



DYFODOL

DE CYMRU

ANNUAL & QUARTER 4 REPORT

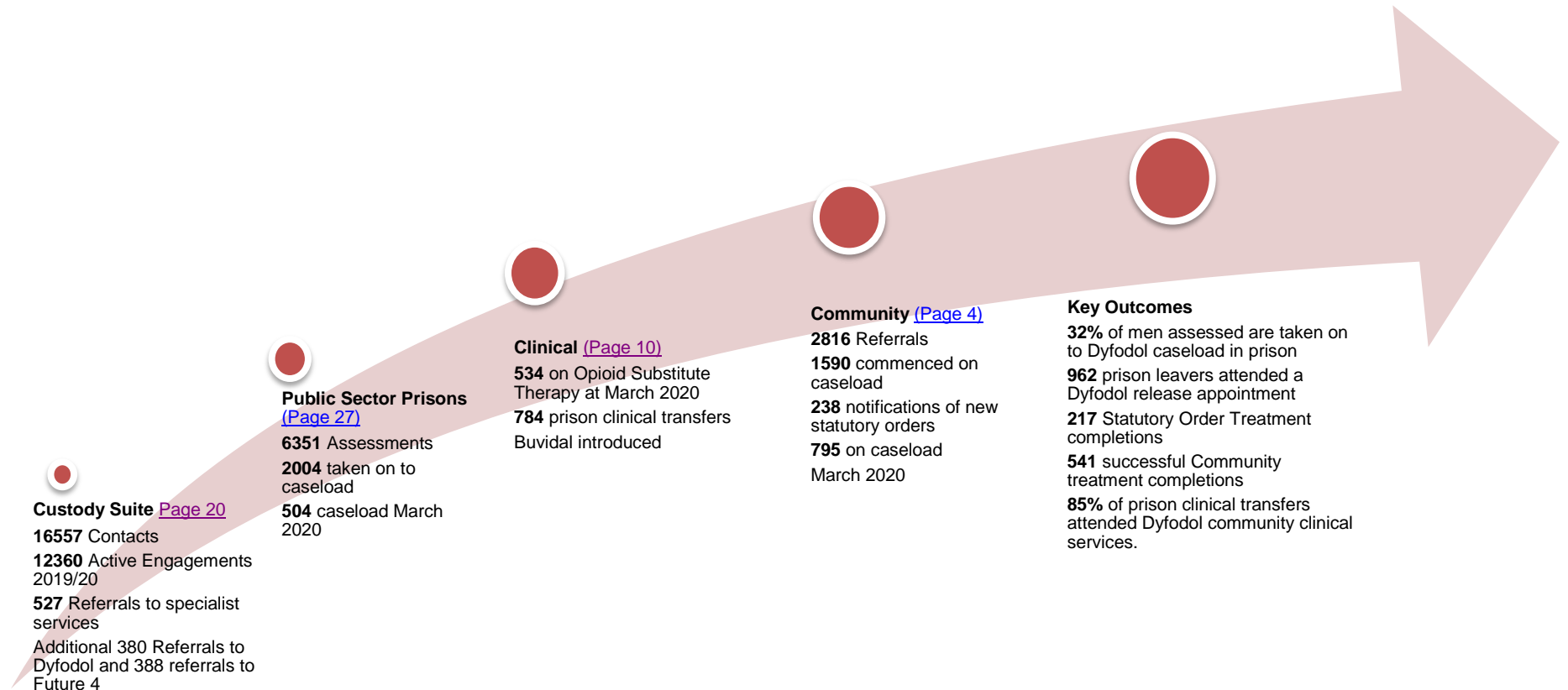
2019 - 2020



Contents

Dyfodol Activity Highlights	1
Foreword	2
SECTION 1: COMMUNITY	4
Caseload.....	4
Statutory Community Caseload.....	7
Clinical Caseload	10
Harm Reduction Interventions.....	12
Outcomes.....	13
SSOM - the Support Service Outcome Measurement Tool (positive outcomes).....	17
SECTION 2: DYFODOL POLICE CUSTODY SUITE ACTIVITY	19
Drug Markets and County Lines.....	25
SECTION 3: PUBLIC SECTOR PRISONS (PSPs).....	26
Intake and induction:	26
Caseloads	27
Release Planning	28
SECTION 4: POST RELEASE ENGAGEMENT IN COMMUNITY SERVICES	29
SECTION 5: DYFODOL SERVICE DEVELOPMENT, INNOVATION AND ADDED VALUE	33
Alcohol Treatment.....	34
Working with complexity.....	34
Group Interventions and activity	35
Working in Partnership with the Dog's Trust and Therapy Dogs UK.....	36

Dyfodol Activity Highlights



Foreword

This report covers the fourth year of the Dyfodol contract. Performance and delivery in 2019/20 has been consistently high, with all management data and available information systems indicating the delivery of a robust, cohesive and learning based approach in all areas of service delivery.

This year has seen a continued focus in communities on supporting the interagency work to deal with County Lines trends, self-poisoning, psychoactive substances, homelessness and domestic violence through ongoing partnership work with the statutory authorities, councils and third sector partners. Additional services have been provided which have been incorporated and aligned to Dyfodol practice so that resources can be maximised and wider based local strategic agendas can be supported (Homelessness work in Cardiff and Western Bay sex worker and community support). These developments perhaps reflect the maturity of the Dyfodol contract and its embedded position within each BCU/Health and Probation area.

In frontline practice the Service has embedded its focus on the positive psychology approach to practice, continuing to enhance staff skills through the psychology led Complex Case Clinics and the commitment to the use of the outcome measurement tool exploring soft outcomes and direction of travel. This is reflected in the ongoing focus on innovation and a commitment to the collaborative cross contract structures that have enabled this such as the Development and Innovation Group. (DIG). The development of the work involving Dog's Trust and Therapy dogs emerged via the Wellbeing workers placed within HMPPS and their role at DIG.

The activity of Dyfodol staff in police custody suites reflects a responsive service based around close working with police and the identification of vulnerable groups and, where possible, diversion away from the criminal justice system to support in the wider community. This work has been further consolidated by the integration of the Future 4 contract aimed at young adults and women – where again, opportunities and benefits are maximised by the work of both contracts in aligning well - so as to minimise duplication and make the most of joint working practices at this very front end of the Criminal Justice System.

The prison based services have embraced new working practices and got to grips with the challenges of delivering group work within local prisons. Also, with increasingly strong joint work with prison Healthcare, more recent developments have meant significant progress in the Through the Gate work. All external clinical providers across West Wales, Gwent and South Wales are involved in a growing momentum for

collaborative practice so that geographical variations in approach and provision are minimised.

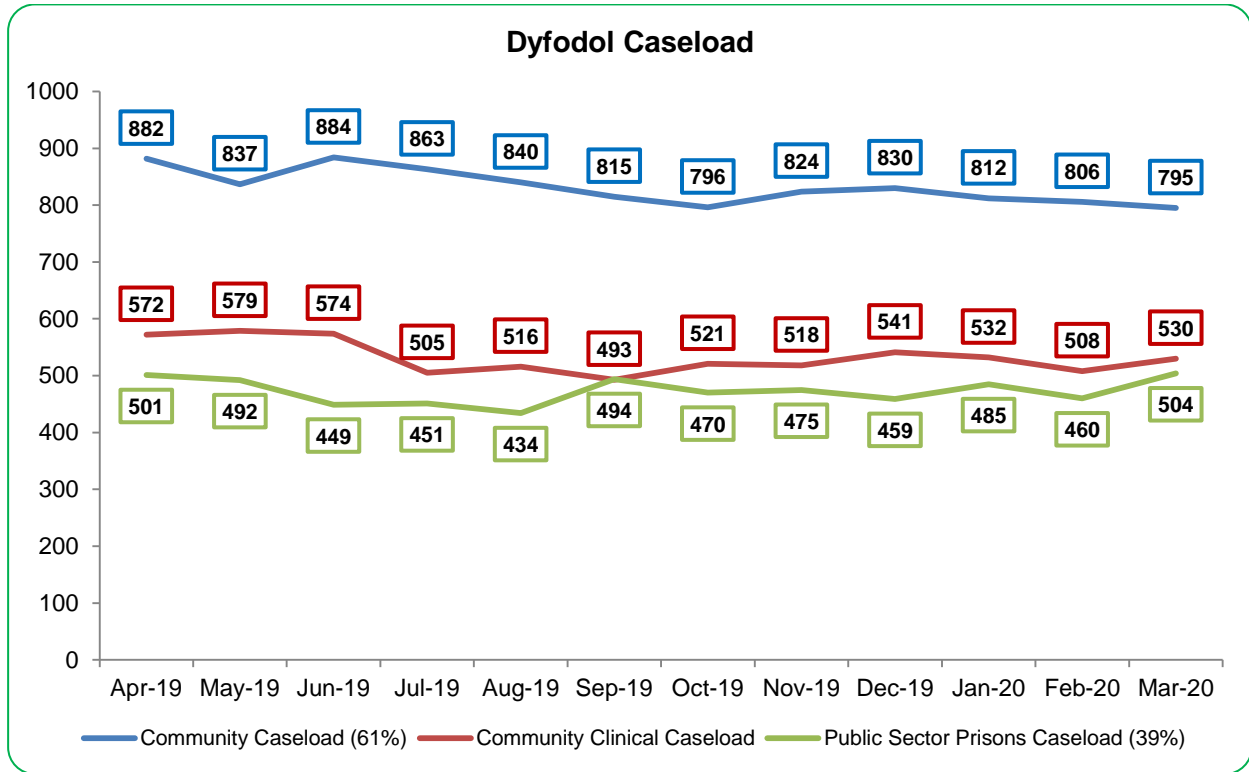
There is to be a continued focus on the integration of criminal justice system services more fully into wider community treatment and support and peer led recovery systems. Key to this will be the positioning of Dyfodol within the reconfigurations across the three South Wales Health Board, BCU and Probation geographical areas. Dyfodol senior management are reviewing operational structures to ensure alignment with these recent organisational reconfigurations. In this way we believe that both service users and communities will benefit from an increasingly joined up strategic environment.

There have been significant challenges this year in terms of some of the wider Dyfodol infrastructure matters and the benefit of a collaborative and supportive problem solving approach via the new Commissioning and Contract Management Team has been felt. The work undertaken to establish a more sustainable buildings / premises strategy has been shared and there is a renewed commitment to establishing a satisfactory and resilient position. Similarly with the unprecedented rise in the cost of some Opioid Substitute Treatment medication there has been a more active and supportive approach by the Contract Manager in identifying the wider system responsibilities for Dyfodol service users when they need to move on to relevant local health service provision.

There is clearly emerging an overall theme of increased collaboration and strategic alignment and whilst some aspects of that are more advanced than others in terms of realising benefits, we are together definitely moving in the right direction and we look forward to continuing to learn, to be open to new approaches and to enable Dyfodol service users and communities to benefit from this.

SECTION 1: COMMUNITY

Caseload

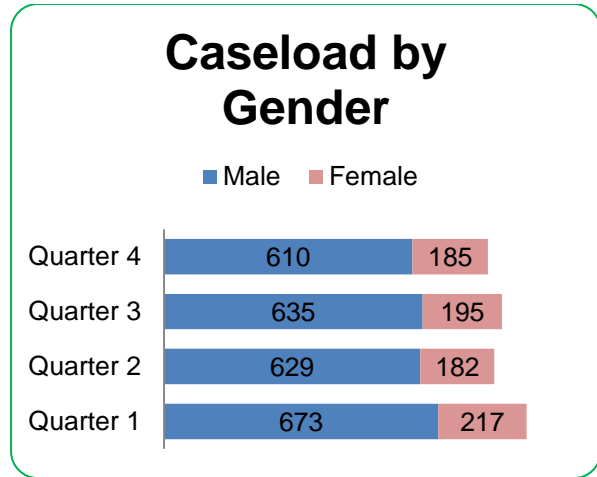
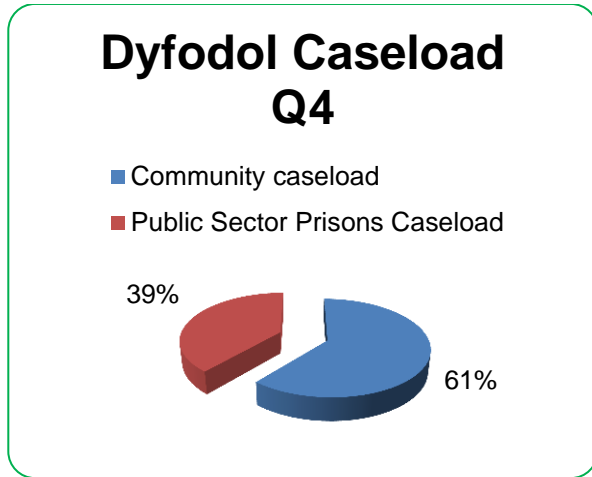


*Please note that the data is from Dyfodol / G4S recording processes. It is not PalBase reliant.

The caseload numbers across the year have been fairly stable although we end the year with less on caseload than at the start. This is partly due to a concerted effort to improve opportunities for stable, non-offending service users to move into community health or third sector services. Taking these individuals away from the criminal justice cohort and enabling them to access provision as a member of the public reduces opportunities for negative influences and is an empowering, dignifying process. It also frees up resources enabling us to continue to welcome people into service without delay and to cope with the significant price increase in medication that have taken place in recent months. Overall this effort ensures that those who need longer term support are able to continue receiving a service and to progress as a citizen, while we maximise the numbers of people that can access treatment via Dyfodol services.

The Public sector prison caseload remains high and stretches the Dyfodol resource within prisons. It is also helpful to note that there are over 490 men on HMP Parc's Dyfodol caseload. These men are accessing services as part of the HMP Parc contract, but our collaborative approach means that they are working in adherence to the Dyfodol

model. This brings strong coherence to the prison journey in Wales from the service user’s perspective and strong continuity through the gate from all prisons at any stage of their justice journey; this adds significant value to this contract.

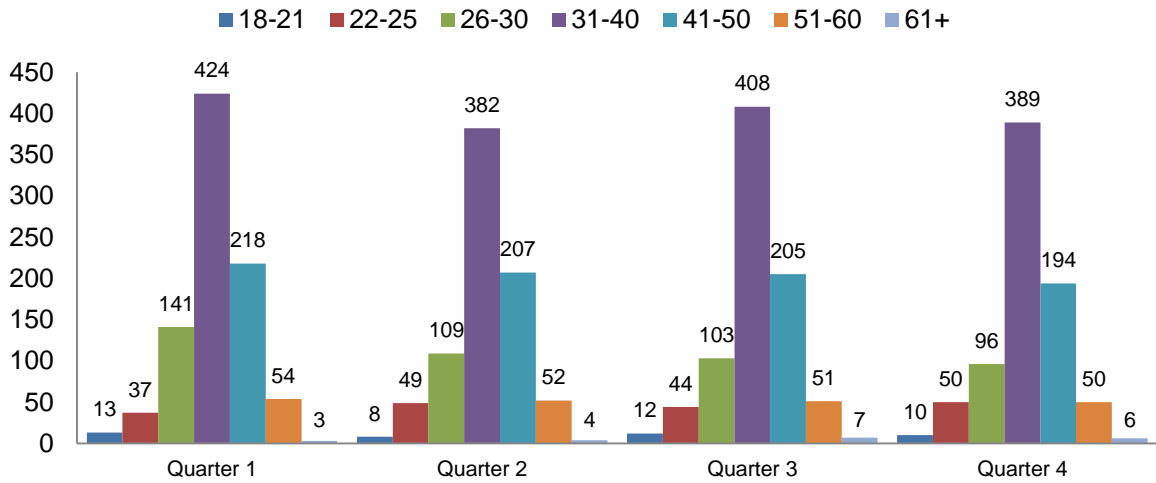


The percentage of female service users has risen by two to three percent over the year - always a welcome trend and we note that Swansea in particular has been effective in attracting women into service and retaining them via specific targeted activities.

We recognise that there are clear disincentives that deter women from seeking treatment, such as fears about potential repercussions for their children. Intimate partner violence is a further factor, because of concerns about aggravating an existing dysfunctional or violent relationship if they are found to be seeking support. So, to provide an environment in which women are enabled to participate in the service we offer:

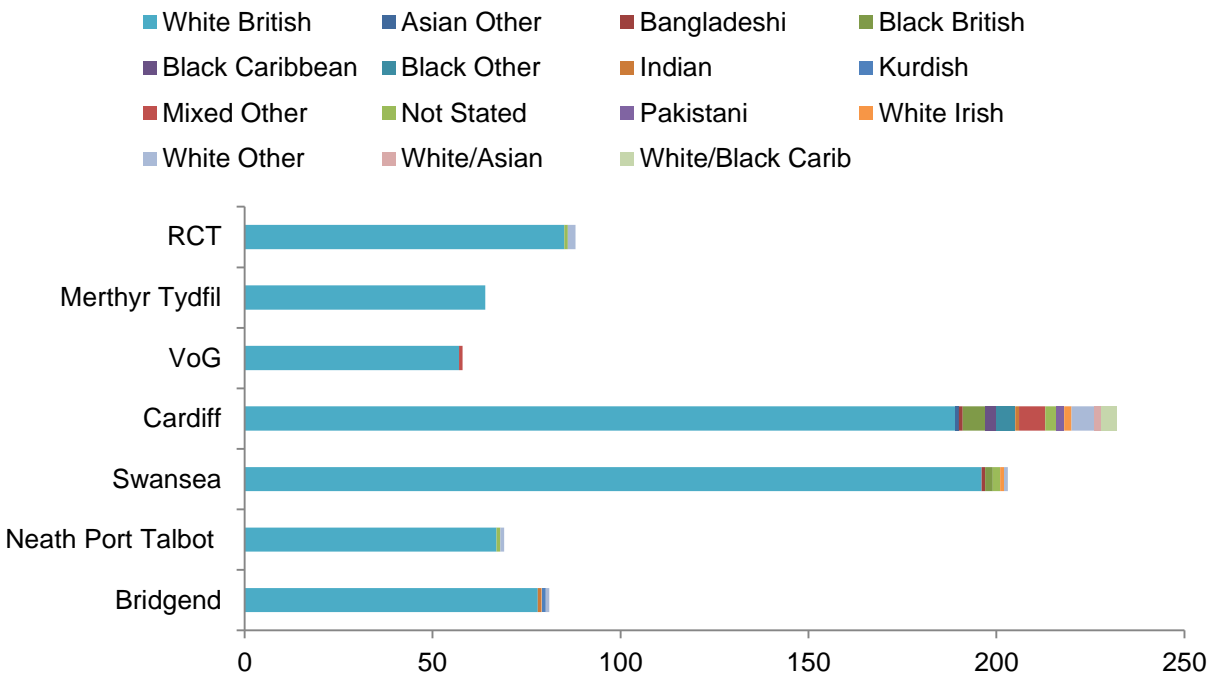
- Activities that appeal to women;
- Group work to encourage peer support and the development of positive relationships;
- One to one structured support and onward referral;
- A safe environment with access to our staff – formally and informally;
- Sexual health and BBV advice and services.

Caseload by Age



The age profile of the service is increasingly ageing with the highest proportion of service users aged 31-50. There is now a small cohort aged 61-70.

Caseload Ethnicity (end of 2019/20)



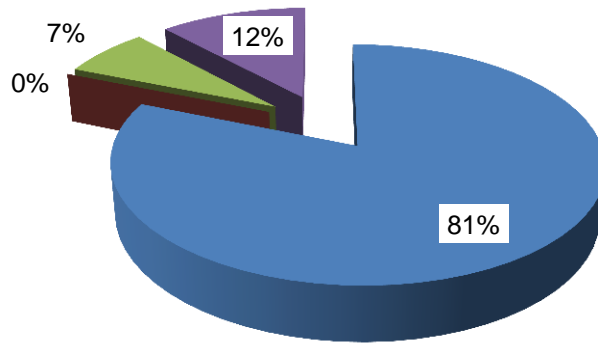
- 93% of the Dyfodol community caseload identify as White British.

Statutory Community Caseload

Integrated Offender Management cases make up 19% of the Dyfodol community caseload (reflected in both voluntary engagement or through community statutory orders). There are also small but significant Dyfodol cases from the WISDOM cohort focussing on managing very high risk offenders in the community.

Statutory caseload as a percentage of total caseload

■ Voluntary (including prison leavers) ■ AAR/RAR (alcohol)* ■ ATR* ■ DRR*



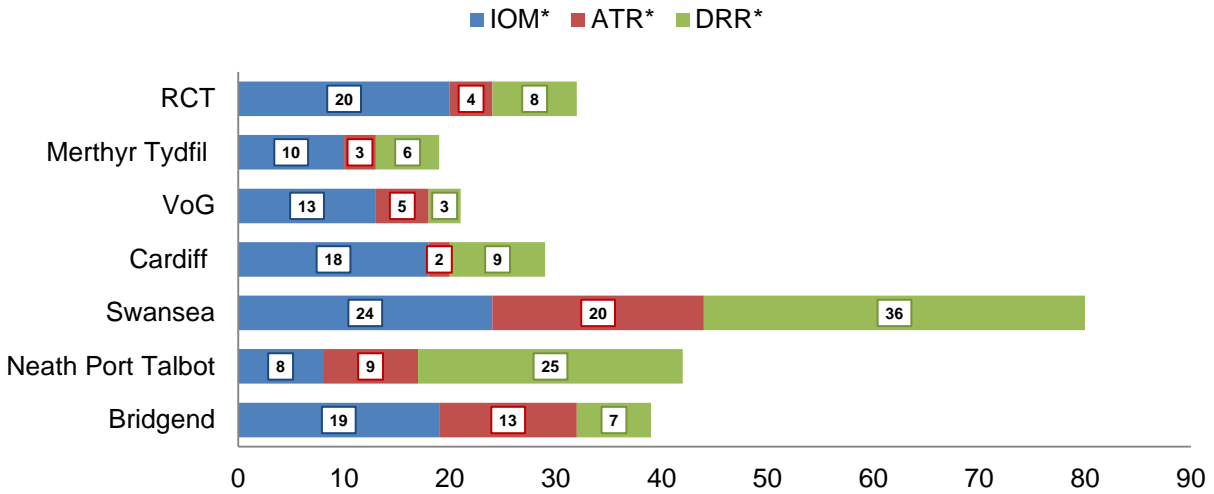
*AAR/RAR – Alcohol Activity Requirement / Rehabilitation Activity Requirement

*ATR – Alcohol Treatment Requirement

*DRR – Drug Rehabilitation Requirement

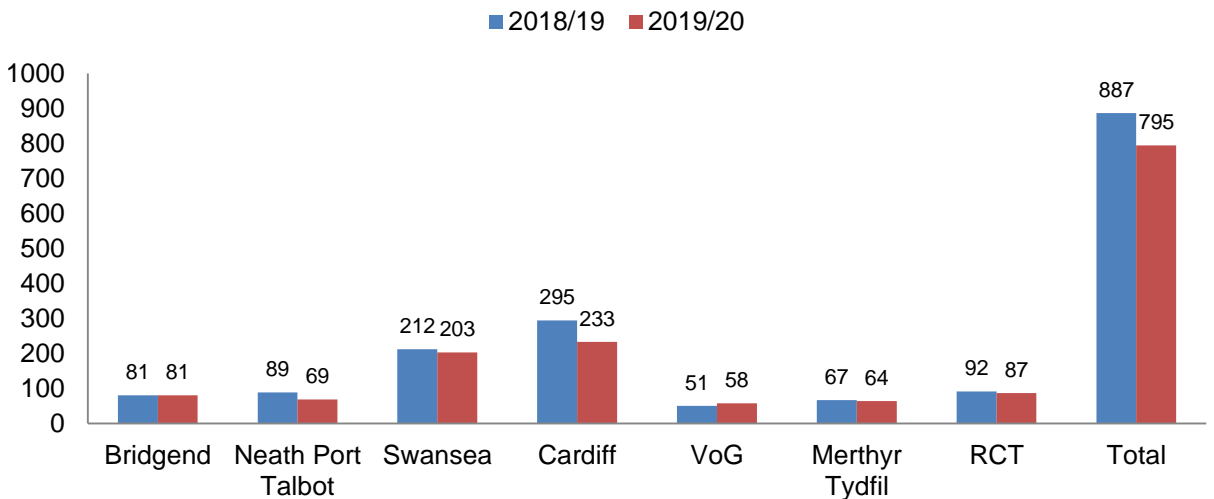
*IOM – Integrated Offender Management

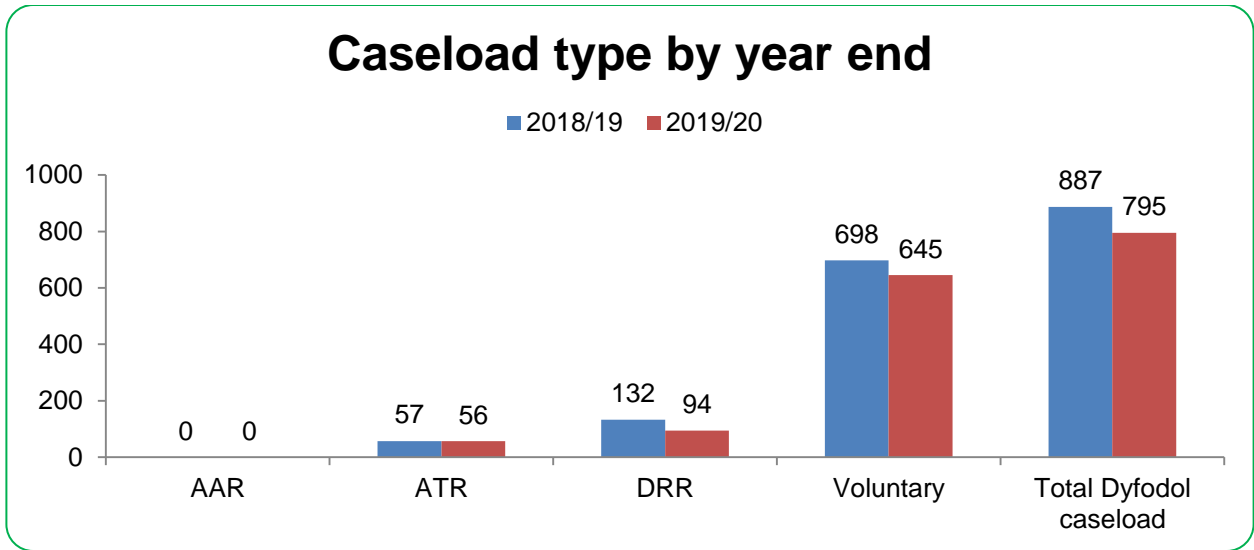
Statutory Caseload Q4



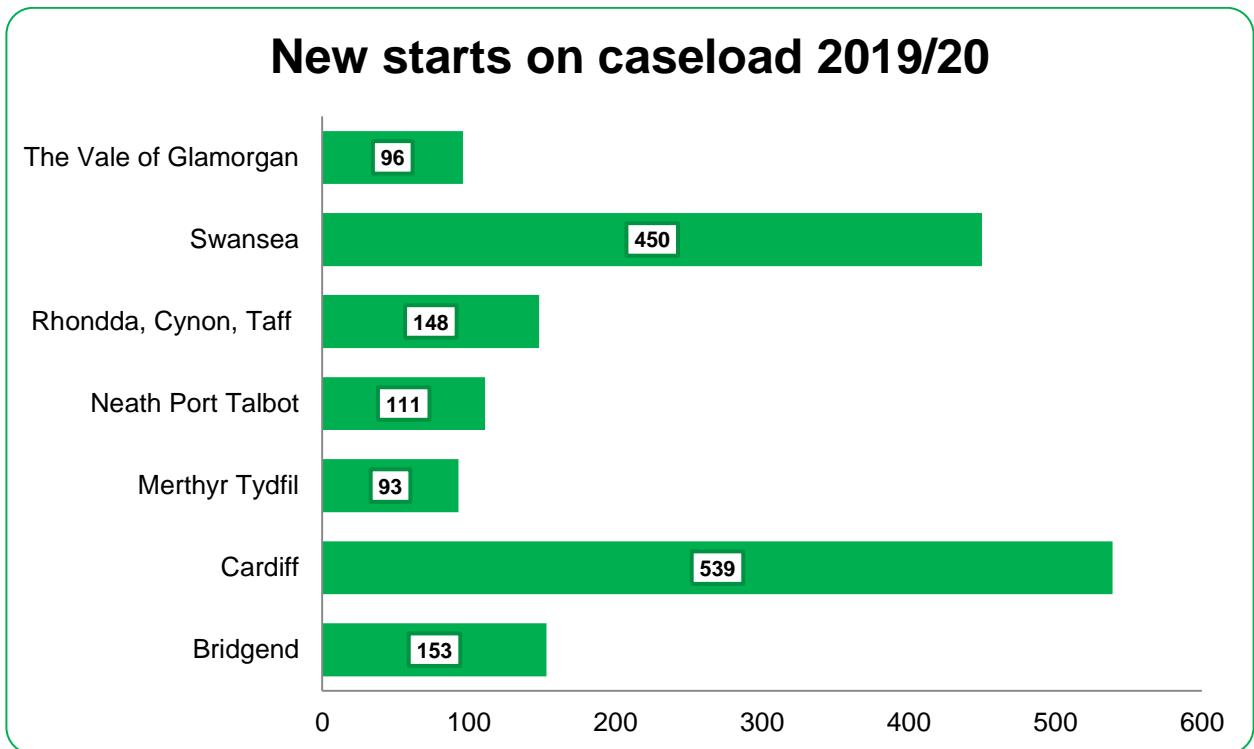
- The more substantial volumes of Drug Rehabilitation Requirements (DRRs) at Swansea and Neath Port Talbot bases are likely to reflect the Drug Court structure that has become an embedded feature of CJS in Swansea (services that whole area).
- This is also likely to be attributable to the particularly close working relationship between the Swansea Dyfodol team and Probation and Police colleagues. In our Neath base Probation and Police staff are co-located with the Dyfodol team, creating a service that is strongly integrated.

Caseload by year end APB area





Commencements on Dyfodol 2019/2020



*Please note that the data is from Dyfodol internal recording processes. It is not PalBase reliant.

- In 2019/20, there have been 1590 community referrals assessed and taken onto the Dyfodol community caseload across South Wales.

Clinical Caseload

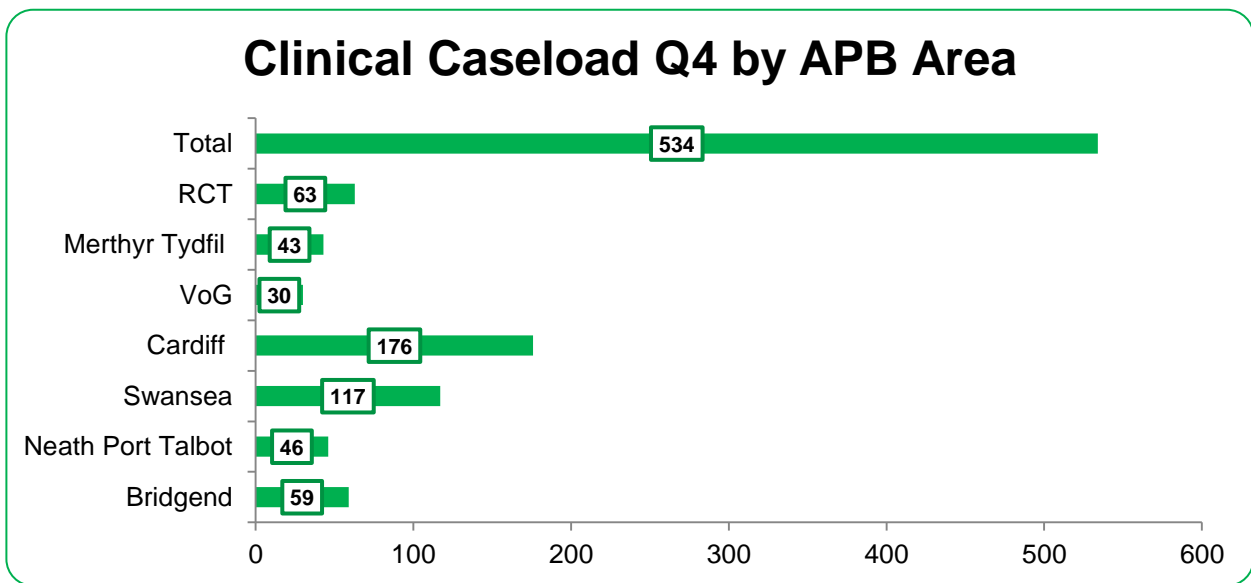
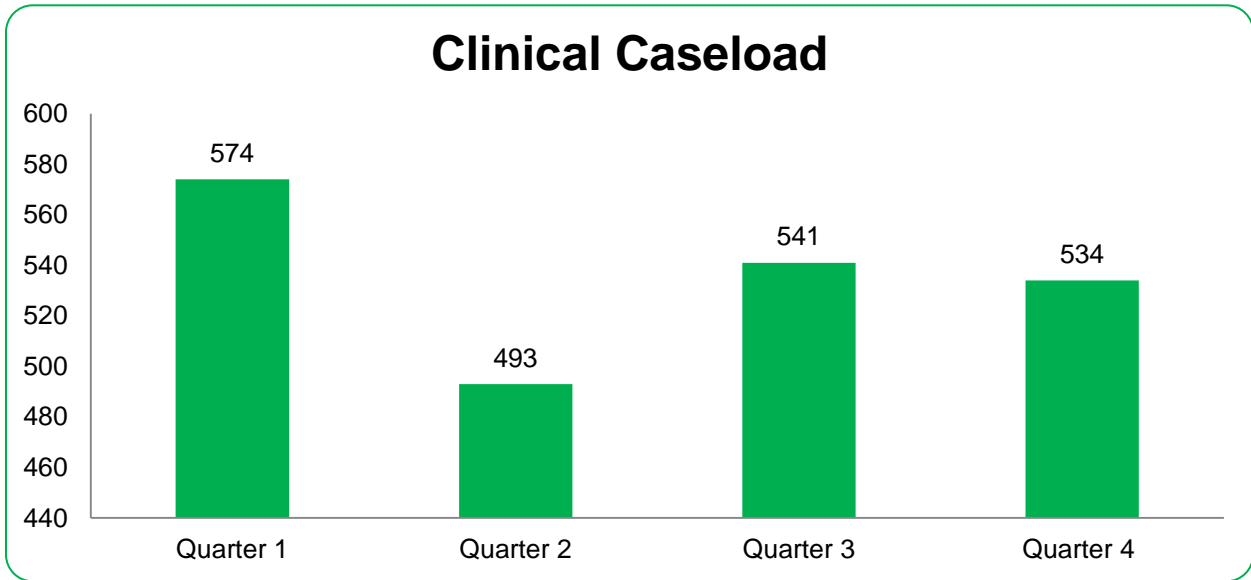
For those who have a pattern of frequent and significant Opiate use (this is the family of drugs to which heroin belongs), **clinical treatment** is available. Clinical treatment is the provision of a daily dose of medication to replicate or to block the effects of this substance. This helps individuals to cope with issues relating to physical dependence in the following ways:

- It removes the health risks of using substances of unreliable purity and potency.
- It provides a safe substance in a dose that is controlled in volume and frequency and overseen by a professional clinician.
- It also removes the user's need to raise funds illegally to buy expensive substances from criminal dealers.

Clinical treatment is used across the world to help reduce the harms caused by substance use, harms to the individual and to the community, harms in terms of medical impact and behavioural issues including crime. We have clinical teams located at each of our community bases to provide this treatment.

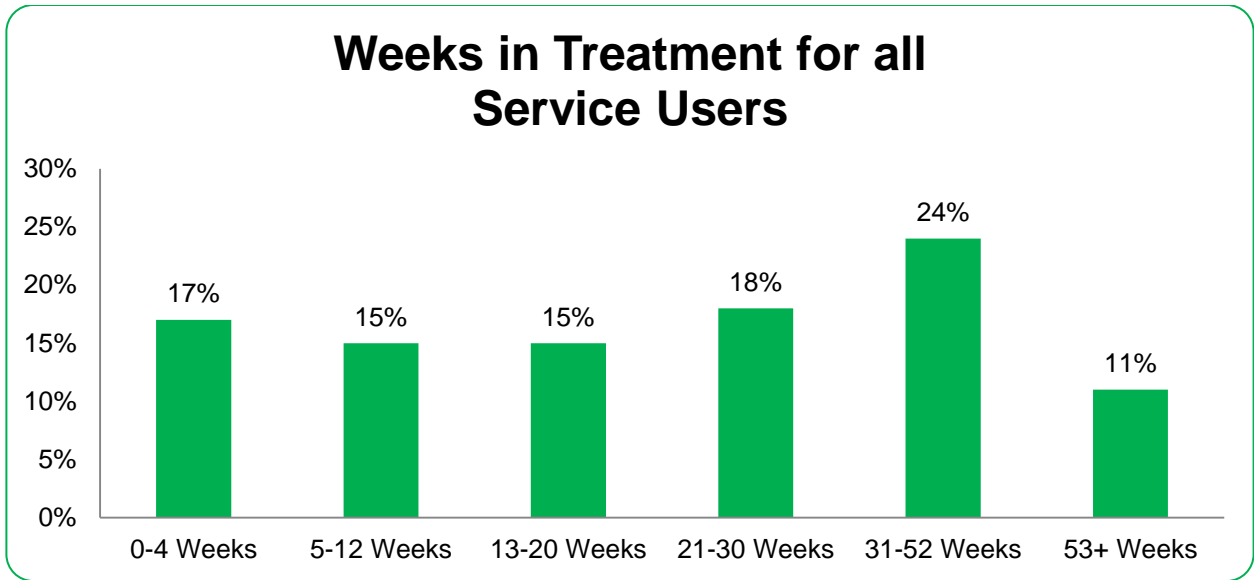
It is important to note that clinical treatment is a foundational element of our services, it provides safety and stability for daily opiate users, but it cannot bring about change in itself. Change is brought about by clinical and **psychosocial work** together. That work is overseen and undertaken by our caseworkers across the bases and across the justice settings. Psychosocial work involves supporting people to develop a future that is not centred on use of damaging substances. Workers support rehabilitation and lifestyle change by carrying out collaborative assessments of substance misuse and associated lifestyle factors. They help to support and facilitate the development of stability, work towards positive change and to build resilience by methods including the following:

- Providing information and advice including harm reduction.
- Undertaking a collaborative treatment and recovery plan.
- Helping develop positive activities, interests, pastimes, habits and routines.
- Identifying risks, challenges but also strengths and protective factors.
- Using motivational interventions on a one to one and group basis.
- Using tools and materials that are evidence based.
- Helping with practical and social needs (e.g. providing support, or referring to support, for accessing welfare benefits).
- Helping develop ways of stopping lapses and strategies for preventing relapse.



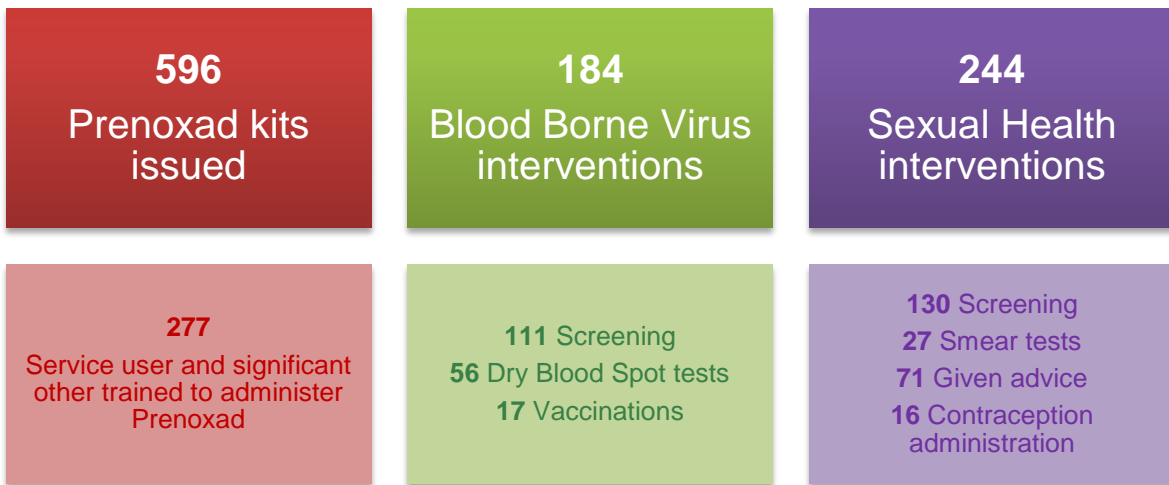
- At the end of Q4, there were 534 community based service users on a substitute medication prescription in the Dyfodol community service.

We have been working in recent months to try to improve the flow out of Dyfodol and into community services as historically this has been a challenging issue for a range of reasons which slightly differ across Area Planning Board areas. As a result there has been some impact on reducing the numbers still with us at 53 weeks plus. The focussed activity of the Commissioner’s Dyfodol contract manager has been welcomed and has started to highlight and widen awareness of the role and challenges for the service in establishing access to community based services and resources.



Harm Reduction Interventions

Dyfodol staff seek to maximise opportunity to increase awareness amongst service users of ways to reduce and minimise the harm they can potentially cause to themselves and others. So this is reflected in the efforts made by staff to increase people’s access to health based interventions that they may not normally seek out but which are often critical given the particular risks and vulnerabilities that our service users are exposed to. Some figures to reflect the work done are represented below.



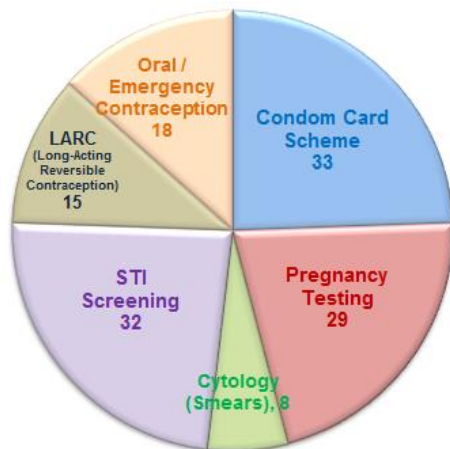
Outcomes

A local example: Cwm Taff

Since April 2019, Dyfodol has worked in partnership with Cwm Taf Morgannwg Health Board to link their nurse led programme with the service user group. This aims to:

- Promote good sexual health, to discourage risky behaviour and reduce future infection rates;
- Improve intimate health awareness, to identify and treat existing and future conditions;
- Promote and provide contraception, to reduce levels of unintended and unwanted pregnancy;
- Improve the uptake of cervical screening among our service users.

Dyfodol case workers promote and coach substance-specific harm reduction methods to improve safety and reduce risks that emanate from substance use.



An NHS specialist nurse offers Sexual Health and Wellbeing services in a familiar environment, enabling service users to make informed decisions with guidance and support, breaking down barriers to vital treatment. The nurse specialist is able to advocate on behalf of service users, liaising with hospitals and other healthcare professionals, making follow up appointments and improving engagement. From April to

December 2019, 135 individuals engage, benefitting from the range of services in the graph. Cwm Taf bases have now become a single point of access for local partnership agencies such as Barod, Adref, Gwalia and Probation.

Service user testimony:

"I hadn't had a smear for 12 years. I was glad of the opportunity to attend Dyfodol and have my smear on site with the nurse"

Tania, 41



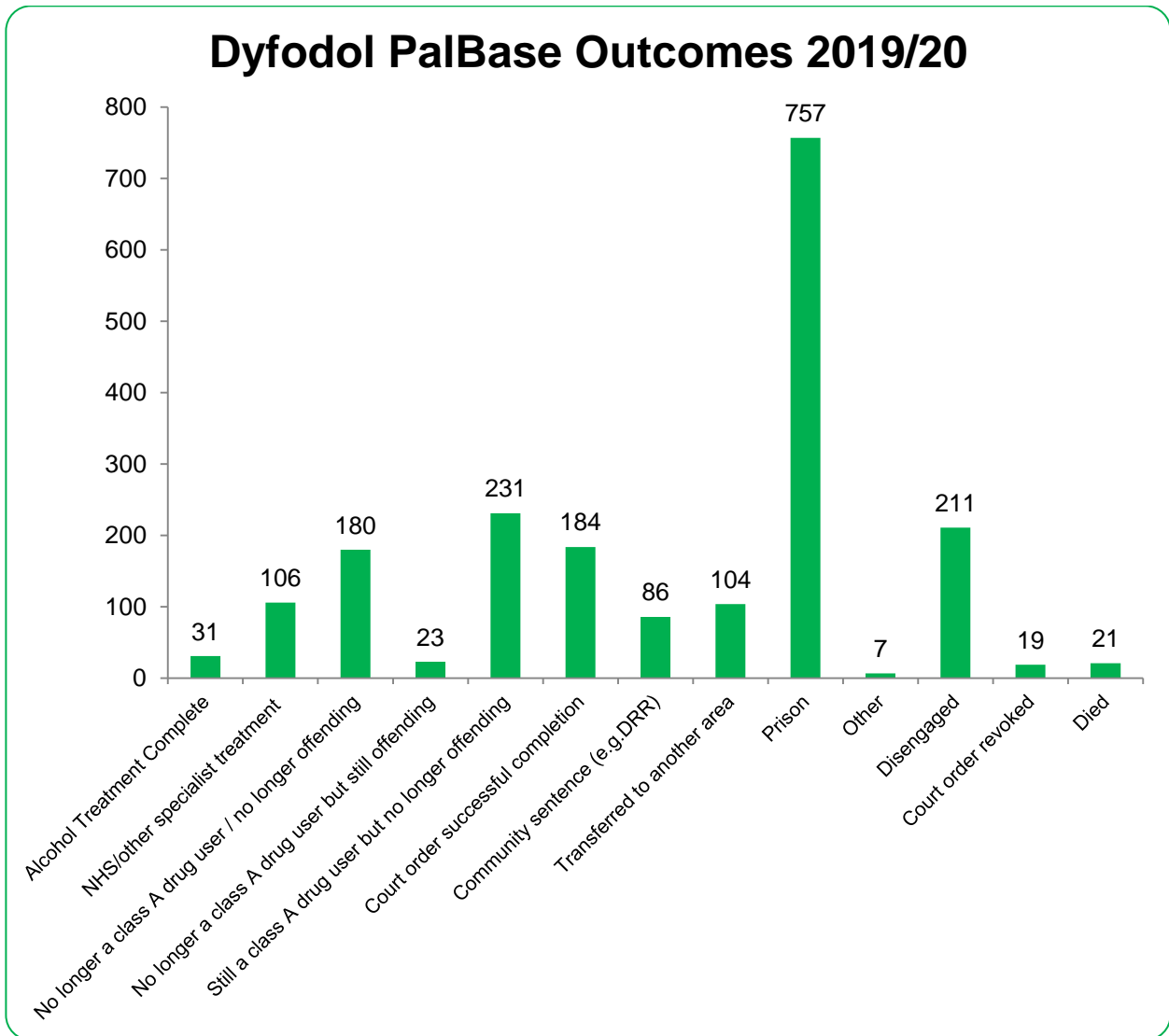
“Sexual health is more than freedom from sexual disease or disorder; sexual health is non-exploitative and respectful of self and others. Sexual health is dependent upon individuals’ sense of self-esteem; sexual health requires trust, honesty and communication.”

Eli Coleman PhD; Director; Programme in Human Sexuality.

A local example: Neath

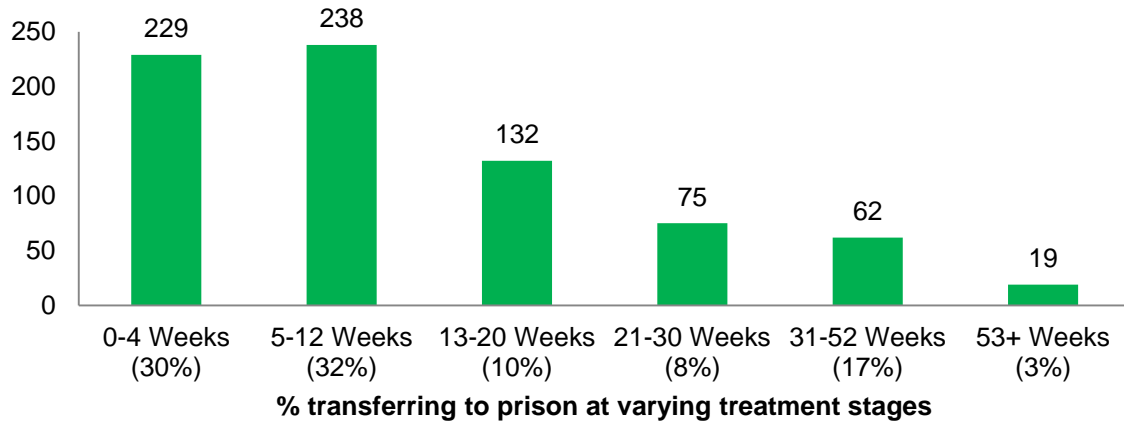
- The Neath Dyfodol team has proactively promoted the benefits of Dry Blood Spot (DBS) testing to service users and there is a robust system in place to encourage and enable participation. An automatic ‘opt in’ approach has meant testing is seen as a norm rather than having a stigma attached to it.
- A SPOC ensures recording and compliance within NHS guidelines.
- An NHS nurse runs a clinic from the base. This reflects the barriers that have been broken down.
- The nurse provides testing, treatment and support onsite rather than people getting lost to the system via referrals to out of area hospitals and clinics.

Outcomes



39% of all service users leave Dyfodol community services by transferring to prison. However, the graph below shows that of those who do transfer to prison, 62% do so within the first 12 weeks of treatment (e.g. for reoffending or breach of licence). Therefore those who engage for over 13 weeks are then less likely to leave Dyfodol services because of going to prison.

All Service Users Transferring to Prisons

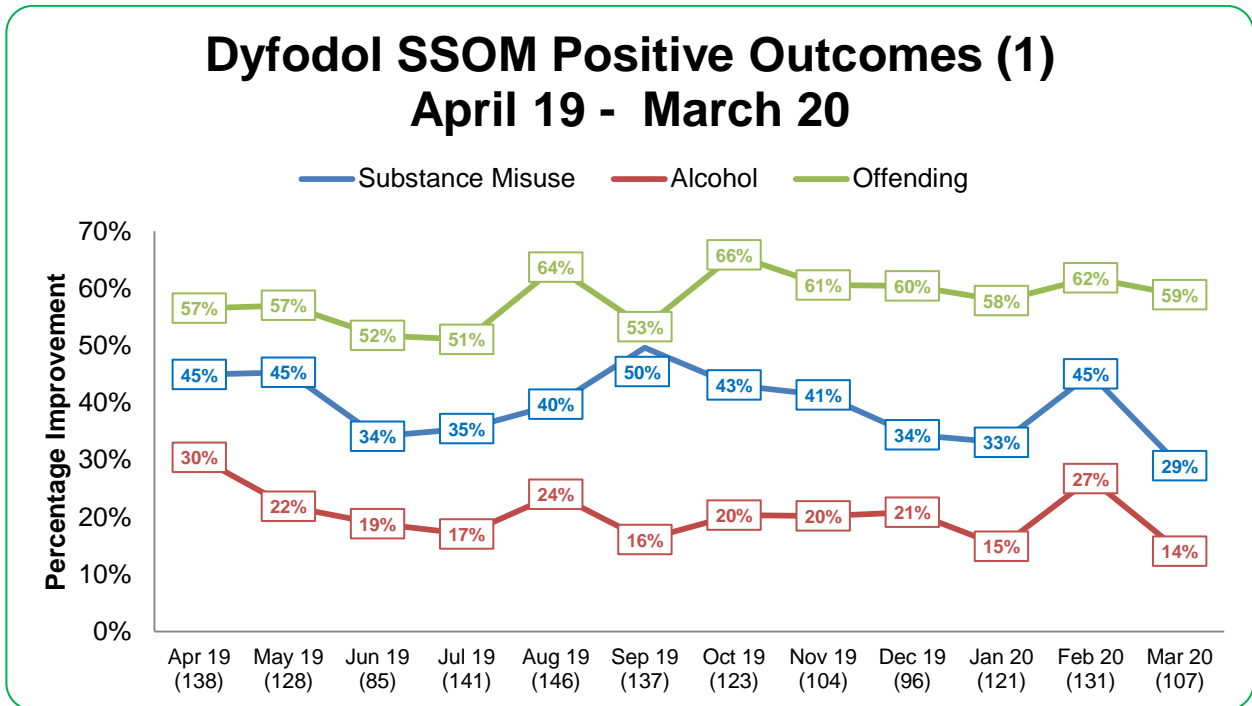


SSOM - the Support Service Outcome Measurement Tool (positive outcomes)

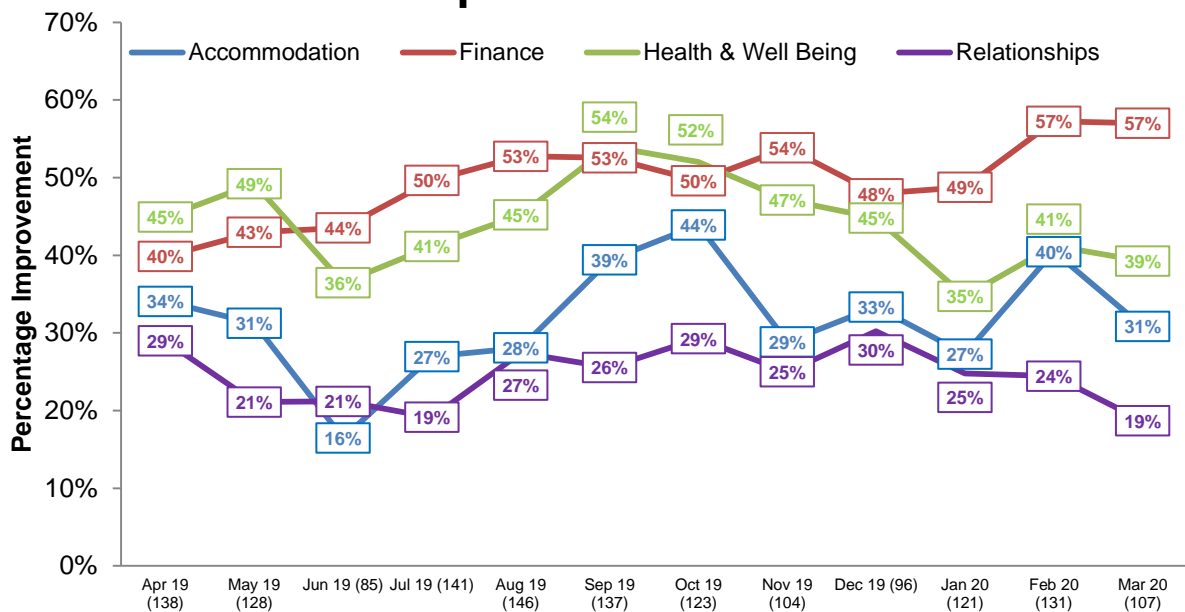
The graphs/data reflect the numbers closed each month with completed SSOM templates (i.e. start and finish data); For the Dyfodol service – length of engagement can be from 4 weeks to 52 weeks and for some longer

Note: Aggregated positive SSOM outcomes reflect scores (grading system) which have improved between start and finish of engagement with Dyfodol. This indicates a level of positive ‘direction of travel’. Dyfodol services are provided for the most challenging/complex cohort of offenders. Many are excluded from other agencies, are ‘revolving door’, many are under Police IOM attention and subject to statutory Safeguarding/Social Services concerns. Many are homeless, suffering mental health problems or a combination of all these things.

The SSOM outcomes in each of the categories shows the percentage of positive outcomes (positive shift in direction of travel) for those who have left the service and been engaged in treatment for more than four weeks.



Dyfodol SSOM Positive Outcomes (2) April 19 - March 20



So for instance - the graphs above show that between 51 and 66% of people who were engaged for over four weeks achieved a positive shift in their offending behaviour so that they either stopped offending or committed less serious offences. Access to information through collaboration with Probation and with Police and Niche are important ways in which caseworkers verify what the service user might be telling them about their behaviour and outcomes.

SECTION 2: DYFODOL POLICE CUSTODY SUITE ACTIVITY

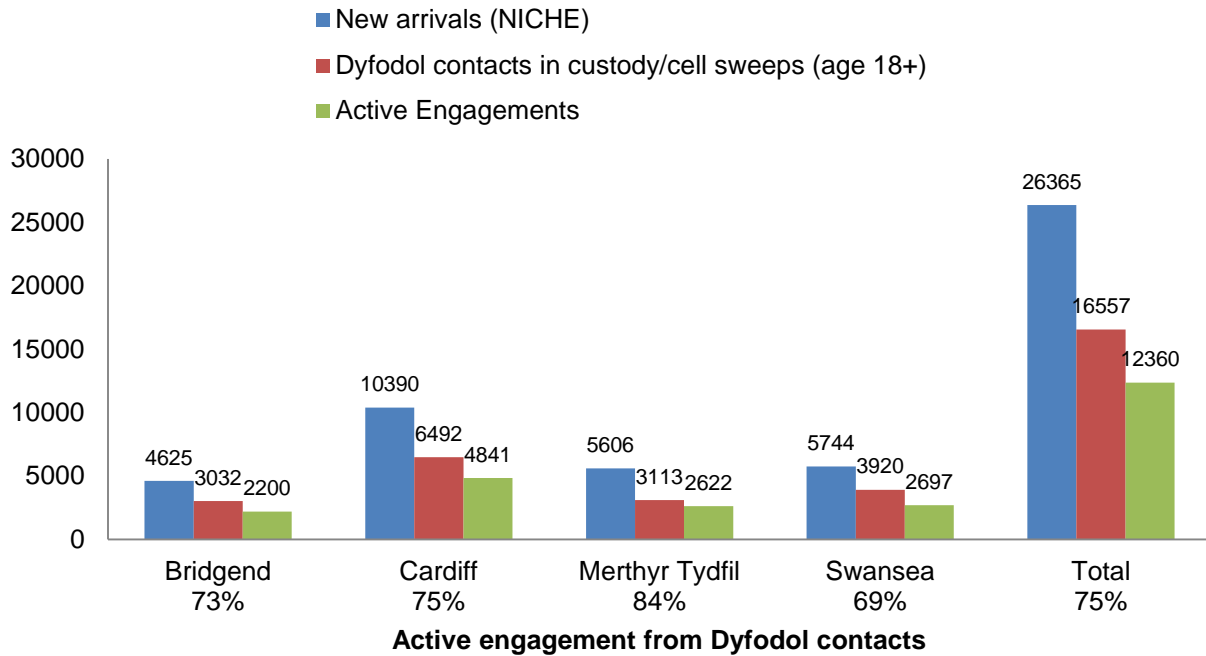
In police custody suites across South Wales staff work to meet with people who are usually in a crisis situation having been arrested and detained. These are places where a variety of needs are often exposed and staff work in this arena so that they can assist with supporting those needs. On every day of the year staff teams work with police and custody staff to meet with those detained, to listen and observe, to triage and assess and to offer advice, guidance and ongoing support. The goal is to help individuals to review the circumstances that led to their arrival in custody, to recognise the causal factors and to engage with support that will minimise the recurrence of such a situation.

While the custody suite is a place where individual needs are exposed, it is not always an easy place for individuals to be receptive to help. Dyfodol teams are sensitive to this and adapt their communication to each person and present their offer of support in accordance with the individual's openness to engage. This means that staff will be able to issue literature to some, be able to have a brief conversation with others and there are many with whom they can enter into a meaningful dialogue and either leave them informed and/or understanding where to go for help, with clear aims, or they can bring people into Dyfodol services for rehabilitative support.

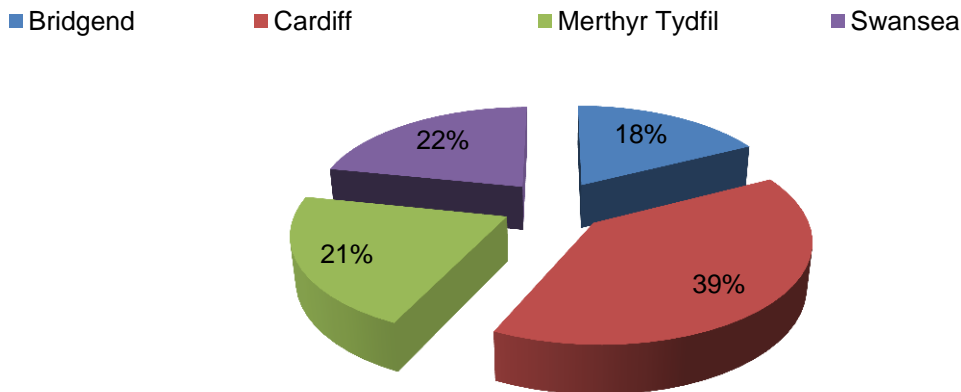
Specifically concerning substance misuse Dyfodol staff support Test on Arrest by undertaking assessments and offering a service that includes harm reduction advice, rapid access to community prescribing and ongoing face to face casework.

- Dyfodol Arrest Referral workers made contact with 16557 of all detainees in police custody.
- 75% (12360) were actively seen by arrest referral workers.
- 25% (4197) were signposted (passive work) as they either refused to engage (2829) or were unable to be seen (1368). All had an information leaflet put into their property.

Annual Custody Suite Activity

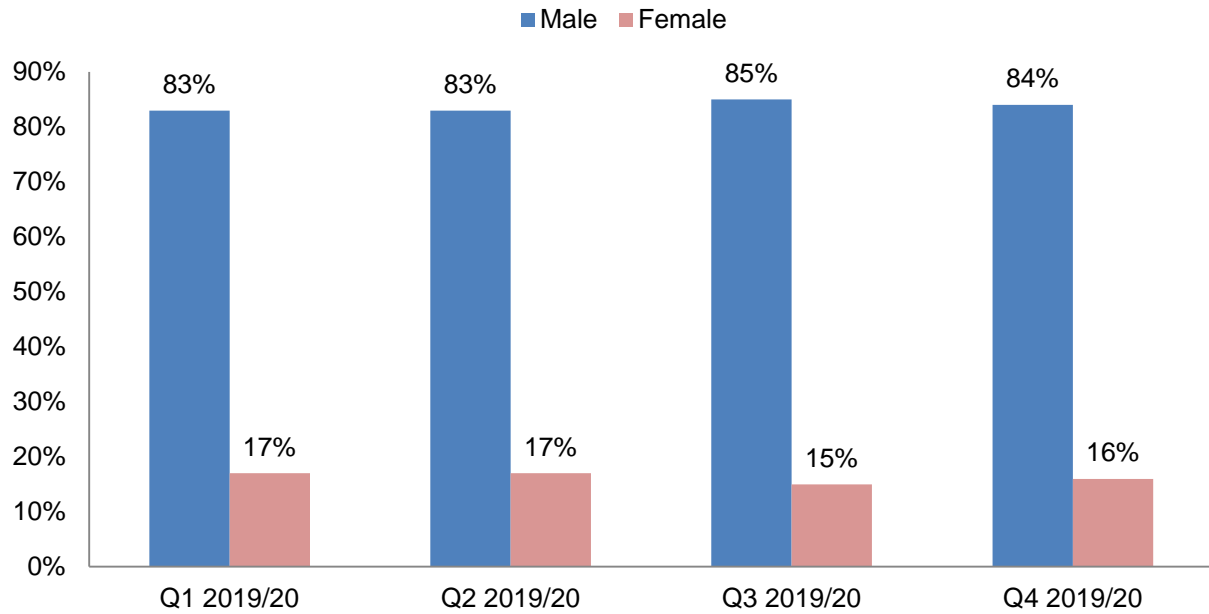


Arrivals in Custody Suite



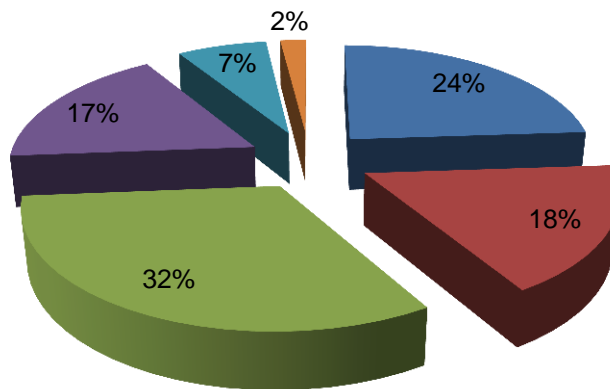
- There has been 26365 (18+) arrivals in the four South Wales Custody suites (SWP Data): Cardiff = 10390 (39%), Merthyr = 5606 (21%), Swansea = 5744 (22%) & Bridgend = 4625 (18%).

Dyfodol contacts in custody suite: Gender

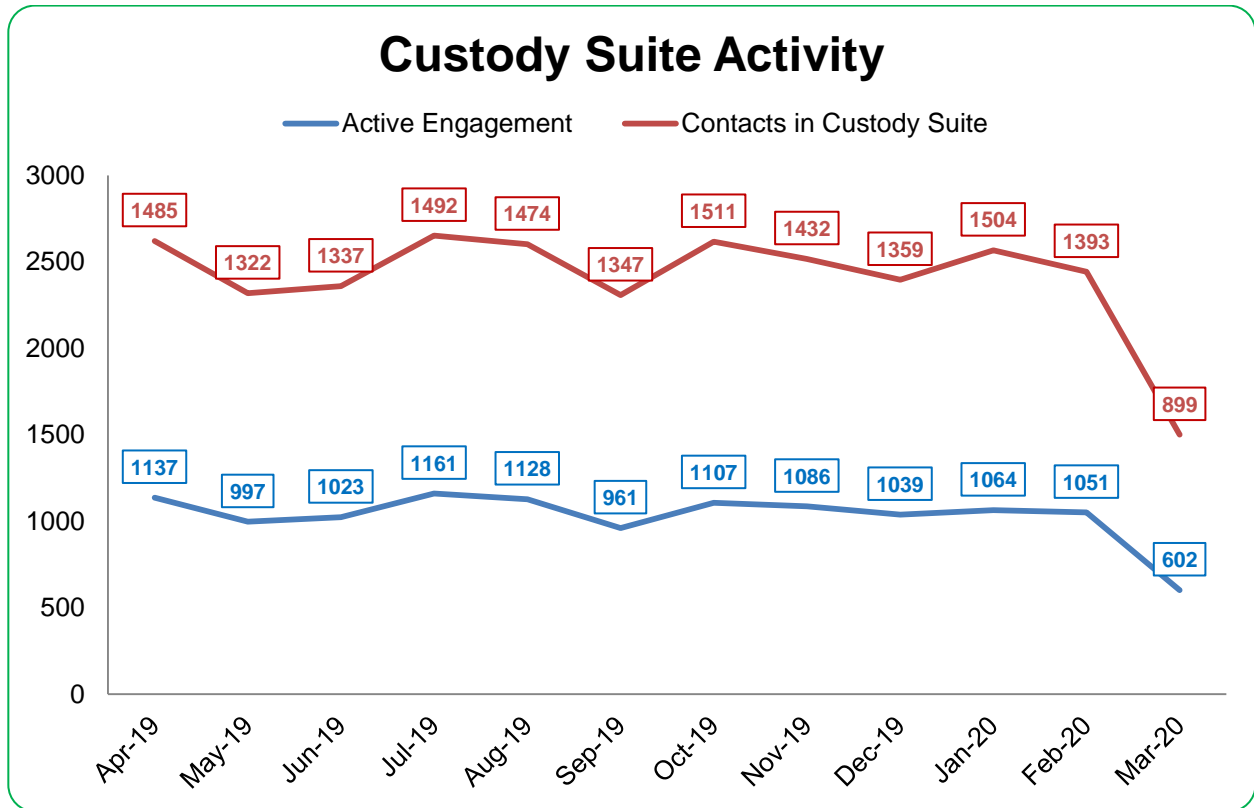


Dyfodol contacts in custody suite: Age

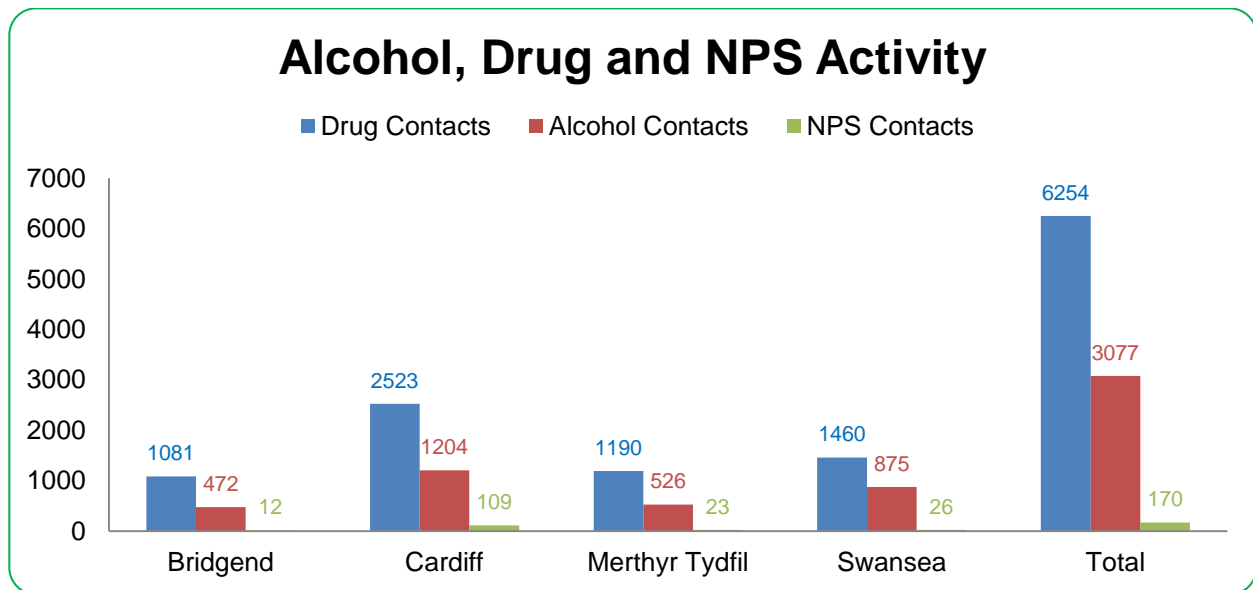
■ 18-25 years ■ 26-30 years ■ 31-40 years ■ 41-50 years ■ 51-60 years ■ 61+ years



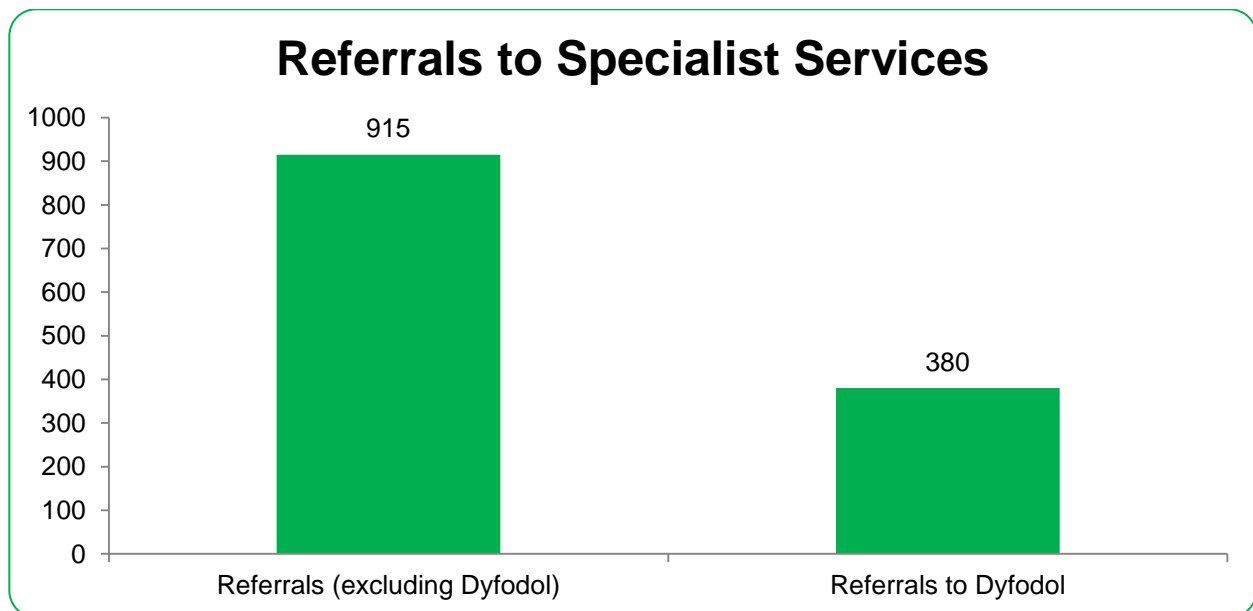
Active engagement refers to the work that Dyfodol staff do when they are able to engage with someone to actively support them. This may be talking to them to offer guidance or advice and it may also include telling them about agencies that can support them and how to find and make contact with those agencies. Sometimes it involves assisting the individual in making a referral to a specific agency.



Police Custody Drug, Alcohol & NPS Contacts



- In 2019/20 there were 9501 disclosures of problematic substance and/or alcohol misuse. 66% (6254) of these were substance misuse issues, 32% (3077) were alcohol issues and 2% (170) had issues with new psychoactive substances.



- There were a further 12417 signposted to generic support services. Since the roll out of the Future 4 diversion and support service for young adults and women in October the Dyfodol service has been working in an integrated way with those staff with whom they now share custody suite activity.-

In brief - the work as part of the Future 4 consortium is commissioned (Gwent and South Wales) to help people access the support they need to where possible avoid the inevitable short and long term challenges and impact of involvement in the criminal justice system. It also provides support for women across the whole offender journey.

The very front end of both F4 and Dyfodol work happens following arrest in the Police custody suites and so both services have been working since October to merge the processes in this setting so that they can maximise the resource available across Dyfodol and F4, minimising duplication and enhancing provision. The existence of established Dyfodol processes enabled swift progress within custody and significant numbers of referrals have emerged for F4 services and Dyfodol staff have benefitted from having wider expertise and options within the 'team'.



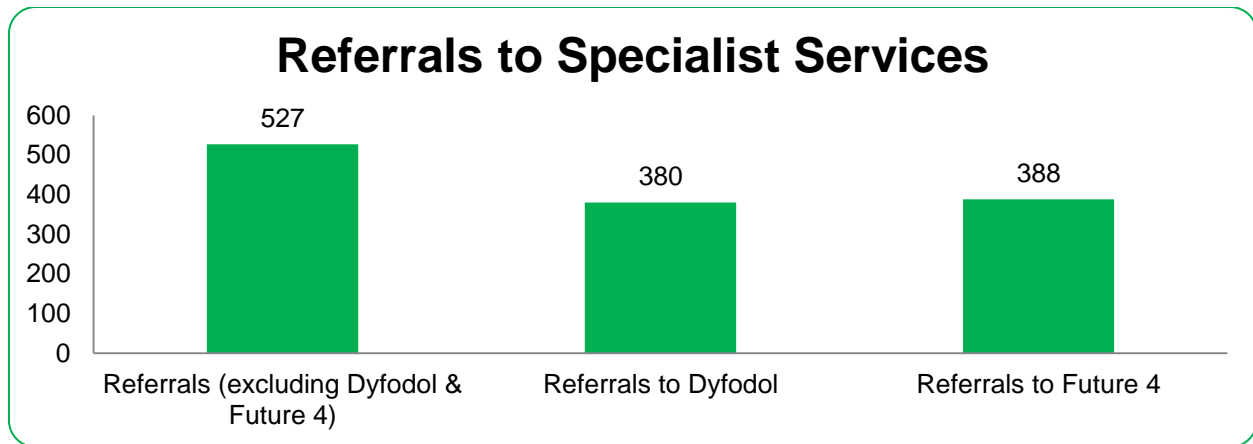
Future 4 is a consortium of providers (G4S, Safer Wales, Include and Llamau) who work with individuals entering the criminal justice system and where possible assist to divert people away from further criminal justice involvement via brief interventions and support. Many are also supported longer term.

The Young Adult (18-25) Scheme is a service which enables young adults and those inexperienced in the justice system to avoid a formal conviction and to benefit from some support to move on with their lives. It also helps lower level substance misusers to break their negative cycles of behaviour.

The Women's Pathfinder Whole System Approach (WSA) provides specialist teams to help women who enter the criminal justice system. WSA workers are able to support women at any point in the criminal justice journey including resettlement following a custodial sentence.

Both schemes provide an allocated caseworker for one to one sessions along with group based workshops.

Joint working protocols are now in place promoting a smooth process and significant support benefits to those who find themselves within the custody suites in South Wales and Gwent.



Drug Markets and County Lines

Cannabis and cocaine remain the predominant drugs available and used across South Wales mainly through the night-time economy. Secondary to this is the more problematic market which deals in heroin and crack cocaine which are predominant in the Dyfodol cohort. Over the year Dyfodol have experienced several spikes in the use of Psychoactive substances in Cardiff and Swansea, with 'Spice' being heavily used within the homeless population, and with some forms triggering very challenging behaviours and overdose situations.

The current drugs market operates through a combination of low level 'local' dealers (often dealing to fund their own habit) operating alongside Urban Street Gangs, Organised Crime Group and County Lines. Users are often loyal to local dealers, however should a County Line offer a better quality product or there is a scarcity of product, users will quickly start to shop around to get what they need. We are particularly aware that this will be changing during the course of the Covid-19 outbreak, and will be monitoring changing patterns of drug use with our partners.

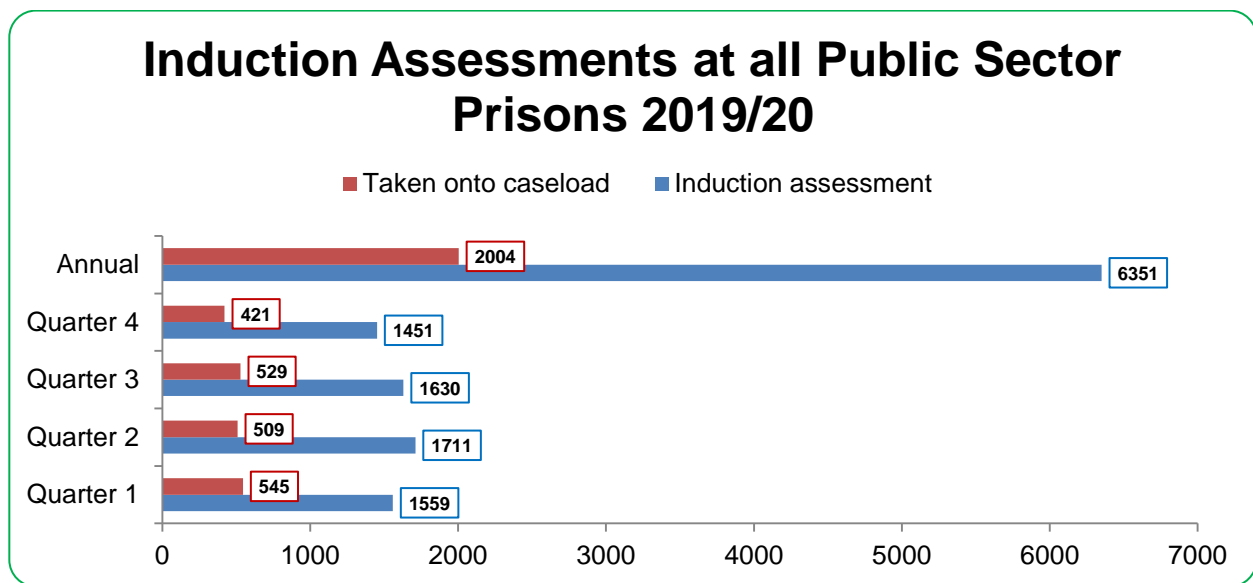
Dyfodol have been providing input into BCU County Lines intelligence on a daily basis and provide input into a drug trends questionnaire which is utilised by the Regional Drug Threats Group which Dyfodol attend. Participants include Dyfed-Powys, South Wales and Gwent Police, the National Crime Agency and treatment services, with the group looking at national trends and trying to counter County Lines activity. Dyfodol work with other service providers and local BCU policing to promote messaging around the threats posed by County Lines with a view to improving public awareness and reporting. Dyfodol have also worked pro-actively to improve the lives of more vulnerable service users affected by County Lines - for example acting on information from a service user whose flat was being used by a dealer - the resulting arrest netted a quantity of cash, drugs and firearms.

SECTION 3: PUBLIC SECTOR PRISONS (PSPs)

Intake and induction:

At the PSPs in Wales, the Dyfodol teams continue to meet all men on arrival, screening every one for substance misuse treatment needs. This is a primary mechanism by which we ensure that all men are aware of the service. This screening enables Dyfodol staff in prisons to harness any initial motivation to engage, to address immediate needs and to ensure that there is support to enable colleagues in the prison clinical teams to promptly address key prescribing needs.

This graph indicates how busy Dyfodol are with the intake, around 530 men a month enter the Welsh public prisons and this intake is concentrated on HMP Cardiff and Swansea due to the nature/role of those establishments.

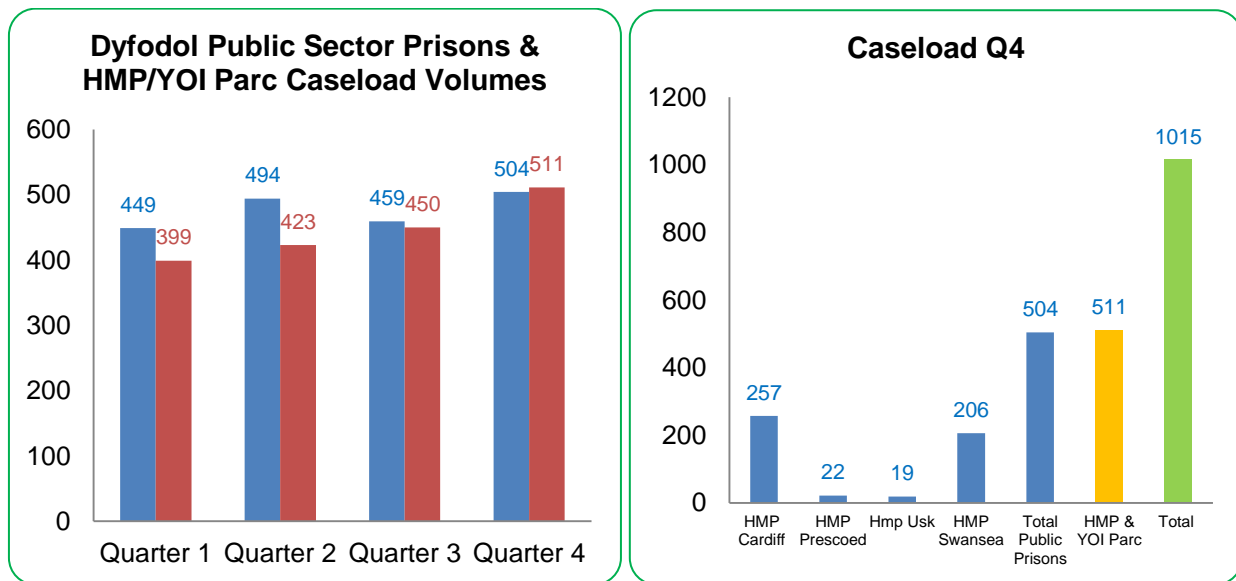


Of this intake:

- All are given harm reduction awareness:
- Around a quarter are given additional advice, guidance and signposting to low level substance misuse services:
- Just under a third of these men come onto the Dyfodol caseload.

Caseloads

Across the year the caseload has been relatively stable. Our overall caseload is largely concentrated on the prisons at Swansea and Cardiff. HMP Usk and Prescoed do not formally house individuals who are actively using illicit substances and require clinical treatment.



Key achievements through the year have included:

- New senior case workers at both HMP Swansea and HMP Cardiff have come into post and brought stability and renewed momentum to the teams.
- A strong contribution to the very good inspection at HMP Cardiff.
- Roll out of group work at HMP Cardiff.
- Further embedding of the Early Days Prescribing work at HMP Swansea in conjunction with our community colleagues.
- Close collaboration with the Regional Drug Strategy Lead for Wales in plans to implement Incentivised Substance Free Living (ISFL) at HMP Swansea.
- Far more active management of staff succession with more swift recruitment and use of volunteers.
- Increasingly strong joint work with Healthcare departments on the ground with weekly clinical meetings and at more strategic levels with Doctors / clinical directors. This

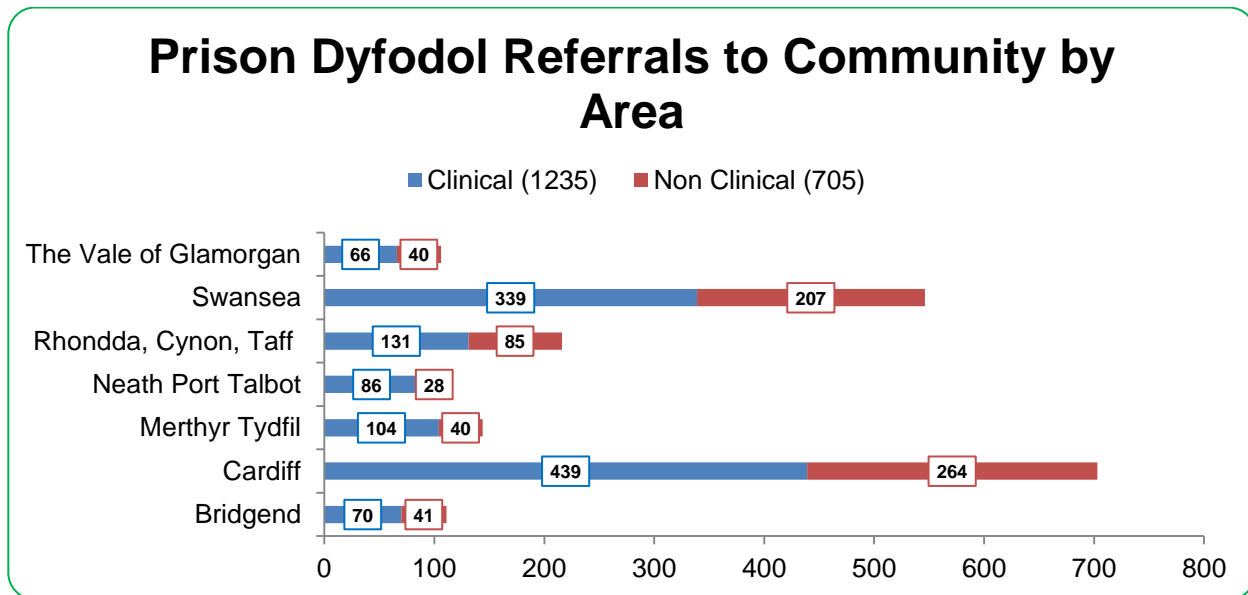
includes contributing to daily clinical issues as well as approaches to substitute medication such as Espranor and now Buvidal.

- Introduction of additional rehabilitation materials and approaches including SMART (HMP Cardiff), BUDs, Lifestyle Planning Modules, Ten Minute Interventions and activities in conjunction with our Prison Link and Wellbeing team.
- Joint work at HMP Prescoed on a Wellbeing event including sessions on steroid use for men.

While much of our work has still to be tailored to short prison terms, we are focusing on the most effective work of maintaining treatment on intake and release, helping achieve and maintain stability and encouraging change and resilience.

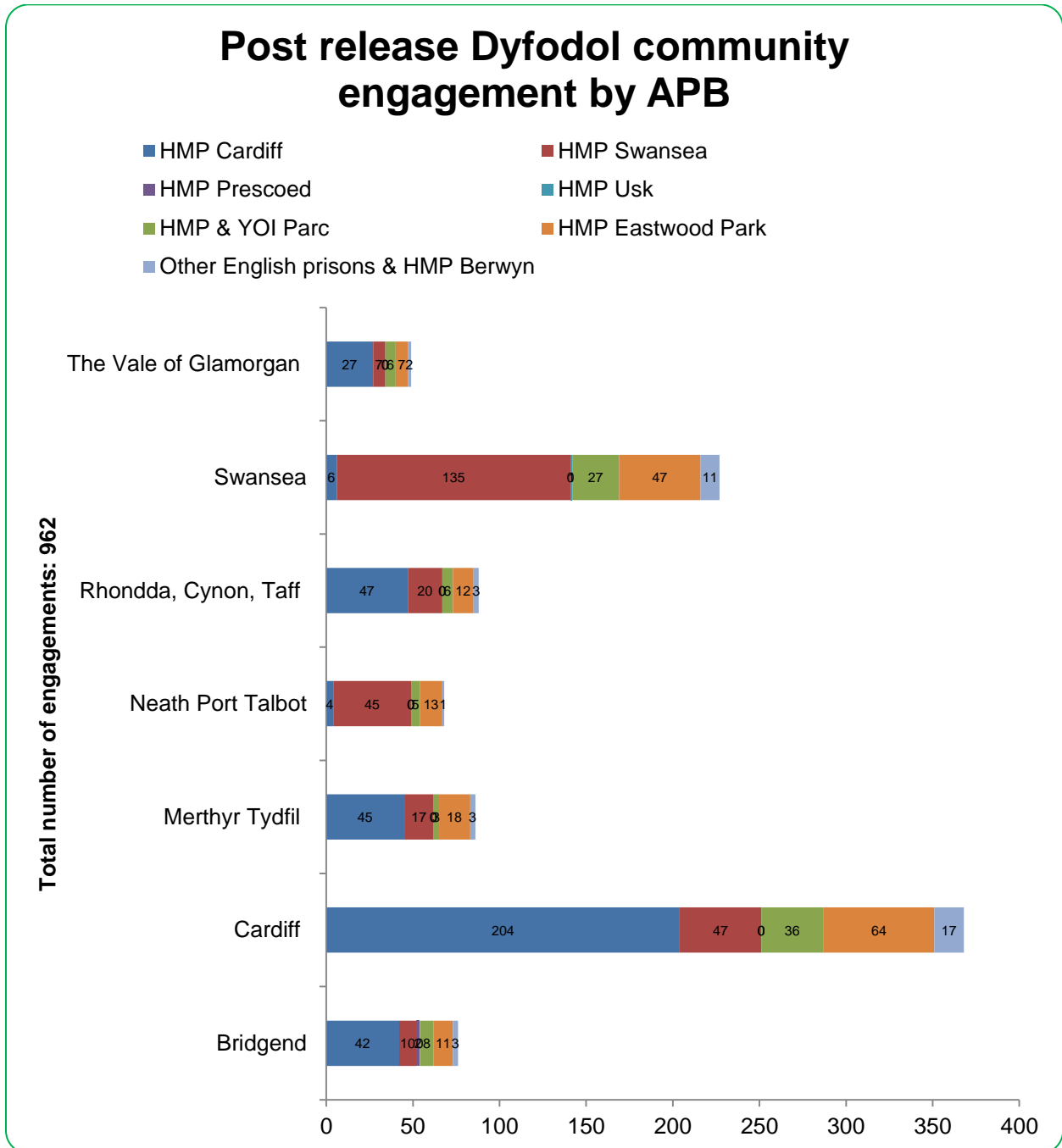
Release Planning

There were 1,940 prison referrals made by prison substance misuse teams to the Dyfodol community teams in 2019/20. Note - These referrals will not all have been released in the reporting year 2020/21.



SECTION 4: POST RELEASE ENGAGEMENT IN COMMUNITY SERVICES

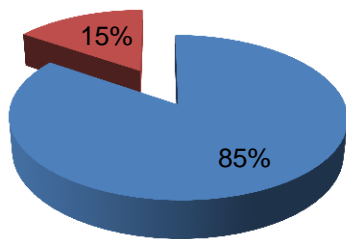
This graph shows releases by APB but features the releasing prison, showing a logical distribution according to the location of the prison.



There were 1360 (924 clinical and 436 non clinical) prison releases to Dyfodol community services in 2019/20 of which all were offered a post release appointment. Overall, 962 of those prison leavers attended their appointment with Dyfodol services following release (71%).

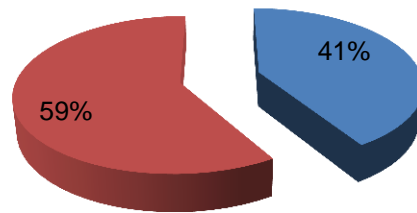
Clinical Post Release Engagement

■ Attended (782) ■ Did not attend (142)



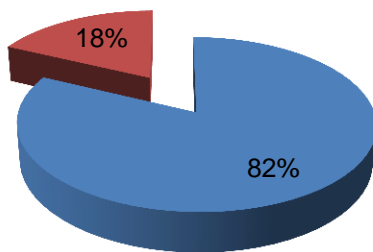
Non Clinical Post Release Engagement

■ Attended (180) ■ Did not attend (256)

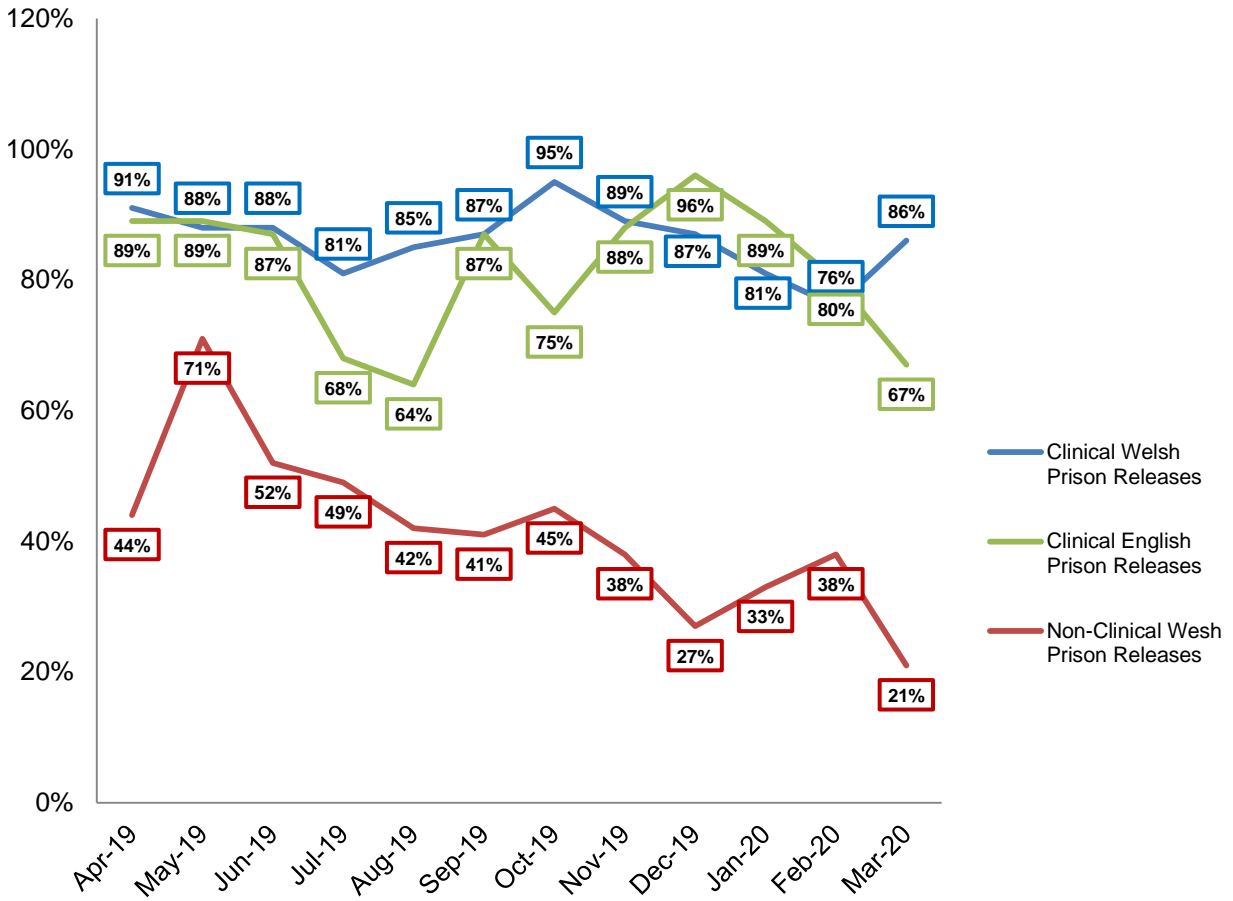


Engagement on Release by Gender

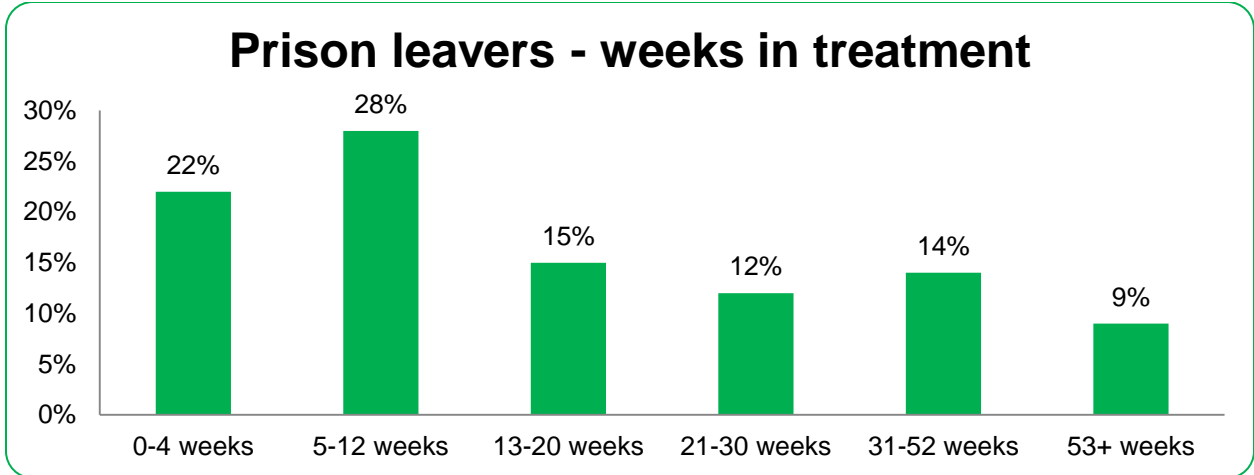
■ Male (790) ■ Female (172)



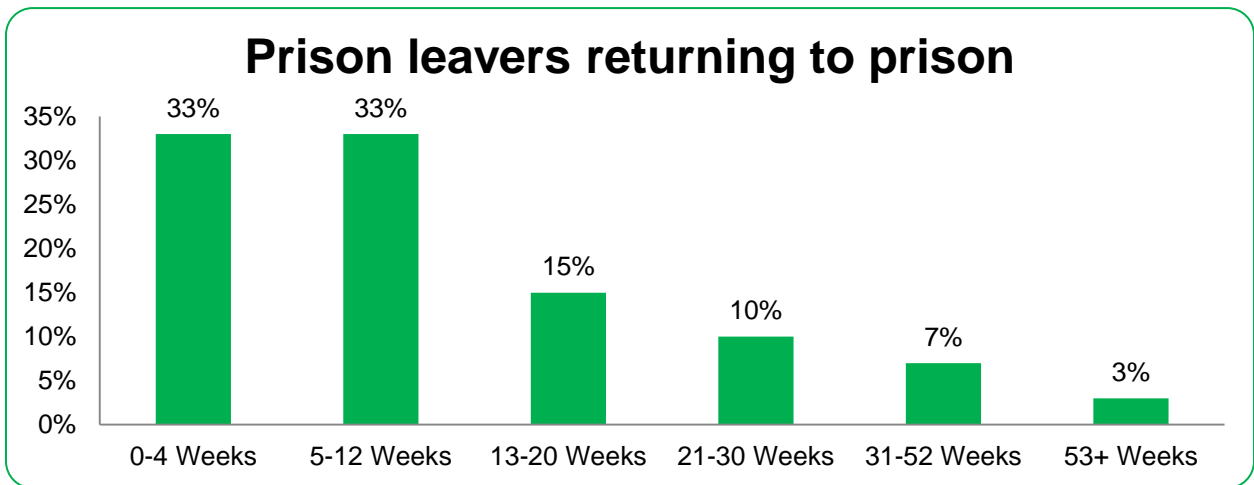
Post release initial engagement



Numerous studies and reports have indicated that being in treatment is a protective factor against drug poisoning. Researchers also particularly note the importance of treatment continuity post prison release (*Reducing Opioid-Related Deaths in the UK- Advisory Council on the Misuse of Drugs (ACMD) 2016 (P2)*, *The Patel Report- Professor Lord Patel and the Prison Drug Strategy Review Group (2010)*, *Evaluation of Drug Recovery Wings in Prisons* by Charlie Lloyd et al (2017)). In the light of that, it is important to consider whether we manage to engage people post release, and also for how long. Through 2019/20 Dyfodol have managed to retain 78% in service beyond four weeks and 50% beyond 12 weeks. This is a demonstrable protection against drug poisoning.



While Dyfodol work with individuals who often lead lifestyles entrenched in offending and cyclical arrest and imprisonment, the graph below shows how the proportion of disengagers in each window significantly reduced after 12 weeks engagement. This indicates that the longer someone engages in treatment with this service, the less likely they are to return to offending that could result in a prison sentence.



In summary, Dyfodol are engaging a remarkable volume of individuals in drug treatment ‘through the gate’ and are managing to retain them in service for significant periods of time.

- The longer these people remain in treatment the less likely the risk is of drug related death.
- The longer these people remain in treatment the less likely they are to return to offending.

SECTION 5: DYFODOL SERVICE DEVELOPMENT, INNOVATION AND ADDED VALUE

Over the past year Dyfodol has undertaken a number of additional work streams to further develop provision for vulnerable people in South Wales.

These include, firstly, the provision of services for Cardiff Council providing clinical treatment services for the homeless and secondly, achieving slippage funding for 30 additional treatment and support places in Western Bay Area Planning Board for vulnerable people at serious risk of overdose. (As part of the response to overdose deaths raised as a critical incident by the Public Service Board in the region.) This service also will provide some places for problematic high risk sex workers in the Swansea area. Dyfodol are also working with Housing First in Swansea supporting a partnership with the Wallich and Kaleidoscope with several Dyfodol service users accessing the project.



Dyfodol has been a pilot site for Buprenorphine injection trials since July 2019, supported by the pharmaceutical supplier and Cardiff and Vale Area Planning Board. The benefits of this new medication centre on the fact that it can last up to 34 days in the system once fully titrated, which therefore means fewer face to face treatment sessions with clinicians. It can reduce disruption to the daily patterns of substance misuse that often form a barrier to other activities and also reduce the daily exposure to others in treatment that can influence thinking and behaviour.

This treatment reduces the need to access pharmacies or treatment bases on a daily basis and the associated stigma to daily supervised methadone consumption. It means that there is a greater opportunity for service users and staff to become more focused on the psychosocial elements that help bring about the life-changes that break reliance on substances. The initial trials have been life changing for some service users, particularly as it has been trialled with more chaotic people. This treatment is not suitable for all service users.

In the run up to Covid-19, this new (yet expensive) treatment has been seen as having huge potential to reduce the daily footfall into services and pharmacies - improving social distancing and reducing the risks of overdose.

This innovation has been noted by Welsh Government, Health Boards and Area Planning Boards, and Dyfodol has been offered additional funding to support service users during the COVID-19 period, particularly:

- those leaving prison;
- those requiring shielding;
- Homeless service users or those in particularly unstable housing
- New starts in the community (especially those known as poor engagers, those particularly vulnerable to overdose, for whom titration is considered particularly risky or practically difficult, or those particularly prone to inappropriately diverting their medication);
- Those whose engagement means they are at risk of falling out of clinical treatment.

Clearly we are pleased to be working at the forefront of this innovation, but retain some reservations about the ongoing risks to clinical budgets and staffing capacity post COVID-19.

Alcohol Treatment

Dyfodol have worked with Drink Wise Age Well partners across Cwm Taff to undertake training in alcohol support for older people. The Cardiff Dyfodol team has worked closely with NHS partners within the Cardiff and Vale Area Planning Board to enable direct access to in-patient detoxification for Dyfodol service users with severe alcohol dependency. Alcohol Group interventions have evolved to 'Peer led alcohol groups' with Dyfodol staff supporting the service user leading the group sessions.

Working with complexity

The cohort of service users supported in a range of ways reflect some of the most complex, vulnerable and chaotic individuals in communities. Staff engage with people who are regularly in crisis on a daily basis, and there has been an increasing focus on looking at how people are moved out of crisis so that they can be enabled to undertake more focussed and planned work on their well-being and lifestyles. Complex case clinics for staff have been commissioned and delivered by our forensic psychologist partners this year, aimed at supporting staff with difficult or 'stuck' cases by providing group training interventions looking at particular case examples brought by staff to the session. These have included:

- Adverse Childhood Experiences,
- Personality disorder,
- Aggressive service users,
- Head injury,
- Mental health,
- Female service users.

Group Interventions and activity

Dyfodol have developed a clear set of principles guiding their work and centering on positive psychology approaches with wellbeing at the core. Increasingly research is indicating that this work should be viewed as fundamental to helping people to manage their lives more effectively and that it should form the key part of work with people once they are stable enough to engage. Specific structures have been established to drive ideas and approaches to this. Many of the examples above and below are a reflection of this.

We provided a range of activities and group intervention in 2019-20:

- Women's group with numbers up to 12 attending in one session. Providing positive outcomes with users engaging with other services invited to the group such as sexual health and benefits agencies.
- Singing, yoga and pamper sessions to improve well-being and self-confidence.
- Cookery classes providing practical skills and cooking on a budget nutritional advice. Creative writing classes to broaden thought processes and develop skills around problem solving and analysis.
- Peer led SMART recovery groups are held at a number of bases. Cyfle Cymru provides employment and training activities. There have also been craft groups, positive mind setting, mindfulness and grounding techniques sessions.



Service users have also taken advantage of the many walking opportunities including the annual Recovery Walk to the top of Pen-y- Fan.

There exist well developed partnerships with Street Homeless Football and opportunities have been provided for service users to support the World Cup held in Cardiff in July 2019. .

Working in Partnership with the Dog's Trust and Therapy Dogs UK

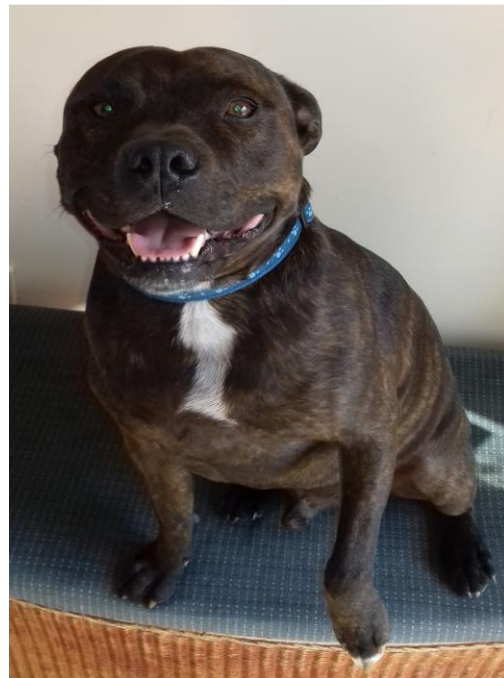
Over the last year Lesley Lloyd, G4S Wellbeing Coordinator for HMP Swansea, has recruited her dog Rex (pictured) as a Prison Therapy Dog and has introduced him to community Dyfodol bases too. At first she forged a partnership with the Dogs Trust who ran their education course for prisoners. The objectives for this course include:

- Specifically: Improving learners' basic knowledge of dog welfare and dog behaviour. Raising awareness of the laws regarding dog ownership. Discouraging disposable dog culture and encouraging positive choices regarding dog ownership.
- Broadly: Develops the understanding that actions have consequences. Improves their interaction and communication skills.

During the course, security staff bring 'search dogs' into the room, participants spend time with the dog and from this, emerged the initiative to bring in Therapy Dogs UK for sessions with the men as a reward for course completion.

Lesley then had Rex assessed and certified as an official Therapy Dog by the national charity, Therapy Dogs UK. Her sessions have been so successful that large numbers of men have completed the course and enjoyed time with the dogs.

In February Lesley went to the Senedd to talk about her work with ministers and other officials. Since Christmas she has taken her dog into the Neath Dyfodol base to meet with service users there and the Bridgend base have hosted their own Dog's Trust course. The course runs for five weeks and there were six participants.



Feedback from service users was positive:

"I really enjoyed the course that was run by the Dogs Trust. I learned things about dogs that I had not known before. I was also able to learn about how to best care for my dog and train him. I didn't have to go to the group but I continued to go as I enjoyed learning new things and was interested in the sessions."

There are now plans in place to run this group in the Neath base once the current situation eases. Further plans are in place to have a Therapy Dog attend both the Bridgend and Neath bases for service users and we are working on similar options in Cardiff.