduction

This is the first Strategic Plan for the new strengthened Aiséirí range of services, which brings together four unique, already well-recognised centres of recovery in Tipperary, Kilkenny, Wexford and Waterford.

By bringing the expertise and the experience of four centres together, we can now provide comprehensive care, knowledge and expertise in settings that retain their homely and tranquil feel so that people, and those closest to them, dealing with alcohol, drug and gambling addiction, find the help, counselling and the specialist evidence-based support they need to recover.

This Strategic Plan has been developed following intensive consultation with staff in our four Aiséirí centres, with our Boards of Directors and Trustees, current and former clients, family members, community and partner organisations, funders and policy makers.

Our new vision, mission and values have emerged from this consultation. They build on the breadth of experience and understanding we already hold, and are an expression of the purpose, goals and aspirations we have for the future of the Aiséirí service and the people, families and communities with whom we work.

The implementation of this Strategic Plan will also see our organisation adopt the Code of Governance for all Community and Voluntary Organisations.

Vision, Mission and Values for a Strengthened Aiséirí

VISION

Aiséirí believes in the priceless potential of people and that recovery from addiction is possible for everyone.

MISSION

Aiséirí provides community and residential services to help young people, adults and families overcome addiction and lead meaningful lives in recovery.

VALUES

Hope

By promoting abstinence we inspire hope for recovery in a safe, non-judgemental environment.

Compassion

Compassion leads us to empathise with our clients as we journey with them in trust and confidence.

Respect

We honour the unique dignity of each person as we support them in addressing their needs.

Recovery

We believe everyone has the potential to recover and have a fulfilled, worthwhile future, transforming their lives and that of their families.

Excellence

Our innovative, evidence-based therapies are delivered with a quality that seeks the highest standards at all times.

Re-shaping Futures

Foreword from the Chairman of the Aiséirí Board

This Strategic Plan is about re-shaping futures – re-shaping the future of Aiséirí as a strengthened treatment and rehabilitation service and centre of excellence, and critically, re-shaping the futures of the young people, adults, families and communities we will work with in the coming years.

The decision by the Founders and Trustees of Aiséirí to devolve policy direction to the new Board could only be described as radical and courageous. This new Board, working with the Chief Executive and his team, have and will continue to invest their energies in reshaping an organisation that best serves the needs of individuals who are confronting the challenges of addiction. While the ethos and the objectives of an organisation are a constant, the environment in which it operates in constantly changes.

Like every other part of our society, Aiséirí suffered the major impacts of a very difficult economic environment. The survival of the organisation necessitated significant changes, which are being implemented in a way that ensures consistency of service delivery. As a Board, we are particularly aware of how challenging this has been for the people who directly deliver the services. The outcome of this demonstrates the quality and commitment of the staff and volunteers. As with most organisations, people are its most important resource. For this resource to be effective it is essential that the organisation operates within a clear policy framework.

This Strategic Plan has been prepared through a process of consultation and dialogue, led by the Chief Executive, with a wide range of people

and organisations – its stakeholders. It also demonstrates that Aiséirí is an outward looking and progressive organisation.

The Strategic Plan provides the framework and direction for the development and improvement of the services that we offer. Aiséirí is operating in an environment in which many changes have taken place in the patterns and prevalence of drug and alcohol use in Ireland and the manner in which the health care system is responding to these changes. In addition to this, the country has seen increases in gaming and a growth in the number of people running into difficulties as a result of gambling. We are also conscious of the need to support people, in particular family members, who suffer the effects of living with their loved ones who have addiction problems.

The overall thrust of this Strategic Plan is to reassert Aiséirí's commitment to the provision of abstinence-based treatment.

The level of engagement of everyone involved in bringing this Strategic Plan to completion is to be commended. However, I want to specially thank the Strategic Planning Working Group, as well as the Strategic Planning Subcommittee of our board.

Finally I want to thank my colleagues on the Board for their commitment and support since our establishment. We are committed to the highest standards of governance and adhere to the recognised Code of Governance for Voluntary Bodies.

Tony Walsh
Chairman

The overall thrust of this Strategic Plan is to reassert Aiséirí's commitment to the provision of abstinence-based treatment.

New Beginnings

Introduction from Aiséirí Chief Executive

All Strategic Plans have to start with a vision, with a strength of purpose and with a determination that what is put down on paper, firstly reflects the values and ethos of the organisation, and secondly, that what is committed to can be realised, can be measured, and importantly, can be relied upon to make a significant difference to the people the organisation serves.

For Aiséirí, this Strategic Plan is an important benchmark. It is the first Strategic Plan for our merged and strengthened treatment and rehabilitation service.

At the heart of this plan are the lives and futures of people – young people, women, middle-aged men, fathers, brothers, sisters, uncles, nieces and nephews. Ordinary people – people that you and I know and love, people who want to work, want to go to school, want to hope, want to care for their families and be cared for. The one thing that distinguishes the people that this Plan is committed to, is that they are living with the despair and unhappiness of addiction. This Plan is a message to them that there is a place, there is a service and there is a wealth of understanding, care and experience, right here in their community, that can help them take the vital first step to recovery from their addiction.

Aiséirí means resurrection. When we were developing this Strategic Plan we did consider the idea of changing our name. But this was quickly dismissed because everyone involved in the consultation was adamant that our name, and what it means, epitomises what we are about. Our four centres are places of new beginnings. Our aim is to provide a gateway to recovery from the unhappiness of addiction so that people can

begin to resurrect and live their lives to their potential, without fear, without defences, and without dependency.

This is also a new beginning for me as Chief Executive with Aiséirí and coincides with a time when our organisation is facing many challenges and uncertainties. We are working with what sometimes can be seen as the absence of firm direction in policy and approaches to addiction. We will diversify our services. We have had to face the challenge of the economic downturn in 2009, which had, and continues to have, devastating impacts on marginalised people and communities, and has directly impacted upon addiction service funding. From my still very short period here I have every confidence that the Aiséirí team, armed with this collective and agreed Strategic Plan as a roadmap, will rise to every challenge before it.

I have been greatly impressed with the way in which people from the four Aiséirí centres have worked together to bring this document and its launch about. As well as facing external uncertainties, the staff and volunteers at Aiséirí have also, at times, faced internal uncertainties about what is essentially a merger of four individual centres under one roof. I would like to acknowledge the spirit of co-operation, trust, energy and commitment with which this merger has been accepted and achieved though this may have been very difficult at times.

We have kept this Strategic Plan simple. We have just two strategic goals – one that sets out our aims for an enhanced service and one that outlines the type of organisation we need to realise this improved and strengthened service. We have fourteen priorities in total but here's a

A Strong Foundation – Our Ethos

Message from the Chairman of the Board of Trustees

taste of what I am particularly excited about:

We want to:

- Encourage client and family participation
- Develop a comprehensive outreach and pre-entry programme
- Extend our detox services, our extended care, aftercare and family services
- Develop an education and prevention strategy
- Establish an audit, research and evaluation programme

I am confident that this Strategic Plan will see us not just build upon the excellent services and care already in existence within the Aiséirí centres but will also see us rise to the new policy, economic and societal circumstances that we face over the coming years.

I would like to conclude by paying tribute to all our staff, the wider management team, our Board of Trustees and our Board of Directors. Without their dedication, enthusiasm, flexibility and willingness to take on the challenge of a new Aiséirí, this Plan, and the goals within it, would have been extremely difficult to achieve.

Finally, I want to acknowledge all of the clients, family members and friends that Aiséirí has had the privilege of supporting over its 30-year history. Your stories are intertwined with our story. Your experiences, sometimes set-backs, resurrections and strengths give us the experience and knowledge that we use everyday to continue to help others. Your future inspires this Plan and the future of Aiséirí.

Paul Conlon

Chief Executive, Aiséirí

The ethos of Aiséirí can be defined as the beliefs, values and principles that are at the heart of all that we do and the approach that underpins the therapeutic work that promotes recovery from addiction.

Our ethos can be summed up under five key themes or guiding principles: we are welcoming, relational, therapeutic, spiritual and transformative. Each is inter-dependent, each is borne out of our 30 years of experience and learning, and each is integral to the journey to recovery and life fulfilment from addiction.

This ethos is embedded into the strategic objectives and goals of this Strategic Plan, ensuring that our future is imbued with our past.

Welcoming

In all of our centres we strive to create an atmosphere that is warm and welcoming. From the first phone call or knock on the door people feel valued. Hospitality is a priority. The physical environment cultivates an atmosphere of comfort, ease and beauty. Rooms are bright and warm. Gardens are well tended and endowed with meaning that complements the aspirations of Aiséirí.

Relational

We understand the importance of relationships in promoting recovery from addiction. Our work is person centred and values each individual, regardless of background or status. We show respect and dignity to every resident through relationships that are caring and compassionate, centre-staging the welfare of the individual and their families. Positive relationships promote mutual responsibility and accountability for actions.

Therapeutic

We offer a therapeutic programme, in accordance with best practice, that is based on the 12 Step Programme of abstinence and the Minnesota Model. We do this in an environment that is safe, physically and psychologically. The physical, intellectual and emotional needs of our residents are addressed to the greatest extent possible. Their on-going recovery is promoted through aftercare, family programmes and the 'self help' fellowships. Reintegration into society is carefully planned and tailored to each person's physical and mental health, education and employment needs, with links to external supports and care.

Spiritual

A spiritual ethos was central to the founding vision of the organisation and remains at the heart of Aiséirí. Attention to the spiritual dimension of human existence acknowledges the transcendent meaning in our lives and informs our search to live well together as human beings. This spiritual dimension is nurtured by putting a value on individual belief systems, for example, providing opportunities for special rituals, creativity, stillness, mindfulness and appreciation of the beauties of nature.

Transformative

The primary objective of the Aiséirí Treatment Programme is to transform the lives of the participants and the lives of their families and friends, through recovery from addiction. This objective places us alongside all those who strive to create a better world through personal and social change. Persons with addictions can feel isolated, marginalised, disempowered and discriminated. In trying to promote a more just society we commit ourselves, through our programme, to empowerment, equality and capacity building.

The provision of two of our key facilities, together with the seed funding provided by the Sisters of Mercy, has been a key factor in the establishment of our organisation. This significant contribution in addition to the beliefs, values and principles described above, has indeed ensured that we have enjoyed the benefit of a solid foundation in more ways than one from the beginning.

Brian Carroll

Chairman of the Trustees

Our work is person centred that values each individual, regardless of background or status. We show respect and dignity to every resident through relationships that are caring and compassionate, centre-staging the welfare of the individual and their families.

Addiction in Ireland - Responding to a changing landscape

Aiséirí is operating in an environment in which many changes have taken place in the patterns and prevalence of drug and alcohol use in Ireland and the manner in which the health care system is responding to these changes. In addition to this, Ireland has seen increases in gaming and a growth in people running into difficulties as a result of gambling.

A total of 15,699 cases were treated for problem drug or alcohol use in 2012.

Addiction and the dangerous use of alcohol and drugs is no longer the stereotyped preserve of inner cities or large towns. It is an issue that is affecting families and communities throughout the country. Our residents are younger in age than before. There are more women presenting with addiction problems. Young people are being exposed to, and would seem to have the capacity to consume more substances at an earlier age.

Adolescents dealing with addiction may have learnt the behaviour; they may be the third generation of addicts in a family. There are more families dealing with addiction before their children reach their 21st birthday, sometimes before they leave school. There is an increase in polydrug use with people using alcohol and prescription drugs presenting more frequently.

Ireland's unhealthy relationship with alcohol is well documented. Our consumption of alcohol increased by 46% between 1987 and 2001 (14.3 litres per person over 15) and while it fell to 11.6 litres in 2012 that still equates to every person over 15 drinking over 42 bottles of vodka a year.

Aside from the high volumes, our drinking habits are of great concern – over half of all Irish

drinkers report harmful patterns of drinking – that is four out of ten women and seven out of ten men. We start to drink early – a pattern that can have devastating consequences for young people. An ESPAD (European School Survey Project on Alcohol and Other Drugs) survey in 2011 found that one in four school children (average age 15) had reported being drunk in the past month.

Alcohol is bad for individual health, societal health and economic health. Every seven hours, someone in Ireland dies from an alcohol related illness; there are almost twice as many deaths due to alcohol as due to all other drugs combined. Alcoholic liver disease deaths almost trebled (188% increase) between 1995 and 2009 and among 15 to 34 year olds, this rate increased by a massive 275%. The economic costs of Ireland's most acute alcohol related problems costs a staggering €3.9 billion a year. The human cost, the family cost, the societal costs can be even more devastating.

Our relationship with drugs has also changed. Illicit drug use has consistently grown and expanded since the 1970s and 1980s when it was confined primarily to inner-city Dublin areas and to a lesser extent, other urban centres. In 2012, nearly 4,000 people reported an opiate as their main problem drug. Less than half of these were resident in Dublin (National Documentation Centre on Drug Use). A 2010—2011 drug and alcohol survey of the general population showed that 6.8% of people had tried cocaine at least once, with the average age for first time use at 22 for men and 21 for women. In 2012, 552 people reported cocaine as a main drug problem.

The same survey showed that 14% of the Irish

population had used sedatives and tranquillisers (e.g. Benzodiazepines) at least once, with women more likely to report taking them more than men. Use was higher among 35-64 year olds than among younger adults. Almost all (95%) of those who had used these drugs had got them on prescription. The number of people reporting benzodiazepine as their main problem drug increased from 75 in 2005 to 547 in 2012.

Cannabis continues to be the most frequently used illegal substance in Ireland with just over one in four people reporting that they had used it. Nine percent of those who said that they had used it recently were classified as cannabis dependent. Dependence was higher among men (11%) and among young adults (15-34 years) at 10%.

It is estimated that approximately one to three per cent of the population are compulsive gamblers, the majority being men. However, both women and young people are coming forward for treatment for gambling problems. A compulsive gambler is a person who is chronically and progressively unable to resist the impulse to gamble despite disruption and compromise in personal, family, social and work life. Gambling is very often a very secret activity – there are no outward signs – and can be very difficult for family and friends to acknowledge and deal with.

While there have been many progressive statutory developments and interventions since the 1970s in particular, many have been ineffective in reducing alcohol and drug related harms and costs. In the case of alcohol, for example, there have been 11 committees and 15 reports on Ireland's relationship with alcohol since 1990.

While the Public Health (Alcohol) Bill is welcome, in particular the measures pertaining to minimum unit pricing, it is regrettable that other important aspects such as the ban on alcohol sponsorship of sports, and measures to separate alcohol from other goods in our supermarkets and shops, are being pushed out to 2016 or even 2018 in some cases.

Aiséiri is dealing with the daily fall-out of such delays and with Ireland's continuing unhealthy relationship with alcohol and drugs. We will continue to respond to the changing landscape of addiction and continue to help people recover. This Strategic Plan also sets out our commitment to a comprehensive education and prevention strategy, which we hope can inform and strengthen ongoing national policies and strategies.

Addiction and the dangerous use of alcohol and drugs is no longer the stereotyped preserve of inner cities or large towns. It is an issue that is affecting families and communities throughout the country. Our residents are younger in age than before. There are more women presenting with addiction problems.

Four Centres – One Vision

Our services and structure

We bring 30 years of expertise and learning to our four unique centres.

Our single aim is to bring about recovery from addiction.

Aiséirí Cahir, Co. Tipperary

Aiséirí was originally founded by the Sisters of Mercy in Cahir, Co. Tipperary in 1983 as a high quality, residential treatment centre for adults and their families who are affected by addiction. For 30 years, we have changed innumerable lives, quietly, and unobtrusively, but with overwhelming success. A residential family programme is also provided from this location on a monthly basis.

Aiséirí Roxborough, Co. Wexford

Because of the demand for services and the record of this first centre, in 1988, Aiséirí opened a second residential centre for adults at Roxborough, Co. Wexford. Like our Cahir centre, Roxborough has offered high quality treatment to adults and families in a homely, tranquil setting for the past 25 Years.

Aiséirí Aislinn, Co. Kilkenny

In 1998 the country's first Adolescent Residential Addiction Treatment Centre was established. Located in Ballyragget, Co. Kilkenny, it provides unique, quality treatment for young people between the age of 15 and 21 years living with the destructive impact of alcohol, drugs and/or gambling. A residential family programme is also provided from this location on a monthly basis. In addition to the above, in 2012 a residential detoxification service was also established to meet the specific needs of young people in Ireland. This is also a unique service.

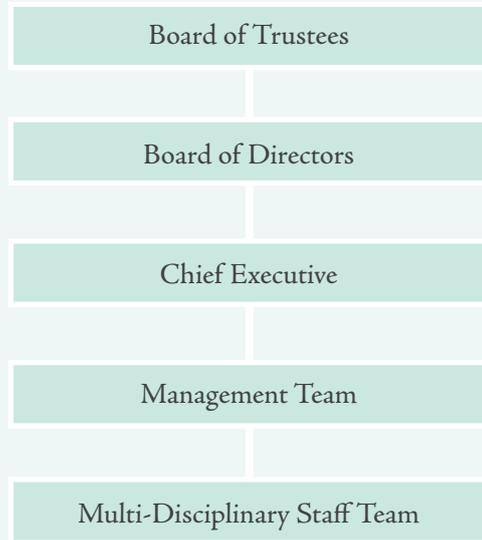
Aiséirí Céim Eile, Co. Waterford

In 2002 we founded Aiséirí Céim Eile in Waterford City to provide continuing care for clients, if required, following completion of their residential programme. While our primary treatment programme is adequate for most, our staff found that a small number of clients may need continued structured and residential support to be able to transition to full recovery.

A Lifetime of Care

All of our residential centres provide an aftercare service with a continuing care plan designed to help clients — and their families and loved ones — live free from addiction after they resume their lives in work, at home, in training or education. Our sphere of influence is not just during the first weeks of residency or treatment, but in the weeks, months and years after a person has left our premises. We believe that our most important task is to provide a lifetime of care, a lifetime of change, a lifetime of potential.

Our greatest sphere of influence is not just during the first weeks of residency or treatment, but in the weeks, months and years after a person has left our premises. We believe that our most important task is to provide a lifetime of care, a lifetime of change, a lifetime of potential.



Residential Services for Young People

Detox facility & six week residential treatment facility

Location - Ballyragget, Kilkenny

Residential Services for Adults

Two, four week residential treatment facilities

Locations - Cahir & Wexford

Family Services

Two residential family programmes

Locations - Cahir & Ballyragget.

Second Stage Residential Service for Adults

One, six month residential treatment programme.

Location - Waterford

Aftercare

Over Fifty aftercare programmes delivered in Dublin and across the south and south east of the country

The Strategic Plan

Aiséirí provides community and residential services to help young people, adults and families overcome addiction and lead meaningful lives in recovery.

Two Strategic Goals

The book that is central to the Aiséirí journey to recovery using the 12-step programme is called Keep it Simple. In this same vein, we wanted to keep our first strategic plan simple, focused and action-led.

We have two over-arching strategic goals. The first underpins our service goals to **provide a framework for the development of a continuum of care** that meets the needs of all clients and is responsive to a changing landscape.

The second addresses the **organisational structure and culture** that will support best practice standards and progression in our service.

Under each of these goals we have set out clearly defined, achievable and measurable objectives.

Strategic Goal One

To provide best practice services

13

To provide services that meet best practice standards in terms of quality and effectiveness, and to develop new services to meet identified needs utilising partnerships with other statutory and voluntary agencies where possible and practical.

Service Objectives

Seven specific key service objectives have been approved which support the overarching service objective. These are as follows:

1. Put in place a system which consistently **encourages and involves** clients, their families and partners.
2. Develop a comprehensive **outreach and pre-entry programme** for potential clients as well as providing day-programme or outpatient programmes to complement residential rehabilitation provision.
3. Develop our existing residential **detox services** for young people as well as securing referral pathways and service level agreements with other providers in order to facilitate adult detoxifications both in residential and community settings.
4. Continue to integrate **evidence-based practices** - where compatible and complementary, within our existing primary drug, alcohol and gambling, residential and community services.
5. Locate permanent facilities and services, either through partnership or directly for our **extended care or step-down facilities** and develop at least two extended care facilities or services for young people and for women.
6. Enhance and expand our organisation's **aftercare and family services** to include comprehensive relapse prevention programmes and support strategies.
7. Develop an **education and prevention strategy** for schools and the courts providers in order to facilitate adult detoxifications both in residential and community settings.

Strategic Goal Two

Ensuring organisational excellence

To support the Service Goals through an organisation that is well-funded and staffed, which follows the principles of good governance and management, which communicates openly with its stakeholders and which provides a dignified environment to clients and employees alike.

Organisational Objectives

Seven specific organisational objectives have been identified which support the overarching organisational objective. These are as follows:

1. Put in place an **annual staff consultation** process, together with development and training plans, to complement the service objectives of the organisation.
2. Improve quality by expanding on existing CHKS accreditation by establishing **robust clinical governance structures and practices** which comply with the HSE's developing clinical governance structures and intentions.
3. Establish an **audit, research and evaluation programme** for the organisation to support and refine the organisational goals. Commence a longitudinal follow-up study of process and outcomes during the course of this Strategic Plan.
4. Continue to implement **best practice in governance, management and accountability**, by complying fully with the 2012 community and voluntary governance code.
5. Implement a **public relations and communications strategy**; internally and externally to raise the profile of our newly-merged organisation and campaign nationally and locally on addiction related issues.
6. Develop and enhance our **fundraising strategy** by establishing a 'Friends of Aiséirí' support structure.
7. Develop support networks to include the establishment of an **Alumni Society**.

Appendix I

Trustees

Brian Carroll
Sr. Eileen Fahey
Cyril Darcy
John Magnier
Sr. Veronica Mangan
Bríd Bates
John Mc Dermott

Directors

Tony Walsh
Anne Mc Mahon
Dr. Ronan Fawcett
Mossy Casey
John O Donoghue
Frank Hutchinson
Jerome Casey
Dr. Mark Doyle
Jacinta Culliton
Pat Mc Loughlin
Sr. Colette Cullinan
Peter Kieran
Mary White

Appendix II

Range of Services

Aiséirí provides a range of services to people with addictions, their families or anyone affected by addiction.

1. Referral

Making the first contact for help with addiction can be the most difficult step to take. Making a referral to Aiséirí for an assessment is simple, quick and completely confidential. A referral may be made by any concerned person — the individual, family members, friends, doctors, counselling services, employers, employee assistance services, social workers, or legal professionals. A referral application form is available on our web site or from any of the units within the organisation.

2. Assessment

Our admissions counsellors in our four centres are highly skilled to provide a client, and his or her family, with all the support and information needed to develop a unique assessment of personal need. We offer one-to-one counselling, an outpatient programme and a residential programme. If Aiséirí treatment is not considered suitable for any reason, every effort will be made to refer the person to the most appropriate services for his or her needs.

3. Primary Rehabilitative Treatment

Research has consistently shown that longer stays in treatment produce the best outcomes for addiction. Our residential services are the bedrock of our treatment philosophy. Our goal is to ensure that as many clients as possible can access our specialist services quickly. Our residential programmes range from four weeks for adults to six weeks for younger clients. The philosophy of Alcoholics Anonymous is central to the programme and all participants

Appendices

are encouraged to use the 12-step programme in their recovery. Our treatment is based on the recognition that alcohol, drug addiction and compulsive gambling are diseases. Total abstinence is the best way to manage the condition. We approach addiction in a holistic way, working with mind, body and spirit as components of a healthy life. Individual treatment programmes may include group therapy sessions, one-to-one counselling, psycho-educational lectures, community meetings, meditation, yoga, peer support and interaction.

4. Aftercare and Progression

A comprehensive aftercare and progression plan is created with the resident before he or she leaves the centre. We recognise that all of our clients have their own particular needs and so the plan is personalised to suit each person's unique situation and challenges.

We provide an ongoing integration and aftercare service by offering the following stepped services:

- Living in Recovery Group – once weekly meetings for those just out of treatment.
- Continuum Care – monthly meetings to check in on how life is progressing.

We hold aftercare programmes in all four centres on a weekly basis. Facilitated by trained co-ordinators, these sessions mean that support is always available for clients and family.

5. Out-patient Treatment

Our addiction treatment services are delivered in different forms depending upon the needs of the person. For some, the residential course is neither required nor possible. For people who can manage with less intensive support, we offer an out-patient service which is abstinence based. We also work with people who are moving towards total abstinence. Our structured

programme means that people can stay at home, remain at work and have the everyday support of family and friends, while recovering in their own environment. Our out-patient service includes information on addiction, introduction to the 12-step programme, group therapy, one-to-one counselling, practical workshops and a weekly programme for family members.

This service is currently under review and will re-open in 2015.

6. Family Support Programme

Aiséirí centre-stages family and concerned persons in all of its programmes. We recognise the importance of helping families and loved ones understand the disease of addiction and how it affects important relationships.

Each Wednesday is a family day at our centres. This special day is an integral part of our programme to assist families while a person is in treatment. Everyone who is close to an addicted person is affected in a unique way; so too each person can play a key and different role in promoting recovery.

We also run a five-day residential programme for family members or any person whose life is affected by the impact of addiction. This programme, which is located in our family lodge on the grounds of Aiséirí Tipperary (Cahir), and in Croi Nua on the grounds of Aiseiri Ballyragget is available year-round and has been described by family participants as “the most powerful, supportive, liberating week of my life.” Up to eight people can be accommodated in either premise.

Appendix III

Methodology

The development of this plan was led by the Chief Executive, with the support of an Organisational Consultant. It involved consultative workshops, one to one interviews and online surveys with a broad and representative range of stakeholders, both internal and external, including the following

- Staff
- Board and trustees
- Current clients of residential and aftercare programmes
- Ex-clients of residential programmes
- Current and ex-clients, family members
- External community and voluntary organisations
- Funding and policy-making agencies
- Sector experts

The following steps were taken:

- Appointment of a Strategic Planning Committee
- Review of current plans, as well as Regional and National Government strategies
- Eight strategic planning days in total with all staff, board members and trustees
- Staff survey
- Client and family survey
- Stakeholder direct consultations
- Stakeholder survey
- Focus groups with clients and family members
- Consultations directly with: key funders, The HSE, The Department of Health, The Probation Service, Local and Regional Drugs Task forces etc.

Draft Reports

Draft reports were presented, through the Strategic Planning Committee to the board of Aiséiri for approval before publication.

Consultation with Minister

A number of meetings were held with Alex White, Minister of State at the Department of Health with responsibility for Primary Care and the National Drugs Strategy. The Minister and his officials visited our projects twice during the course of this consultation.

Consultant to the process

Yvonne Nolan,
Organisational Consultant & Group Analyst,
Group Analytical Practice.



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