

ACCREDITATION STANDARDS FOR DROP IN CENTERS IN BOSNIA AND HERZEGOVINA

AKAZ, february 2014.

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FOREWORD

With the passing of the National Action Plan for the fight against illicit drugs 2009-2013, and the adoption of the Law on the Prevention and Suppression of Drug Abuse in BiH "Official Gazzete of Bosnia and Herzegovina, 2006.", the state of Bosnia and Herzegovina clearly demonstrated its commitment to this field. One course of action and commitment of the state in this direction is the opening of drop in centers in Bosnia and Herzegovina.

Drop in centers purpose is to provide it clients a comfortable place for rest, sleep and any other needs (personal hygiene, laundry, etc.). At the center, a responsible person (drop in the operator) is always present and available for the clients. Among other things, once or twice a week, nurse, social worker and lawyer come to the drop in center to advise the clients of the center.

Clents of the Center are not only people who inject drugs, but also sex workers and former prisoners. Drop in centers organize field work (outreach) which aims to reach the target groups and to establish contact with addicts who, on their own, do not have contact with any health or social institution. Outreach work acts in the immediate environment of addicts. Outreach workers are not only college-educated people, but also people with experience in drug use that have many years of stable abstinence.

Accreditation Standards for drop in centers were created as part of the "Package of harm reduction services in Bosnia and Herzegovina" related to the UN Global Fund for HIV / AIDS, TB & Malaria project implementation. These standards rely on policies and programs and good practices to reduce the social, health and economic consequences of (mis) use of legal and illegal psychoactive substances, without them irrefutably reducing injection

drug use. Harm reduction as a program has been recognized by the World Health Organization, UNODC and the UNAIDS.

In addition to the national literature used in the preparation of these standards, international references, downloaded from the official site of EMCDDA* (European Monitoring Centre for Drugs and Drug Addiction), were used as well. The EMCDDA has existed since the 1993., and is one of the EU's decentralized agencies with headquarters in Lisbon. It gives EU member states a factual overview of the events associated with psychoactive substance abuse and offers topics for discussion.

The goal is to, throuh accreditation standards and accreditation of drop in centers, achieve for all centers in Bosnia and Herzegovina to operate and provide services to their customers at the same, guaranteed level of quality, which primarily refers to the safety of the clients and personnel at drop in centers.

*<http://www.emcdda.europa.eu/best-practice/standards/harm-reduction>

INTRODUCTION

Accreditation Standards: Form and Content

Accreditation Standards for drop in centers in Bosnia and Herzegovina contain a total of 13 standards and 87 criteria are divided into four sections as follows:

1. Center;
2. Services and interventions in the center;
3. Fieldwork (outreach);
4. Evaluation of the drop in center work success.

Standards and criteria have a specific form. Each standard has four columns, each criteria has five columns (see Figure 1):

- The Number of standard (contains two numbers: the chapter number and then the ordinal number of the standard) or the number of criteria (which has three labels: chapter number, ordinal number of standard and ordinal number of criteria);
- The Statement of standard (which defines it) or statement of criteria (which in more detail analyzes that standard);
- Instructions of standard or criteria (further emphasizes or explains the statement);
- Evidence for evaluation (present only in criteria, and state what must be provided or met during the assessment for the criteria to be fulfilled) and
- References of standard/criteria (column which lists the literature and/or national legislation to which it directly or indirectly refers and which directly or indirectly supports the statement of the standard/criteria in question).

2. – Usluge i intervencije u centru				
Standard	Izjava	Uputstvo		Reference
2.1	Centar pruža usluge koje odgovaraju dobu i sub-populaciji korisnika usluga.	Sub-populacije obuhvataju: - Nove korisnike i v. droga., - Žene, - Seksualne radnike/ce, - Beskućnike koji koriste i v. droge, - Manjinske etničke grupe.		Guidelines for services providing equipment – recommendation 3, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
Kriterij	Izjava	Uputstvo	Dokazi za ocjenu	Reference
2.1.1	U centru ne postoje ograničenja vezana za dob korisnika usluga.	Ograničenje usluga na korisnike mlađe od 16 godina. <i>Guidelines for services providing equipment, Healthier Scotland, 2010.</i>	- Intervju sa osobljem - Intervju sa korisnicima	Guidelines for services providing equipment, Healthier Scotland, 2010 Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS, february 2009
2.1.2	Centar nudi usluge koje odgovaraju dobu korisnika.		- Opservacija ocjenjivača - Intervju sa osobljem	Guidelines for services providing equipment, Healthier Scotland, 2010.
2.1.3	Osoblje centra je educirano da pruži usluge koje odgovaraju dobu korisnika.		- Opservacija ocjenjivača - Intervju sa osobljem	Reducing drug-related deaths, NHS, 2004

Figure 1: Image of the standard/criteria form

Within the standards are listed policies and procedures relating to the work within the center. Standards provide 16 policies and procedures, although it is assumed that, over time, centers will create more procedures than prescribed by the accreditation standards, since procedures are the ones that are enabling all service users to receive equal treatment, both in volume and by quality of service, and making the work easier for the personnel, by standardization of work processes. Of course, it is possible for procedures to be named and/or grouped differently, in case of similar themes, or if several procedures are overlapping in a work process of one center. Procedure, in addition to its name, has its own form, which must be fulfilled in order to be valid. This form contains:

- The date of creation or last revision,
- The date of the next planned revision (up to three years furthest),
- The seal of the center or the organization which established it,
- The signature of the responsible person (person who has written procedure) and
- A list of signatures of personnel confirming that they are familiar with the procedure and are implementing it.

Rating of standard/criteria fulfillment level

The fulfillment of the individual standard is conditioned by fulfillment of all the the criteria contained in this standard, while the fulfillment of the criteria is conditioned by presenting evidence listed in „Evidence for assessment“ column, which are necessary for the given criteria. The unconditional (full) Accreditation will be given to centers that have met 80% or more of the standards requirements, while the conditional (suspended) Accreditation will be given to those that have met more than 70% but less than 80% of the standards requirements.

As evidence of the fulfillment of the criteria, within these accreditation standards, interviews with both the staff and the clients are used, and the criteria is met if 80% (or 4 out of 5 respondents) confirms assertion stated by criteria. For other cases, the rating is done through the presentation of evidence (insight into existing documentation, policies, procedures, etc.) and inspection of the facility and/or it's equipment. Grading of the criteria fulfillment is carried out according to the scheme:

- Fully fulfilled criteria **F** 2 boda;
- Partially fulfilled criteria **P** 1 bod;
- Unfulfilled criteria **U** 0 bodova i
- Non-applicable criteria **NA** shall be exempt.

Rating of fulfillment is first time performed by the staff of the center in a process known as self-assessment, which is a way for center to determine its shortcomings in terms of fulfilling the requirements arising from the standards. Self-assessment can be repeated any number of times. When the self-assessment is satisfactory, the center is ready for external review and submits a

request to AKAZ about the term of the external review. During the process of appointing members of the evaluation team, AKAZ takes into account that there is no conflict of interest between the appointed team and the center to which the team is going.

Accreditation review conducts a team of appointed external evaluators at the external inspection of the center. The team consists of chief evaluator and a team member. These are trained professionals who have undergone AKAZ's training for external assessors. They are guided by the same evidence for fulfillment of the criteria/standard that are listed alongside the very standard/criteria. Based on the final report, the drop in center is granted full (unconditional) accreditation or conditional accreditation. If conditional accreditation is granted, the center is given a certain period of time during which it is required to fix the deficiencies in terms of meeting the standards and thus fulfill the requirements for full accreditation. If this is not done within the given deadline, the accreditation is being withheld. Also, when the fulfillment of the criteria is below 70%, accreditation is denied until the conditions are met for the issuance of the same.

Duration and monitoring of the accreditation

Accreditation is obtained for a period of three years. Within those three years, AKAZ will supervise the accredited centers through at least one unannounced external review. This review is done in the same way as the review during the external assessment, whith the purpose of determining to what extent the staff of the center abides to the requirements arising from the accreditation standards. Upon expiry of the accreditation period, the center applies

for the renewal of the accreditation and the whole process starts over again. Accredited centre has the right to: inform their clients and public about the status of accreditation, put to public scrutiny the

decision on accreditation and the accreditation mark, and request official interpretation from AKAZ in case of any questions.

1. – Drop in center				
Standard	Statement	Instruction		References
1.1	Access and working hours of the center are adapted to clients' needs.	The clients of the center must be able to easily obtain service and at a time when they need it.		Guidelines for services providing equipment, Healthier Scotland; 2010.
Criteria	Statement	Instruction	Evidence for assessment	References
1.1.1	Drop-in center has a Harm Reduction policy, which describes the objectives, mission and vision of the center.	Policy contains measures on: <ul style="list-style-type: none"> - Prevention of the population to begin with injection drug use; - support of the cessation of injection drug use, - reduction of harmful effects related to the drug use. 	- Insight into policy	Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004 Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
1.1.2	The mission and the vision of the center are clearly outlined in the premises.		- observation by assessors	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.1.3	Before the opening of center, notifications to ministries are sent.	Notification is sent to the Ministry of Health, Ministry of Internal Affairs and, eventually, to the Ministry of Social Affairs.	- Insight into a copy of sent notifications	
1.1.4	Drop-in center is easily accessible to clients.		- observation by assessors	Guidelines for services providing equipment – recommendation 2, Healthier Scotland; 2010.
1.1.5	Working hours of drop-in center are adjusted to the needs of the clients		- observation by assessors - Interview with clients	Guidelines for services providing equipment – recommendation 4, Healthier Scotland; 2010.

Standard	Statement	Instruction		References
1.2	The premises suit the needs of the Center and customers.	The premises make the staff and customers feel relaxed and comfortable.		Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Criteria	Statement	Instruction	Evidence for assessment	References
1.2.1	The premises of the Center are appropriate.	The Center has a minimum of 40m2 and has at least two separate rooms and sanitary facilities.	- observation by assessors - Interview with clients	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.2.2	The Center has a room for confidential counseling of the client.	The room is visually and acoustically isolated.	- observation by assessors	Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004
1.2.3	The premises of the Center meet the needs of different sessions.	Sessions can be: - assistance 1:1 (one to one) - Group sessions (up to 10 people).	- observation by assessors	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.2.4	If the center is located in a larger space, then there is also a living room, a bathroom and laundry machine for washing and drying clothes.		- observation by assessors	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.2.5	The premises of are properly maintained.	Maintenance of premises implies cleaning schedule which is followed.	- observation by assessors - Insight into the cleaning sheet	Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004
1.2.6	There are procedures for maintaining spatial hygiene.		- Insight into the procedure	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Standard	Statement	Instruction		References
1.3	The equipment of the center is adequate.	In accordance with the scope of work done in the center, the equipment is adequate and maintained in good working order.		Standards Kontakt- und Anlaufstellen; Info Drog. 2011
Criteria	Statement	Instruction	Evidence for assessment	References
1.3.1	The equipment of the center fits it's needs.		- observation by assessors - Interview with personnel	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.

1.3.2	Equipment of the center is clean and well maintained, which is recorded through the log sheet.		- observation by assessors - Insight into the cleaning sheet	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.3.3	There are procedures for equipment cleaning.		- Insight into the procedure	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
1.3.4	There are procedures in case of accidental needle sticks.		- Insight into the procedure	Ben Curran; A guide for all professionals working within an outreach setting – Guidance 2, Outreaching substance misusers; 2009
Standard	Statement	Instruction		References
1.4	Qualifications and scope of staff meet the needs of the Center.			Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, July 2012. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Criteria	Statement	Instruction	Evidence for assessment	References
1.4.1	The center employs qualified staff with experience: - Social worker/social pedagogue, - Medical worker/technician - Lawyer.	Experts are hired for the position of drop in operator - people with experience and primarily great communication skills.	- Interview with personnel - Insight into personnel files	Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC; July 2012. Guidelines for services providing equipment – recommendation 9, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; February 2009
1.4.2	The center also employs persons who have had personal experience in the use of drugs.	These persons have gone through all the stages: from drug use to reintegration into society (peer-peer approach to access).	- observation by assessors - Interview with personnel	Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, July 2012. Guidelines for services providing equipment – recommendation 9, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004
1.4.3	Composition of staff meets the needs of populations with which the Centre works.	Drop in Centre works with three different populations: - People who inject drugs, - Sex workers, - Prisoners.	- observation by assessors - Interview with personnel	Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, July 2012. Guidelines for services providing equipment – recommendation 9, Healthier Scotland; 2010. Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; February 2009

1.4.4	For each employee individually a personal file is kept.	File should include a CV, copy of diplomas, certificates of attended lectures and training courses, medical examinations, etc..	- Insight into the dossier	
1.4.5	A plan and a program of continuous education and training was made for employees.		- Insight into the dossier - Insight into the training plans and programs - Interview with personnel	Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, July 2012. Guidelines for services providing equipment – recommendation 9, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004
1.4.6	Plan and training program is kept for each employee.		- Interview with the leader of the center - Interview with personnel	
1.4.7	Employees adhere to strict ethical standards.	Clients are addressed with the obligations of the signed informed consent respect, professional secrets kept, complied with, etc..	- observation by assessors - Interview with personnel - Interview with clients	Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, July 2012.
1.4.8	Employees of the Center are subject to regular medical/sanitary examination.	This examination is conducted at least once a year, in order to control and prevent the spread of infectious diseases.	- Interview with personnel - Insight into the sanitary booklets	
1.4.9	Employees are vaccinated against hepatitis A, B and tetanus.		- Interview with personnel - Insight into the health booklets of personnel	Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; February 2009
Standard	Statement	Instruction		References
1.5	The Center keeps documentation and records up to date.			Zakon o evidencijama u zdravstvu, „SN FBiH“ 37/12
Criteria	Statement	Instruction	Evidence for assessment	References
1.5.1	The Centre keeps all required documentation.	This includes patient records and identification lists of clients	- Insight into records	

<p>1.5.2</p>	<ul style="list-style-type: none"> - The documentation includes the following records, in accordance with the scope of work: - About the visits and the type of health care service, - About the diagnosed illnesses, injuries, conditions, - About the treatment for psychoactive substances, - About the measures taken for disinfecting, fumigation and pest control, - About the personnel structure, - About the medical equipment, - About the conducted social services, - About the conducted legal counseling. 		<ul style="list-style-type: none"> - Insight into record sheets 	<p>Zakon o evidencijama u zdravstvu, „SN FBiH“ 37/12, čl. 6., 7., 8.</p>
<p>1.5.3</p>	<p>Keepeng medical/social/legal documentation is carried out by health/social/legal workers.</p>		<ul style="list-style-type: none"> - observation by assessors - Insight into medical/social/legal documentation 	<p>Zakon o evidencijama u zdravstvu, „SN FBiH“ 37/12, čl. 7., st. 2.</p>

2. – Services and interventions in the Center

Standard	Statement	Instruction		References
2.1	The Center provides services which are corresponding to age and sub-population of service users.	Sub-populations include: <ul style="list-style-type: none"> - Sex workers, - Homeless people who inject drugs, - Former prisoners who inject drugs - People who inject drugs under the age of 18. 		Guidelines for services providing equipment – recommendation 3, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
Criteria	Statement	Instruction	Evidence for assessment	References
2.1.1	The Center has a limit on providing services to users under the age of 16.		<ul style="list-style-type: none"> - Interview with personnel - Interview with clients 	Guidelines for services providing equipment, Healthier Scotland; 2010 Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009
2.1.2	The Center offers services that match the user's age.		<ul style="list-style-type: none"> - observation by assessors - Interview with personnel 	Guidelines for services providing equipment, Healthier Scotland; 2010.
2.1.3	Center personnel is trained to provide services that meet user's age.		<ul style="list-style-type: none"> - observation by assessors - Interview with personnel 	Reducing drug-related deaths, NHS, 2004
2.1.4	Each Center has house rules.	House rules relate to sanctioning of: <ul style="list-style-type: none"> - Violence within the center, - Trafficking of drugs and weapons, - Alcohol consumption. 	<ul style="list-style-type: none"> - observation by assessors 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
2.1.5	House Rules are clearly visible within the premises of the Center.		<ul style="list-style-type: none"> - observation by assessors 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Guidelines for services providing equipment, Healthier Scotland; 2010
Standard	Statement	Instruction		References
2.2	In the Center, a social-medical-psychological evaluation of the patient is made	In the Center, each user individually passes through assessment of his/her social-psychological-health status, of which detailed notes are kept.		Guidelines for services providing equipment – recommendation 10, Healthier Scotland; 2010.

Criteria	Statement	Instruction	Evidence for assessment	References
2.2.1	The staff of the center addresses and treats each service user with respect, without discrimination of any kind.		<ul style="list-style-type: none"> - observation by assessors - Interview with personnel - Interview with clients 	Guidelines for services providing equipment – recommendation 10, Healthier Scotland; 2010.
2.2.2	The first time a user comes to the Center, he/she receives an identification card, with a code that does not reveal user's personal data.	The card serves as proof that the person is a user of drop-in centers' services, and is also evidence that needles and syringes originate from the drop-in center (in case that the police are interested in their origins).	<ul style="list-style-type: none"> - Interview with personnel - Insight into the sample cards 	
2.2.3	There is a procedure of how an identification code is assigned to the user.		<ul style="list-style-type: none"> - Insight into the procedure 	
2.2.4	All the information obtained about the user are subject to professional secrecy.		<ul style="list-style-type: none"> - Interview with personnel 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
2.2.5	Assessment of users' risk behavior is conducted in the Center.		<ul style="list-style-type: none"> - Interview with personnel - Insight into file records 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004
2.2.6	There is a corresponding procedure for the assessment of users' risk behavior.		<ul style="list-style-type: none"> - Insight into the procedure 	
2.2.7	Evaluation of the users' health status is done in the Center.	<p>Procjena zdravstvenog stanja podrazumijeva:</p> <ul style="list-style-type: none"> - Somatski pregled, - Procjenu duševnog stanja, - Izradu anamneze, - Upućivanje u druge ustanove po potrebi. 	<ul style="list-style-type: none"> - Insight into client's records - Interview with personnel - Interview with clients 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
2.2.8	There is a procedure for the assessment of users' health status.		<ul style="list-style-type: none"> - Insight into the procedure 	
2.2.9	Assessment of the users' social status is done in the Center.		<ul style="list-style-type: none"> - Interview with personnel - Insight into records in the file 	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.

2.2.10	There is a procedure for the assessment of users' social status.		- Insight into the procedure	
2.2.11	The Center assists it's clients in obtaining personal documents	By this, it is meant obtaining an ID card.	- Interview with personnel - Interview with clients - Insight into the procedure	
2.2.12	The Center helps it's clients when registering into the employment office.		- Interview with personnel - Interview with clients - Insight into the procedure	
2.2.13	The Center assists it's clients in obtaining health insurance.		- Interview with personnel - Interview with clients - Insight into the procedure	
2.2.14	The Center helps it's clients with recommendations and contact with health and social institutions.		- Interview with personnel	
2.2.15	Each client has his own individual record/file which is legible and regularly updated.	The file includes clients' identification records, and any additional information obtained about the client, such as: - The results of all assessments - Expected changes - Unexpected developments.	- Insight into files	
Standard	Statement	Instruction		References
2.3	Counseling related on (mis) use of drugs is carried out in the Center.	Substitution therapy is advised, the switchover from injecting drug use to a safer way of usage, abstinence maintaining, etc.		Reducing drug-related deaths, NHS, 2004
Criteria	Statement	Instruction	Evidence for assessment	References
2.3.1	Assessment of clients' drug misuse is made in the Center	This includes: history of drug abuse, previous diagnoses and treatments. All this is recorded in clients' file.	- Insight into files - Interview with personnel - Interview with clients	Reducing drug-related deaths, NHS, 2004 Državni akcioni plan za borbu protiv zlouporabe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.

2.3.2	There is a procedure for the assessment of drug misuse		- Insight into the procedure	
2.3.3	Individual plan of treatments is made for every client, which suits his/her needs.		- Insight into files - Interview with personnel	Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
2.3.4	There is a procedure for creation of individual plan of treatments.		- Insight into the procedure	
2.3.5	Each client receives adequate information about the available treatment options.		- Interview with personnel - Interview with clients	Reducing drug-related deaths, NHS, 2004
Standard	Statement	Instruction		References
2.4	In accordance with the client's needs, appropriate services are offered at the Center	Services include distribution of brochures, syringes, needles, condoms and lubricants, in line with individual assessment of each client.		Guidelines for services providing equipment, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Criteria	Statement	Instruction	Evidence for assessment	References
2.4.1	Assessment of clients' needs is done in the Center.	This assessment is done in order to reduce the damage in terms of injecting drug use, reduction of needle use in public places, etc.	- Insight into files - Interview with personnel	Guidelines for services providing equipment, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
2.4.2	There is a procedure for assessment of client's needs		- Insight into the procedure	
2.4.3	Free of charge needle exchange is done in the Center	Exchange is done by the "used for sterile" principle.	- Insight into the free materials - Insight into the records of the issued material - Interview with personnel - Interview with clients	Guidelines for services providing equipment – Section 2, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004 Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009

2.4.4	Free of charge syringe exchange is done in the Center	Exchange is done by the "used for sterile" principle.	<ul style="list-style-type: none"> - Insight into the free materials - Insight into the records of the issued material - Interview with personnel - Interview with clients 	<p>Guidelines for services providing equipment – Section 2, Healthier Scotland; 2010.</p> <p>Standards Kontakt- und Anlaufstellen; Info Drog. 2011.</p> <p>Reducing drug-related deaths, NHS, 2004</p> <p>Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009</p>
2.4.5	The Center has a place for disposal of used syringes and needles.		<ul style="list-style-type: none"> - observation by assessors 	Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009
2.4.6	Places for disposal of used syringes and needles are visibly marked.	Part of the room where the infective material is deposited is indicated by at least a yellow ribbon on the floor.	<ul style="list-style-type: none"> - observation by assessors 	Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009
2.4.7	The Center has contracted infectious waste removal.		<ul style="list-style-type: none"> - Insight into the contract - Interview with personnel 	
2.4.8	At the Center, free distribution of condoms is done.	Under condoms are implied male and female condoms for vaginal, anal and oral intercourse.	<ul style="list-style-type: none"> - Insight into free condoms - Interview with personnel - Interview with clients 	Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004
2.4.9	At the Center, free distribution of lubricants is done.		<ul style="list-style-type: none"> - Insight into free lubricants - Interview with personnel - Interview with clients 	Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004
2.4.10	At the center, a distribution of packages containing other equipment for injection drug use is done.	<p>The packages include, among other things:</p> <ul style="list-style-type: none"> - filters, - distilled water for injecting, - cooker, - alcohol prepads, - citric, - rubber tourniquets, - creams for veins, - brochures about overdose and safe injection 	<ul style="list-style-type: none"> - Insight into the package contents - Interview with personnel 	<p>Guidelines for services providing equipment – Section 2, Healthier Scotland; 2010.</p> <p>Standards Kontakt- und Anlaufstellen; Info Drog. 2011.</p> <p>Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009</p>
2.4.11	There is a procedure for distribution of packages and all the individual items from the packages.		<ul style="list-style-type: none"> - Insight into the procedure 	

2.4.12	The center keeps a record of the issued materials.	Records are kept on a monthly basis. It is available both in electronic and paper form.	- Insight into the records of the issued material	
2.4.13	If the client's needs exceed the services provided in the Center, the Center refers him/her to other institutions.	These are medical centers, social work centers, etc.	- Interview with personnel - Interview with clients	Reducing drug-related deaths, NHS, 2004
2.4.14	There is an adequate procedure and form for referral to other institutions.		- Insight into the procedure - Insight into the form	
Standard	Statement	Instruction		References
2.5	The Centre conducts and organizes counseling and training of clients and professionals who come into contact with clients.			Guidelines for services providing equipment, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Criteria	Statement	Instruction	Evidence for assessment	References
2.5.1	The Center conducts counseling and education of clients.	Counseling and education cover areas of safe use of drugs, overdose, legal counseling, acute medical care and social assistance and counseling.	- Interview with personnel	Guidelines for services providing equipment – recommendation 11, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004 Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009
2.5.2	The center owns and provides brochures and flyers with educational and preventive-promotional material.	Brochures and leaflets contain information about - Overdose - Safe use of needles and syringes and - Educational material, - Information about the programs that are offered in the local community and offered by other organizations and institutions.	- Insight into brochures and pamphlets	Guidelines for services providing equipment – recommendation 11, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011. Reducing drug-related deaths, NHS, 2004 Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009

2.5.3	The Centre conducts training of professional staff in the community who come in contact with the clients of the Center.	Education is on the issue of harm reduction and health risks. This includes employees of the police, social workers, etc.	- Insight into the training curriculum	
2.5.4	The Center offers a variety of trainings that comply with different levels of the same profession.	Trainings last from one to three days.	- Insight into the training curriculum - Interview with personnel	
Standard	Statement	Instruction		References
2.6	The Center consults with the community.	Opinion of the local community is of importance to the Center.		Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009 Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004 Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004
Criteria	Statement	Instruction	Evidence for assessment	References
2.6.1	The Center has a Policy of avoiding conflict.		- Insight into Policy	Ben Curran; A guide for all professionals working within an outreach setting – Guidance 6, Outreaching substance misusers; 2009
2.6.2	Policy of avoiding conflict is clearly exhibited in the premises of the Center.		- observation by assessors	
2.6.3	The Center has a procedure for handling cases of verbal and physical violence in its premises.		- Insight into the procedure	Ben Curran; A guide for all professionals working within an outreach setting – Guidance 6, Outreaching substance misusers; 2009
2.6.4	Personnel of the Center has established formal communication with the community.	In order to avoid incidents with neighboring tenants/residents, etc., regular consultations are held, at which a record is kept of any complaints or difficulties.	- observation by assessors - Insight into logs	Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009 Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004

3. – Fieldwork (Outreach)				
3.1	Each drop-in center organizes fieldwork (outreach).	The objective of fieldwork is to promote a safe (healthy) behavior, which is accomplished in three ways: <ul style="list-style-type: none"> - by increasing awareness of health risks; - by encouraging changes that reduce risky behavior; - by supporting positive change in behavior. 		Ben Curran; A guide for all professionals working within an outreach setting, Outreaching substance misusers; 2009 Državni akcioni plan za borbu protiv zloupotrebe opojnih droga BiH 2009-2013, Liječenje i smanjenje štete.
3.1.1	The fieldwork is carried out by outreach workers.	Outreach workers are usually people with experience in the use of drugs, but can also be professionals (nurses, social workers, social pedagogues, psychologists).	- Interview with personnel	Guidelines for services providing equipment, Healthier Scotland; 2010.
3.1.2	The center offers various forms of fieldwork.	There are three basic forms of fieldwork: <ul style="list-style-type: none"> - Fieldwork in public areas - informative approach, - Field work in institutions - stationary operation and - Field work in homes - domicile approach. 	- Interview with personnel - observation by assessors	Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
3.1.3	Service type of fieldwork depends on the needs of the population.	Services are: <ul style="list-style-type: none"> - exchange needles and syringes, - Distribution of condoms and lubricants, - Brochures for health education and self-help, - Counseling related to risky behavior, - Medical counseling and testing for HIV and Hep C - Social assistance. 	- Interview with personnel	Guidelines for services providing equipment, Healthier Scotland; 2010. Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009

3.1.4	Outreach workers have established contact with health and social institutions.		- Interview with personnel	Guidelines for services providing equipment, Healthier Scotland; 2010.
3.1.5	Outreach workers are conducting education and distribution of educational and preventive materials directly among drug users.		- Interview with personnel - Insight into the materials	Guidelines for services providing equipment – recommendation 11, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
3.1.6	Outreach workers carry out referral to institutions that treat problems related to drug addiction and there is a procedure for that.		- Insight into the procedure - Interview with personnel	
3.1.7	Fieldwork is flexible and adapts to the needs of its clients.		- Interview with personnel	
3.1.8	Fieldwork can be done in mobile units.	These mobile units provide: - general health examination, - basic first aid in case of misinjection - medical counseling and testing for HIV or HCV, - Counseling related to risky behavior, - Social assistance.	- Interview with personnel - observation by assessors	Guidelines for services providing equipment, Healthier Scotland; 2010.

4. - Success evaluation of the work of Drop in center

Standard	Statement	Instruction		References
4.1	The Center has a policy on the assessment of reduction of client's risky behavior and performs evaluations of the success of work done.			Guidelines for services providing equipment – recommendation 13, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
Criteria	Statement	Instruction	Evidence for assessment	References
4.1.1	The Center has a policy on the assessment of reduction of client's risky behavior.		<ul style="list-style-type: none"> - Insight into the Policy - Interview with personnel 	Guidelines for services providing equipment – recommendation 13, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
4.1.2	The Center assesses reduction of client's risky behavior through surveys.	Reduction of risky injecting, reduction the risky drug use, reduction of unprotected sexual intercourse is observed.	<ul style="list-style-type: none"> - Insight into the questionnaires - Insight into the completed questionnaires - Insight into the processed data 	Guidelines for services providing equipment – recommendation 13, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
4.1.3	Through survey, the Center assesses client's capacities for referral to other institutions in the system.	Referral is done as needed and only with the consent of the client.	<ul style="list-style-type: none"> - Insight into the questionnaires - Insight into the completed questionnaires - Insight into the processed data 	
4.1.4	The Center conducts an internal assessment of the activities and outcomes, meaning revision of work practices		<ul style="list-style-type: none"> - Insight into the internal practice analysis 	Guidelines for services providing equipment – recommendation 13, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
4.1.5	The Center conducts external independent evaluation of activities and outcomes.		<ul style="list-style-type: none"> - Insight into the external practice analysis - Interview with personnel 	Guidelines for services providing equipment – recommendation 13, Healthier Scotland; 2010. Standards Kontakt- und Anlaufstellen; Info Drog. 2011.
4.1.6	The Center conducts assessment of clients needs for services of the center as well as of all institutions/organizations in the local community.	Creating of annual plans and coordinating with local and national strategies	<ul style="list-style-type: none"> - Insight into plans - Insight into polls - Interview with personnel 	

References / legal basis

National legislation:

- National Action Plan for the Fight against illicit drugs in Bosnia and Herzegovina, treatment and harm reduction, 2009-2013,
- Law on Records in Health Care "OG FBiH" No. 37/12

International references*:

- Reducing drug-related deaths, NHS, 2004
- Advocacy guide: HIV/AIDS prevention among injecting drug users, WHO, 2004
- Ben Curran; A guide for all professionals working within an outreach setting, Outreaching substance misusers; 2009
- Needle and syringe programmes: providing people who inject drugs with injecting equipment, NHS; february 2009
- Guidelines for services providing equipment, Healthier Scotland; 2010
- Standards Kontakt- und Anlaufstellen; Info Drog. 2011
- Professional Profile of the Outreach Worker in Harm Reduction, E-book, PrOWfile, EC, july 2012

** International references are taken from: <http://www.emcdda.europa.eu/best-practice/standards/harm-reduction>*

Documented policies and procedures:

1. Harm Reduction Policy
2. Policy for assessing reduction of client's risky behavior
3. Procedure for maintaining hygiene of the facilities
4. Procedure for equipment cleaning
5. Procedure in case of accidental needlestick
6. Procedure for assessing the (mis) use of drugs and risky behavior of clients
7. Procedure for assessing client's health status and drug abuse
8. Procedure for assessing client's social status
9. Procedure for client's individual treatment plan
10. Procedure for assessing client's needs
11. Procedure for distribution of individual pieces of equipment and the whole package to clients
12. Procedure for referral of clients to other institutions
13. Procedure for handling cases of verbal and physical violence
14. Procedure for referral of clients to institutions related to drug addiction

List of abbreviations:

AKAZ	Agency for Quality and Accreditation in Health Care in Federation of Bosnia and Herzegovina
BiH	Bosnia and Herzegovina
EMCDDA	European Monitoring Center for Drugs and Drug Addiction
FBiH	Federation of Bosnia and Herzegovina
HIV	Human Immunodeficiency Virus
OG	Official Gazette
UNDOC	United Nations Office on Drugs and Crime
UNAIDS	Joint United Nations Programme on HIV/AIDS
WHO	World Health Organisation