DSP Guidelines on Referral to a CE Drugs Rehabilitation Place

CE Drugs rehabilitation places are available only to service users who are in drugs rehabilitation and referred to a place; this is defined as individuals attending either a relevant HSE addiction service or other relevant statutory, community based or voluntary drug support service within the last year.

The standard Departmental eligibility requirements are waived based on evidence of an appropriate referral following an assessment of the applicant in the context of the National Drugs Rehabilitation Implementation Committee Care and Case Management Framework (NDRIC) and as reflected in the CE 9 Point Agreement for the delivery of the CE drugs rehabilitation places.

Steps to Referral

1. The local practitioner (Key Worker or Case Manager, Counsellor, GP, Treatment Centre practitioner, Health Service practitioner; etc.) identifies through the course of assessment and care planning with the service user that a CE scheme is an appropriate intervention to support rehabilitation and progression.

2. The local practitioner works through the CE Referral Form with the service user, explaining the purpose of the referral and with the service user’s agreement forwards the completed form together with the service user’s signed Information Release Consent Form to the CE Scheme.

3. The referral practitioner may initially contact the CE Supervisor to notify her/him of the referral. In this case, the service user is invited for an interview by the Supervisor or the service user may make direct contact with the Scheme seeking an interview.

4. The service user must register with her/his local DSP Intreo/Employment Services Office

5. In the case of a CE Scheme with a specific focus on drugs rehabilitation, where an interagency support service is available, an initial meeting may take place with the project support worker who will further explore the issues identified on the CE referral form - current drugs status; history; motivation; treatment status and any special needs in order to assess the service user’s suitability for that particular CE Scheme. In certain schemes there are minimum drug entry requirements, such as defined entry level methadone levels etc.

6. The CE Supervisor and Sponsor interview the applicant to explain the goals, opportunities and demands of participation on CE. The Supervisor determines the applicant’s history in relation to any previous participation on CE and any relevant issues.

7. Where CE is deemed the appropriate progression step, the CE eligibility form is completed, signed-off by the Scheme Sponsor and sent together with the referral form to the DSP Officer.
8. The DSP Officer agrees a start date with the Supervisor. The Supervisor works through the contract with the applicant. Both sign-off on the agreement. The participant begins the programme with a period of formal induction and self-assessment.

9. During their time on CE, the participant works through their own Individual Learner Plan. For people with a poor history of learning and for those who experience a sense of marginalisation, the ILP provides a formal record for the learner of their efforts and achievements at all stages of participation. This improves motivation and self-esteem, providing a personal record of progression towards rehabilitation and re-integration.

Please note:

- In the past, evidence of referral, such as a GP's letter, which may be deemed to contain sensitive personal information, was held on the Scheme for ‘sighting’ by the DSP Officer. The new DSP referral form is designed to rationalise the application process. Letters of referral may still come into the Scheme. These should be kept securely by the Scheme for monitoring.