

**ACT GOVERNMENT RESPONSE
TO THE RECOMMENDATIONS ON
ACCESS TO NEEDLES AND SYRINGES
BY INTRAVENOUS DRUG USERS**

Report No. 5 of the
Standing Committee on Health

Circulated by the authority of
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PROPOSED ACT GOVERNMENT RESPONSE TO THE RECOMMENDATIONS ON ACCESS TO NEEDLES AND SYRINGES BY INTRAVENOUS DRUG USERS

INTRODUCTION

The Standing Committee on Health resolved to inquire into and report on access to syringes by intravenous drug users with particular regard to:

- after-hours access
- prisons and remand centres; and
- indigenous peoples.

The Committee resolved to undertake an inquiry into the access to syringes by intravenous drug users following concerns raised with Members by the community that clean syringes are becoming more difficult to access.

The Committee was also concerned about reports that Hepatitis C infection is increasing at an alarming rate amongst intravenous drug users, in a large part due to sharing needles, and we, as a community need to seek solutions to this problem.

This inquiry did not look to solve or enter into the debate on drug use in the community. It instead comes from the premise that Australia, and the ACT, operates within a harm-minimisation approach to drug use and that the supply of clean injecting equipment is an important part of such an approach because of the public health issues related to the spread of blood borne viruses.

Throughout the course of this inquiry, it became clear to the Committee that it was looking at the access to 'injecting equipment' which *includes* needles and syringes, but also includes spoons, filters, water, swabs, disposal bin and other paraphernalia used by intravenous drug users. This distinction is made because, while it is of the utmost importance to reduce the incidence of sharing needles and syringes, the sharing of equipment also raises the possibility of exposure to blood borne viruses.

The Committee has therefore used the term injecting equipment, wherever possible in this report, which should be read to be inclusive of needles and syringes.

The Government welcomes this Report and addresses each of the Standing Committee's Recommendations in this response.

Recommendation 1: **The Committee recommends that the Government work with the States and Northern Territory to apply consistent standards where possible in relation to the supply and disposal of injecting equipment.**

Response

Agreed-in-principle. In April 1999 the Council of Australian Governments (COAG) approved a \$221 million package of measures under the National Illicit Drug Strategy. Within this package, COAG agreed that a national training package for NSP workers be developed. The University of Queensland, acting through the Queensland Alcohol and Drug Research and Education Centre (QADREC) were contracted to develop a National Training Program for NSP Workers.

The package consolidates the knowledge and skills required for working in a needle and syringe program. It has an array of delivery modes, encourages different ways of working with clients, promotes principles of public health and harm reduction and places an emphasis on key public health issues, such as hepatitis C. The package was provided to all States and Territories in 2002.

The Government is committed to ensuring that the highest standard of interventions are provided and implemented including standardised training for needle and syringe providers and the production of standard material. However, while nationally consistent standards are frequently desirable, development of any program must always take into account community specific factors. In addition the Government is supportive of the development of ACT specific guidelines that provide a framework for continuity of service provision that is supported by evidence-based practice.

In pursuing the highest attainable standard of intervention and referral it is desirable to ensure that all providers of syringes are competent and able to provide interventions and sound advice about referral options. While the *Drugs of Dependence Act 1989* provides for the sanctioning of an “approved person” who has been trained in intervention and referral to distribute injecting equipment, it does not clearly prevent a person who is not approved from distributing equipment. The Government will progress amendments to the *Drugs of Dependence Act 1989* to ensure the highest distribution standards are attained.

Recommendation 2: The Committee recommends that the Government undertake a comprehensive education campaign on the safe disposal of used injecting equipment.

Response

Agreed. Education of user groups and the community is essential to ensuring a high level of awareness of supply and disposal standards and guidelines. A significant amount of information and education material is currently available to intravenous drug users and other users of needles and syringes in the ACT.

The Government believes that the current level of awareness regarding the safe disposal of injecting equipment is quite good in the ACT. However, the Government will continue to monitor the effect of existing information and education material to ensure that safe disposal standards remain high. Following is a summary of information and educational material currently available in the ACT.

In July 2000, a safety ban was enforced on sorting recycled material collected from commercial and multi-dwellings bins at the Materials Recovery Facility – the recycling plant. This safety ban was in place as several needle stick injuries had occurred at the facility.

Research on the disposal of injecting equipment found that there was a need in the ACT for additional sharp disposal infrastructure, education and a review of occupational health and safety. This led to the formation of a Sharps Steering Committee, with representatives from both the public and private sectors.

While the Committee was formed in response to several needle stick injuries at the MRF, issues with OH&S were solved relatively easily and most of the Committee's ongoing efforts have been focussed on coordinating the development and implementation of a rolling program of initiatives to educate the community and to improve the availability and use of infrastructure for the post use recovery of sharps.

In 2002, the Committee developed three information brochures to inform specific target groups (injecting drug users and people with diabetes and other medical conditions) about safe disposal; and to inform the public about correct health and safety procedures in the event of discovering discarded injecting equipment.

Earlier this year, the effectiveness of the three brochures was reviewed and a single revised brochure as subsequently developed. The brochure was published in mid 2003 and is now available from libraries, shopfronts, health centres, DIRECTIONS ACT, and other associations. The brochure is also being distributed through pharmacies with syringe packs.

The ACT has one the highest return rates of needles and syringes in Australia. During 2002, the recovery rate was between 85% and 90%. Over the last twelve months there has been a significant decrease in the number of sharps disposed inappropriately in public toilets and open spaces. All public toilets have been fitted with DisposalSafe chutes and many large bins have been put in place. A free pick up service for sharps from private land and ACT Housing properties has also been introduced.

It is intended that the Committee will continue to coordinate education programs aimed at educating all sectors of the community about these issues and will continue to improve the availability and use of appropriate infrastructure for the recovery of used sharps.

Recommendation 3: **The Committee recommends that the Government, in consultation with peer intravenous drug user groups, increase the number and location of injecting equipment disposal units across the ACT, and work on methods to decrease other barriers to safe disposal as identified by intravenous drug users.**

Response

Agreed. The ACT Alcohol and Other Drug Taskforce has identified this issue and has recommended prioritised strategies to increase access for intravenous drug users to sterile equipment and vending machines as well as safe disposal. Within these strategies, consideration will be given to persons with restricted mobility through the provision of disposal units and vending machines at a height accessible to people with disabilities.

Recommendation 4: **The Committee recommends that the Government undertake a needs analysis on the location, hours and service model that injecting equipment exchange programs should operate in the ACT and following the outcomes of that analysis, ensure that services are enhanced in areas of need.**

Response

Agreed-in-principle. The Government agrees that it is important to assess whether there is flexibility on the locations of needle and syringe outlets, capacity to increase hours at outlets and location of vending machines. The Government will progress this further.

Recommendation 3 and Recommendation 7 also provide further input for this response.

Recommendation 5: The Committee recommends that a primary outlet be established in each town centre.

Response

Agreed-in-principle. Cost and resource implications of establishing a primary outlet in each town centre would need to be considered and determined. Such implications might include: training of new providers; storage of extra equipment; impact on the work and role of the approved provider; increase in work time devoted to a needle and syringe distribution service; increased demands and competing priorities between primary reception role and providing extra needle and syringe services. The Government will progress this issue further.

Recommendation 6: The Committee recommends that the Government work with the Pharmacy Guild of Australia to enhance the current needle and syringe program in community pharmacies based on successful programs in other States.

Response

Agreed. The Illicit Drug Training Project for Pharmacy was a joint initiative of The Pharmaceutical Society of Australia (PSA) and The Pharmacy Guild of Australia (PGA), commissioned by the Commonwealth Department of Health and Ageing under the 'Training for Frontline Workers Initiative'.

Officers from the ACT Department of Health contributed to the Training Project through participation on the Project Advisory Group.

The project brief was to design, implement and evaluate a training package for pharmacies that covers the provision of illicit drug services, as well as to develop resources and service standards. The project is a response to a need for more training and resources to support pharmacy in providing illicit drug services.

The National Illicit Drug Training for Pharmacy Project had three broad aims:

- To identify barriers to pharmacy's involvement in the provision of services and assistance to illicit drug users.
- To recommend strategies to overcome these barriers.
- To the training needs of pharmacists and their staff in the area of services to illicit drug users, including preferred and recommended approaches to meeting these training needs.

In 2002, the project won the Ted Noffs Award for Treatment Service.

The Government is actively encouraging community pharmacies to increase their involvement in the needle and syringe program and believes that their spread of location within the community, coupled with a variety opening hours, allows pharmacies to play an important role in the program. The Government will continue to work with the Pharmacy Guild of Australia to progress this issue.

Recommendation 7: The Committee recommends that the Government install injecting equipment vending machines across the whole of the ACT.

The Committee further recommends that the locations of vending machines be trialled in consultation with key stakeholders.

Response

Agreed. The Government has made available \$250,000 this financial year to support the implementation of a number of high priority projects identified in the Draft ACT Alcohol, Tobacco and other Drug Strategy, finalised in November 2003. These priorities include establishing a trial of vending machines for dispensing needles and syringes in the ACT. The trial will provide 24 hour access to sterile injecting equipment across a range of sites in the ACT, and the ACT Government will implement this trial in early 2004.

The introduction of vending machines in the ACT will be a cost effective alternative to extending opening hours of current needle and syringe program outlets. In addition to increasing access, the machines have the potential to service a hidden population of injecting drug users who require complete confidentiality.

The main objectives of introducing vending machines include:

- Increased access to the means of blood-borne disease prevention
- Complement the educative role of the Needle and Syringe Program
- Provide anonymous 24-hour access to sterile injecting equipment
- Provide access to new equipment for Intravenous Drug Users not currently utilising existing services
- Provide a cost effective means of dispensing needles and syringes
- Maximise the proper disposal of used equipment through the provision of a disposal bin

The location and type of vending machines is yet to be negotiated.

The experience of other jurisdictions shows that the locations for vending machines must be carefully chosen. The machines need to be placed in areas that users frequent. The users' need for anonymity must be balanced with the need to protect the machines from vandalism. The machines must also be fitted with protective metal grills to help combat vandalism. Installation of sharps disposal facilities nearby and reliable servicing of the machines are also essential.

Recommendation 8: **The Committee recommends that the Government, in line with its harm minimisation approach, adopt the policy of injecting equipment exchange in the ACT corrections system.**

Response

Noted. The Government supports the principle of harm minimisation in correctional facilities. However, there are a range of issues that need to be considered in the development of an appropriate model such as duty of care issues for custodians and occupational health and safety issues for staff.

Although the adult correctional facility environment has been identified as high risk in terms of blood borne viral infection due to the high rates of injecting, tattooing, unsafe sexual practice and the high prevalence of hepatitis C in correctional facilities, the extent of these problems in some or all of the ACT facilities is unclear.

The Government will examine the costs/benefits and feasibility of this recommendation further in conjunction with corrections officers, youth justice staff and relevant health experts.

Recommendation 9: **The Committee recommends that the Government, as a matter of urgency, initiate round-table discussions with all current corrections officers and relevant health experts to define the safest way to implement an injecting equipment exchange program in the ACT corrections setting, including the Belconnen Remand Centre, the periodic detention centre and the Quamby Youth Detention Centre.**

Response

Noted. The Government supports the principle of harm minimisation in correctional facilities. However, there are a range of issues that need to be considered in the development of an appropriate model such as duty of care issues for custodians and occupational health and safety issues for staff.

Although the adult correctional facility environment has been identified as high risk in terms of blood borne viral infection due to the high rates of injecting, tattooing, unsafe sexual practice and the high prevalence of hepatitis C in correctional facilities, the extent of these problems in some or all of the ACT facilities is unclear.

The Government will examine the costs/benefits and feasibility of this recommendation further in conjunction with corrections officers, youth justice staff and relevant health experts.

Recommendation 10: **The Committee recommends that the Government ensure that the new prison has purpose-built facilities for an injecting equipment exchange program.**

Response

Noted. The approach for the new prison will be based upon the findings of the work undertaken as stated in Recommendation 8.

Recommendation 11: **The Committee recommends that the Government ensure that culturally appropriate education campaigns regarding safe injecting practices are available to the Indigenous community.**

Response

Agreed.

The Government recognises the need to address barriers faced by Aboriginal and Torres Strait Islander people in accessing mainstream services through the provision of culturally sensitive and appropriate services that are developed in collaboration with the Aboriginal and Torres Strait Islander communities.

Aboriginal Medical Services currently employ Alcohol and Other Drug staff who provide this information. However, there is also a need to ensure culturally and linguistically diverse users have access to this information and education. The Government will continue to progress this issue to ensure appropriate services are provided.

Recommendation 12: **Following the earlier recommendation to locate a primary needle and syringe exchange outlet in each town centre, the Committee recommends that one of these new outlets be specifically focussed on the needs of the Indigenous community.**

Further, the Committee recommends that the Government work closely with the Indigenous community to provide a model of secondary injecting equipment exchange outlets that can be located in areas of greatest need.

Response

Agreed-in-principle. The Government believes that all needle and syringe outlets should be developed as culturally sensitive to Aboriginal and Torres Strait Islander and culturally and linguistically diverse clients. Non-Indigenous clients, culturally and linguistically diverse clients and Indigenous clients currently attend all services. Locating a primary or secondary outlet within the Aboriginal Medical Service may enhance utilisation by Aboriginal and Torres Strait Islander clients, but further work and consultation is required on whether this is an approach that would be used by Aboriginal and Torres Strait Islander clients. The Government will progress this issue further.

Recommendation 13: The Committee recommends that should the Gudan Gulwan Aboriginal Youth Corporation outreach service prove successful that it be used as a model for outreach to other marginalised communities.

Response

Agreed-in-principle. While the Gudan Gulwan service may be a useful model for outreach, and many communities may benefit from this model, it may not be the only model. The Government will progress this issue further with particular regard to cost and safety consequences.

CONCLUSION

The Government believes that the current program operating in the ACT is, in the main, a good system. There are, however, improvements that can be made to the program to ensure better access to injecting equipment for the ACT community and better information and education about intravenous drug use.

The Report concludes that "There are no easy answers to preventing blood borne virus, however it is widely accepted that the provision of access to clean injecting equipment is a basic requirement to achieve this objective." (p. 41). From a health perspective, this goal is supported.

The Government thanks the Standing Committee on Health for the work undertaken in relation to these issues and is committed to progressing the implementation of a number of the reports recommendations.

It is useful to note the number of needle and syringe outlets currently operating to assist people with issues related to injecting drug use. These are provided at Attachment A.

It is also useful to note the broad range of services currently provided throughout the ACT to address issues relating to drug and alcohol misuse. These are provided at Attachment B.

The Government has recently been presented with the report of the ACT Alcohol, Tobacco and other Drug Taskforce. The Taskforce report was developed in consultation with the community and the alcohol and other drug sector and addresses a range of issues related to access to needles and syringes. The Government will be responding to the Taskforce Report in early 2004 and will provide further information in relation to these issues then.

ATTACHMENT A

NEEDLE AND SYRINGE OUTLETS

Primary Outlets:

Directions ACT (Assisting Drug Dependants Inc.)
33A East Row, Canberra City
CAHMA
Griffith Centre, Civic

Secondary Outlets:

AIDS Action Council
Westlund House
Gordon St., Acton
Alcohol & Drug Service
City Health Building
Cnr Moore & Alinga St.
Canberra City
Belconnen Health Centre
Swanson St & Benjamin Way
Belconnen Town Centre

Narrabundah Health Centre
Boolimba Cres
Narrabundah
Phillip Health Centre
Corrina & Keltie St.
Woden

Tuggeranong Health Centre
Anketell & Pitman Sts.
Tuggeranong

Pharmacy Outlets:

Ainslie (Chemart)
Edgar St. Ainslie
Campbell
Blamey Pl. Campbell
Charnwood Capital Chemist
The Small Mall, Charnwood
Chisholm Capital Chemist
Chisholm Shopping Centre
City Markets Chemart
City Markets
City - David Moses
Canberra Arcade
City - Develins
Garema Place
City - Canberra Centre
Pyes Pharmacy Plus
Curtin Capital Chemist
Curtin Place, Curtin
Deakin
Deakin Shopping Centre
Fyshwick
Gladstone St., Fishwick
Higgins (Guardian)
Higgins Pl., Higgins
Holder
Holder Shopping Centre

Hughes Capital Chemist
Hughes Shopping Centre
Karabar
Karabar Shopping Centre
Lyneham Capital Chemist
Wattle St., Lyneham
Manuka Soul Pattinson
Manuka Arcade, Franklin St, Manuka
Mawson Capital Chemist Southlands
Southlands Shops Mawson
Narrabundah
Narrabundah Shopping Centre
Ngunnawal Pharmacy
Ngunnawal Shopping Cntr, Wanganeen Ave
Red Hill
La Perouse St., Red Hill
Southlands(Capital)
Southlands Shopping Centre, Mawson
Tuggeranong Capital Chemist Hyperdome
Tuggeranong Hyperdome
Tuggeranong The Hyperdome Soul Pattinson
Tuggeranong Hyperdome
Warramanga
Warramanga Shopping Centre

ATTACHMENT B

CURRENT DRUG AND ALCOHOL SERVICES

ORGANISATION	SERVICE PROVISION
ACT Division of General Practice Inc	The Opiate Program (TOP) The program aims to provide an improved system of multidisciplinary health care for opiate dependent people in the ACT utilising the unique role of the GP in partnership with the client.
Alcohol & Drug Foundation ACT Inc - Karralika Therapeutic Community - Canberra Alliance for Harm Minimisation & Advocacy (CAHMA)	Karralika Residential Rehabilitation Program - Residential rehabilitation for adults, including parents accompanied by children, who are recovering from or are currently undergoing treatment for alcohol and drug problems. - Counselling. Community Houses for Men & Women - Provision of supported accommodation for transitional purposes. - Provision of supported accommodation for men and women on methadone & benzodiazepine. Family Support - Provision of a registered Child Care Cent at the Fadden location for parents accessing ADFACT services with accompanying children Canberra Alliance for Harm Minimisation & Advocacy (CAHMA) - subcontract - Provision of information, advice & referral about the wider range of services available to injecting drug users & users of other illicit drugs. - Activities, which facilitate & coordinate groups to exchange information & experiences, provide activities to meet common needs, & provide social & practical support.
Assisting Drug Dependents Inc Trading as DIRECTIONS	Primary Health Care Intervention - Activities which provide assessment of service needs, development & monitoring of service plans, ongoing case management & coordination of voluntary individualised service packages, & professional support in accessing & using general community services. - Information, advice and referral. - Provision of pre sentence & pre placement assessments, reports, advice & advocacy. - Provision of appropriate age-related services & activities for children, including the provision of equipment and food. - Provide alcohol & drug education to colleges in the community.

	Arcadia House Withdrawal Centre • Clients reside temporarily at an accommodation unit providing support, non- acute care & other services to people with particular personal or social difficulties. Needle & Syringe Program (NSP) • Provision of a needle & syringe exchange & AIDS education program. • Provision of training in the performance of skills & tasks in order to provide NSP services, in a community service participating in the Needle & Syringe Program. Pharmacy Program • Implementation of the Needle & Syringe Diversification Program - targeting pharmacies and other outlets to distribute needles & syringes. Life Skills Program • Provide opportunistic & crisis counselling to clients of needle & syringe outlets and at outreach points in the ACT. • Provide opportunities for education, training and employment. • Support injecting drug users to pursue detoxification and rehabilitation treatments. Families in Action Project • Provision of exclusive time for families, including the young person involved, to discuss intervention, treatment, referral and general substance impact issues,
Gugan Gulwan Youth Aboriginal Corp	Outreach Service • Provide Aboriginal & Torres Strait Islander young people access to information on education & health service resources relating to alcohol & Drug use through provision of an outreach service including street based outreach and through forging links with mainstream services. Elders Bus Tour - education • A bus tour appropriate service to educate elders about mainstream services available for their families. Cultural & Recreational Outings - for young people accessing the service • Provide outings with cultural significance, within the Canberra region • Provide recreational outings including sport and camping activities
Salvation Army Incorporated	The Bridge Residential Rehabilitation Program • Provision of Alcohol & Drug Counselling – one to one, group counselling and/or peer support
Salvation Army Incorporated	ACT Police Early Intervention & Diversion Program (Retainer funding) • Enhance the ability of the service provider to assist clients under the Diversion Program.

Toora Women Incorporated	Women's Information, Resources, Education on Drug Dependency (WIREDDD) - A community based service that provides education resources & information to any community members, individuals and/or professionals on issues relevant to the field of women and drugs and dependency, with the aim of minimising the harm associated with dependencies. Before & After Supervised Withdrawal Support Service - A support service for women & women with children who are planning to attend and/or have completed a supervised withdrawal. - Parent Education & Support Program - Provision of Parent Education sessions to a select range of target groups within the ACT community - Indigenous Family Program, Spanish Speaking & Serbian Community Program, and parents of young people who have experienced sexual assault.
Ted Noffs Foundation Inc	Program for Adolescent Life Management & Aftercare (PALM) - Residential treatment and aftercare program for adolescent substance users aged 14 – 18 years. - Family and carer support groups - Adolescent Drug Withdrawal Unit - Provision of a community based residential withdrawal service for adolescents aged 14 – 18 years.
Winnunga Nimmityjah Aboriginal Health Service	ACT Police Early Intervention & Diversion Program (Retainer funding) Enhance the ability of the service provider to assist clients under the Diversion Program.
ACT Department of Education, Youth & Family Services	Drug Education for Schools Project The provision of training to provide knowledge and skills for ACT teachers in effective delivery of drug education for all ACT school age people within the school setting.
Australian Federal Police ACT Policing	ACT Police Early Intervention & Diversion Program Employment of a Co-ordinator to assist with the implementation of the program to provide opportunities for individuals to access assessment, with a view to treatment, rather than progress through the criminal justice system.
ACT Health Alcohol & Drug Program	Community Services provided: - Outpatient counselling. - Methadone treatment. - Withdrawal service (Canberra Hospital) - Case management. - Needle & syringe outlets - Health Promotion - Alcohol & drug family skills education program