

Drug User Health Capacity Building Initiative: Organizational Assessment

Domain 1: Access, Assessment, Treatment and Support Services: *Providers use and are trained in interventions based on the best available empirical evidence and science, are culturally appropriate, and reflect harm reduction principles. Interventions for patients who use drugs are acceptable, effective, and available for individuals and families seeking services. When services are not available within the organization, there is a trusted, effective referral system in place that facilitates connecting individuals with appropriate treatments. Patient services are provided equitably to all regardless of current or former drug use. Patient rights are respected through every step of the patient experience in the clinic.*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	The patient's bill of rights state that it will provide equal access to services and information regardless of disclosure of criminalized behavior (i.e., sex work, injection drug use, etc.) or use of illegal substances.				
	The organization supports flexibility in the scheduling and provision of services to accommodate the needs of people who use drugs.				
	The organization has policies in place that enable staff to serve the health needs of a patient who is intoxicated or uses drugs.				
	There are policies in place that instruct staff to provide clear guidance to patients regarding the implications of self-reporting drug use, such as child protective services.				
PRACTICE	Treatment plans reflect the patient's own definition of drug use and goals to address their drug use.				
	The organization offers or provides referrals to a range of evidence-based harm reduction services including naloxone, syringe access, and opioid agonist treatment (methadone, buprenorphine).				
	The harm reduction principles and interventions are incorporated into the organization's ongoing operations.				
	Staff talk with patients who use drugs about stigma, and work to minimize feelings of fear or shame and to increase self-understanding.				

Domain 2: Training and Workforce Development: *Continuous training on the philosophies of harm reduction are essential. The organization’s human resource system incorporates harm reduction principles in hiring, supervision, staff evaluation; procedures are in places to support staff with histories of drug use and/or those currently using drugs.*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	The organization’s written policies and procedures recognize the pervasiveness of drug related stigma, and express a commitment to reducing re-stigmatization and promoting well-being and continued and meaningful engagement in services.				
	The organization demonstrates a commitment to staff training on providing services and supports that are culturally relevant and include harm reduction.				
PRACTICE	The organization provides trauma informed support for staff and peers working with individuals with complex trauma.				
	The organization supports staff and supervisor training and workforce development to increase staff knowledge of and skills for providing services to patients who use drugs, including training on harm reduction and drug-related stigma.				
	Workforce development/staff training address the ways identity, culture, community, and oppression can affect a person’s experience of drug-related stigma, access to supports and resources, and opportunities for safety.				
	Clinical and non-clinical staff are prepared/trained to respond to a person who overdoses at the clinic.				

Domain 3: Physical Environment: *The organization ensures that the physical environment promotes a sense of safety and collaboration. Staff working in the organization and patients must experience the setting as safe, inviting, and not a risk to their physical or psychological safety. The physical setting also supports a harm reduction approach with both private and shared spaces that allow for privacy and discretion.*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	The organization has policies and procedures to maintain physical safety of personnel including addressing agitated patients, sharps disposal, etc.				
	The organization has policies in place around managing sensitive information around drug use and the provision of services for people who use drugs.				
PRACTICE	The physical environment promotes a sense of safety, calming, and de-escalation for patients and staff.				
	Staff members recognize and address aspects of the physical environment that may be stigmatizing for people who use drugs, and work with patients and staff on developing strategies to address this, such as privacy of assessment; discretion that patients can access services; visual materials on display, etc.				
	The organization provides spaces that both staff and patients can use to practice self-care (e.g., break room, smoking area, etc.).				
	The organization has mechanisms in place to address the needs of people who use drugs (e.g. sharps containers in the bathroom for syringe disposal, availability of naloxone in case of an opioid overdose).				
	The organization has a private area to discuss drug related issues and services confidentially.				

Domain 4: Engagement and Involvement: *Patients who use drugs have significant involvement, voice, and meaningful choice at all levels and in all areas of the organizational functioning (e.g. program design, implementation, service delivery, quality assurance, cultural competence, access to harm reduction peer support, workforce development, and evaluation).*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	Policies and procedures are in place for including patients and peers who use drugs in meaningful and significant roles in organization planning, governance, policy-making, services, and evaluation.				
	The organization has supportive policies for personnel with lived/living experience of drug use. For example, organization hires staff/peers who will work with people who use drugs, does not terminate employment due to drug use and provides access to supportive services, if required.				
PRACTICE	Staff members keep patients fully informed of rules, procedures, activities, and schedules.				
	Transparency and trust between staff and patients is promoted.				
	Staff members help patients identify strategies that contribute to feeling a sense of autonomy and empowerment.				
	The perspective of patients that use drugs and may have experienced drug-related stigma, inform and improve the organization's performance beyond routine consumer satisfaction surveys.				

Domain 5: Governance, Leadership and Financing: *The leadership and governance of the organization support and invest in implementing and sustaining a harm-reduction approach; there is an identified point of responsibility within the organization to lead and oversee this work; and there is inclusion of the peer voice. A champion of this approach is often needed to initiate a system change process. Financing structures are designed to support a harm reduction approach which includes resources for: staff training on drug user health, key principles of a harm reduction approach, development of appropriate and safe facilities, establishment of peer-support; provision of evidence-supported drug use screening, assessment and treatment and recovery supports; and development of harm reduction cross-agency collaboration.*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	The organization’s mission statement and/or written policies and procedures include a commitment to providing services and supports to people who use drugs utilizing a harm reduction approach.				
	The organization specifically seeks and obtains <i>funding</i> to support the organization’s commitment to provide services and supports to people who use drugs.				
	Policies and procedures are in place that guarantee staff’s confidentiality, if they want to seek substance use treatment. Staff feel comfortable disclosing the need to seek substance use treatment.				
PRACTICE	Organization leadership communicates its support and guidance for implementing a harm reduction approach.				
	Leadership and governance structures demonstrate support for the voice and participation of staff and patients who have histories of drug use.				
	The organization’s budget includes funding to support ongoing training on trauma, stigma and harm reduction approaches.				

Domain 6: Cross Sector Collaboration: *Collaboration across agencies is built on a shared understanding of harm reduction principles. While harm reduction may not be the stated mission of various service sectors, understanding harm reduction principles, education training, and experience working with people who use drugs is a critical aspect of building collaborations.*

Indicators		Strongly Agree	Agree	Disagree	Strongly Disagree
POLICY	Memorandums of Understanding and/or referral systems are in place with other agencies providing services to people who use drugs, including harm reduction services.				
	There are policies and procedures in place for responding to patient grievances regarding agencies to whom they were referred.				
	Collaborative partners provide stigma-free non-discriminatory care to people who use drugs.				
PRACTICE	There is a system of communication in place with other partner agencies for making decisions around a patient's care, including using a harm reduction approach.				
	There are mechanisms in place to promote cross-sector training on providing services for people who use drugs using a trauma-informed and harm reduction approach.				

Domain 7: Progress Monitoring, Quality Assurance and Evaluation: *Ongoing assessment, monitoring and evaluation of harm reduction principles and effective use of evidence-based drug user health specific screening, assessments and treatment.*

Indicators	Strongly Agree	Agree	Disagree	Strongly Disagree
The organization solicits feedback from individuals receiving services and incorporates patient feedback to inform organizational change.				
A community advisory board (CAB) is in place and membership includes people who use drugs.				
The CAB or patient representatives, including people who use drugs, are involved in establishing goals for the quality program.				
The CAB or patient representatives, including people who use drugs, are involved in quality improvement team meetings.				
The CAB is involved in reviewing data from quality improvement activities.				
The organization evaluates the success of referrals to agencies when referring people who use drugs.				
The organization reviews incident reports and addresses physical safety issues with a harm reduction approach.				
The organization conducts a harm-reduction organizational assessment.				
The organization has measures or indicators that are used to assess the organization's progress in providing stigma free care to people who use drugs.				

SUMMARY OF RESULTS

What are the major findings from the Organizational Assessment?

Describe one policy or practice change your organization would like to make by the end of this year long initiative. Identify the specific domain/domains and describe the change.

Domain:

Description:

**This instrument was adapted from Substance Abuse and Mental Health Services Administration (SAMHSA) Concept of Trauma and Guidance for a Trauma-Informed Approach, prepared by SAMHSA's Trauma and Justice Strategic Initiative July 2014.*