While every endeavour has been made to check the accuracy of the information provided in this document, the Department of Health (WA) takes no responsibility for any errors that may be contained within.
1. Introduction

The Poisons Regulations 1965 state that a Needle and Syringe Program (NSP) Coordinator is required to submit an NSP Annual Report at the end of every financial year.

Of the 106 current Needle and Syringe Programs (NSPs), 84 coordinators (79 percent) submitted a 2011-12 NSP Annual Report (see Appendix A for a list of these NSPs). This is a similar proportion to response rates in previous years. Table 1 shows the report submitted by type of NSP:

<table>
<thead>
<tr>
<th>Type of NSP</th>
<th>Number of current NSPs</th>
<th>Number of responses (%)</th>
<th>% of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health-service based</td>
<td>86</td>
<td>66 (76.7%)</td>
<td>78.6</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>6*</td>
<td>6 (100%)</td>
<td>7.1</td>
</tr>
<tr>
<td>Needle and syringe exchange</td>
<td>6</td>
<td>6 (100%)</td>
<td>7.1</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>6 (75%)</td>
<td>7.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>106</strong></td>
<td><strong>84</strong></td>
<td><strong>99.9%</strong></td>
</tr>
</tbody>
</table>

*Note: The six pharmacies in the table have an approval to sell loose needles and syringes. There are approximately another 550 community pharmacies which supply packaged injecting equipment under the Pharmacy Registration Board of WA’s blanket approval.

** Due to rounding, % of responses does not total 100%.

The Sexual Health and Blood-borne Virus Program (SHBBVP), Department of Health WA (DoH) provided coordinators with the NSP Annual Report 2011-12 template (see Appendix B) which comprised 24 questions about the activities and operations of the NSP during the reporting period. Topics covered included service provision, disposal issues, operational issues, professional development, and how to improve the NSP.

Coordinators had the option to complete the report online through the DoH website. Forty-six annual reports were completed online (compared to 52 last year), while 38 were either emailed, faxed or mailed to the DoH. Annual reports were collected between July and September 2012. The results presented in this report apply to those 84 NSPs for which the coordinator submitted an annual report.
2. Service Provision

Seventy-six of the 84 (90 percent) responding NSPs distributed injecting equipment to clients during the reporting period. The WA AIDS Council’s (WAAC) Fremantle site and mobile needle and syringe exchange van, the WA Substance Users’ Association (WASUA) in Perth and South West mobile needle and syringe exchange van, Palmerston Mandurah, and the Midwest needle and syringe exchange program (NSEP), distributed a range of loose needles and syringes with a disposal container. All health service-based NSPs distributed Fitsticks™ to clients. Fifteen NSPs reported distributing a mix of loose needles and syringes, and packaged needles and syringes including Fitpacks® and Sterafits™. These NSPs included pharmacies, health services and specifically targeted non-government organisations.

Printed information on a variety of injecting drug use-related topics was routinely distributed with injecting equipment or was available for clients to access in waiting areas at 61 (73 percent) NSPs. Topics distributed are illustrated in Chart 1 below:
Thirty-seven NSPs (44 percent) referred clients to other services as shown in Table 2 below:

**Table 2: Number of NSPs who Referred Clients to Other Services**

<table>
<thead>
<tr>
<th>Type of Referral</th>
<th>Number of NSPs who Made Referrals</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug and alcohol counselling</td>
<td>21</td>
<td>25</td>
</tr>
<tr>
<td>Detoxification services</td>
<td>14</td>
<td>16.7</td>
</tr>
<tr>
<td>Treatment and rehabilitation options</td>
<td>18</td>
<td>21.4</td>
</tr>
<tr>
<td>Mental health care services</td>
<td>14</td>
<td>16.7</td>
</tr>
<tr>
<td>Legal services</td>
<td>6</td>
<td>7.1</td>
</tr>
<tr>
<td>Accommodation services</td>
<td>8</td>
<td>9.5</td>
</tr>
<tr>
<td>Other NSP outlet</td>
<td>10</td>
<td>11.9</td>
</tr>
<tr>
<td>Sexually transmitted infection Testing</td>
<td>16</td>
<td>19</td>
</tr>
<tr>
<td>Blood-borne virus Testing</td>
<td>18</td>
<td>21.4</td>
</tr>
<tr>
<td>Hospital</td>
<td>9</td>
<td>10.7</td>
</tr>
<tr>
<td>Other medical practitioner</td>
<td>10</td>
<td>11.9</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>8.3</td>
</tr>
</tbody>
</table>

3. Disposal Issues

Across the 84 NSPs, 14 coordinators (17 percent) reported experiencing issues regarding needle and syringe disposal over the reporting period. The key concerns were about incorrectly disposed needles and syringes found in public areas / by members of the public, and safe disposal practices from non-NSP workers and the public. One NSP also reported positive feedback from both staff and clients in relation to a new disposal bin.

NSP Coordinators were asked to provide information on what action was taken to address disposal issues and the most frequently cited responses were to engage in discussions with staff and clients regarding safe disposal, and general awareness-raising of safe disposal of injecting equipment.
Seventy-nine NSP Coordinators (94 percent) reported engaging in at least one strategy to facilitate the safe disposal of needles and syringes. The most common methods reported by coordinators to facilitate the safe disposal of needles and syringes were:

- Provision of injecting equipment with disposal containers (n=73).
- Education through printed resources or verbal direction (n=48).
- Availability of disposal bins (n=18).
- Taking back used equipment (n=18).
- Fixed disposal units in public amenities (n=16).
- Referral to needle and syringe exchange programs (n=16).

4. Operational issues

NSP Coordinators were asked about issues that they have experienced relating to staff, clients and the coordination of their NSP. Table 3 below shows the responses received to these questions:

Table 3: Operational Issues reported by NSP Coordinator

<table>
<thead>
<tr>
<th>Operational Issue</th>
<th>Number of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Issues with Clients</strong></td>
<td></td>
</tr>
<tr>
<td>Disruptive behaviour</td>
<td>11</td>
</tr>
<tr>
<td>Clients injecting drugs in close proximity to the NSP</td>
<td>8</td>
</tr>
<tr>
<td>Verbal abuse</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
</tr>
<tr>
<td><strong>Issues with staff</strong></td>
<td>19</td>
</tr>
<tr>
<td>Moral objection or anxiety to distributing needles and syringes</td>
<td>13</td>
</tr>
<tr>
<td>Problems interacting with clients</td>
<td>5</td>
</tr>
<tr>
<td>Personal safety concerns</td>
<td>3</td>
</tr>
<tr>
<td>Anonymity and confidentiality issues</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
</tr>
<tr>
<td><strong>Issues coordinating NSP</strong></td>
<td>23</td>
</tr>
<tr>
<td>Staff turnover</td>
<td>13</td>
</tr>
<tr>
<td>Record keeping</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
</tr>
<tr>
<td>Accessing supply of needles and syringes</td>
<td>2</td>
</tr>
<tr>
<td>Understanding the duties of the NSP Coordinator role</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: Respondents could select multiple answers
Issues with clients

Twenty (24 percent) NSP Coordinators reported experiencing issues with clients, with one NSP Coordinator reporting positive issues relating to information sharing between staff and clients, opportunities for engagement with clients and for providing brief interventions. The predominant issues reported included disruptive behaviour (n=11), clients injecting in close proximity to the NSP (n=8) and verbal abuse (n=7).

Coordinators were asked whether any action was taken to address these issues. The main actions taken involved discussion with staff around training and how to deal with clients in different situations, and education and discussion with clients around what is and is not acceptable behaviour.

Issues with staff

Nineteen (23 percent) NSP Coordinators reported experiencing issues with staff including:

- Moral objection or anxiety to distributing needles and syringes (n=13).
- Problems interacting with clients (n=5).
- Personal safety concerns (n=3).
- Anonymity and confidentiality issues (n=3).

Other issues raised included concerns with the number of Fitsticks™ being requested by clients and the provision of equipment to minors. Some NSP Coordinators reported that their staff respond positively to the NSP and are passionate about contributing to its operation.

In terms of action taken to address these issues, the most frequently cited ways of dealing with these issues were around education, training and awareness-raising of NSPs and the benefits that the program can have.

Issues coordinating the NSP

Twenty-three (27 percent) NSP Coordinators stated that they had experienced issues in the coordination of their NSP, with the biggest issue being staff turnover (n=13) which has consistently been highlighted in previous NSP Annual Reports. Other issues raised related to individual NSP procedures and access to additional resources to be distributed with Fitsticks™ e.g. brochures and equipment (water, filters, spoons).  

6
Action taken to address the issues identified included education and training around the NSP and related policies and procedures, and ensuring effective communication between staff members.

5. Professional Development

Seventy-three NSP Coordinators (87 percent) reported undertaking at least one form of education/training relating to NSP during the reporting period. The most common types of professional development that were accessed were:

- Read NSP News (n=54).
- Read the NSP Information Pack (n=43).
- Read professional publications (n=38).
- Attended lectures, seminars, workshops (n=15).
- Participated in 2012 NSP Coordinator Training (n=12).

Other training and workshops that NSP Coordinators participated in included those organised by the Drug and Alcohol Office (DAO), WASUA and Hepatitis WA, and sessions organised locally.

When asked whether they were aware of the new Online NSP Orientation and Training Package, 61 (73 percent) NSP Coordinators stated that they were aware of the new online training and 57 (68 percent) stated that they would be interested in completing the online training. In addition to this, 79 (94 percent) NSP Coordinators said that they would encourage staff members and colleagues to complete the training package.
6. General

Sixty-six (79 percent) NSP Coordinators undertook activities to enhance their NSP in some way during the year. This is summarised in Table 4 below:

**Table 4: Activities Undertaken to Enhance the NSP**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide short training sessions for new staff</td>
<td>35</td>
</tr>
<tr>
<td>Review the NSP guidelines</td>
<td>32</td>
</tr>
<tr>
<td>Make up packs with sterile water, swabs, condoms and information</td>
<td>31</td>
</tr>
<tr>
<td>Provide in-house staff training</td>
<td>30</td>
</tr>
<tr>
<td>Establish rapport and networks with regular clients</td>
<td>19</td>
</tr>
<tr>
<td>Provide staff with region specific information</td>
<td>12</td>
</tr>
<tr>
<td>Provide debrief session for staff</td>
<td>11</td>
</tr>
<tr>
<td>Conduct community education sessions</td>
<td>9</td>
</tr>
<tr>
<td>Develop a list of referral agencies for NSP staff</td>
<td>8</td>
</tr>
<tr>
<td>Develop a list of harm reduction brief information questions for NSP staff</td>
<td>6</td>
</tr>
</tbody>
</table>

Note: Respondents could select multiple answers

The majority of NSP Coordinators reported they were either ‘very satisfied’ or ‘satisfied’ (n=25, 50; see Table 5) with the way their NSP operates within the community. This compares very favourably with levels of satisfaction for the previous NSP Annual Report and shows increased levels of satisfaction among NSP Coordinators.

**Table 5: Level of satisfaction of the NSP Coordinator with the way the NSP operates within the community**

<table>
<thead>
<tr>
<th>Level of Satisfaction</th>
<th>Number (%) of responses 2011-12</th>
<th>Number (%) of responses 2010-11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfied</td>
<td>25 (30%)</td>
<td>19 (22%)</td>
</tr>
<tr>
<td>Satisfied</td>
<td>50 (60%)</td>
<td>41 (48%)</td>
</tr>
<tr>
<td>Neutral</td>
<td>7 (8%)</td>
<td>24 (28%)</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>1 (1%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Very dissatisfied</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
The main comments provided in relation to levels of satisfaction were that NSP Coordinators would like to increase engagement with clients and to have more time to be able to spend with clients.

7. Suggestions for service enhancement

When asked how NSPs could be improved, Coordinators made a number of suggestions including:

- Developing better links between NSPs and other agencies.
- Increasing availability of resources for clients such as condoms and wheel filters, and providing more culturally appropriate resources/information.
- Better promotion of NSPs in local communities and increased awareness among staff of the benefits of NSPs.
- More training for staff and volunteers.
- More disposal containers in public places.
- More involvement with WASUA.

Nineteen (23 percent) NSP Coordinators felt that the DoH could improve the level of support provided to NSPs and suggestions of how this might be done included:

- Promotion of the benefits of NSPs to staff.
- Providing resources to be included with Fitsticks™ for distribution e.g. condoms, sterile water, wheel filters, pamphlets.
- Providing more local education sessions involving specialist agencies e.g. Hepatitis WA.
- Providing more culturally appropriate resources.
- Better local promotion of NSPs and safer using and disposal methods.
- Support in incorporating NSPs into organisational policy and procedures.
- Clear identification of where NSPs are located e.g. a symbol.
• Promotion of blood-borne virus awareness in rural areas.

• Undertaking steps to promote positive media coverage of NSPs.

10. Conclusion

Results from the 2011-12 NSP Annual Reports reflect the continued dedication of NSP staff to delivering services through needle and syringe programs in WA and working towards reducing the transmission of blood-borne viruses through injecting drug use. The response rate of 79 percent was consistent with recent years and helps to provide an overview of the effectiveness of NSPs and the activities they undertake over the course of the year.

Increasing numbers of NSPs are reporting distributing printed resources with 73 percent providing printed information to clients during the 2011-12 financial year, compared to 69 percent the previous year. Information on hepatitis C and safer using were most frequently distributed resources, which contributes to promoting messages of safer injecting and protecting against the transmission of blood-borne viruses. The DoH can provide NSPs with printed health promotion and prevention information on a range of injecting drug use related topics. A list of these resources can be found at Appendix C. Agencies such as WASUA, WAAC, Hepatitis WA and DAO also produce printed resources and can be contacted directly for further information on what is available.

Numbers of referrals made are increasing with 44 percent of NSPs making referrals to other services during 2011-12 compared to 38 percent during 2010-11, and 19 percent during the 2009-10 reporting period. The greatest numbers of referrals were to drug and alcohol counselling, treatment and rehabilitation services, and blood-borne virus testing; which demonstrates the ongoing inter-agency work that takes place throughout WA. Staff at NSPs are encouraged to engage in brief interventions with clients where appropriate, and to be familiar with local referral agencies. The NSP Information and Referral Agencies document (Appendix D) lists a number of agencies, however it is recommended that NSP Coordinators develop a local referral list of their own.

NSPs continue to experience issues with needle and syringe disposal, however the number of Coordinators reporting these issues has decreased over recent years. In the 2011-12 reporting period 17 percent of Coordinators experienced issues with disposal compared to 19 percent...
during 2010-11, and 29 percent during 2009-10. Ninety-four percent of NSP Coordinators reported engaging in strategies to facilitate the safe disposal of needles and syringes with the most common methods being through the provision of disposal containers (87 percent), and education through printed resources or verbal direction (57 percent).

NSP Coordinators reported a number of operational issues with clients (24 percent), staff (23 percent) and the coordination of the NSP (27 percent), however this is a reduction from the 2010-11 reporting period (28 percent, 35 percent and 35 percent respectively). The key issues highlighted were disruptive behaviour from clients (13 percent compared with 12 percent the previous reporting period), moral objection from staff or anxiety to distributing needles and syringes (15 percent compared with 21 percent the previous reporting period), and staff turnover (15 percent compared with 22 percent the previous reporting period). The main ways in which these issues were addressed were through education and awareness-raising among staff and clients and training of staff around NSPs. It is important to note that some Coordinators also reported positive issues in relation to clients and staff. NSP Coordinators should be commended for their ongoing efforts to identify and address these issues and their support in providing NSP services throughout WA.

Eighty-seven percent of Coordinators undertook some form of education or training related to NSP during the reporting period and the importance of appropriate training for staff was highlighted. The new online NSP Orientation and Training Package should contribute towards raising awareness of NSP and providing staff with information in delivering NSP services. Seventy-three percent of Coordinators were aware of this training at the time of completing the Annual Report, and 94 percent of Coordinators stated that they would encourage staff members and colleagues to complete the training package. Staff training can also be delivered to regional areas by non-government agencies including Hepatitis WA and WASUA. Further information on training opportunities can be obtained from the SHBBVP.

Seventy-nine percent of NSP Coordinators undertook activities to enhance their NSP over the course of the reporting period including providing training sessions for new staff, reviewing their NSP guidelines and making up packs with sterile water, swabs, condoms and information. This reflects the dedication of staff in providing NSPs and their efforts to deliver services to promote harm reduction among injecting drug users.
It is encouraging to see that the majority of NSP Coordinators are either satisfied (60 percent) or very satisfied (30 percent) with the way their NSP operates. This is also an improvement on satisfaction levels during the 2010-11 reporting period where 70 percent of Coordinators were either satisfied or very satisfied.

In terms of service enhancement and support from the DoH, a number of NSP Coordinators requested more culturally appropriate resources. The DoH has recently updated resources on sexually transmitted infections and blood-borne viruses for Aboriginal communities, which are available to order through the Department’s Pack Centre. The Drug and Alcohol Office (DAO) also developed a number of resources through their Aboriginal blood-borne virus project which may be useful for NSP staff working with Aboriginal clients. Through this project, DAO can also provide training on BBV issues specifically for agencies working with Aboriginal people. Further information on these resources and training opportunities can also be obtained from the SHBBVP.

The SHBBVP have recently produced a range of Culturally and Linguistically Diverse (CALD) factsheets which will be available in the following languages:

- Arabic
- Burmese
- Chinese
- French
- Indonesian
- Thai
- Vietnamese

NSP Coordinators will be notified by email once these resources are available to order.

Coordinators are also reminded that the SHBBVP are available to discuss any issues or ideas that NSP staff may have throughout the year and can offer information and support to staff in relation to NSP provision.

The SHBBVP thank the NSP Coordinators for their invaluable contribution to NSP provision in Western Australia.
Appendix A

Participating Needle and Syringe Programs
NSPs for which coordinators submitted an NSP Annual Report 2011/12

Albany Community Pharmacy
Augusta Hospital
Boddington Hospital
Bremer Bay Health Centre
Bridgetown District Hospital
Bruce Rock Memorial Hospital
Bunbury Regional Hospital
Busse1ton Hospital
Busy Bee Chemist and Newsagency
Carnarvon Hospital
Chinatown Pharmacy
Collie Health Service
Compari Midwest Community Drug Service Team
Coolgardie Health Centre
Coral Bay Nursing Post
Cunderdin District Hospital
Denmark District Hospital
Department of Health, Communicable Disease Control Branch
Dongara Eneabba Mingennew Health Service
Donnybrook Hospital
Dumbleyung Memorial Hospital
Esperance Community Health Centre
Esperance Regional Hospital
Exmouth Hospital
Geraldton Hospital
Gnowangerup District Hospital
Goldfields Public Health Services
Goomalling District Hospital
Great Southern Aboriginal Health Service
Great Southern Community Drug Service Team
Great Southern Population Health Unit
Harvey Hospital
Hedland Health Campus
Hedland Well Women's Centre
HepatitisWA
Jurien Bay Health Centre
Kalbarri Health Service
Kalgoorlie Regional Hospital
Kellerberrin Memorial Hospital
Kimberley Public Health Unit
Kojonup Hospital
Kondinin Districts Health Service
Lake Grace District Health Service
Leonora Community Health
Leonora Hospital
Magenta and SWOPWA
Margaret River District Hospital
Menzies Health Centre
Merredin District Hospital
Moora Hospital
Nannup Hospital
Narembeen Memorial Hospital
Newman Hospital
Next Step Specialist Drug and Alcohol Services
Norseman Community Health Centre
Norseman Hospital
Northam Regional Hospital
Northampton Health Service
Palmerston South Metropolitan Community Drug Service
Pemberton Hospital
Perth Inner City Youth Service
Pilbara Population Health Unit
Pingelly Hospital
Plantagenet Hospital
Quairading District Hospital
Ravensthorpe Hospital
Rottnest Island Nursing Post
Southern Cross District Hospital
St Andrew's Pharmacy
Tambellup Health Centre
Tom Price Hospital
WA AIDS Council
WA AIDS Council Fremantle BBV Clinic
WA Substance Users’ Association
WA Substance Users’ Association - SWMNSEP
WACHS Midwest Murchison
Wagin Hospital
Wangara Pharmacy
Warren District Hospital
West Pilbara Community Health Service (Warambie)
Women's Health Resource Centre
Wongan Hills Hospital
Yirrigan Drive-In Chemist
York Hospital
Appendix B

Needle and Syringe Program

Annual Report 2011/12

Please note that under the Poisons Regulations 1965 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.

DUE DATE: 31st August 2012

NSP COORDINATOR DETAILS

Program Location: ____________________________ Program number: _________

Name: ________________________________________________

Email: ____________________________________________ Phone: __________________

Please complete ALL sections of this report by marking the appropriate boxes and providing as much information as possible about your NSP for the year 1 July 2011 to 30 June 2012.

PART 1. SERVICE PROVISION

1. In the past 12 months, did you distribute Fitpacks/Fitsticks, or single needles and syringes through your program?

Fitpacks/Fitsticks:  
Yes  No

Single needles and syringes:  
Yes  No

2. Did your NSP distribute any information to clients during the year?

Yes  No  If no, please go to question 4

3. If yes, what type of information was distributed by your NSP?

- Hepatitis C
- Hepatitis B
- HIV/AIDS
- Safer using information
- Vein care
- Drug information
- Health and medical services
- Housing and welfare

- BBV testing
- STI testing
- BBV treatment options
- Detoxification services
- Body art
- First aid for overdose
- Legal services
- Other (please specify): __________
4. How many referrals did your NSP make during the year?

- [ ] 0
- [ ] 1-5
- [ ] 6-10
- [ ] 11-15
- [ ] 16-20
- [ ] More than 20 (please specify):

5. What types of referrals were made by your NSP?

- [ ] Drug and alcohol counselling
- [ ] Detoxification services
- [ ] Treatment and rehabilitation services
- [ ] Mental health care services
- [ ] Legal services
- [ ] Accommodation services
- [ ] Other NSP outlet
- [ ] STI testing
- [ ] BBV testing
- [ ] Hospital
- [ ] Other medical practitioner
- [ ] Other (please specify):

PART 2. DISPOSAL MATTERS

6. Has your NSP experienced any issues regarding needle and syringe disposal in the past 12 months?

- [ ] Yes
- [ ] No

If no, please go to question 9

7. What was the nature of the issue/s:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

8. Was any action taken to address the issue/s (please specify)?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

9. What strategies are in place at your NSP to facilitate the safe disposal of needles and syringes?

- [ ] Provision of injecting equipment with disposal containers (including Fitpack, Fitstick)
- [ ] Take back used equipment
- [ ] Education through printed resources or verbal direction
- [ ] Fixed disposal units in public amenities
- [ ] Availability of disposal bin
- [ ] Referral to needle and syringe exchange programs
- [ ] None
- [ ] Other (please specify):

________________________________________________________________________
PART 3. OPERATIONAL MATTERS

10. In the past 12 months, what types of issues have been experienced with NSP clients?

☐ None
☐ Disruptive behaviour
☐ Verbal abuse
☐ Clients injecting drugs in close proximity to the NSP
☐ Other (please specify):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

11. Was any action taken to address the issue/s (please specify)?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

12. In the past 12 months, what types of issues have been experienced from NSP staff?

☐ None
☐ Moral objection or anxiety to distributing needles and syringes
☐ Personal safety concerns
☐ Problems interacting with clients
☐ Anonymity and confidentiality issues
☐ Other (please specify):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

13. Was any action taken to address the issue/s (please specify)?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

14. In the past 12 months, what type of issues have you experienced in coordinating your NSP?

☐ None
☐ Understanding the duties of the NSP Coordinator
☐ Understanding recent changes to the Operational Directive (if applicable), Guidelines, and/or
   Duties of an NSP Coordinator documents
☐ Accessing supply of needles and syringes
☐ Record keeping
☐ Staff turnover
☐ Communication with the Department of Health
☐ Other (please specify):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

15. Was any action taken to address the issue/s (please specify)?

________________________________________________________________________
________________________________________________________________________
PART 4. PROFESSIONAL DEVELOPMENT

16. As the NSP Coordinator, what type of education and training related to NSPs have you participated in, in the past 12 months?

☐ Participated in 2012 NSP Coordinator Training
☐ Read the NSP Information Pack
☐ Read professional publications
☐ Read NSP News
☐ Attended seminars/lectures/workshops*
☐ None
☐ Other (please specify):

*Please specify the title(s) of the seminars/lectures/workshops, and the location and name of organisation hosting the event:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

17. Are you aware of the new Online NSP Orientation and Training Package?

☐ Yes  ☐ No

The online training package aims to enhance the knowledge, confidence and skills of health workers who deliver NSP services and can be undertaken by those already working in NSP as well as those who are new to the area. The entire program takes approximately 3 hours to complete with a final assessment on completion, and a certificate on passing the program. Professional development points are available for nurses and pharmacists completing the package.

For further information on the new Online NSP Orientation and Training Package, please email NSP@health.wa.gov.au

18. Are you interested in completing the Online NSP Orientation and Training Package?

☐ Yes  ☐ No  ☐ Unsure

19. Would you encourage staff members/colleagues to complete this online training package?

☐ Yes  ☐ No
PART 5. GENERAL SERVICE MATTERS

20. Have you done any of the following to enhance your NSP in the last 12 months?
   - [ ] Provide short orientation sessions for new staff
   - [ ] Provide in-house staff training
   - [ ] Provide staff with region specific information
   - [ ] Provide debrief sessions for staff
   - [ ] Conduct community education sessions
   - [ ] Establish rapport and networks with regular clients
   - [ ] Make up packs with sterile water, swabs, condoms and information
   - [ ] Develop a list of harm reduction brief information questions for NSP staff
   - [ ] Develop a list of referral agencies for NSP staff
   - [ ] Review the NSP guidelines
   - [ ] None of the above
   - [ ] Other (please specify):

   ________________________________________________________________
   ________________________________________________________________

21. Please indicate your level of satisfaction with the way your NSP operates within your community:

   - [ ] Very satisfied
   - [ ] Satisfied
   - [ ] Neutral
   - [ ] Dissatisfied
   - [ ] Very dissatisfied

   Comments

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

22. Do you have any suggestions that may improve your NSP?

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

23. Can the Department of Health enhance support for your NSP?

   - [ ] Yes
   - [ ] No

24. If yes, in what ways?

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
I have undertaken the duties of the Coordinator of an approved needle and syringe program as set out in the Poisons Regulations 1965.

Signature of the Coordinator:     Date:

__________________________________________________________________________

Thank you for your assistance in completing this report and your continued contribution to NSP provision in Western Australia.

Please return completed reports to:

Faye Thompson
Program Officer
Sexual Health and Blood-borne Virus Program
PO Box 8172, PERTH BUSINESS CENTRE WA 6849
Ph: 08 9388 4856 / Fax: 08 9388 4877
faye.thompson@health.wa.gov.au
Appendix C

Needle and Syringe Program and Blood-borne Virus Publication Catalogue

To order publications visit:

<table>
<thead>
<tr>
<th>NAME OF PUBLICATION</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needle &amp; Syringe Programs in our Community</td>
<td>HP010453</td>
</tr>
<tr>
<td>Safe Disposal of Needles and Syringes</td>
<td>HP005780</td>
</tr>
<tr>
<td>What is Hepatitis C?</td>
<td>OA000832</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>HP003211</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>HP010060</td>
</tr>
<tr>
<td>All About Hepatitis</td>
<td>HP012478</td>
</tr>
<tr>
<td>(resource for Aboriginal people)</td>
<td></td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>HP010055</td>
</tr>
<tr>
<td>All About HIV/AIDS</td>
<td>HP012476</td>
</tr>
<tr>
<td>(resource for Aboriginal people)</td>
<td></td>
</tr>
<tr>
<td>Understanding &amp; Preventing Sexually Transmitted Infections</td>
<td>HP008979</td>
</tr>
<tr>
<td>Healthy Body Art</td>
<td>HP10313</td>
</tr>
</tbody>
</table>

Please note, agencies such as the WA Substance Users’ Association, WA AIDS Council, Hepatitis WA and the Drug and Alcohol Office also produce a range of safer injecting, NSP and BBV publications. Please contact these agencies directly for more information.
Appendix D

NSP Information and Referral Agencies

ADIS: Alcohol and Drug Information Service
Tel:  (08) 9442 5000 Email: ADIS@health.wa.gov.au
Fax:  (08) 9442 5020 Country Callers (free): 1800 198 024

A 24-hour telephone service providing confidential counselling, information, and referral about alcohol and drug-related problems.

Also provides a 24 hour counselling Parent Drug Information Service (PDIS) to the parents and family members of individuals experiencing alcohol and drug-related problems and some peer support via a Parent Volunteer Support Network. PDIS can be reached on: (08) 9442 5050, Toll Free for Country Callers: 1800 653 203 or email: PDIS@health.wa.gov.au

ABORIGINAL ALCOHOL AND DRUG SERVICE INC.
211 Royal Street, East Perth WA 6004
Tel:  (08) 9221 1411 Email: info@aads.org.au
Fax:  (08) 9221 1585

Free counselling and referral support for Aboriginal people with alcohol and other drug-related concerns. Operates Monday to Friday, 8:30am to 5pm.

CLINICAL ADVISORY SERVICE (restricted to clinicians only)
Tel:  (08) 9442 5042

Provides 24 hour specialist medical support to GPs and other professionals involved in the treatment of people with alcohol and other drug problems. The Clinical Advisory Service (CAS) has a key role in supporting the Community Program for Pharmacotherapies (CPOP). The service provides support for CPOP including liaison between clients and community pharmacists and prescribers. As well as advise on the phone, CAS provides information sheets and brochures to health professionals on a range of alcohol and drug issues.

CYRENIAN HOUSE
Non-Residential Programs
318 Fitzgerald Street, Perth WA 6000
Tel:  (08) 9328 9200 Email: enquiry@cyrenianhouse.com
Fax:  (08) 9328 9200 Web: http://www.cyrenianhouse.com

Provides individual, family and group counselling for persons with both licit and illicit drug use issues and those affected by their use. Provides transitional programs for male and female prisoners with drug use issues, during imprisonment and upon release.

Residential Programs
920 Gnangara Road, Cullacabardee WA 6067
Tel:  (08) 9302 2222 Fax:  (08) 9302 2237

Provides a mixed gender residential program for persons with significant licit and/or illicit drug use issues. Also provides a women-only residential program for women with young children. The program is for women who have significant drug use issues and is structured to meet specific treatment needs.

COMMUNICABLE DISEASE CONTROL DIRECTORATE
Department of Health
Email: cdc@health.wa.gov.au
Provides information about a range of communicable diseases and issues relating to injecting drug use. For queries relating to the needle and syringe program, please contact the Sexual Health and Blood-borne Virus Program.

DERBARL YERRIGAN HEALTH SERVICE
156 Wittenoom Street, East Perth WA 6004
Tel: (08) 9421 3888 Web: http://www.derbarlyerrigan.com.au/
Fax: (08) 9421 3883

Provides information, education and referral to Aboriginal persons with drug-related issues across five sites in the Perth metropolitan area. Also offers confidential testing for STI/HIV/hepatitis B and C, and operates a needle and syringe program. Medical services are also provided at clinics operating from 9am to 5pm, five days per week in Mirrabooka (9344 0444) and Maddington (9452 5333).

FREMANTLE HOSPITAL
Infectious Diseases Clinic
Block B2, Alma Street, Fremantle WA 6160
Tel: (08) 9431 2149

Confidential STI/HIV/hepatitis B and C testing, hepatitis B vaccination. Referral not required. A specialist management service for all STIs and BBVs. Provides public and community education.

HELPLINE: WA AIDS Council
AIDSLine: (08) 9482 0044 Web: http://www.waids.com
Email: aidsline@waids.com

AIDSLine provides information and referral services on HIV/AIDS, STI and sexual health issues. Operates 9am to 5pm, Monday to Friday.

HEPATITISWA
187 Beaufort St, Northbridge WA 6003
Tel: (08) 9328 8538 Email: info@hepatitiswa.com.au
Fax: (08) 9227 9800 Web: http://www.hepatitiswa.com.au
Country Callers (free): 1800 800 070

Confidential telephone information and support for those infected with and affected by hepatitis C. Public meetings, community education, client advocacy, individual counselling, library services, education resources for professionals and the community.

HOLYOAKE: Australian Institute on Alcohol and Drug Addiction
75 Canning Hwy, Victoria Park, WA, 6000 Website: www.holyoake.org.au
Tel: (08) 9416 4444 Email: reception@holyoake.org.au
Fax: (08) 9416 4443

Wheatbelt Drug Service Team:
95 Wellington Street, Northam WA 6401
Tel: (08) 9621 1055 Email: admin@wcdst.holyoake.org.au

A strong family approach in the wide range of programs offered, service operates Monday, Thursday and Friday from 9am to 5pm, Tuesday and Wednesday 9am to 8pm. The following services as well as a non-residential women’s addiction program and a men’s non-residential addiction program are available:
- Childhood in Perspective – family of origin issues
- Focus Program – Partners dependency issues
- Young People’s Program – Children whose parents have alcohol or drug problems
- Parent Services – Assisting parents with adolescent or adult substance users
- Adolescent Services – Assisting young people with substance issues
- Prison to Parole Program – Assisting those in conflict with the law.
MAGENTA/SWOPWA
81 Brisbane St, Northbridge, WA 6000
Tel: (08) 9328 1387 Website: www.magenta.org.au
Fax: (08) 9227 9606 Email Magenta: info@magenta.org.au
Email SWOPWA: swopwa@fpwa.org.au

Magenta and SWOPWA provide confidential and sex worker friendly services to support and promote the health and safety of people involved in the sex industry. The sexual health clinic at Magenta runs every Wednesday from 10 am to 1 pm by appointment and offers free STI screening, HIV testing, Hepatitis B immunisation, and answers to general health questions. A translator can be arranged for CaLD clients and a range of sexual health and working resources is available in many languages. Educators and low cost supplies are available Monday to Thursday, 9 am to 4pm. Magenta periodically extends outreach to regional areas in the state.

SWOPWA services are for street based sex workers only. Outreach is provided Tuesday to Thursday afternoons, and Friday and Saturday evenings (2 weekends out of 3). Clients can access free harm reduction supplies of safe sex equipment and safer injecting equipment.

PALMERSTON ASSOCIATION INC.
134 Palmerston Street, Perth WA 6000
Tel: (08) 9328 7355 Web: http://www.palmerston.org.au
Fax: (08) 9227 9158 Email: mail@palmerston.org.au

Albany Unit
3/145 Lower Stirling Terrace, Albany WA 6330
Tel: (08) 9842 8008 Email: gscdst@iinet.net.au

Provides non-residential assessment, counselling and referral for youth (14 to 25 years), adults (25 years plus), and parents and significant others who want to discuss alcohol and other drug use, and related issues. Additionally, a Bereavement Service offers one-to-one counselling and/or group sessions (Monday evenings) for parents who have lost a child through drug use.

Palmerston Farm provides medium-term, residential therapeutic community setting for people (16 years plus) with alcohol and other drug use issues.

NEXT STEP SPECIALIST DRUG & ALCOHOL SERVICES
East Metropolitan Drug & Alcohol Service
32 Moore Street, East Perth WA 6004 Email: nextstep@health.wa.gov.au
Tel: (08) 9219 1919
Fax: (08) 9221 3089

North Metropolitan Drug & Alcohol Centre South Metropolitan Community Drug Services
26 Dugdale St, Warwick WA 6024 Level 3/22 Queen St, Fremantle WA 6160
Tel: (08) 9246 6767 Tel: (08) 9430 5966
Fax: (08) 9246 6768 Fax: (08) 9335 3071

Clinical Community Program Youth Service
Tel: (08) 9219 1919 Tel: (08) 1300 651 329
Fax: (08) 9471 0444

The outpatient service offers assessment, case management, pharmacotherapies (including methadone and suboxone) and blood-borne virus testing to anyone over 18 with alcohol and/or other drug problems. Entry is by referral or brief assessment. Brief assessments can be conducted by phone.

The inpatient withdrawal unit offers supervised medical drug and alcohol withdrawal treatment (5 to 14 days stay – 13 beds plus 4 Aboriginal beds available) within a therapeutic and supportive environment.

The Youth Services provide an assessment and treatment program for young people between the ages of 12 and 19 years who are experiencing difficulties in relation to their alcohol and/or other drug use and other co-occurring mental health issues. Services include counselling, medical assessment and treatment, blood-borne virus screening and immunisations for Hepatitis A and B, and the Human Papilloma Virus, a music program, family counselling and
consultation and support for the youth sector. Next Step operates an integrated triage and entry process with Mission Australia Youth Withdrawal and Respite Service and the YIRRA Program.

A Community Methadone Program provides referral to clients wishing to access GP methadone and suboxone prescribers.

**DRUG AND ALCOHOL YOUTH SERVICE**

129 Hill Street, East Perth WA 6004  
Tel: (08) 9222 8363

A service for young people aged 12 to 18 years who are experiencing serious problems related to drug use. The integrated Drug and Alcohol Youth Service is a partnership between Mission Australia and Next Step. The service provides young people and their families with improved access to a comprehensive range of alcohol and other drug services. These services include withdrawal and respite, clinical psychology, medical assessment and review, opiate and alcohol pharmacotherapy, residential rehabilitation and Aboriginal and youth mentors. Clients can self-refer to the service, but should ring to make an appointment.

The Residential Program offers assessment, support, counselling and group activities.

**ROYAL PERTH HOSPITAL**

Sexual Health Clinic  
Wellington Street, Perth WA 6000  
Tel: (08) 9224 2178

Specialist medical care of all STIs and BBVs. Provides hepatitis B vaccinations. Referral is not required.

Communicable Diseases Service OR Gastroenterology Service  
Wellington Street, Perth WA 6000  
Tel: (08) 9224 2244

Offers essential specialist medical care for all HIV and hepatitis C positive people. Medical practitioner referral is required. A social worker is available.

**SALVATION ARMY: Bridge House**

15 Wright Street, Highgate WA 6003  
Tel: (08) 9227 8086  
Fax: (08) 9227 7302

Provides detoxification and assessment services for adults, 18 to 65 years, who are experiencing problems related to alcohol and drug use. This is a non-medical facility, offering a safe space for sobering up (maximum 24 hours) or detoxification (maximum 48 hours). Pending an interview, people who have detoxified may access a two-week live-in residential program, and on completion, may transfer to the Harry Hunter residential program (13 weeks).

Also offers a Community Care Program providing low cost housing and free counselling to support those who have completed detoxification and who remain sober in re-integrating the community.

**WA AIDS COUNCIL (WAAC)**

664 Murray Street, West Perth WA 6005  
Tel: (08) 9482 0000  
AIDSLine: (08) 9482 0044  
Fax: (08) 9482 0001  
Email: waac@waaids.com.au  
Web: http://www.waaids.com

Provides education, counselling, advocacy, support and care services to enhance the quality of life of people living with and/or affected by HIV/AIDS. Provides services to minimise the transmission of BBVs and STIs. These include a needle and syringe exchange program that provides equipment and information on safer sexual and injecting practices at fixed and mobile sites, peer education and outreach programs.
WA Substance Users’ Association (WASUA)
519 Murray Street, West Perth WA 6005
Tel: (08) 9321 2877    Email: info@wasua.com.au
Fax: (08) 9321 4377    Web: http://www.wasua.com.au

Provides support, education, advocacy and referral to people who inject drugs via in-house sessions with clients and/or outreach interactions. Focus on the prevention of BBV and STI via peer education and a fixed-site needle and syringe exchange program operating Saturday to Wednesday 10am to 4pm, and Thursday to Friday 10am to 8pm. Develops and distributes informational materials in partnership with other organisations and agencies.

WASUA also offers BBV and STI testing and hepatitis B vaccinations via a weekly clinic on Tuesdays and Thursdays 10am to 4pm.

COMMUNITY DRUG SERVICE TEAMS

NORTH EAST METROPOLITAN
14 Sayers Street
Midland 6056
Tel: (08) 9274 7055
Fax: (08) 9274 7066
Email: desk@cdst.holyoake.org.au

SOUTH EAST METROPOLITAN
Suite 4, 1 Hamilton Street
Cannington 6107
Tel: (08) 9358 4011
Fax: (08) 9358 4144
Email: cds@missionaustralia.com.au

GREAT SOUTHERN
Palmerston
3/145 Proudlove Parade
Albany 6330
Tel: (08) 9842 8008
Fax: (08) 9842 8719
Email: albany@palmerston.org.au

PILBARA
Cnr Colebatch Way and Rason Court
South Hedland 6722
Tel: (08) 9158 9222
Fax: (08) 9158 9215
Email: runga.pillay@health.wa.gov.au

NORTH METROPOLITAN
U3/26 Dugdale Street
Warwick 6024
Tel: (08) 9246 6767
Fax: (08) 9246 6768
Email: Deb.Slade@cyrenianhouse.com

SOUTH METROPOLITAN
Level 3, 22 Queen Street
Fremantle 6160
Tel: (08) 9335 8156
Fax: (08) 9335 3071
Email: fremantle@palmerston.org.au

KIMBERLEY
Cnr Anne and Robinson Streets
Broome 6725
Tel: (08) 9194 2640
Fax: (08) 9192 3489
Email: kmhdsclinic.reception@health.wa.gov.au

SOUTH WEST
167 Spencer Street
Bunbury 6230
Tel: (08) 9721 9256
Fax: (08) 9721 8375
Email: admin.swcdst@sjog.org.au

PERTH METROPOLITAN
318 Fitzgerald Street
Perth 6000
Tel: (08) 9328 9200
Fax: (08) 9227 7431
Email: enquiry@cyrenianhouse.com

GEOGEBE
7 Dugan Street
Kalgoorlie 6430
Tel: (08) 9091 1833
Fax: (08) 9021 8673
Email: @centrecare@goldfields.centrecare.com.au

MIDWEST
Community Health Building
51-85 Shenton Street
Geraldton 6530
Tel: (08) 9956 2424
Fax: (08) 9956 2440
Email: mwcdst@health.wa.gov.au

WHEATBELT
95 Wellington Street
Northam 6401
Tel: (08) 9621 1055
Fax: (08) 9621 1077
Email: adminwheatbelt@holyoake.org.au
<table>
<thead>
<tr>
<th>REGIONAL PUBLIC HEALTH UNITS (those in <strong>bold</strong> provide clinical services)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wheatbelt (Northam)</td>
</tr>
<tr>
<td>Gascoyne (Carnarvon)</td>
</tr>
<tr>
<td><strong>Goldfields</strong> (Kalgoorlie)</td>
</tr>
<tr>
<td>Kimberley (Broome)</td>
</tr>
<tr>
<td>Great Southern (Albany)</td>
</tr>
<tr>
<td><strong>Midwest</strong> (Geraldton)</td>
</tr>
<tr>
<td>Pilbara (South Hedland)</td>
</tr>
<tr>
<td>South West (Bunbury)</td>
</tr>
</tbody>
</table>

If the details in this document are no longer current, please contact the Sexual Health and Blood-borne Virus Program on (08) 9388 4841 / [NSP@health.wa.gov.au](mailto:NSP@health.wa.gov.au)