

Building Agency Capacity for Drug User Health: An Initiative to Ensure Access to Health Care Services for People Who Use Drugs

The NYSDOH AIDS Institute is offering an intensive capacity building initiative to assist health care organizations to refine policies and practices related to people who use drugs to improve engagement in services and ensure the provision of quality, non-judgmental and stigma-free care.

Public Health Crisis

It is a public health, economic, and moral imperative that health care organizations be more responsive to people who use drugs. Rates of HIV and hepatitis C are substantially higher among persons who use drugs than among persons who do not. Opioid use in the United States is at epidemic proportions. Stigma related to drug use creates significant barriers to vital prevention and health care services for people who use drugs. Stigma can also have an adverse impact on the HIV and HCV treatment uptake, treatment adherence and quality of life.

Defining Drug User Health

Drug User Health is a set of services built on the harm reduction philosophy of “meeting people where they are”. These services address the structural and social barriers that may underlie use of drugs and does not rely solely on a “treatment only” approach. This approach engages individuals to seek and return for services from compassionate and competent providers.

Requirements for Participation

The DUHCBI is a year-long initiative, involving face to face meetings, conference calls and team work.

The following are requirements for participation in this capacity building initiative:

- The agency must identify two (2) representatives to participate in the initiative who are in leadership positions who have: 1) a long-term commitment to the agency, 2) the authority to implement changes in agency practices, and 3) the ability to train/ coach staff.
- The agency must identify a “team” of DUH CBI Champions to support the two representatives.
- Agency representatives must attend and participate in:
 - Two in-person meetings - February and December 2020. Travel is the responsibility of the agency.
 - Monthly coaching webinars.
- Agency must complete and submit DUH CBI assessments (attached) in a timely manner (Staff Assessment and Organizational Assessment).
- Agency must commit to making improvement in policies and practices based on the results of the Organizations Assessment.
- Agency must sign-on to provide stigma free care to people who use drugs.

APPLICATION DUE DATE: December 6, 2019. For more information call 518-474-3045. Please submit completed applications to **Rob Curry at Robert.curry@health.ny.gov**

AGENCY APPLICATION

Name of Agency: _____

Representative 1: _____ Representative 2: _____

Rep. 1 Title: _____ Rep. 2 Title: _____

Rep. 1 Phone Number: _____ Rep. 2 Phone Number: _____

Rep. 1 E-mail Address: _____ Rep. 2 E-mail Address: _____

1. Please identify all agency DUH CBI team members (names, titles and email)

NAME	TITLE	EMAIL

2. Describe the Agency's reason for wanting to participate in this capacity building initiative.

3. Describe the Agency Representative's ability to influence changes in agency policy and practice to promote a stigma free environment for people who use drugs.

4. Describe your agency's commitment to transforming agency policies and practices to ensure the provision of quality, non-judgmental and stigma-free care for people who use drugs.

5. Where in the organization will you focus your DUH CBI intervention (e.g. entire agency, specific program/department within the agency)?

6. Outside of required activities (in-person meetings, coaching webinars), describe the time that your agency team will commit to making improvement in policies and practices based on the results of the Organizations Assessment.

Agency Executive Director Attestation:

I understand the structure of the capacity building initiative and the requirements for participation outlined in this document and agree to make a full commitment to participating in this capacity building initiative. I agree to support my agency team in completing the Organizational and Staff Assessments. I will support the time commitment of agency staff outlined in this application. I understand that the AIDS Institute may share the findings in aggregate from my agency's participation in this initiative.

Name: _____

Signature: _____ **Date:** _____