

Vote 35 - Tourism, Sport and Recreation

32. Drugs Initiative

Background

In October 1996, the Government accepted the recommendations of a Ministerial Task Force on Measures to Reduce the Demand for Drugs. These included the establishment of a *Cabinet Committee on Drugs* to give overall political leadership, A *National Drugs Strategy Team (NDST)* to ensure effective co-ordination between the Departments and Agencies, and *Local Drugs Task Forces* to develop co-ordinated local responses to the drug problem. The Government also approved an allocation of £10m to support the initiative. Funds were initially provided in the Vote for the Department of the Taoiseach but following the change of Government in July 1997 responsibility for the NDST passed to the Department of Tourism, Sport and Recreation. The NDST is representative of the principal parties concerned with the problem of drug misuse. These include Government Departments, health boards, the Garda Síochána, State Agencies and voluntary and community bodies. The NDST was initially required to ensure effective co-ordination between the Departments and Agencies involved in responding to the problem and to oversee the setting up and operation of the local drugs task forces (LDTFs).

Thirteen LDTFs were established between October 1996 and May 1997. Their remit includes contributing to the formation of national policy on drugs and the development of local strategies to tackle the problem, through a partnership approach involving the statutory, voluntary and community sectors. With regard to the Initiative, their primary role is to

- assess the extent and nature of the drug problem
- receive, review and recommend drugs related projects for funding as part of the process of preparing local strategies to address the problem
- oversee and monitor the implementation of projects approved.

Drugs Initiative funds are paid from the Department of Tourism, Sport and Recreation to other Departments and agencies; principally the Departments of Education and Science; Health and Children; Environment and Local Government; Justice, Equality and Law Reform; The Eastern Regional Health Authority (ERHA); The Southern Health Board; Area Development Management Ltd (ADM) and FÁS. Table 38 shows the distribution of funds by programme type between October 1997 and April 2001. An additional £281,000 was made available to LDTFs to meet administration costs. This is channelled through the local partnership network of ADM.

Table 38 Analysis of Allocations by Programme type October 1997 to December 2000

Programme Type	No. of Projects	£
Education and Prevention	124	8,605,804
Treatment and Rehabilitation	61	7,022,922
Combination Projects ²⁰	13	2,043,180
Supply and Control	9	390,550
Research and Information	11	209,904
Other	13	715,917
Total	231	18,988,277

²⁰ Projects combining elements of Education, Prevention, Treatment and Rehabilitation Source: NDST

Table 39 shows the number of projects sponsored by each of the 13 LDTFs and the amounts of money allocated in both the original and subsequent allocations.

Table 39 Analysis of Funding of LDTFs October 1997 to December 2000

Task Force	No. of Projects	Original Allocation £	Additional Funding £	Total Funding £
Ballyfermot	33	902,000	203,717	1,105,717
Ballymun	14	625,000	828,324	1,453,324
Blanchardstown	11	732,990	1,019,647	1,752,637
Canal Communities	14	800,000	1,134,779	1,934,779
Clondalkin	16	923,000	684,932	1,607,932
Cork	21	546,700	431,703	978,403
Dublin North East	8	707,200	637,583	1,344,783
Dublin 12	12	616,000	278,000	894,000
Dun Laoghaire- Rathdown	19	582,865	555,738	1,138,603
Finglas/ Cabra	15	696,500	769,904	1,466,404
North Inner City	26	749,730	1,258,861	2,008,591
South Inner City	23	966,220	779,125	1,745,345
Tallaght	19	675,700	882,059	1,557,759
Totals	231	9,523,905	9,464,372	18,988,277

Objectives and Scope of Audit

The primary objectives of the audit were

- to review overall management and control of the Initiative
- to review effectiveness in the context of projects funded

Departmental files relating to the Initiative were reviewed. Discussions took place with the Department's representative on the NDST. Meetings were also held with the Departments of the Environment and Local Government and Education and Science, City of Dublin Youth Service Board, the ERHA and the Chairmen and Project Co-ordinators of two LDTFs. A number of drugs projects that received funding were visited and a sample of project expenditure was examined. The NDST also provided information and responses.

Audit Findings

Management of the Initiative

While representatives of six Departments, the Garda Síochána, the ERHA and FÁS were seconded on up to a half-time basis to the NDST no administrative support was provided to the NDST initially. A secretary was made available in July 1997 and in July 1998 an Administrative Officer was seconded to the NDST from the Department of the Taoiseach. Requests by the NDST for additional administrative support from the participating Departments and Agencies have been unsuccessful. The Department of Tourism, Sport and Recreation point out that consultants who evaluated the Drugs Initiative in October 1998, while confirming the initial resource problems, were of the opinion that the NDST subsequently had adequate administrative support.

The NDST did not set formal deadlines for receipt of project plans. LDTFs were expected to identify suitable projects, find persons to undertake them and ensure that plans were submitted as soon as possible to the NDST. Following initial vetting by LDTFs between March and November 1997 the NDST considered these plans in two phases, between May and December 1997. The initial vetting and screening procedures used by LDTFs ensured that few projects were rejected for funding.

It was intended that projects would be funded for one year and then independently evaluated. Subsequently the NDST would recommend successful projects for direct funding by the appropriate state agency (a procedure known as "mainstreaming"). However, projects did not get off the ground to the extent necessary for proper evaluation, as quickly as was hoped, and the Government approved continued funding. Project evaluations took place towards the end of the year 2000 some 3 years after the effective commencement of operation of projects funded under the Initiative.

Overall Costs

Not all allocations have been drawn down, as the timing of drawdown is dependent on the cash flows of individual projects and the administrative arrangements of the implementing agencies. Table 40 shows the position at 31 December 2000.

Table 40 Calculation of Amounts not yet paid to Projects at 31 December 2000

	£	£	£
Allocations Approved by NDST			19,241,000 ¹
Allocations Drawn Down	17,787,000		
Advances by Implementing Agencies to Projects ²	546,000		
Balances on hands in Implementing Agencies	(604,000)		
Net Allocations drawn down		17,729,000	
Allocations not paid to Projects at 31 December 2000			<u>1,512,000</u>

¹ Development funds amounting to £253,000 which were not included in LDTF action plans, are included in this figure to assist comparison of amounts shown.

² Certain agencies advanced funds to projects in anticipation of drawing down from the Vote for Tourism, Sport and Recreation

When account is taken of the balances with implementing agencies at 31 December 2000, the remaining funds not yet drawn down from the Vote for Tourism, Sport and Recreation represent in the main projects that did not start or which had not yet developed to the extent necessary for full draw down.

In addition to the £17,787,000 drawn down from the Department, an additional £1,120,000 was paid in respect of once-off allocations for specific drugs projects. These projects are outside the action plans of the LDTFs which are the subject matter of this report.

The NDST estimates that 70 % of total funding is used to meet the payroll costs of projects.

Associated Costs of the Initiative

The value of services provided to projects, apart from the amounts charged to the Vote, is significant. The ERHA estimates its contribution in respect of accommodation and administrative support at £1.3m over the 4-year period. FÁS estimates its contribution at about £4.8m per annum. It has allocated 1,000 places under its Community Employment Scheme to recovering drug addicts. Services provided voluntarily by individuals and groups throughout the LDTF areas are also significant. These have been quantified in some cases *e.g.*

volunteer time for Internet learning activities in City Quay (£52,500), provision of accommodation by Dublin Corporation for the Urrús and Springboard projects (£9,360) and services for the Springboard project (£9,000).

Accounting and Control

Funding guidelines were prepared by the NDST and issued to the Chairpersons of LDTFs and the relevant statutory agencies in August/ September 1997. However, the NDST has identified the need for updated funding guidelines which are now being developed. At the time of audit the NDST financial records of funding to individual LDTFs and projects were written up only to 30 June 1999. The NDST attributed this to a lack of staff resources in its office. The records were subsequently written up to 6 April 2001 before the audit ended. All projects are required to provide a copy of their latest externally audited project accounts to the relevant funding agency annually. No matters have been brought to the attention of the NDST arising from review of those audited accounts.

Formal contracts were not concluded between the funding agencies and those undertaking projects due to the perceived fear at NDST level that such arrangements would detract from the effectiveness of the projects by over-formalising an already difficult process. It is intended that such contracts will be a feature where funding is incorporated into the annual budgets of implementing agencies in respect of projects which have been mainstreamed.

While rigorous internal control structures could have adverse cost impacts and may be difficult for very small organisations, some deficiencies were noted which should be considered by the NDST as soon as practicable. They include: a general lack of segregation of duties, particularly as regards approving invoices, signing cheques and reconciling bank statements to the financial records; lack of evidence of bank reconciliation, and the retention of cheque books and accounting records in individuals' homes. There is a general absence of contracts of employment for project employees. In a small number of instances expenditure was not properly supported by relevant documentation. Some evidence of project employees transferring to other projects offering higher rates of pay was noted.

LDTF Co-ordinators

Each LTDF in the Greater Dublin Area has been assigned a co-ordinator recruited by the ERHA. These co-ordinators are full-time, permanent employees of the ERHA and cost £300,000 annually which is not recouped from Initiative funds. The fact that they are simultaneously permanent employees of the Health Authority and serving the interests of their Task Force may give rise to some difficulties. For example co-ordinators may be involved in both the preparation and approval of draw down requests which are being funded through the Health Authorities to which they belong. While this may restrict their scope to act in an independent or critical manner there was no evidence that this conflict had manifested itself in any way. No evidence was noted of systematic financial checks or inspections of projects, carried out independently, by the funding agencies or by project co-ordinators.

The Role of Agencies and other Departments

The NDST and the Department of Tourism, Sport and Recreation expressed the view that responsibility for exercising financial control over the projects rested with the funding agencies. However, many of the funding agencies in turn used other agencies within their remit to channel funding to projects. This has led to a distancing of accountability for Initiative funding from the responsible Department.

The funding received under the Initiative by the Department of the Environment and Local Government was drawn down by Dublin Corporation, as is required for projects under the Department's aegis. The Department did not routinely ask for, nor did Dublin Corporation provide, evidence that the funding was required at the time requested. The Department has not carried out on-the-spot checks or inspections of the projects for which it is the funding agency. It has not received or requested reports from Dublin Corporation regarding the efficiency and effectiveness of the projects themselves.

The Department of Education and Science transfers Initiative moneys to four Vocational Education Committees- City of Dublin VEC (CDVEC), County Dublin VEC, Dún Laoghaire VEC and City of Cork VEC. In the case of CDVEC, the moneys are transferred on foot of requests received by it from the City of Dublin Youth Service Board (CDYSB) which is a statutory sub-committee of the CDVEC. The CDYSB makes the requests following receipt of LDTF drawdown forms. However, the CDYSB has never inspected Initiative projects for which it is responsible. Likewise the Department of Education and Science has not undertaken on-the-spot checks nor has it sought or received reports from the CDYSB regarding the activities of Initiative funded projects. The CDYSB has indicated that it is not in a position to operate to the standards that it applies to the administration of other funds because of staffing levels. No allocation of funding was made available for the appointment of staff to administer the Initiative.

The Department of Health and Children was represented on the NDST and was expected to be one of the funding agencies for the Initiative. However this Department only accepted one tranche of funds from the Department of Tourism and Sport in November 1997. It returned a later payable order because it was unable to take responsibility as the agent of the Department of Tourism, Sport and Recreation. The financial procedures operated by the Department of Health preclude acting as an agent. Accordingly the Department forwarded the first tranche to the Eastern Health Board (now the ERHA) which thereafter performed the agency function.

The Department of Justice, Equality and Law Reform channels payments through the Garda Síochána and the Probation and Welfare Service representatives on LTDFs. It does not request reports from its local representatives as to the progress of the projects funded. The Department has indicated that both agencies have clear procedures in place for monitoring all payments made to community based projects so it has not directed them to exercise any form of financial inspection or control over funds utilised by projects.

None of the agencies sampled has ever formally requested quarterly returns from either the projects themselves or from the LDTFs. It was a condition of grant to projects that quarterly accounting returns would be submitted to funding agencies.

Assessing Effectiveness in the context of Project Evaluations

No specified objectives or targets were set for the Initiative. The NDST did not set targets for reductions in the levels of drug abuse. In particular, no performance measures for effectiveness of projects were established. The NDST believed that a speedy and appropriate response was required to counter the hostility and suspicion that existed in communities in LDTF areas at the time. Measurement of the reduction or otherwise of opiates use in the areas covered by the LDTFs would have been a key indicator of the success of the Initiative. However, neither the NDST nor the LDTFs considered it appropriate to delay the introduction of programmes and services in order to devise performance indicators. In any event, the NDST expressed the opinion that there are no generally agreed studies or statistics against which to measure success.

Although the Initiative received Government approval in October 1996, the first projects started in October 1997. By end-1997, 43 projects were underway and by end-1998, 143 projects were established. In 1999, 18 projects started and a further 26 projects got off the ground in 2000. The NDST attributes these delays to

- local opposition to the introduction of drugs related projects
- difficulties in recruiting and retaining suitably skilled personnel
- a lack of suitable premises from which projects could operate.
- the difficulty in identifying and organising local groups to manage projects in areas where community structures were underdeveloped

The Department of Tourism, Sport and Recreation has advised me that £10m has been allocated towards a premises Initiative to provide suitable accommodation in local areas for Task Force operations and that as part of a new drugs strategy, by 2002 all Health Boards, in considering the location and establishment of treatment and rehabilitation facilities, must develop a management plan with local communities.

The ERHA believes that the Initiative supported the introduction of drug treatment facilities into areas which would otherwise have been virtually inaccessible. The ERHA also believes that these facilities would not have been made available but for the Initiative.

Evaluation of Projects

Consultants evaluated 140 of the 231 projects approved for funding although a number of the approved projects were subsequently merged. The evaluation process resulted in 129 being mainstreamed. The NDST records showed that a further 42 projects were not evaluated because they were:

- one-off projects which did not warrant evaluation (23)
- delayed projects which had not advanced to a stage suitable for evaluation (10)
- planned projects which never started, or, once started, never progressed (6)
- projects which had been discontinued (2)
- one project which, though ongoing, is funded on a needs basis (1).

A recommendation for a project to be incorporated into the annual budget of an implementing agency is an indicator of the long-term benefit of a project to the community in which it is established. The cost of such projects is estimated at £8,688,000 per annum.

Table 41 shows the number of projects mainstreamed by LDTF area.

Table 41 Number of NDST Approved Projects Mainstreamed

Local Drugs Task Force	No. of Projects	Mainstreamed²¹
Ballyfermot	33	12
Ballymun	14	10
Blanchardstown	11	9
Canal Communities	14	8

²¹ Note: Some further projects are currently being evaluated. The number incorporated into the budgets of implementing agencies is likely to increase as a result.

Clondalkin	16	12
Cork	21	13
Dublin North East	8	8
Dublin 12	12	6
Dún Laoghaire- Rathdown	19	14
Finglas/ Cabra	15	8
North Inner City	26	5
South Inner City	23	11
Tallaght	19	13
Totals	231	129

Of the 140 projects evaluated by consultants, five were merged into other projects, while six were not recommended for mainstreaming. The total cost of these was £53,940. Among other reasons, projects were not mainstreamed because of:

- Inability to attract staff with the necessary skills and experience due to the relatively low remuneration and the lack of continuity of funding ("Mediation Support Service" - South Inner City Task Force)
- Classification as a discrete, one-off training activity ("Community and Teachers, Leaders in Drug Prevention" - Ballyfermot Task Force area)
- Organisational difficulties including significant staff turnover and difficulties in obtaining copyrights to course materials ("Coolmine Community Support Group" - Blanchardstown Task Force)

An independent evaluation of the Drugs Initiative by consultants, published in October 1998, found weaknesses and deficiencies in the supporting structures and in control over projects. A key weakness was the absence from the LDTFs of Department of Education and Science representatives. This gap hampers LDTFs when discussing drugs matters in relation to local schools. According to the NDST this deficiency will be addressed in the context of a recent Government approval for structural reform of the Department of Education and Science with the establishment of a framework of local Offices. That Department is committed to providing representatives to sit on LDTFs by the end of 2001.

The funding agencies sampled in this audit were not formally consulted prior to the evaluation process. Neither were they asked for their opinions on those projects recommended or rejected for mainstream funding.

The total amount paid or committed for evaluation of the Initiative itself, or of projects funded under it, is £262,724, of which £239,244 had been expended in the period 1997 to end 2000. Most of this expenditure, £167,240, was paid to evaluators and consultants for the evaluation of specific projects. Consultants were paid £88,930 for evaluating the LDTFs and the Initiative as a whole. Miscellaneous evaluation expenditure amounted to £6,554.

Specific Projects

The audit team visited 7 projects that had been evaluated for mainstreaming and one that had not. While each project was established with differing objectives, a number of general observations regarding the operations and effectiveness of activities funded under the Initiative may be made.

- Projects are not following up the progress of past participants in the community, to the extent

desirable, to produce meaningful feedback for fine-tuning the Initiative in future. Contact with such participants tended to be informal and unfunded by the Initiative.

- The level of potential participation in projects was either unknown, or not established, in a number of cases. In the absence of targets against which to measure performance, it is not possible to indicate the overall success of projects.
- A number of projects complained of inability to recruit and retain suitably qualified staff. This presented difficulties for projects in achieving their objectives.

The following is a short summary of observations on the specific drugs projects visited

Aisling (Ballymun LDTF)

The objectives of the project were to provide a school based support for children of the area who are or may be at risk due to their family involvement with drugs. Over £97,000 was provided under the Initiative, with £114,000 being provided under an EU scheme and from other sources.

With a school year capacity of 52 children, ranging in ages 8 to 12 year old, almost all of the places available have been taken up. The project evaluator indicated that a further 50 children were on the waiting list for places.

The evaluator listed a number of positive outcomes of the project including prevention of school drop-out, and increases in self-esteem for the children concerned.

Community Response (South Inner City LDTF)

The project aimed to train local people to participate in the development and delivery of local drugs services. The project drew down £92,000 under the Initiative. However, due to substantial delays reported by the project in drawing down funds, it was subsidised by its parent body for about 3 months in 1998. During this time, the project was unable to recruit employees for approximately 5 months. Sixteen people successfully completed the first training course.

City Quay and Westland Row Youth (South Inner City LDTF)

This project drew down almost £81,000 in the period concerned to provide a youth worker and support services to educate young people in the area on the drugs issue.

As the project is a sub-activity of the overall St. Andrew's Resource Centre in the area, there was no separate evaluation of the work of the employee recruited.

Gateway (South Inner City)

The project is integrated into the Merchant's Quay Project. It received £208,000 in Initiative funding with an objective of allowing chaotic drug users to access treatment. Each programme in the project runs for 12 weeks.

Set up to cater for 15 participants, at its commencement in 1998 the project has reported a high participation rate of 14 at the end of 1999 with a low of 9 at the end of 2000. The project was set up to service the South Inner City area and this has had an adverse impact on client numbers attending. Also, an average attendance, initially recorded as 45 days, had fallen to 13 days per client a year later.

Promotional Campaign (Ballymun LDTF)

The overall objective of the project was to inform people in the area about the drugs issue. The project drew down £30,000 from the Initiative. At the time of examination, the project had not been evaluated.

Ringsend and District Response to Drugs (South Inner City LDTF)

The aim of the project was to provide a drug-free rehabilitation centre. It drew down £192,000 up to the end of 2000. The funding supports one project co-ordinator and one project worker, together with associated administration costs. Of 52 participants in total, 18 have succeeded in gaining full-time employment.

The evaluator of the project noted that there has been a history of internal conflict and local opposition which constrained development. The evaluator also recommended that the LDTF should provide more effective support to the project.

Springboard (Ballymun LDTF)

£217,000 was drawn down by this project to the end of 2000. It was established to support drug-users who had not yet presented for treatment and ERHA waiting list clients. However, due to lack of support from the ERHA, the objectives were re-evaluated to provide a community support to individuals who were linked to existing services.

The project promoters did not know the size of the potential client base, being able to record only those contacted. Statistics were only available for 1999 which showed 95 males and 187 females contacted by the project workers.

Urrus Addiction Training for Adults (Ballymun LDTF)

Through drugs training courses, the project teaches skills to area residents closest to people affected by drugs. A target participation rate was not set by the project, however, although a benchmark for success was stated to be the number of participants and applicants for the courses.

Since funding commenced, 1256 participants have been served by the project, including 822 parents, 32 young people and 402 community professionals. The evaluator noted that there was a shortage of quality and continuously available staff.

Conclusions

The Drugs Initiative was conceived by Government as an innovative response to a major social problem requiring a co-ordinated response from several Government Departments and Agencies and the Social Partners. It has been in operation for a relatively short period of time and this inevitably presents difficulties in assessing its impact. Nonetheless some general comments on its operation to-date can be made.

- The high number of projects which were recommended for incorporation into the annual budgets of implementing agencies is indicative of the overall success of the Initiative
- Inadequate consideration was given as to how the effectiveness of the Initiative would be measured.
- Lead in times for many projects were long due to local community resistance, a shortage of skilled staff and a shortage of suitable accommodation for projects.
- Administrative and financial control arrangements were inadequately considered prior to funding.
- Funding agencies did not exercise sufficient financial management and control over projects.
- The channels used to fund projects appear to be excessively complex and should be reviewed with a view to simplification.
- This complexity has distanced the Department from its accountability for funding of the Initiative.

Observations of the National Drugs Strategy Team

It is the NDST view that many of the accounting and control deficiencies highlighted in the report arise primarily from a lack of clarity between the NDST, Department of Tourism, Sport and Recreation and the

funding agencies in relation to their respective roles in administering the funding under the Drugs Initiative.

Many of these deficiencies had been identified prior to the Comptroller and Auditor General's examination and appropriate steps are being taken to address them. In addition, the roles of the various players in administering the funding under the initiative are being reviewed in a detailed review of the operation of the Local Drugs Task Forces, which has now commenced, as well as a joint review of the NDST and the Drugs Strategy Unit of the Department of Tourism, Sport and Recreation, which is about to get underway.

The NDST point out that the arrangement whereby funding is channelled to projects through relevant State Agencies was designed to facilitate the subsequent "mainstreaming" of the projects. This arrangement ensures that the projects and the State Agencies, which will eventually take over responsibility for their funding, establish a relationship from the outset. It was the NDST's understanding that the funding agencies should take a "hands on" role in assisting the setting up and running of projects during their pilot phase, so that when they are "mainstreamed" the relationship is well established. However, the NDST acknowledge that there was some confusion as to how this role should be carried out.

Apart from the reasons outlined in the report as to why targets were not set when the Initiative was being established, the NDST re-emphasises the difficulties involved in setting such targets.

Drug misuse is a complex phenomenon. At European level each Government is working on developing indicators of problem drug use. When these indicators are fine tuned and applied it will be easier to set targets to measure effectiveness.

Furthermore, research consistently shows a direct correlation between opiate abuse and social and economic disadvantage. The majority of drug misusers left school early, are unemployed, come from dysfunctional backgrounds and have a criminal record. The Drugs Initiative is just one part of a wider response to address these issues and its success, in terms of drug reduction, is dependent on the successful implementation of a range of related initiatives.

Notwithstanding this, arising from the evaluation of the Local Drugs Task Force projects, a manual has now been developed for community groups on the planning, implementation and evaluation of drug related projects. The manual, which advises on the systems which should be put in place to eventually measure the effectiveness of the projects will be disseminated to all projects developed under the original and new Local Drugs Task Force plans.

The NDST acknowledge that the individual projects examined in the report are a representative sample from two Local Drugs Task Force areas. The NDST point out that the overall report on the 140 projects that were evaluated found "the projects were providing a very wide range of activities and were reaching large numbers of people. Despite difficulties related to premises, staffing and funding, two thirds of the projects appear to have delivered what they set out to do and half of them said they were providing additional services/activities not included in the original plan".

Observations of the Department of Tourism, Sport and Recreation

The Department takes the view that its role is to monitor the NDST's progress against stated Government Policy objectives for the Initiative, and to manage the issue of funds voted by the Oireachtas for the Initiative, as approved by Government and having regard to advices from the NDST.

The Department points out that each statutory agency should be responsible for complying with normal accountancy procedures in relation to the funds allocated to it and the Local Drugs Task Force handbook identifies the role of the agency as to see that the conditions under which the funding has been approved are complied with, prepare aggregate monthly profiles of expenditure for submission to the NDST and provide the NDST with periodic reports of income and expenditure as appropriate.

This clearly delineates the role of the various bodies and establishes that primary responsibility for ensuring compliance with the relevant regulations rests with the funding agency. The Department proposes raising the issues highlighted in my report in relation to financial management with the relevant funding agencies and the Team, in the context of the issue of future funds for the Initiative.