



Government of **Western Australia**
Department of **Health**

Needle and Syringe Program Annual Report 2020-21

Western Australia

1 July 2020 – 30 June 2021

Acknowledgments

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 2020-21 NSP Annual Report. NSP Coordinators and staff should be commended for their work conducted throughout 2020-21 and the SHBBVP looks forward to working with these teams again in 2021-22.

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Contents

1.0 Executive summary	3
2.0 Introduction	3
3.0 Methodology	5
4.0 Key findings	5
4.1 Response rate	5
4.2 COVID-19	6
4.3 Service provision	6
4.4 Disposal matters	7
4.5 Operational matters	8
4.6 Professional development	8
4.7 Service enhancement	9
4.8 Suggestions for service enhancement	9
4.9 Support provided by SHBBVP	10
5.0 Conclusion and recommendations	10
Appendix A: WA NSP distribution	12
Appendix B: Participating sites	13
Appendix C: Survey results	14
1.0 COVID-19 impact on NSPs	14
1.1 Operating hours during COVID-19	14
1.2 Changes implemented to operating hours	14
1.3 Changes to service delivery during COVID-19	14
1.4 Other COVID-19 related issues.	14
2.0 Service Provision	15
2.1 Information Distributed	15
2.2 Referrals Provided	15
2.3 Additional Equipment	16
3.0 Disposal Matters	16
4.0 Operational Issues	18
5.0 Professional Development	18
6.0 General Service Matters	19
6.1 Activities undertaken to enhance NSP	19
6.2 NSP Coordinator Satisfaction	19
6.3 Suggestions for service enhancement	20
Appendix D: Report pro-forma	21

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 state-wide 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 program delivery.

As of 30 June 2021, there were 103 total NSP approvals held under the Medicines and Poisons Regulations 2016. Out of these NSP approvals, a response was required for 91 approvals for the 2020-21 year. The remaining approvals were exempt from submitting an NSP annual report for 2020-21, as they provide regular reporting as part of Service Agreements held with the SHBBVP. The 2020-21 reporting period saw 98% compliance, with 88 NSP coordinators completing a report and one NSP coordinator submitting a 'nil activity' response.

Key findings of the responses for the 2020-21 report include:

- only three sites reported not being able to operate due to COVID-19 restrictions
- changes to service delivery during the COVID-19 pandemic were made by 20% of sites
- educational materials/resources were distributed by 76% of sites
- referrals to other services were made by 12% of sites
- of sites that only provided the FITSTICK® product, 12% reported clients requesting additional equipment
- issues with disposal were reported by 20% of sites
- issues with NSP clients were reported by 3% of respondents
- issues with NSP staff were reported by 7% of respondents
- five coordinators reported issues coordinating their NSP
- of responding NSP sites, 72% engaged in at least one form of professional development
- most sites, 76%, undertook at least one activity to enhance their NSP
- nine NSP coordinators indicated that they would benefit from additional support from the SHBBVP for their NSP, which included training and resources.

Suggestions for service enhancement from participants included:

- more training and education opportunities for staff
- provision of safe disposal units on site and in the community for public use
- more educational and referral resources with distributed equipment
- increased community engagement and education
- inclusion of sterile water with FITSTICK® packs.

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 key state and national blood-borne virus (BBV) and alcohol and drug strategies including:

- 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
- WA Alcohol and Drug Interagency Strategy 2018-2022

- 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
- Western Australian 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 Machines/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 no-cost (NSDM).

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

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 the SHBBVP in its system manager support role of planning, managing and monitoring of the state-wide NSP.

There were 12 organisations that provide NSP and/or NSEP that were exempt from submitting an NSP annual report for 2020-21, as they provide regular reporting as part of service agreements held with the SHBBVP. These exempt services included Peer Based Harm Reduction WA sites, WAAC (formerly WA AIDS Council) sites, Palmerston Mandurah, Goldfields Population Health Unit, HepatitisWA, the Great Southern Population Health Units, Magenta/Sex Worker Outreach Project WA (SWOPWA), the Midwest Community Alcohol Drug Service, and the Pilbara Population Health Unit.

In terms of needle and syringe distribution in Western Australia, Table 1 and Figure 1 in *Appendix A: WA NSP distribution* shows a decrease in the distribution of needles and syringes between 2019-20 and 2020-21, with fluctuations in distribution noticeable over the past five years.

The following sections are a summary of the methods and results, as reported by NSP Coordinators through the submission of NSP annual reports for 2020-21. 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 2020-21 pro-forma (*Appendix D: Report pro-forma*) which comprised of 32 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 2021, although 13 sites were granted extensions to submit the report.

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 2020-21, 88 reports were completed through SurveyMonkey (88 completed in 2019-20) 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

Ninety-one services were required to complete a 2020-21 NSP annual report. This does not include the services previously noted as exempt from this annual reporting process. 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 (97.8% 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 reported nil activity and was not included in the analysis of the results. NSP coordinators must either complete a report or provide a nil activity response if no activity was recorded during the reporting period.

Table 1 shows that the response rate has remained high over the past three years.

Table 1: Annual Report Response Rate

Reporting Period	Number of required responses	Number of reports completed	Number of 'nil activity' responses	Total number of responses
2018-19	88	87 (98.9%)	0 (0%)	87 (98.9%)
2019-20	89	88 (98.9%)	1 (1.1%)	89 (100%)
2020-21	91	88 (96.7%)	1 (1.1%)	89 (97.8%)

4.2 COVID-19

The COVID-19 pandemic led to physical distancing restrictions and interstate and intrastate travel restrictions. Only three NSPs reported not being able to operate during the COVID-19 restrictions, with the majority of NSPs 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: Survey Results* has a breakdown of changes to service delivery.

Table 2: COVID-19

Reporting Period	Operating hours change	Changes to service delivery
2019-20	3 (3%)	23 (26%)
2020-21	3 (3%)	18 (20%)

Note: Some sites indicated their NSP had made changes to the operating hours related to COVID-19. However, when asked to describe the changes, some of those sites responded with changes to operating hours unrelated to COVID-19. Therefore, those sites were not counted in the total for changes to operating hours due to COVID-19.

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

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

4.3 Service provision

All NSPs that completed the NSP annual report for 2020-21 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 NSPs 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 1 of *Appendix C: Survey Results* respectively.

Table 3: Service Provision at NSPs

Reporting Period	Printed Materials, Resources & Information	Referrals to Other Services
2018-19	61 (70%)	13 (15%)
2019-20	65 (74%)	14 (16%)
2020-21	67 (76%)	11 (12%)

Table 4 shows that requests for additional equipment has remained stable compared to the 2019-20 reporting period and decreased compared to the 2018-19 reporting period. A breakdown of the equipment requested can be seen in Table 3 of *Appendix C: Survey Results*.

Table 4: Requests for Additional Equipment at NSPs

Reporting Period	Requests (%)
2018-19	16 (18%)
2019-20	10 (11%)
2020-21	11 (12%)

4.4 Disposal matters

Eighteen NSP coordinators (20%) reported issues experienced regarding needle and syringe disposal over the past 12 months. This is an increase compared with the last two reporting periods and is shown in Table 5, below.

Table 5: Disposal Issues

Reporting Period	Issues Reported (%)
2018-19	14 (16%)
2019-20	14 (16%)
2020-21	18 (20%)

A further breakdown on the issues reported can be seen in Table 4 of *Appendix C: Survey Results*.

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	38 (43%)
Not available	44 (50%)
Unsure	5 (6%)
Missing response	1 (1%)
Location of sharps disposal bins if available¹	
Inside the health facility	29 (33%)
Outside the health facility building/s (within grounds)	15 (17%)
Unsure	0
Other	6 (7%)
Aware of other sharps disposal bin locations (excluding health facility)	
Yes	55 (62%)
No	19 (22%)
N/A (no safe disposal bins available in community)	13 (15%)
Missing response	1 (1%)

Notes: ¹Multiple responses possible.

A further breakdown on the availability and location of sharps disposal bins can be seen in Table 5 of *Appendix C: Survey Results*.

4.5 Operational matters

NSP coordinators were asked whether any operational issues were experienced over the 2020-21 reporting period. Table 7 outlines the issues encountered and number of respondents over the past three reporting periods. Refer to Table 6 of *Appendix C: Survey Results* for a further breakdown.

Table 7: Issues in Service Provision

Reporting Period	Clients (%)	Staff (%)	NSP Coordination (%)
2018-19	7 (8%)	2 (2%)	5 (6%)
2019-20	8 (9%)	6 (7%)	3 (3%)
2020-21	3 (3%)	6 (7%)	5 (6%)

4.6 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, 64 out of 88 coordinators participated in some form of professional development regarding NSP (Table 8). This has remained relatively stable compared to the two previous reporting periods.

Table 8: Participation in Professional Development by NSP coordinators

Reporting Period	Response (%)
2018-19	65 (75%)
2019-20	65 (74%)
2020-21	64 (72%)

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

4.7 Service enhancement

Sixty-seven NSP coordinators (76%) reported activities undertaken to enhance their NSP in 2020-21 (Table 9). The proportion of NSP coordinators reporting enhancements increased slightly, by one percent, compared to the 2019-20 reporting period and by six percent compared to the 2018-2019 period.

Table 9: Number of activities undertaken to enhance NSP

Reporting Period	Response (%)
2018-19	61 (70%)
2019-20	66 (75%)
2020-21	67 (76%)

4.8 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 28 respondents that provided suggestions for improving their NSP. The following suggestions have been grouped by themes:

- education and further training on NSPs for coordinator and other staff
- provision of safe disposal units on site and in the community for public use
- more educational and referral resources with distributed equipment
- increase the number of brief interventions with clients
- increase availability of sharps disposal bins
- increased community engagement and education
- installation or improvement of NSVM/NSDM
- inclusion of sterile water with FITSTICK® packs.

4.9 Support provided by SHBBVP

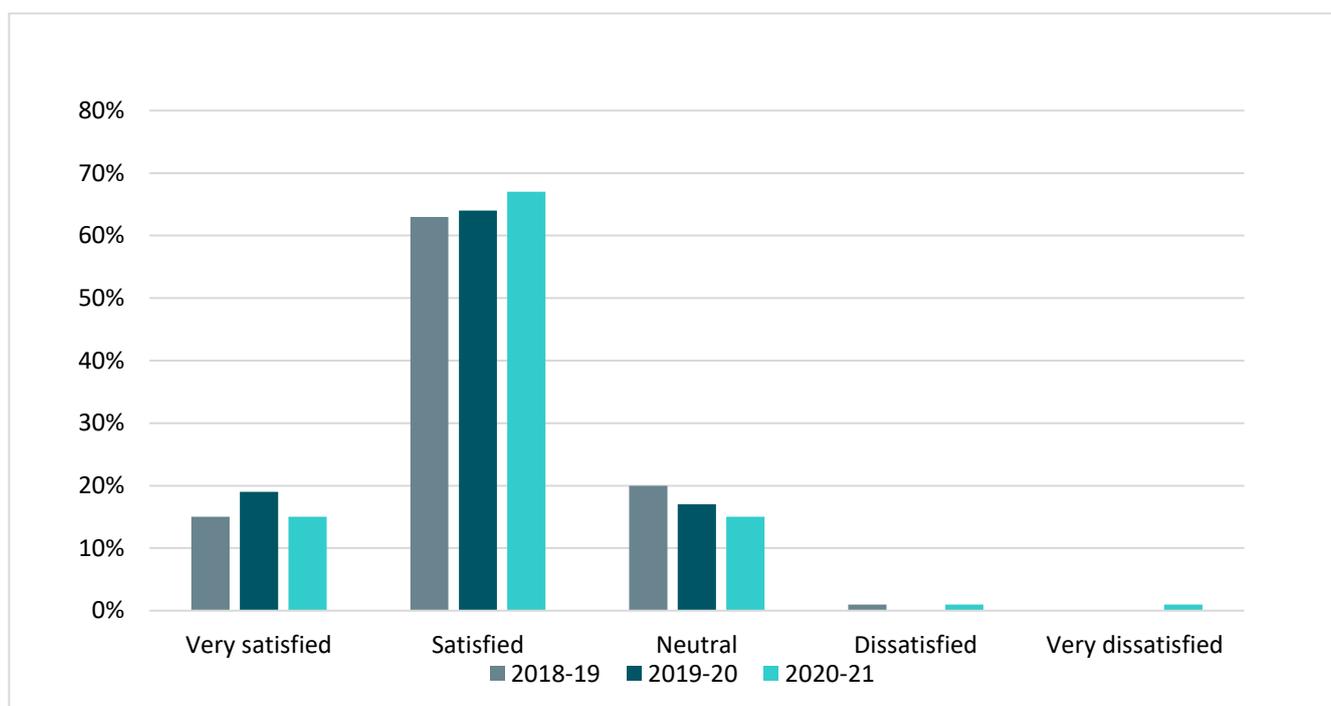
Nine NSP coordinators (10%) indicated they would benefit from additional support specifically from SHBBVP for their NSP. Their suggestions included that the SHBBVP:

- provide increased training and workforce development opportunities related to NSP
- provide relevant information, reading materials and resource development.

For 2020-21 the satisfaction among participants with how their NSP operated within the community remained relatively stable compared to the 2019-20 year. In the 2020-21 survey, thirteen respondents (15%) were very satisfied, sixty respondents (67%) satisfied, thirteen respondents (15%) neutral, one respondent was dissatisfied, and one indicated they were very dissatisfied. It was determined that the respondent who indicated dissatisfaction with the NSP reported this was due to the physical site, rather than the program. The respondent who indicated they were very dissatisfied provided no comment regarding their dissatisfaction and was unavailable for follow up. The SHBBVP has offered support to the associated NSP site.

This shows a slight decrease in satisfaction among NSP coordinators compared to 2019-20, where 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).

Figure 1: NSP coordinator satisfaction



5.0 Conclusion 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 (MHC) developed and continue to provide both Generic and Pharmacy Online NSP Orientation and Training Packages, which can be accessed at: E-learning@MHC.

SHBBVP also provides a two-day face to face NSP training course annually in collaboration with the MHC. This was delivered in 2020-21 on the 18th and 19th May 2021. For more

information regarding training for 2021-22, please contact SHBBVP on (08) 9222 2355 or e-mail NSP@health.wa.gov.au.

MHC's Workforce Development team also offers a range of training focusing on alcohol and other drug related issues. Information on their upcoming training events can be accessed at [Alcohol and other drug training \(mhc.wa.gov.au\)](http://mhc.wa.gov.au).

If further NSP related training is required, it is recommended that all regional enquiries are directed to the appropriate Regional NSP Coordinator. The 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 regional safe disposal issues, the 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. The 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: [Department of Health Online Ordering System \(getquickmail.com\)](http://getquickmail.com).

Additional resources are available from key partner organisations in the sector including Peer Based Harm Reduction WA, WAAC, HepatitisWA and the Mental Health Commission. 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.

Guidelines on the operation of NSP across WA and the provision of needle and syringe vending/dispensing machines from sites across WA are currently being developed, alongside a WA Country Health Service NSP Policy which to replace the following Operational Directives:

- OD 0553/14 Provision of Sterile Needles and Syringes from Rural and Regional Hospitals to People Who Inject Drugs
- OD 0554/14 The Operation and Maintenance of Needle and Syringe Vending Machines (NSVMs).

An updated individual site NSP Guidelines template will accompany the release of these documents.

The provision 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 a decrease in reported issues with clients who access the NSP, whilst issues with staff remained relatively stable and a slight increase in issues in coordinating the NSP was noticed. NSP coordinator satisfaction with how their NSP operates in the community remained similar to previous reporting periods, while the SHBBVP continually aims to support NSP Coordinators in the delivery of NSP across the state.

Appendix A: WA NSP distribution

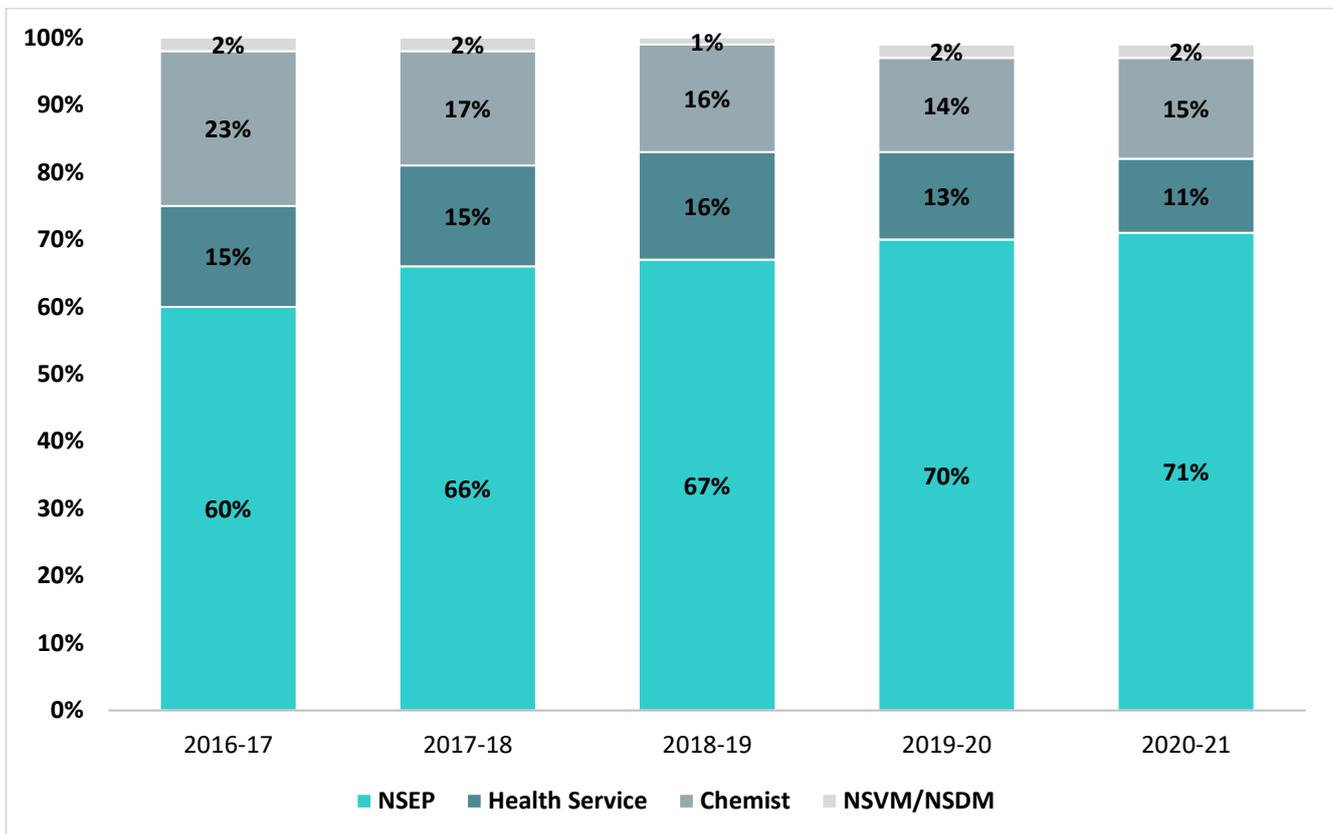
The following table and graph show needle and syringe distribution across the state. All services saw a decrease in distribution in the 2020-21 period compared to 2019-20 period.

Table 1 Needle and syringe distributions by NSP outlet type

	2016-17	2017-18	2018-19	2019-20	2020-21
NSEP	3 494 801	3 866 993	4 185 290	4 576 848	4 005 421
Health service NSP	994 484	907 917	1 012 668	874 509	659 550
Pharmacy	1 232 483	1 017 615	992 868	932 595	852 110
NSVM/NSDM	94 500	96 900	70 500	116 400	107 700
TOTAL	5 816 268	5 889 425	6 261 326	6 500 352	5 624 781

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

Figure 1 Proportion of total needles and syringes distributed by NSP outlet type



Appendix B: Participating sites

Albany Community Pharmacy	Kondinin Districts Health Service
Albany Regional Hospital	Kununoppin Health Service
Augusta Hospital	Lake Grace District Health Service
Beverley Hospital	Laverton District Hospital
Boddington Hospital	Leonora Community Health
Boyup Brook Soldiers Memorial Hospital	Leonora Hospital
Bremer Bay Health Centre	Marble Bar Nursing Post
Bridgetown District Hospital	Margaret River District Hospital
Bruce Rock Memorial Hospital	Meekatharra Hospital
Bunbury Regional Hospital	Merredin District Hospital
Busselton Hospital	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 Health Centre	Night and Day Pharmacy Bayswater
Dalwallinu Hospital	Norseman Community Health Centre
Denmark District Hospital	Norseman Hospital
DoH, Integrated Case Management Program	North Midlands Health Service
Derbarl Yerrigan Health Service Inc	Northam Regional Hospital
Dongara Eneabba Mingenew Health Service	Northampton Health Service
Donnybrook Hospital	Onslow Health Service
Dumbleyung Memorial Hospital	Palmerston Association Katanning
Esperance Population Health Centre	Pemberton Hospital
Esperance Regional Hospital	Pilbara Population Health Unit
Exmouth Hospital	Pingelly Health Centre
Fiona Stanley Hospital	Plantagenet Hospital
Geraldton Hospital	Quairading District 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 Public Health Unit	Pharmacy Registration Board of WA
Kojonup Hospital	

Appendix C: Survey results

1.0 COVID-19 impact on NSPs

1.1 Operating hours during COVID-19

Six sites indicated that their NSP made changes to its operating hours due to COVID-19 during the 2020-21 period. Eighty responses suggested that there were no changes to operating hours of the NSP due to COVID-19 and three respondents did not select a response.

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. Nine responses were received, with three of those indicating there were no changes made to the operating hours. Three sites indicated they had to close the NSP service due to COVID-19. Of these, two responses advised that outpatient clinics ceased, with one it being the main method of NSP distribution, and the other having no walk-in clients which may have had an impact on the NSP. Three indicated that their hours of operation increased to 24 hours a day, 7 days a week, however it is not clear if this was due to COVID-19.

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. Eighteen (20%) respondents indicated changes were made to service delivery. Ten services indicated consumers were screened upon arrival. This included some sites asking COVID-19 symptom questions/taking contact details. Three services indicated they moved the access location for the NSP and two stated they had increased service delivery (these two were not included in the table below). Two sites indicated they were not able to deliver services during COVID-19 restrictions. See Table 1, below.

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	10
Operational changes/access location	3
Encourage outreach/postal service delivery	1
Service closure	2

Note: Operational changes included changes in delivery method and location. Service closure includes changes to outpatient clinics.

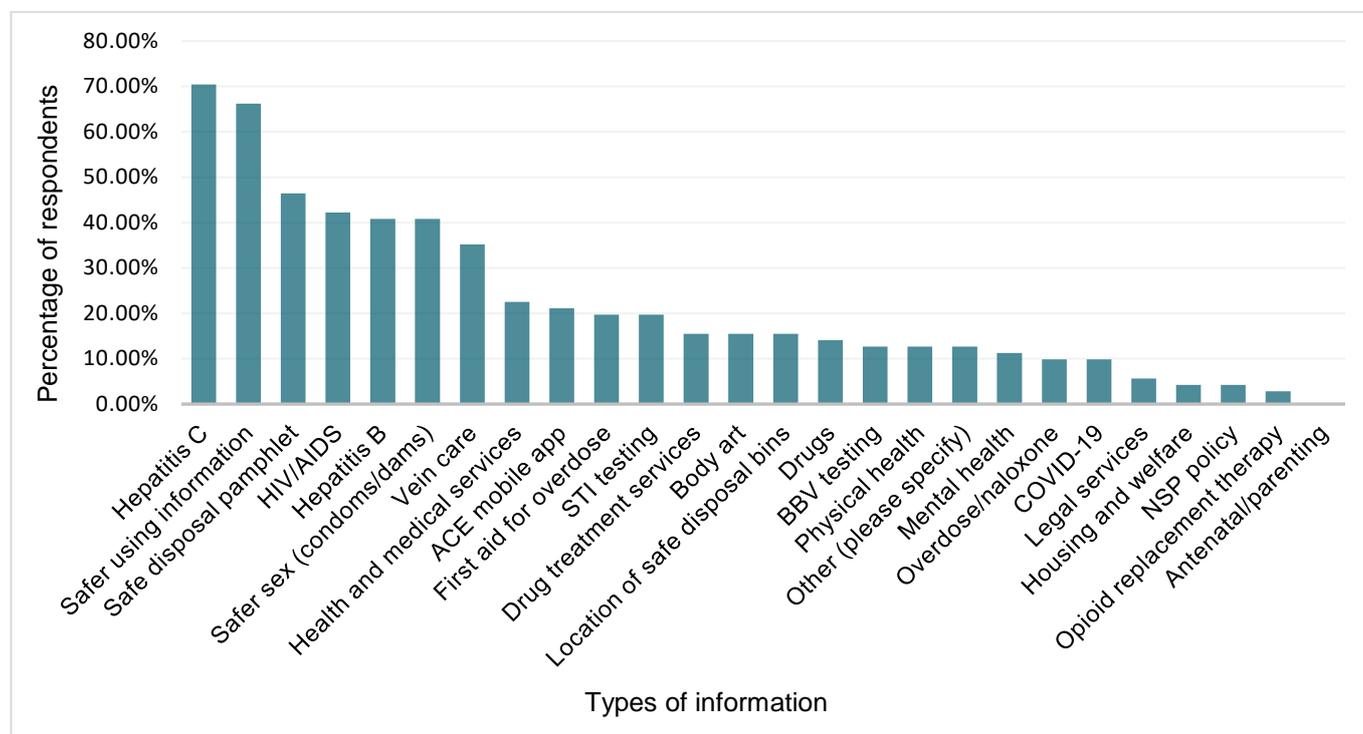
1.4 Other COVID-19 related issues

NSP coordinators were asked about any other issues encountered relating to COVID-19 restrictions. Thirteen respondents indicated other related issues. This included; reduced drug supply, issues with obtaining swabs and onsite packaging, reduced anonymity and decreased client contacts during this period.

2.0 Service Provision

2.1 Information Distributed

Figure 1: Types of information distributed by NSPs 2020-21



Notes: Multiple responses possible. The “Other” category included PrEP information, NSEP services, family, support and AOD counselling services.

2.2 Referrals Provided

Table 2: Type of service clients are referred to

Type of service referred to	No. of NSPs that made a referral
Drug and alcohol counselling	7
BBV testing	7
Mental health care services	6
Peer based service	5
Other NSP outlet	5
Hospital	5
Other NSP outlet	5
STI testing	4
Legal services	3
Treatment and rehabilitation services	3
Another medical practitioner	3
Sexual health service	3
Hepatitis service	2
HIV/AIDS service	2
Detoxification services	2
Accommodation services	2
Other (please specify)	5

Note: Multiple responses possible. A total of 12 respondents completed the question. In the 'other' category, three respondents referred clients to another health service, one was referred to an NSEP and one to hospital for care (included in hospital referral data).

2.3 Additional Equipment

Most NSPs that completed the NSP annual report for 2020-21 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, twelve NSP Coordinators (13%) had reported that clients had at some stage requested different equipment from what was available from their NSP.

Table 3: Most commonly requested equipment outside FITSTICK®

Types of equipment requested	No. of requests
Water	8
Swabs	6
Different sized needles	4
Syringes	3
Filters	1
Spoons	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. Nineteen responses (22%) were analysed and categorised into various themes seen in Table 4.

Table 4: Disposal Issues and Actions Taken

Disposal issues	Reoccurrence of theme
Incorrectly disposed of injecting equipment found in the community including parks and gardens	12
Used needles and syringes found incorrectly disposed of in and around hospital and health service grounds and carparks	3
Other	4
Actions taken to resolve disposal issues	
Education and information disseminated	7
Review of disposal options	4
Collaboration with local government	3
Other/removal	5

Note: Other responses included clients returning buckets of syringes, community concerns, FITSTICK® litter found and staff beliefs/concerns.

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	38
Not available	45
Unsure	5
Location of sharps disposal bins if available	
Inside the health facility	30
Outside the health facility building/s (within grounds)	16
Unsure	0
Other	6
Aware of sharps disposal bin locations (excluding health facility)	
Yes	56
No	19
There are no safe disposal bins available in community	13

Note: Multiple responses possible. Other responses included public toilets as a location, one respondent indicated their disposal bins are next to the NSDM, and one response was advised public property near NSEP.

4.0 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 6.

Table 6: Operational issues reported by NSP Coordinator

Operational issue	Reoccurrence of theme
Issues with clients (3 responses)	
Disruptive/rude behaviour	2
COVID-19 physical distancing/screening issues	1
Actions	
Reminder to client of policies and procedures	2
Security intervention	1
Issues with staff (6 responses)	
Moral objection to distributing needles and syringes	2
Objection to process around Fitpack packing and distribution	1
Limited education and training	1
Staff turnover	2
Actions	
Provided education and training to staff	4
Issues coordinating NSP (5 responses)	
Supply issues with NSP equipment/NSDM installation	2
Limited capacity to focus on NSP	1
Changes in work role	1
Staff turnover	1
Actions	
Liaison with management	2
Supply of alternative equipment	1

Notes: Some provided nil response to action to resolve issue.

5.0 Professional Development

Sixty-four NSP (72.7%) coordinators participated in some form of professional development in 2020-21.

Table 7: Professional Development by NSP Coordinators

Activity	No. of responses
Read NSP information on WA health websites	37
Read printed NSP resources	31
Completed Online NSP Orientation and Training Package	30
Read professional publications	16
Participated in 2021 NSP coordinator training	14
Attended online/face to face seminars/lectures/workshops	11
Other	3

Notes: Multiple responses possible. Other included: Education/information from other staff members.

6.0 General Service Matters

6.1 Activities undertaken to enhance NSP

Sixty-six NSP coordinators (75%) reported activities undertaken to enhance their NSP in 2020-21 (Table 8). This is the same as the last reporting period which saw 66 NSP coordinators reporting activities to enhance their NSP. Multiple answers could be selected.

Table 8: Activities undertaken to enhance NSP

Activity	No. of responses
Provided short orientation sessions for new staff	48
Encouraged staff to complete Online NSP Orientation and Training Package	31
Provided in house staff training	24
Established rapport and networks with regular clients	17
Provided debrief sessions for staff	13
Provided staff with regional specific information	11
Reviewed or updated NSP guidelines	9
Developed a list of harm reduction brief information questions for NSP staff	4
Conducted community education sessions	2
Other	5

Notes: Multiple responses possible.

Other included: Ordering of printed resources to include in Fitpacks or to provide to clients, discussions with AOD services, creation of sexual health manual.

6.2 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 2020-21, 13 participants (15%) were very satisfied, 60 participants (68%) were satisfied, and 13 participants (15%) were neutrally satisfied with how their NSP operated within the community as detailed in the below table.

Table 9: NSP coordinator satisfaction

Year	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Total
2018-19	13	55	18	1	0	87
2019-20	17	56	15	0	0	88
2020-21	13	60	13	1	1	88

6.3 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, education and services
- increased health promotion and harm minimisation
- a greater variety of injecting equipment available for clients
- increased engagement with clients and staff
- provision of safe disposal units on site and in the community for public use
- increased discreetness of NSP access locations.

Nine NSP coordinators (10%) 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/professional development	3
More information for clients and community	2
More NSP information and resources	3
NSDM/NSVM	1

Appendix D: Report pro-forma

Needle and Syringe Program Annual Report 2020/21

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.

The Department of Health, Western Australia, approves the use of SurveyMonkey in the collection of data for the Needle and Syringe Program Annual Report.

Disclaimer: From time to time the Department of Health, Western Australia may use SurveyMonkey for the collection, aggregation and analysis of survey data. The information collected in these surveys is transmitted and stored securely in the United States and is accessed by the Department in accordance with SurveyMonkey's terms of use. The Department regularly removes collected data from 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: <https://www.surveymonkey.com/mp/legal/privacy/>

* 1. NSP coordinator details

Program location

Program number

Coordinator name

Email address

Phone number

Needle and Syringe Program Annual Report 2020/21

COVID-19

The following questions are related to service impacts from the 1 July 2020 to the 30 June 2021 financial year due the COVID-19 pandemic.

* 2. Did your NSP change its operating hours at any time?

Yes

No

* 3. What were the changes to the operating hours?

* 4. What changes if any, did your NSP make to service delivery?

* 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 2020/21

Part 1. Service provision

The following questions are related to general service provision during the 2020/21 financial year.

* 7. Did your NSP distribute any information to clients in 2020/21?

Yes

No

* 8. What type of information was distributed by your NSP in 2020/21? (Please select all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Opioid replacement therapy (methadone, suboxone etc.) |
| <input type="checkbox"/> Hepatitis B | <input type="checkbox"/> Drug treatment services |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Body art |
| <input type="checkbox"/> Safer using information | <input type="checkbox"/> Safe disposal pamphlet |
| <input type="checkbox"/> Vein care | <input type="checkbox"/> Legal services |
| <input type="checkbox"/> Safer sex (condoms, dams etc) | <input type="checkbox"/> Location of safe disposal bins |
| <input type="checkbox"/> Drugs | <input type="checkbox"/> Overdose/naloxone |
| <input type="checkbox"/> First aid for overdose | <input type="checkbox"/> Physical health |
| <input type="checkbox"/> Health and medical services | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Housing and welfare | <input type="checkbox"/> Antenatal/parenting |
| <input type="checkbox"/> BBV testing | <input type="checkbox"/> NSP policy |
| <input type="checkbox"/> STI testing | <input checked="" type="checkbox"/> ACE (Access, Care and Empowerment) |
| <input type="checkbox"/> Other (please specify) | <input type="checkbox"/> COVID - 19 |

Contact the Department of Health 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 [ordering site \(external site\)](#) 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](#)

You can also download the Department of Health's [ACE \(Access, Care and Empowerment\) app \(external site\)](#).

* 9. Were any referrals made for clients in 2020/21?

- Yes
- No

* 10. What types of referrals were made by your NSP in 2020/21? (Please select all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Drug and alcohol counselling | <input type="checkbox"/> BBV testing |
| <input type="checkbox"/> Detoxification services | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Treatment and rehabilitation services | <input type="checkbox"/> Another medical practitioner |
| <input type="checkbox"/> Mental health care services | <input type="checkbox"/> HIV/AIDS service |
| <input type="checkbox"/> Legal services | <input type="checkbox"/> Hepatitis service |
| <input type="checkbox"/> Accommodation services | <input type="checkbox"/> Sexual health service |
| <input type="checkbox"/> Other NSP outlet | <input type="checkbox"/> Peer based service |
| <input type="checkbox"/> STI testing | |
| <input type="checkbox"/> Other (please specify) | |

Referrals can be as simple as providing clients with a contact number to another health service or directing a client to other services located on - site.

Contact the Department of Health 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.

* 11. If your NSP only provides Fitsticks (containing 1ml syringes), have any clients requested different injecting equipment in 2020/21 (eg: alternative tips/needles, barrels etc)

- Yes Not Applicable
- No

* 12. What type of equipment has been requested?

Part 2. Disposal matters

* 13. Has your NSP experienced any issues regarding needle and syringe disposal in 2020/21?

Yes

No

* 14. What was the issue/s?

* 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

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 community.

Part 3. Operational matters

* 19. Have any issues been experienced with NSP clients in 2020/21?

Yes

No

* 20. What was the issue/s?

* 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 2020/21?

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 contact the Department of Health at NSP@health.wa.gov.au

* 24. Have you experienced any issues (not related to COVID-19) in coordinating your NSP in 2020/21?

Yes

No

Part 4. Professional development

* 27. What type of education and training related to NSPs have you participated in, in 2020/21? (Please select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Completed Online NSP Orientation and Training Package | <input type="checkbox"/> Participated in May 2021 NSP coordinator |
| <input type="checkbox"/> Read NSP information on WA Health websites | <input type="checkbox"/> Attended on-line and/or face-to face seminars/lectures/workshops |
| <input type="checkbox"/> Read printed NSP resources | <input type="checkbox"/> None |
| <input type="checkbox"/> Read professional publications (e.g.: <i>Anex Bulletin</i>) | |
| <input type="checkbox"/> Other (please specify e.g. title, topic and name of host organisation) | |

Contact your NSP regional coordinator for any training opportunities that may be available.

You can also contact the Department of Health 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
- see if there are other training opportunities available.

NSP Online Orientation and Training Package is available here: [Mental Health Commission website \(external site\)](#)

**This document can be made available in alternative formats
on request for a person with disability.**

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