# Needle and Syringe Program Annual Report 2019-20

Western Australia

1 July 2019 – 30 June 2020

# **Acknowledgements**

The information included in this report has been provided by NSP Coordinators and program staff. The Sexual Health and Blood-borne Virus Program (SHBBVP) thanks each respondent for their input into the 2019-20 NSP Annual Report. NSP Coordinators and staff should be commended for their work conducted throughout 2019-20 and the SHBBVP look forward to working with these teams again in 2020-21.

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# 1.0 Executive Summary

This report assists the Department of Health's Sexual Health and Blood-borne Virus Program (SHBBVP) in its system manager support role of planning, managing and monitoring of the statewide needle and syringe program (NSP). It is a requirement under the *Medicines and Poisons Regulations 2016* for all NSP coordinators to submit an annual report on the program.

As of 30 June 2020, there were 102 total NSP approvals held under the *Medicines and Poisons Regulations 2016*. Out of these NSP approvals, a response was required for 89 approvals for the 2019-20 year. The remaining approvals were exempt from submitting an NSP annual report for 2019-20, as they provide regular reporting as part of Service Agreements held with the SHBBVP. The 2019-20 reporting period saw 100% compliance, with 88 NSP coordinators completing a report and one NSP coordinator submitting a 'nil activity' response.

Key findings of the coordinators responses for the 2019-20 report include:

- only three sites reported changes to their operating hours due to COVID-19
- changes to service delivery during the COVID-19 pandemic were made by 26% of sites
- educational materials/resources were distributed by 74%
- referrals to other services were made by 16% of sites
- 13% of sites that only provided the FITSTICK® product, reported clients requested additional equipment
- 16% of coordinators reported issues with disposal
- issues with NSP clients were reported by 9% of respondents
- only 7% reported issues with NSP staff
- only three coordinators reported issues coordinating their NSP
- 73% engaged in at least one form of professional development
- 75% undertook at least one activity to enhance their NSP
- 8% indicated that they would benefit from additional support from the SHBBVP for their NSP, which included training, resources and disposal meetings.

Suggestions for service enhancement from participants included:

- more training and education opportunities for staff
- improved community engagement and education
- · a greater variety of injecting equipment available for clients
- provision of safe disposal units on site and in the community for public use
- more educational and referral resources with distributed equipment.

NSP coordinators reported various levels of satisfaction in the function of their NSP with 19% reporting they were very satisfied, 64% reporting they were satisfied, and 17% reporting neutral satisfaction.

# 2.0 Introduction

NSPs are a highly successful harm reduction strategy that aims to reduce the transmission of HIV, hepatitis B and hepatitis C by the provision of sterile injecting equipment to people who inject drugs (PWID).

NSPs are supported by the following state and national blood-borne virus (BBV) strategies:

- WA Hepatitis C Strategy 2019–2023
- WA Hepatitis B Strategy 2019–2023
- WA HIV Strategy 2019–2023
- WA Aboriginal Sexual Health and BBV Strategy 2019-2023
- Fifth National Aboriginal and Torres Strait Islander Blood-borne Viruses and Sexually Transmissible Infections Strategy 2018–2022
- Fifth National Hepatitis C Strategy 2018–2022
- Third National Hepatitis B Strategy 2018–2022
- Eighth National HIV Strategy 2018-2022

NSP's are also supported by the following state and national drug strategies:

- WA Alcohol and Drug Interagency Strategy 2018-2022
- National Drug Strategy 2017-2026.

In WA, there are currently four models of NSP operating:

- Needle and syringe exchange programs (NSEPs) supply free sterile needles and syringes conditional on the return of used items (i.e. exchanged) or a cost recovery may apply.
- NSPs outlets such as regional and rural hospitals, public health units, community health centres and non-government agencies that provide access to free sterile needles and syringes as a component of their service.
- Pharmacy-based NSPs run on a commercial basis via the retail of sterile needles and syringes.
- Needle and Syringe Vending/Dispensing Machines (NSVM/NSDMs) a self-service device which either vends sterile injecting equipment on a cost-recovery basis (NSVM) or dispenses sterile injecting equipment for free (NSDM).

In terms of needle and syringe distribution in Western Australia, Table 1 and Figure 1 in Appendix A show a slight increase in the distribution of needles and syringes between 2018-19 and 2019-20, with slight fluctuations in distribution noticeable over the past five years.

The SHBBVP coordinates the prevention and control of sexually transmitted infections (STIs) and BBVs in Western Australia, which includes planning, managing, and monitoring the statewide NSP.

The SHBBVP provides support to NSP coordinators and staff through the following:

- supply of safe injecting equipment
- phone and e-mail support for NSP related issues
- fund organisations to provide blood-borne virus training to pharmacists and NSP staff
- face-to-face NSP training course provision
- an online orientation and training package for NSP coordinators and pharmacies
- NSP newsletter
- bi-monthly video conferences with NSP Regional Coordinators.

The *Medicines and Poisons Regulations 2016* stipulate that NSP coordinators are required to submit an annual report to the CEO, Department of Health. The report provides an opportunity for NSP coordinators to raise any issues encountered during the financial year and assists SHBBVP in its system manager support role of planning, managing and monitoring of the statewide NSP.

There were 11 organisations that provide NSP and/or NSEP that were exempt from submitting an NSP annual report for 2019-20, as they provide regular reporting as part of service agreements held with the SHBBVP. These exempt services included Peer Based Harm Reduction WA sites, WA AIDS Council (WAAC) sites, Palmerston Mandurah, Goldfields Population Health Unit, Hedland Well Women's Centre (HWWC), HepatitisWA, the Great Southern Population Health Unit, Magenta/Sex Worker Outreach Project WA (SWOPWA), the Midwest Community Alcohol Drug Service, and the Pilbara Population Health Unit. The Pharmacy Registration Board of WA was also exempted from submitting an annual report.

The following sections are a summary of the methods and results, as reported by NSP Coordinators through the submission of NSP annual reports for 2019-20. Past summary reports have reflected on service provision methods, including distribution of printed materials and resources, client referral, additional equipment requested by clients, disposal and operational issues as well as professional development and suggestions for service enhancement. For this report comparisons have been made to previous reporting periods.

# 3.0 Methodology

The SHBBVP provided NSP Coordinators with the *NSP Annual Report 2019-20 pro-forma* (Appendix D) which comprised of 30 questions about the activities and operations of the NSP during the reporting period as well as the impact of COVID-19. Key topics included service provision, disposal matters, operational matters, professional development and general service matters. Reports were required to be completed before 28 August 2020, although six sites were granted extensions.

The report pro-forma was available to complete online through SurveyMonkey, and there was also an option for coordinators to return reports via email or mail for those unable to access the online survey. For 2019-20, 88 reports were completed through SurveyMonkey (87 completed in 2018-19) and one site submitted a nil activity response. The findings detailed in this report were analysed using thematic analysis and categorised into themes and sub-themes from which conclusions were drawn.

# 4.0 Key Findings

### 4.1 Response rate

Eighty-nine services were required to complete a 2019-20 NSP annual report. This does not include the services previously noted as not being required to submit an annual report. In addition, approximately 600 additional community pharmacies retail packaged injecting equipment under a single blanket approval held by the Pharmacy Registration Board of Western Australia.

Eighty-nine coordinators (100% response rate) returned a response within the parameters of the reporting period (see *Appendix B: Participating needle and syringe programs*, for a list of these NSPs). One service submitted a nil activity response as noted earlier. NSP coordinators must either complete a report or provide a nil activity response if no activity was recorded during the reporting period. Submitting an annual report is a requirement of the *Medicines and Poisons Regulations 2016*.

Table 1 shows that the response rate has remained high over the past three years with only 2018-19 not meeting the target compliance rate of 100%.

| Reporting Period | Number of required responses | Number of reports completed | Number of<br>'nil activity'<br>responses | Total number of responses |
|------------------|------------------------------|-----------------------------|--|---------------------------|
| 2017-18          | 89                           | 88 (98.9%)                  | 1 (1.1%)                                 | 89 (100%)                 |
| 2018-19          | 88                           | 87 (98.9%)                  | 0 (0%)                                   | 87 (98.9%)                |
| 2019-20          | 89                           | 88 (98.9%)                  | 1 (1.1%)                                 | 89 (100%)                 |

**Table 1: Annual Report Response Rate** 

#### 4.2 COVID-19

The COVID-19 pandemic led to physical distance restrictions and travel restrictions interstate and intrastate. Only three NSPs were unable to operate during the COVID-19 restrictions, most NSPs were able to remain open throughout the duration of the different phases of restrictions. Some sites made changes to service delivery to ensure compliance with physical distancing restrictions. Table 2 outlines the proportion of sites that made changes to their NSP during the COVID-19 pandemic in this reporting period. Table 1 of Appendix C has a breakdown of changes to service delivery.

Table 2: COVID-19

| Reporting Period | Operating hours change | Changes to<br>service delivery |
|------------------|------------------------|--------------------------------|
| 2019-20          | 3 (3.4%)               | 23 (26.1%)                     |

Note: Some sites indicated their NSP had made changes to the operating hours. However, when asked to describe the changes, some of those sites responded that their NSP had made no changes to their operating hours. Therefore, those sites were not counted towards the sites that made changes to operating hours.

Coordinators were asked if there were any other issues related to COVID-19 for their NSP. Ten respondents described other issues related to COVID-19. The issues were grouped together and themes included:

- changes to FITSTICK® packing
- reduced demand for equipment, possibly due to reduced supply of drugs
- changes due to COVID-19 restrictions impacting client access.

#### **4.2 Service Provision**

All NSPs that completed the NSP annual report for 2019-20 distributed injecting equipment to PWID during the reporting period. Equipment was distributed most commonly as pre-packaged kits (such as FITSTICK® products), whereas some NSPs distributed loose needles and syringes, or a mix of loose needles and syringes and pre-packaged kits, as specified by their NSP approval issued by the Department of Health. All needles and syringes are required to be distributed along with a disposable receptacle.

Resources and referrals from NSP are usually offered at the request of clients, although some NSPs have printed resources available to browse or take away. Table 3 shows that for each of the categories, the figures remain relatively stable across the three reporting periods. A breakdown of referrals and resources provided can be seen in Table 2 and Figure 2 of Appendix C respectively.

**Table 3: Service Provision at NSPs** 

| Reporting Period | Printed Materials, Resources<br>& Information | Referrals to Other Services |
|------------------|---|-----------------------------|
| 2017-18          | 69 (78%)                                      | 13 (15%)                    |
| 2018-19          | 61 (70%)                                      | 13 (15%)                    |
| 2019-20          | 65 (74%)                                      | 14 (16%)                    |

Table 4 (below) shows that requests for additional equipment had have decreased compared to 2018-19. A breakdown of the equipment can be seen in Table 3 of Appendix C.

**Table 4: Requests for Additional Equipment at NSPs** 

| Reporting Period | Requests (%) |
|------------------|--------------|
| 2017-18          | 12 (14%)     |
| 2018-19          | 16 (18%)     |
| 2019-20          | 10 (11%)     |

### 4.3 Disposal Matters

Fourteen NSP coordinators (16%) reported issues experienced regarding needle and syringe disposal over the past 12 months. This is similar with the last reporting period as seen in Table 5. A further breakdown on the issues reported can be seen in Table 4 of Appendix C.

**Table 5: Disposal Issues** 

| Reporting Period | Issues Reported<br>(%) |
|------------------|------------------------|
| 2017-18          | 14 (16%)               |
| 2018-19          | 14 (16%)               |
| 2019-20          | 14 (16%)               |

NSP coordinators were asked about the availability, location and awareness of sharps disposal bins. Less than half of NSP coordinators said that sharps disposal bins were available at the NSP site for public use. Most NSP coordinators were aware of the locations of sharps disposal bins within their community. Table 6 shows a further breakdown.

Table 6: Availability of Sharps Disposal Bins at NSP site for Public Use

| Sharps disposal bin availability                                   | Number of respondents |
|--|-----------------------|
| Availability of sharps disposal bins at NSP site for public use    |                       |
| Available  | 43 (49%)              |
| Not available  | 42 (48%)              |
| Unsure   | 3 (3%)                |
| Location of sharps disposal bins if available                      |                       |
| Inside the health facility   | 34 (79%)              |
| Outside the health facility building/s (within grounds)            | 14 (33%)              |
| Unsure   | 0 (0%)                |
| Other  | 6 (9%)                |
| Aware of sharps disposal bin locations (excluding health facility) |                       |
| Yes  | 58 (65%)              |
| No   | 17 (19%)              |
| N/A (no safe disposal bins available in community)                 | 13 (15%)              |

Note: Multiple responses possible, Other responses included public toilets, in the NSEP, and inside the premise but outside the office.

### **4.4 Operational Matters**

NSP coordinators were asked whether any operational issues were experienced over the 2018-19 reporting period. Table 7 (page 9) outlines the issues encountered and number of respondents over the past three reporting periods. Refer to Table 6 of Appendix C for a further breakdown.

**Table 7: Service Provision** 

| Issues with: | Clients (%) | Staff (%) | NSP Coordination (%) |
|--------------|-------------|-----------|----------------------|
| 2017-18      | 7 (8%)      | 6 (7%)    | 5 (6%)               |
| 2018-19      | 7 (8%)      | 2 (2%)    | 5 (6%)               |
| 2019-20      | 8 (9%)      | 6 (7%)    | 3 (3%)               |

Compared to the previous year, issues experienced with clients remained stable while issues with staff increased. Issues in NSP coordination also decreased.

### **4.5 Professional Development**

As stipulated within the *Medicines and Poisons Regulations 2016*, an NSP Coordinator must understand their duties as the coordinator of the program and must ensure that persons who participate in the conduct of the program understand the requirements of the regulations and are appropriately instructed and trained. The SHBBVP provides information about training opportunities for new coordinators, and ongoing professional development is encouraged. For this report, 65 out of 88 coordinators participated in some form of professional development regarding NSP (Table 8). This shows some decrease compared to the two previous reporting periods.

Table 8: Participation in Professional Development by NSP coordinators

| Reporting Period | Response<br>(%) |
|------------------|-----------------|
| 2017-18          | 77 (88%)        |
| 2018-19          | 65 (75%)        |
| 2019-20          | 65 (74%)        |

For a breakdown on the professional development undertaken by NSP coordinators, refer to Table 7 of Appendix C.

#### 4.6 Service Enhancement

Sixty-six NSP coordinators (75%) reported activities undertaken to enhance their NSP in 2019-20 (Table 9). The proportion of NSP coordinators reporting enhancements has increased compared to the previous reporting period. However, this is still lower than the 2017-2018 reporting period.

Table 9: Number of activities undertaken to enhance NSP

| Reporting Period | Response (%) |
|------------------|--------------|
| 2017-18          | 72 (82%)     |
| 2018-19          | 61 (70%)     |
| 2019-20          | 66 (75%)     |

For a breakdown on the activities undertaken, refer to Table 8 of Appendix C.

### 4.7 Suggestions for service enhancement

In addition to reporting on activities undertaken, the NSP report pro-forma also provides coordinators the opportunity to raise issues and suggest ways to improve the operation of their NSP. There were 29 respondents that provided suggestions for improving their NSP. The following suggestions have been grouped by themes:

- maintenance and further training on NSP for coordinator and other staff, particularly in regional and remote areas
- improved community engagement and education
- provide a greater variety of injecting equipment available for clients
- provision of safe disposal units on site and in the community for public use
- more educational and referral resources with distributed equipment
- improved alcohol and other drug services
- increase the number of brief interventions with clients
- include brochures and information within FITSTICK® packs
- increase availability of sharps disposal bins
- installation or improvement of NSVM/NSDM

### 4.8 Support provided by SHBBVP

Seven NSP coordinators (8%) indicated they would benefit from additional support specifically from SHBBVP for their NSP. Their suggestions included that the SHBBVP:

- provide increased training and workforce development opportunities related to NSP
- collaborate with local councils to implement safe disposal units within community
- provide general support and updates on recent trends and information.

For 2019-20 there were some increases compared to the previous year in satisfaction among participants with how their NSP operated within the community. Seventeen respondents (19%) were very satisfied, fifty-six respondents (64%) were satisfied, fifteen respondents (17%) were neutral and no respondents were dissatisfied or very dissatisfied (Figure 1). This shows a slight increase in satisfaction among NSP coordinators compared to 2018-19 which had thirteen respondents (15%) were very satisfied, fifty-five respondents (63%) satisfied, eighteen respondents (21%) neutral, and one respondent indicated they were dissatisfied.

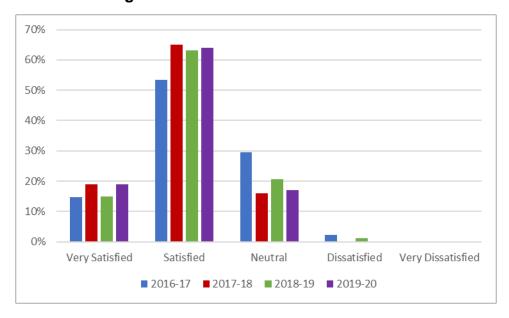


Figure 1: NSP coordinator satisfaction

# 5.0 Conclusions and recommendations

The SHBBVP notes the suggestions for improving NSP in WA and the requests for additional assistance. SHBBVP in collaboration with the Mental Health Commission have developed both Generic and Pharmacy Online NSP Orientation and Training Packages, which can be accessed at: <a href="http://aodelearning.mhc.wa.gov.au/">http://aodelearning.mhc.wa.gov.au/</a>.

These packages were recently updated with new information and resources.

SHBBVP also provide a two-day face to face NSP training course annually in collaboration with the MHC. Unfortunately due to COVID-19 restrictions, the 2020 training could not be held. For more information regarding training for 2020-21, please contact SHBBVP on (08) 9222 2355 or e-mail NSP@health.wa.gov.au.

MHC's Workforce Development also offers a range of training focusing on alcohol and other drug related issues. Information on their upcoming training events can be accessed below: <a href="https://www.mhc.wa.gov.au/training-and-events/training-for-professionals/alcohol-and-other-drug-training/">https://www.mhc.wa.gov.au/training-and-events/training-for-professionals/alcohol-and-other-drug-training/</a>.

If further NSP related training is required, it is recommended that all regional enquiries are directed to the appropriate Regional NSP Coordinator. SHBBVP can advise and/or support the Regional NSP Coordinators with arranging training if required. The Regional NSP Coordinator can assist with other matters including issues with needle and syringe vending/dispensing machines, staff who may have moral objection or anxiety distributing needles and syringes, questions around protocol or guidelines for NSPs and general support relating to NSPs.

For safe disposal issues, SHBBVP advises enquiries to be initially directed to the Regional NSP Coordinator and for collaborative work to be undertaken with the local government authority where possible. SHBBVP can provide contact details for the Regional NSP Coordinators if required.

For metropolitan enquiries, please contact SHBBVP on (08) 9222 2355 or e-mail NSP@health.wa.gov.au.

WA Health Quickmail provides all STI/BBV resources as downloads and depending on stock levels, also in hard copy. NSP coordinators and health service providers can access the free online ordering system: <a href="http://dohquickmail.com.au/">http://dohquickmail.com.au/</a>

Additional resources are available from key partner organisations in the sector including <u>WA AIDS Council (WAAC)</u>, <u>Peer Based Harm Reduction WA</u>, <u>HepatitisWA</u> and the <u>Mental Health Commission</u>. The SHBBVP will continue to work in collaboration with these organisations to develop new resources and update existing resources to meet the needs of the community.

Currently, the guidelines template to assist NSP sites in their operation, is under review and an updated version will be released alongside a new Mandatory Policy for NSP provision in WA. The guidelines aim to support NSP coordinators in their role as well as address issues related to NSPs.

The delivery of sterile injecting equipment to PWID, through NSPs, contributes greatly in reducing the transmission of BBVs in Western Australia. Continued provision of relevant information and referrals to key internal and external health and community services is vital to the success of the program. This report indicated an increase in issues with staff operating the NSP, whilst issues with clients remained relatively stable, and issues in coordinating the NSP declined. NSP coordinators participated in less professional development compared to previous years. Notably the face-to-face NSP training for 2020 was postponed due to COVID-19 restrictions, reducing the availability of professional development for NSP coordinators. Overall, there was an increase in satisfaction among NSP coordinators with how their NSP operates in the community, and the SHBBVP continually aims to support NSP Coordinators in the delivery of NSP across the state.

# **Appendix A: WA NSP Distribution**

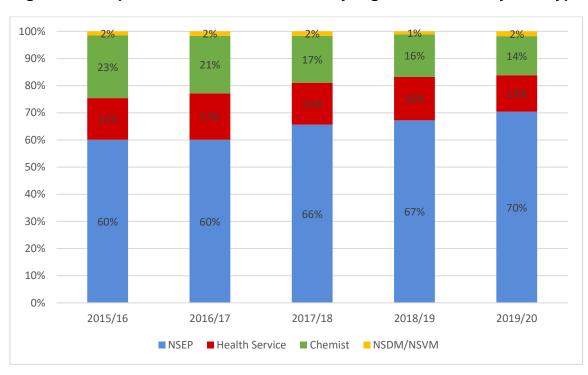
The following table and graph show an increase in needle and syringe distribution across the state. Pharmacies saw a decline in distribution numbers, while NSEPs have seen a substantial increase.

Table 1.0 Needle and syringe distributions by NSP type

|           | 2015-16   | 2016-17   | 2017-18   | 2018-19   | 2019-20   |
|-----------|-----------|-----------|-----------|-----------|-----------|
| NSEP      | 3 615 752 | 3,494 801 | 3 866 993 | 4 185 290 | 4 576 848 |
| NSP       | 924 233   | 994 484   | 907 917   | 1 012 668 | 874 509   |
| Pharmacy  | 1 386 353 | 1 232 483 | 1 017 615 | 992 868   | 932 595   |
| NSVM/NSDM | 92 200    | 94 500    | 96 900    | 70 500    | 116 400   |
| TOTAL     | 6 018 538 | 5 816 268 | 5 889 425 | 6 261 326 | 6 500 352 |

Notes: Data may vary from data published in previous reports due to ongoing data cleaning and review processes.

Figure 1.0 Proportion of total needles and syringes distributed by NSP type



The per capita (aged 15-64) rate of needles and syringes distributed for WA in 2019-20 was 3.4 needles <sup>1</sup>. The proportion of distribution from needle and syringe exchange programs have steadily increased over the past few years. The proportion of distribution from pharmacies have decreased over the past few years.

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<sup>&</sup>lt;sup>1</sup> Unpublished data for 2019/20, available upon request

# **Appendix B: Participating Sites**

| Albany Community Pharmacy                         | Kojonup Hospital                   |
|---|------------------------------------|
| Albany Regional Hospital                          | Kondinin Districts Health Service  |
| Augusta Hospital                                  | Kununoppin Health Service          |
| Beverley Hospital                                 | Lake Grace District Health Service |
| Boddington Hospital                               | Laverton District Hospital         |
| Boyup Brook Soldiers Memorial Hospital            | Leonora Community Health           |
| Bremer Bay Health Centre                          | Leonora Hospital                   |
| Bridgetown District Hospital                      | Marble Bar Nursing Post            |
| Bruce Rock Memorial Hospital                      | Margaret River District Hospital   |
| Bunbury Regional Hospital                         | Meekatharra Hospital               |
| Busselton Hospital                                | Merredin District Hospital         |
| Caring Pharmacy Cockburn                          | Moora Hospital                     |
| Carnarvon Community Alcohol Drug Service          | Morawa Perenjori Health Centre     |
| Chinatown Pharmacy                                | Mount Magnet Health Centre         |
| Cockburn Super Clinic Pharmacy                    | Mullewa Health Service             |
| Collie Health Service                             | Nannup Hospital                    |
| Coolgardie Health Centre                          | Narembeen Memorial Hospital        |
| Coral Bay Nursing Post                            | Narrogin Hospital                  |
| Corrigin District Hospital                        | Newman Hospital                    |
| Cunderdin District Hospital                       | Night and Day Pharmacy Bayswater   |
| Dalwallinu Hospital                               | Norseman Community Health Centre   |
| Denmark District Hospital                         | Norseman Hospital                  |
| Department of Health, HIV Case Management Program | Northam Regional Hospital          |
| Derbarl Yerrigan Health Service Inc               | Northampton Health Service         |
| Dongara Eneabba Mingenew Health Service           | Onslow Hospital                    |
| Donnybrook Hospital                               | Palmerston Association Katanning   |
| Dumbleyung Memorial Hospital                      | Pemberton Hospital                 |
| Esperance Population Health Centre                | Pilbara Population Health Unit     |
| Esperance Regional Hospital                       | Pingelly Hospital                  |
| Exmouth Hospital                                  | Plantagenet Hospital               |
| Fiona Stanley Hospital                            | Quairading District Hospital       |
| Geraldton Hospital                                | Ravensthorpe Hospital              |
| Gnowangerup District Hospital                     | Roebourne Hospital                 |
| Goldfields Public Health Services                 | Rottnest Island Nursing Post       |
| Goomalling District Hospital                      | Southern Cross District Hospital   |
| Great Southern Community Drug Service Team        | St Andrew's Pharmacy               |
| Harvey Hospital                                   | Tambellup Health Centre            |
| Jurien Bay Health Centre                          | Tom Price Hospital                 |
| Kalbarri Health Service                           | Wagin Hospital                     |
|   |                                    |

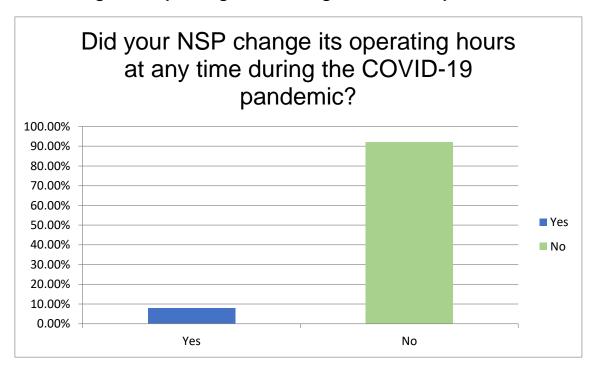
| Kalgoorlie Regional Hospital     | Warren District Hospital      |
|----------------------------------|-------------------------------|
| Kambalda Health Centre           | Wongan Hills Hospital         |
| Karratha Health campus           | Wyalkatchem District Hospital |
| Katanning Hospital               | Yirrigan Drive-In Chemist     |
| Kellerberrin Memorial Hospital   | York Hospital                 |
| Kimberley Population Health Unit |                               |

# **Appendix C: Survey Results**

### 1.0 COVID-19 impact on NSPs

#### 1.1 Operating hours during COVID-19

Figure 1: Operating hours during the COVID-19 pandemic



#### 1.2 Changes implemented to operating hours

NSP coordinators were asked to provide details of any changes made to the operating hours of the NSP during the COVID-19 pandemic. Seven responses were received, with four of those indicating they had not made any changes to the operating hours. Three sites indicated they had to close the NSP service for a period of time (roughly mid-March to June).

#### 1.3 Changes to service delivery during COVID-19

NSP coordinators were asked to provide details of any changes made to service delivery in their NSP during the COVID-19 pandemic. Twenty-three (26%) respondents indicated changes were made to service delivery. Nine services indicated consumers were screened upon arrival. This included some sites asking for contact details and travel history as well as asking about flu like symptoms. Several services indicated changes to service delivery through making hand sanitiser and increased health messages available. Three services indicated access was available by appointment alone. One site moved the access location for the NSP. See Table 1 on page 17.

Table 1: Changes to service delivery due to COVID-19

| Type of service delivery change                     | Number of NSPs that made this change |
|---|--------------------------------------|
| Concierge/screening process implemented             | 12                                   |
| Operational changes                                 | 8                                    |
| Information displays and changes to FITSTICK® packs | 2                                    |
| Service closure                                     | 1                                    |

Note: Operational changes included; hand hygiene stations, changes to the location of the NSP and staff changes.

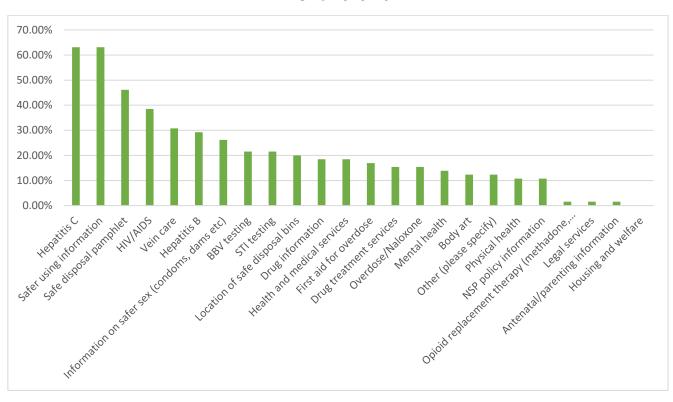
#### 1.4 Other COVID-19 related issues

NSP coordinators were asked about any other issues encountered relating to COVID-19 restrictions. Ten respondents indicated other related issues. This included; the impact of reduced drug supply, reduced anonymity and decreased client contacts during this period.

#### 2.0 Service Provision

#### 2.1 Information Distributed

Figure 2: Types of information distributed by NSPs 2019-20



Notes: Multiple responses possible. The "Other" category included overdose information, safe disposal, safer injecting fact sheets, healthy relationships, NSEP services, postal NSP services, mobile NSEP services and AOD counselling services.

#### 1.2 Referrals Provided

Table 2: Type of service clients are referred to

| Type of service referred to           | Number of NSPs<br>that made a<br>referral |
|---------------------------------------|---|
| Drug and alcohol counselling          | 12  |
| Mental health care services           | 7   |
| STI testing                           | 4   |
| BBV testing                           | 4   |
| Treatment and rehabilitation services | 3   |
| Hospital                              | 3   |
| Other medical practitioner            | 3   |
| Other (please specify)                | 3   |
| Other NSP outlet                      | 2   |
| Hepatitis service                     | 2   |
| Detoxification services               | 1   |
| Legal services                        | 1   |
| Accommodation services                | 1   |
| Sexual health service                 | 1   |
| Peer based service                    | 1   |

Note: Multiple responses possible. A total of 14 respondents completed the question. In the 'other' category, two respondents referred clients to an NSEP, another was referred to an enhanced NSP.

#### 1.3 Additional Equipment

Most NSPs that completed the NSP annual report for 2019-20 only distributed pre-packaged 'FITSTICK®' packs, a packaged product that contains five syringes and five black disposal sleeves, from their service. Over this reporting period, Ten NSP Coordinators (11%) had reported that clients had requested different equipment from what was available from their NSP at some stage.

Table 3: Most commonly requested equipment outside FITSTICK®

| Types of equipment requested | Number of requests |
|------------------------------|--------------------|
| Water                        | 6                  |
| Swabs                        | 5                  |
| Syringes                     | 3                  |
| Filters                      | 3                  |
| Spoons                       | 1                  |
| Vein cream                   | 1                  |
| Tourniquets                  | 1                  |
|                              |                    |

Note: Multiple responses possible.

### 3.0 Disposal Matters

NSP coordinators were asked if their NSP experienced any disposal issues and what actions were taken to resolve them. Fourteen responses (16%) were analysed and categorised into various themes seen in Table 4.

**Table 4: Disposal Issues and Actions Taken** 

| Disposal issues  | Reoccurrence of themes |  |
|--|------------------------|--|
| Used needles and syringes found incorrectly disposed of in and around hospital and health service grounds and carparks | 5                      |  |
| Incorrectly disposed of injecting equipment found in the community including parks and gardens                         | 7                      |  |
| Other  | 2                      |  |
| Actions taken to resolve disposal issues   |                        |  |
| Education and information disseminated   | 8                      |  |
| Review of disposal options   | 1                      |  |
| Collaboration with local government  | 1                      |  |

NSP coordinators were asked about the availability, location and awareness of sharps disposal bins.

Table 5: Availability of Sharps Disposal Bins at NSP site for Public Use

| Disposal issue  | No. respondents |
|---|-----------------|
| Availability of sharps disposal bins at NSP site for    |                 |
| public use  |                 |
| Available   | 43              |
| Not available   | 42              |
| Unsure  | 3               |
| Location of sharps disposal bins if available           |                 |
| Inside the health facility                              | 34              |
| Outside the health facility building/s (within grounds) | 14              |
| Unsure  | 0               |
| Other   | 4               |
| Aware of sharps disposal bin locations (excluding       |                 |
| health facility) Yes                                    | 58              |
|   |                 |
| No  | 17              |
| There are no safe disposal bins available in community  | 13              |

Note: Other respondents included public toilets as a location and one respondent indicated their disposal bins required staff assistance to access.

### 3.0 Operational Issues

NSP coordinators were asked to report any issues experienced with clients, staff, and in the NSP coordination. The responses were then analysed and categorised into the various themes seen in the table below.

**Table 6: Operational issues reported by NSP Coordinator** 

| Operational issue   | Reoccurrence of theme |
|---|-----------------------|
| Issues with clients (8 responses)   |                       |
| Disruptive/rude behaviour   | 4                     |
| Injecting drug use on site  | 1                     |
| Needle stick injury   | 1                     |
| Incorrect disposal  | 1                     |
| Requests for large quantities of equipment COVID-19 physical distancing issues          | 1<br>1                |
| Actions   |                       |
| Introduced equipment supply limits  | 1                     |
| Introduced hand hygiene stations  | 1                     |
| Re-education of staff   | 1                     |
| Incident report completed and actioned  | l                     |
| Issues with staff (6 responses)  Moral objection or anxiety to distributing needles and | 4                     |
| syringes<br>Management changes  | 1                     |
| Actions   |                       |
| Provided education and training to staff  | 2                     |
| Issues coordinating NSP (3 responses)   |                       |
| Staff resistance to deliver NSP   | 1                     |
| Supply issues with enhanced equipment   | 1                     |
| Limited capacity to focus on NSP  | 1                     |
| Actions   | 4                     |
| Transfer of services  Directive to refrain from participation in the program for        | 1                     |
| concern around quality of service delivery to clients                                   |                       |

### **4.0 Professional Development**

Sixty-five NSP coordinators participated in some form of professional development in 2019-20.

**Table 7: Professional Development by NSP Coordinators** 

| Activity  | Number of<br>responses |
|---|------------------------|
| Read NSP Information Pack                             | 36                     |
| Read printed NSP resources                            | 28                     |
| Read NSP News   | 26                     |
| Read professional publications                        | 25                     |
| Completed Online NSP Orientation and Training Package | 15                     |
| Attended seminars/lectures/workshops                  | 4                      |
| Other   | 6                      |
| None  | 23                     |

Notes: Multiple responses possible.

Other included: Enrolment in the NSP course (cancelled), NSP regional coordinator provided support, discussions with local stakeholders, and emails with the SHBBVP.

#### **5.0 General Service Matters**

#### 5.1 Activities undertaken to enhance NSP

Sixty-six NSP coordinators (75%) reported activities undertaken to enhance their NSP in 2019-20 (Table 8), This is an increase from the last reporting period which saw 61 NSP coordinators reporting activities to enhance their NSP. Multiple answers could be selected.

Table 8: Activities undertaken to enhance NSP

| Activity   | Number of responses |
|--|---------------------|
| Provided short orientation sessions for new staff                            | 35                  |
| Encouraged staff to complete Online NSP Orientation and Training Package     | 34                  |
| Established rapport and networks with regular clients                        | 17                  |
| Provided in-house staff training   | 15                  |
| Provided staff with regional specific information                            | 14                  |
| Reviewed or updated NSP guidelines   | 10                  |
| Provided debrief sessions for staff  | 8                   |
| Conducted community education sessions                                       | 4                   |
| Developed a list of harm reduction brief information questions for NSP staff | 2                   |
| Other  | 2                   |
| None   | 22                  |

Notes: Multiple responses possible.

Other included: Participated in interagency meetings, discussions with AOD services for targeting hepatitis C.

#### **5.2 NSP Coordinator Satisfaction**

NSP coordinator satisfaction is an important indicator of how an NSP is operating in the community and how staff view the program. For 2019-20, 17 participants (19%) were very satisfied, 56 participants (64%) were satisfied, and 15 participants (17%) were neutrally satisfied with how their NSP operated within the community as detailed in the below table.

**Table 9: NSP coordinator satisfaction** 

| Year    | Very<br>Satisfied | Satisfied | Neutral | Dissatisfied | Very<br>Dissatisfied | Total |
|---------|-------------------|-----------|---------|--------------|----------------------|-------|
| 2017-18 | 17                | 57        | 14      | 0            | 0                    | 88    |
| 2018-19 | 13                | 55        | 18      | 1            | 0                    | 87    |
| 2019-20 | 17                | 56        | 15      | 0            | 0                    | 88    |

#### **5.3 Suggestions for service enhancement**

Respondents provided suggestions for ways in which their NSP could be improved. The suggestions have been grouped by the following themes:

- more training and education opportunities for staff
- improved community engagement and education
- a greater variety of injecting equipment available for clients
- provision of safe disposal units on site and in the community for public use
- more educational and referral resources with distributed equipment.

Seven NSP coordinators (8%) indicated they would benefit from additional support from SHBBVP for their NSP. Their suggestions are included in Table 10.

Table 10: Support required from WA Health

| Activity  | Reoccurrence of themes |
|---|------------------------|
| Training for staff                                  | 4                      |
| More information/ referrals for clients             | 1                      |
| Regional visits to NSP                              | 1                      |
| Meetings with local council for safe disposal units | 1                      |

# **Appendix D: Report pro forma**

#### Needle and Syringe Program Annual Report 2019/20

#### **NSP** Coordinator Details

Please note that under the *Medicines and Poisons Regulations 2016* it is a condition of any needle and syringe program (NSP) approval that a report be submitted at the end of every financial year. The information provided assists in planning for the future development and expansion of NSP provision statewide.

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SurveyMonkey so it is no longer stored offshore. You may decline to provide this information by not responding to these surveys. If you do provide a survey answer you consent to storage of your survey answer offshore (outside of Australia). This means that once you have chosen to participate in the survey, the Department will not have an obligation to take reasonable steps to ensure that

SurveyMonkey does not breach the Australian Privacy Principles in relation to personal information that is given to SurveyMonkey. Access SurveyMonkey's privacy policy.

| * 1. NSP Coordinator De | etails |  |
|-------------------------|--------|--|
| Program location        |        |  |
| Program number          |        |  |
| Coordinator name        |        |  |
| Email address           |        |  |
| Phone number            |        |  |

| Needle and Syringe Program Annual Report 2019/20   |  |  |
|--|--|--|
| COVID-19   |  |  |
| The following questions are related to service impacts from the COVID-19 pandemic during the 20192020 financial year.  |  |  |
| * 2. Did your NSP change its operating hours at any time during the COVID-19 pandemic?  Yes  No  |  |  |
| * 3. What were the changes to the operating hours?  * 4. What Changes if any, did your NSP make to service delivery during the COVID-19 pandemic?  * 5. Were there any other issues related to the COVID-19 pandemic for the NSP?  Yes  No |  |  |
| * 6. What were the issues related to COVID-19?   |  |  |
| Thank you for answering questions related to COVID-19. This concludes the COVID-19 section of the survey.  |  |  |

# Needle and Syringe Program Annual Report 2019/20 Part 1. Service Provision The following questions are related to general service provision during the 2019-2020 financial year. \* 7. Did your NSP distribute any information to clients in 2019/20? \* 8. What type of information was distributed by your NSP in 2019/20? (Please select all that apply) Hepatitis C Opioid replacement therapy (methadone, suboxone etc.) Hepatitis B Drug treatment services HIV/AIDS Body art Safer using information Safe disposal pamphlet Vein care Legal services Information on safer sex (condoms, dams etc) Location of safe disposal bins Drug information Overdose/Naloxone First aid for overdose Physical health Mental health Health and medical services Housing and welfare Antenatal/parenting information BBV testing NSP policy information STI testing Other (please specify) Contact us at NSP@health.wa.gov.au for access to further information and resources relevant to your NSP. You can also use the Department of Health's Quickmail to access a variety of online and printed resources. You can also visit the following websites for information and resources: Peer Based Harm Reduction WA **HepatitisWA** WA AIDS Council Mental Health Commission Community Alcohol and Drug Services Green Book \* 9. Were any referrals made for clients in 2019/20? Yes

|   | * 10. What types of referrals were made by your NSP in 2   |   |  |  |
|---|--|---|--|--|
|   | Drug and alcohol counselling   | BBV testing   |  |  |
|   | Detoxification services  | Hospital  |  |  |
|   | Treatment and rehabilitation services  | Other medical practitioner  |  |  |
|   | Mental health care services  | HIV/AIDS service  |  |  |
|   | Legal services   | Hepatitis service   |  |  |
|   | Accommodation services   | Sexual health service   |  |  |
|   | Other NSP outlet   | Peer based service  |  |  |
|   | STI testing  |   |  |  |
|   | Other (please specify)   |   |  |  |
|   |  |   |  |  |
|   |  |   |  |  |
|   | Referrals can be as simple as providing clients with a contact number to anot  | her health service or directing a client to other services located on-site. |  |  |
|   | Contact us for more information on providing referrals to clients at NSP@health.wa.gov.au  |   |  |  |
|   | If you are unsure about what services are available in your area, you can speak to your local public health unit or closest Community Alcohol and Drug service. You can also check the Green Book for alcohol and other drug services. |   |  |  |
|   | Service. For ear also eneck the other book for alcohol and other drug service.   | ccs.  |  |  |
|   |  |   |  |  |
| * 11. If your NSP only provides Fitsticks (containing 1ml syringes), have any clients requested different injecting equipment |  |   |  |  |
|   | in 2019/20 (eg: alternative tips/needles, barrels etc)   |   |  |  |
|   | Yes  | Not Applicable  |  |  |
|   | No   |   |  |  |
| * 12. What types of equipment have been requested?  |  |   |  |  |
| 12. That types of equipment have been requested.  |  |   |  |  |
|   | L  |   |  |  |
|   |  |   |  |  |

| Needle and Syringe Program Annual Report 2019/20  |
|---|
| Part 2. Disposal Matters  |
| * 13. Has your NSP experienced any issues regarding needle and syringe disposal in 2019/20?  Yes  |
| No Yes  |
| * 14. What was the issue/s (please specify)?  |
|   |
| * 15. Was any action taken to address the issue/s (please specify)?   |
|   |
|   |
| * 16. Are sharps disposal bins available at the NSP site for public use?  |
| Yes Unsure  No  |
| * 17. Where are the safe disposal bins located? (Please select all that apply)  Inside the health facility  Unsure  |
| Outside the health facility building/s but within the grounds of the health facility  |
| Other (please specify)  |
|   |
| * 18. Are you aware of the locations of safe disposal bins in the community which are available for public use (excluding those available at your health facility)? |
| Yes There are no safe disposal bins available in the community  |
| No No   |
| Visit <a href="https://www.safesharps.org.au/">https://www.safesharps.org.au/</a> to see disposal options in your community.  |
| If there is a lack of disposal options available, you can speak with your regional NSP coordinator and local council to address safe disposal within your           |

| Needle and Syringe Program Annual Report 2019/20  |
|---|
| Part 3. Operational Matters   |
| * 19. Have any issues been experienced with NSP clients in 2019/20  Yes  No   |
| * 20. What was the issue/s (please specify)?  |
| * 21. Was any action taken to address the issue/s (please specify)?   |
| * 22. Have any issues been experienced in relation to the NSP from NSP staff in 2019/20?  Yes No  |
| * 23. What was the issue/s and was any action taken to address the issue/s (please specify)?  |
| Education and training around NSPs can help give staff a greater understanding and confidence in providing NSP services.                |
| Speak to your regional NSP coordinator about training opportunities for staff, and you can also reach out to us at NSP@health.wa.gov.au |
| * 24. Have you experienced any issues in coordinating your NSP in 2019/20? (not related to COVID-19)  Organical Yes No                  |
| * 25. What was the issue/s (please specify)?  |
| * 26. Was any action taken to address the issue/s (please specify)?   |

# Needle and Syringe Program Annual Report 2019/20 Part 4. Professional Development \* 27. What type of education and training related to NSPs have you participated in, in 2019/20? (Please select all that apply) Completed Online NSP Orientation and Training Package Read NSP News Read NSP Information on WA Health websites Attended seminars/lectures/workshops\* Read printed NSP resources None Read professional publications Other (please specify eg. title, topic and name of host organisation) If you are not already subscribed to the NSP news, send "SUBSCRIBE" to NSP@health.wa.gov.au to receive the NSP newsletter (released twice a year). Reach out to your NSP regional Coordinator for any training opportunities that may be available. You can also contact us at NSP@health.wa.gov.au to: • find out about when the next face-to-face NSP Coordinator training is on • receive updated NSP information and; • see if there are other training opportunities available. NSP online training is available here: <a href="https://aodelearning.mhc.wa.gov.au/course/index.php?categoryid=8">https://aodelearning.mhc.wa.gov.au/course/index.php?categoryid=8</a>

# Needle and Syringe Program Annual Report 2019/20 Part 5. General Service Matters \* 28. Have you done any of the following to enhance your NSP in 2019/20? (Please select all that apply) Provided short orientation sessions for new staff Conducted community education sessions Encouraged staff to complete Online NSP Orientation and Established rapport and networks with regular clients Training Package Developed a list of harm reduction brief information Provided in-house staff training questions for NSP staff Provided staff with region specific information Reviewed or updated NSP guidelines Provided debrief sessions for staff None of the above Other (please specify) \* 29. Please indicate your level of satisfaction with the way your NSP operates within your community Very Satisfied Satisfied Neutral Dissatisfied Very Dissatisfied \* 30. What suggestions do you have that may improve your NSP? \* 31. Do you require any additional support from the Department of Health for your NSP? If yes, in what ways can the Department of Health further support your NSP?

### Needle and Syringe Program Annual Report 2019/20

#### Part 6. Submission

By submitting this survey, I confirm that I have undertaken my duties as the Coordinator of an approved needle and syringe program as set out in the *Medicines and Poisons Regulations 2016*. Thank you for your assistance in completing this report and your continued contribution to NSP provision in Western Australia. For any questions please email NSP@health.wa.gov.au or call (08) 9222 2355.