

## DOC 3.4: Introduction to the Good Practice Study

A good practice (GP) can be a lot of things, from an overall attitude to a single case management practice, and from a juridical disposition to a type of group meeting.

In short, it is a practice you observe when you visit an institution which seems of peculiar interest to you. It is not necessarily directly related to your learning objectives, but it appeals to your professional experience and you'd like to deepen your understanding of it.

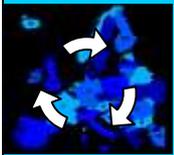
Good practices is about analyzing and explaining why something works, why something is a success. Questions like “what are we good at?” and “Why does it work so well?”, are central elements in the analysis.

Typically, your study goes in three phases:

### 1. choose a good practice

While visiting your host institution, **choose a good practice**, state its general objective, explain why you chose it, and select the eventual TC standards it is related to...

<b>Name of the Good Practice (GP):</b>	EVENING PROGRAMME FOR ADDICTED PEOPLE IN SANTIAGO
<b>Name of the Host Institution:</b>	Projecto Hombre
<b>Dates of the traineeship:</b>	09-12/04/2008
<b>General objective of the GP:</b>	Realising a process oriented to personal autonomy and social integration
<b>Topic to which the GP is related:</b>	Services in TC
<b>Reason for choosing the GP:</b>	Recently in Solidarnost we have had a lot of demands from addicts who can't be dealt with by our programme because their profile is very different from the one we normally work on. Those people who don't take opiates, who work and whose family's background is supportive. They can't participate in our programme because ours is a day programme and they are at work during that time. At the same time they are motivated to stop taking drugs.
<b>TC standards* related to the GP (Physical Environment):</b>	
<b>TC standards related to the GP (staff):</b>	

 <b>ecett</b>	Period of traineeship	1-week		
		Trainee	Host	Helpdesk
	Name of person			
	Mobile phone			
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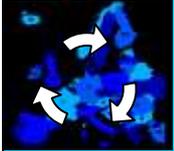
<b>TC standards related to the GP (Joining and Leaving):</b>	
<b>TC standards related to the GP (Therapeutic Environment):</b>	
<b>TC standards related to the GP (Treatment Programme):</b>	
<b>TC standards related to the GP (External Relations):</b>	

\* the *Service Standards for Addiction Therapeutic Communities* (Communities of Communities, 2006) are widely recognised standards for good practices in TC. You can download them in this GP module. Have a look at them and select those related to your GP.

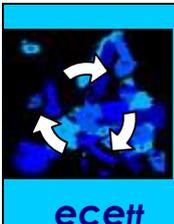
## 2. describe your good practice

*Then, describe the good practice you observed. Try to do this in cooperation with your host coordinator.*

<b>Description of the GP (+/- 500 words):</b>	<p>The evening programme is based in Santiago de Compostela, Galicia, Spain. The programme started in the year 2000 as an adequate response to a new profile of addiction which became increasingly dominant during the late 1990s as compare with the heroin addicted. In addition, the existing therapeutic structures were not able to cope with the new reality because these addicts preserve their family structures and their job provoking numerous therapeutic failures.</p> <p>The duration of the programme is about 22 moths and depends on the process. The users come to the programme 2 or 3 times a week during the first 2 phases and only once a week during the third phase. During the first two phases they have 3 or 4 sessions when they wok the important events from their past.</p> <p>The programme has 3 phases. The first one covers 6 months; the second - 8 months, the</p>
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	<p>third - 8 months. During the transition from one phase to other the users make an evaluation which is read and shared with the group. At the moment there are 130 participants. The main activities are self-help groups, work activities, social visits, seminars, individual's sessions.</p> <p>The social integration starts from the very beginning of the therapy. The second phase puts the stress on social integration by finding the appropriate activities for each participant which could lead him to personal satisfaction. Family and close friends are part of the therapy taking part in communication groups and individual sessions for parents and relatives. All this is an essential part of the process. The family, the friends and the partners have the opportunity to participate in the self-help groups.</p>
<b>Type of target group:</b>	Young users of cocaine and their families
<b>Description of target group:</b>	Man (70 %), , about 31 having secondary education, with the stable family, permanent partner, children (50 %), job, with low level of understanding of their problem, debt, and with accompanying health problem (anxiety, depressions, dysfunctions...)
<b>Means:</b>	Method of work with cocaine addicted a therapeutic programme with procedures and tools.
<b>Skills involved for the staff:</b>	Knowledge about the addiction, the profile of the addicts and their families, skills for carrying out a therapeutic plan and case management
<b>Resources (Human, tools, financial...):</b>	Trained therapeutic team, premises, a well balanced budget for the programme, therapeutic tools and procedures
<b>Notes:</b>	Each group is led by therapist. A single therapist can be in charge of three groups a week.

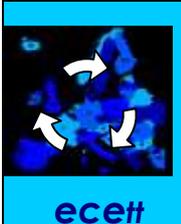
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<b>Hypothesis/risks:</b>	It might happen that a lot an effort could be needed for setting up a well structured group. Lack of suitable premises could be a risk. In that case additional funds should be provided.
<b>Comparison with own practice (+/- 200 words):</b>	In Bulgaria there is no such practice for cocaine addicts.

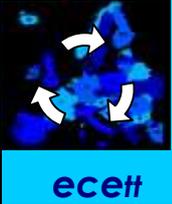
### 3. Critical analysis of the good practice

And finally, still together with your host coordinator, **make a critical analysis** of the good practice, considering the following:

<b>Why is this a Good Practice? (+/- 200 words):</b>	Because it allows us to cope with a lot number of demands and because of success obtained (relative and real); because it response of severe social problem. The response achieved is based on the good results and not only on the good practice, which goes to show there must be a continuous observation outside the programme. The programme complies with the standards of the good practice
<b>Is the GP achievable?:</b>	Yes, the programme can be transferred. Through diagnostic interviews and if there exists a structural profile of the client such a programme can be started and latter adapted for the context.
<b>Is it realistic?:</b>	Yes because it responds to the actual need of the young people.
<b>Is it critical to the quality of the TC?:</b>	Yes, the basic difference between the T.C. and the evening programme is the non residential character of the evening programme and the profile of the clients; the easy adaptation to the users life and work and inclusion in the programme an external elements (such a family, partners...) without the necessity of leaving their social environment.
<b>What are the benefits?:</b>	Covering the profile of young addicts not included in the programme of the TC and

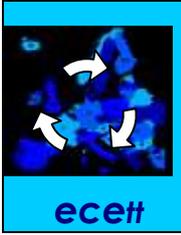
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	<p>day centres. They can make a therapeutic programme without leaving your work and family. The recovery process includes the family, relatives and partners.</p>
<p><b>Is there 1 path or more paths?:</b></p>	<p>There are different ways to setting up such a programme. One of them can be the model of Projecto Hombre. Another one can use the model of day programmes but adapted for a evening programmes.</p>
<p><b>Is it understandable?:</b></p>	<p>Yes the reasons for setting up such a programme are comprehensible and realistic.</p>
<p><b>Is it measurable?:</b></p>	<p>Yes, in 2007 Projecto Hombre published a report on evaluating the treatment programmes for cocaine addicts. The report covers 26 centres of their network and there was a consensus about the objectives of investigation.</p>
<p><b>Is it adaptable to a range of settings?:</b></p>	<p>Yes, because Solidarnost already has 2 functioning groups of users who go to work. We have to think about providing a most structured programme which should integrate the principles of evening programme for the cocaine addicts.</p>
<p><b>Would the implementation of this GP in your institution be desirable and why?</b></p>	<p>Yes, because for the last 5 months we have had very few demands from opiates addicts. On the contrary, the numbers of persons consuming amphetamines and cocaine and at the same time go to work increases.</p>
<p><b>Could you suggest a link about the GP?:</b></p>	<p>Non</p>
<p><b>Do you have a picture describing the GP?:</b></p>	<p>Non</p>
<p><b>Do you have another picture describing the GP?:</b></p>	<p>Non</p>

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At last, you will have produced one complete good practice study. To be recognized as an ECEtt good practice it will have to be assessed by a Jury of ECEtt Tutors (May 2008).

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	Period of traineeship		Host institution + place	
		Trainee	Host	Helpdesk
	Name of person			
	Mobile phone			
	Email			