



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

Needle and Syringe Program Annual Report 2022-23

Western Australia

1 July 2022 – 30 June 2023

Acknowledgments

The information included in this report has been provided by NSP coordinators and program staff. The Sexual Health and Blood-borne Virus Program (SHBBVP) thanks each respondent for their input into the 2022-23 NSP Annual Report. NSP coordinators and staff should be commended for their work conducted throughout this reporting period.

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1.0 Executive summary

This report assists the Department of Health's Sexual Health and Blood-borne Virus Program (SHBBVP) in its system manager support role of planning, managing and monitoring the state-wide needle and syringe program (NSP). It is a requirement under the *Medicines and Poisons Regulations 2016* for all NSP coordinators to submit an annual report on program delivery to the CEO, Department of Health.

As of 30 June 2023, there were 100 total NSP approvals held under the *Medicines and Poisons Regulations 2016*. Out of these NSP approvals, a response was required for 88 approvals for the 2022-23 year. The remaining approvals were exempt from submitting an NSP annual report for 2022-23, as they provide regular reporting as part of Service Agreements held with the SHBBVP. The 2022-23 reporting period saw 93.2% compliance, with 82 NSP coordinators completing a report and four NSP coordinators submitting a 'nil activity' response. This report includes data from the following reporting periods; financial years 2018-19, 2019-20, 2020-21, 2021-22 and 2022-23. Data from five reporting periods is displayed to reflect the possible influence the COVID-19 pandemic had on data.

Equipment was distributed most commonly as pre-packaged kits (such as FITSTICK™ products). Some NSPs distribute loose needles and syringes, or a mix of loose needles and syringes and pre-packaged kits, as specified by their NSP approval issued by the Department of Health. All needles and syringes are required to be distributed along with a disposal receptacle.

Key findings of the responses for the 2022-23 report include:

- over half of services (60%) distributed educational materials/resources
- referrals were made by 22% of sites
- disposal issues were reported by 15% of sites
- issues with NSP staff were reported by 8% of sites
- issues with NSP clients were reported by 5% of sites
- four percent of coordinators reported issues with coordinating their NSP
- nearly three-quarters (71%) of NSP coordinators engaged in at least one form of professional development and 70% undertook at least one activity to enhance their NSP.

Suggestions for service enhancement from participants included:

- education and further training on NSPs for coordinators and other staff
- provision of safe disposal units on site and in the community for public use
- increasing community education
- installation of needle and syringe dispensing machines (NSDM)
- sites re-evaluating the most suitable NSP service delivery for their community i.e. an NSP becoming an needle and syringe exchange program (NSEP).

2.0 Introduction

NSPs are a highly successful, evidence-based harm reduction strategy that aims to reduce the transmission of HIV, hepatitis B and hepatitis C by the provision of sterile injecting equipment to people who inject drugs (PWID).

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

- [WA Sexual Health and BBV Strategy 2024-2030](#)
- [WA Sexual Health and Blood-borne Virus Action Plan 2024-2030](#)
- [WA Alcohol and Drug Interagency Strategy 2018-2022](#)
- [Fifth National Aboriginal and Torres Strait Islander Blood-borne Viruses and Sexually Transmissible Infections Strategy 2018–2022](#)
- [Fifth National Hepatitis C Strategy 2018–2022](#)
- [Third National Hepatitis B Strategy 2018–2022](#)
- [Eighth National HIV Strategy 2018-2022](#)
- [Western Australian Alcohol and Drug Interagency Strategy 2018-2022](#)
- [National Drug Strategy 2017-2026](#).

In WA, there are currently four models of NSP operating:

- needle and syringe exchange programs (NSEPs) – supply sterile needles and syringes with disposal containers and allow for the return of used needles and syringes
- NSPs (outlets such as regional and rural hospitals, public health units, community health centres and non-government agencies) - provide access to free sterile needles and syringes as a component of their service
- pharmacy-based NSPs – run on a commercial basis via the retail of sterile needles and syringes. Approximately 600 additional community pharmacies retail packaged injecting equipment under a single blanket approval held by the Pharmacy Registration Board of Western Australia
- needle and syringe vending machines/dispensing machines (NSVM/NSDMs) – a self-service device which either vends sterile injecting equipment on a cost-recovery basis (NSVM) or dispenses sterile injecting equipment for no-cost (NSDM) (as of September 2023, there are NSDMs operating in WA, with NSVMs no longer in operation in WA).

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

The *Medicines and Poisons Regulations 2016* stipulate that NSP coordinators are required to submit an annual report to the CEO, Department of Health. The report provides an opportunity for NSP coordinators to raise any issues encountered during the financial year and assists the SHBBVP in its system manager support role of planning, managing, and monitoring of the state-wide NSP.

There were 12 organisations that provide NSP and/or NSEP services that were exempt from submitting an NSP annual report for 2022-23, as they provide regular reporting as part of service agreements held with the SHBBVP. These exempt services included Peer Based Harm Reduction WA sites, WAAC sites, Palmerston Mandurah, Goldfields Population Health Unit (NSEP), HepatitisWA, the Great Southern Population Health Unit (NSEPs), Magenta/Sex Worker Outreach Project WA (SWOPWA), the Midwest Community Alcohol Drug Service (NSEP), and the Pilbara Population Health Unit (NSEP).

In terms of needle and syringe distribution in Western Australia, Table 1 and Figure 1 in *Appendix A: WA NSP distribution* shows an increase in the distribution of needles and syringes from the 2021-22 reporting period to the 2022-23 reporting period. This is the first increase in overall distribution seen in a reporting period since 2019-2020, with distribution noticeably decreasing in the 2020-21 and 2021-22 reporting periods, likely due to the impacts of COVID-19.

The Key Findings section is a summary of the responses by NSP coordinators through the submission of NSP annual reports for 2022-23. For this report, comparisons have been made to previous reporting periods: financial years 2018-19, 2019-20, 2020-21, and 2021-22.

3.0 Methodology

The SHBBVP provided NSP coordinators with the NSP Annual Report 2022-23 pro-forma (*Appendix D: Report pro-forma*) which comprised of 33 questions about the activities and operations of the NSP during the reporting period as well as the impact of COVID-19. Key topics included service provision, disposal matters, operational matters, professional development, and general service matters.

The report pro-forma was available to complete online through RedCAP. The qualitative data in the survey was analysed using thematic analysis and categorised into themes.

4.0 Key findings

4.1 Response rate

Eighty-eight services were required to complete the 2022-23 NSP annual report survey. This does not include the services previously noted as exempt from this annual reporting process.

Eighty-two coordinators (93.2% response rate) returned a response within the parameters of the reporting period (see *Appendix B: Participating needle and syringe programs*, for a list of these NSPs). Four services reported nil activity and were not included in the analysis of the results. NSP coordinators must either complete a report or provide a nil activity response if no activity was recorded during the reporting period.

Table 1 shows that the response rate for the 2022-23 NSP annual report survey was lower than the previous four years. Conversely, reporting of 'nil activity' was at its highest compared to the previous four years.

Table 1: Annual Report Response Rate

Reporting Period	Required responses n	Reports completed n (%)	'Nil activity' responses n (%)	Total Responses n (%)
2018-19	88	87 (98.9%)	0 (0%)	87 (98.9%)
2019-20	89	88 (98.9%)	1 (1.1%)	89 (100%)
2020-21	91	88 (96.7%)	1 (1.1%)	89 (97.8%)
2021-22	90	85 (96.6%)	1 (1.1%)	86 (97.8%)
2022-23	88	82 (93.2%)	4 (4.9%)	78 (88.6%)

4.2 COVID-19

The COVID-19 pandemic physical distancing restrictions and interstate and intrastate travel restrictions were mostly lifted during the 2022-23 reporting period. During this reporting period, only four NSPs reported changes in operating hours due to COVID-19 restrictions. Table 2 outlines the proportion of sites that made changes to their NSP related to COVID-19 in this reporting period. Section 1 of *Appendix C: Survey Results* has further detail on survey responses.

Table 2: COVID-19 Service Impacts

Reporting Period	Sites that had operating hours change n (%)	Sites that had changes to service delivery n (%)
2018-19	N/A ¹	N/A
2019-20	3 (3%)	23 (26%)
2020-21	3 (3%)	18 (20%)
2021-22	4 (5%)	11 (13%)
2022-23	4 (5%)	10 (13%)

Notes: ¹Not applicable.

4.3 Service provision

Many NSPs have resources for clients to browse or take with them, with additional resources and referral options available at the request of clients. In the period 2022-23, there was an increase in resources provided compared to the previous reporting period. There was also a five year high on the number of NSP sites that made referrals to other services in the 2022-23 period. A breakdown of referrals and resources provided can be seen in Table 3 below and Figure 1 of *Appendix C: Survey Results* respectively.

Table 3: Resource and Referral Provision at NSPs

Reporting Period	Number Of NSP Sites that Distributed Printed Materials, Resources & Information n (%)	Number Of NSP Sites that Made Referrals to Other Services n (%)
2018-19	61 (70%)	13 (15%)
2019-20	65 (74%)	14 (16%)
2020-21	67 (76%)	11 (12%)
2021-22	45 (53%)	8 (9%)
2022-23	47 (60%)	17 (22%)

Table 4 shows that for NSPs that only provide FITSTICK® packs (containing 1ml syringes), the number of sites that have received requests for different injecting equipment (e.g.: alternative tips/needles, barrels) decreased compared to the previous reporting periods. A breakdown of the equipment requested can be seen in Table 3 of *Appendix C: Survey Results*.

Table 4: Requests for Different Injecting Equipment at NSPs

Reporting Period	Number of Sites Who Received Requests n (%)
2018-19	16 (18%)
2019-20	10 (11%)
2020-21	11 (12%)
2021-22	11 (13%)
2022-23	5 (6%)

4.4 Disposal matters

Twelve NSP coordinators (15%) reported issues regarding needle and syringe disposal in the 12-month period 2022-23. This is an increase compared to the 2021-22 reporting period, but comparable to the three earlier reporting periods, as shown in Table 5, below.

Table 5: Disposal Issues at NSPs

Reporting Period	Number of Sites Reporting Disposal Issues n (%)
2018-19	14 (16%)
2019-20	14 (16%)
2020-21	18 (20%)
2021-22	4 (5%)
2022-23	12 (15%)

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

NSP coordinators were asked about the availability, location and awareness of sharps disposal bins. Just under half (47%) of NSP coordinators said that sharps disposal bins were available at the NSP site for public use. Most NSP coordinators (59%) were aware of the locations of sharps disposal bins within their community. Table 6 shows a further breakdown of responses.

Table 6: Availability, Location and Knowledge of Sharps Disposal Bins at NSP site for Public Use

	Number of respondents				
Availability of sharps disposal bins at NSP site for public use	2018-19 n (%)	2019-20 n (%)	2020-21 n (%)	2021-22 n (%)	2022-23 n (%)
Available	41 (47%)	43 (49%)	38 (43%)	37 (44%)	37 (47%)
Not available	41 (47%)	42 (48%)	44 (50%)	42 (49%)	33 (42%)
Unsure	5 (6%)	3 (3%)	5 (6%)	6 (7%)	8 (10%)
Missing response	0	0	1 (1%)	0	4 (5%)
Location of sharps disposal bins if available¹					
Inside the health facility	32 (65%)	34 (79%)	29 (33%)	30 (35%)	28 (36%)
Outside the health facility building/s (within grounds)	11 (22%)	14 (33%)	15 (17%)	14 (16%)	12 (15%)
Unsure	0	0 (0%)	0	1 (1%)	0
Other	6 (12%)	6 (9%)	6 (7%)	0	5 (6%)
Aware of other sharps disposal bin locations (excluding health facility)					
Yes	58 (67%)	58 (65%)	55 (62%)	48 (56%)	46 (59%)
No	10 (11%)	17 (19%)	19 (22%)	32 (38%)	24 (31%)
N/A (no safe disposal bins available in community)	19 (22%)	13 (15%)	13 (15%)	5 (6%)	8 (10%)
Missing response	0	0	1 (1%)	0	4 (5%)

Notes: ¹Multiple responses possible.

4.5 Operational matters

NSP coordinators were asked whether any operational issues were experienced over the 2022-23 reporting period and if any actions were taken to mitigate these. Table 7 outlines the operational issues encountered and the number of respondents over the past five reporting periods. Refer to Table 5 of *Appendix C: Survey Results* for detail on issues and actions reported.

Table 7: Number of Sites Reporting Issues in Service Provision

Reporting Period	Due to Staff n (%)	Due to NSP Coordination n (%)	Due to Clients n (%)
2018-19	2 (2%)	5 (6%)	7 (8%)
2019-20	6 (7%)	3 (3%)	8 (9%)
2020-21	6 (7%)	5 (6%)	3 (3%)
2021-22	2 (2%)	4 (5%)	1 (1%)
2022-23	6 (8%)	3 (4%)	4 (5%)

Encouragingly, the number of sites reporting issues in service provision has continued to remain low over the past five reporting periods.

4.6 Professional development

As stipulated within the *Medicines and Poisons Regulations 2016*, an NSP coordinator must understand their duties as the coordinator of the program and must ensure that persons who participate in the conduct of the program understand the requirements of the *Regulations* and are appropriately instructed and trained. The SHBBVP provides information about training opportunities for new coordinators (see section 6.0: 'Resources and support available for NSP coordinators' below) and ongoing professional development is encouraged.

For this report, 55 out of 78 coordinators participated in some form of professional development regarding NSP (Table 8). This has remained relatively stable compared to previous reporting periods.

Table 8: Participation in Professional Development by NSP Coordinators

Reporting Period	Yes Response n (%)
2018-19	65 (75%)
2019-20	65 (74%)
2020-21	64 (72%)
2021-22	62 (73%)
2022-23	55 (71%)

For a breakdown on the professional development undertaken by NSP coordinators, refer to Table 6 of *Appendix C: Survey Results*.

4.7 Service enhancement

Sixty-one NSP coordinators (70%) reported undertaking activities to enhance their NSP in 2022-23 (Table 9). This has remained stable compared to previous recent reporting periods.

Table 9: Number of sites that undertook activities to enhance NSP

Reporting Period	Response n (%)
2018-19	61 (70%)
2019-20	66 (75%)
2020-21	67 (76%)
2021-22	65 (76%)
2022-23	61 (70%)

Refer to Table 7 below for a breakdown on the activities undertaken by NSP coordinators to enhance their site's NSP.

Table 10: Activities undertaken to enhance NSP

Activity	No. of responses n
Provided short orientation sessions for new staff	39
Encouraged staff to complete Online NSP Orientation and Training Package	34
Provided in house staff training	27
Established rapport and networks with regular clients	18
Reviewed or updated NSP guidelines	13
Provided staff with regional specific information	12
Provided debrief sessions for staff	11
Conducted community education sessions	7
Developed a list of harm reduction brief information questions for NSP staff	5

Note: Multiple responses possible.

4.8 Suggestions for service enhancement

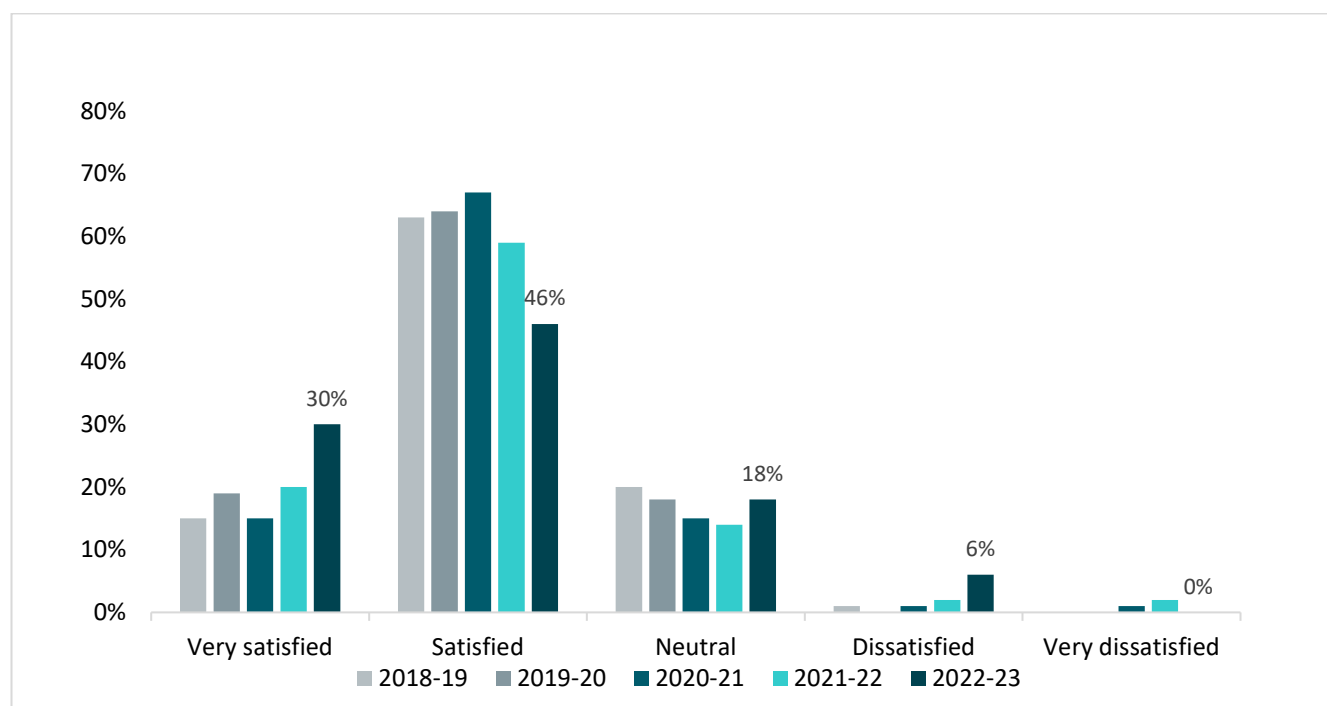
In addition to reporting on activities undertaken, the NSP report pro-forma also provides coordinators the opportunity to raise issues and suggest ways to improve the operation of their NSP. There were 22 respondents that provided suggestions for improving their NSP. The suggestions were grouped into the following themes:

- education and further training for NSP coordinators and other staff
- provision of safe disposal units on site and in the community for public use
- increasing community education
- installation of NSDMs
- sites re-evaluating the most suitable NSP service delivery for their community i.e. an NSP becoming an NSEP.

4.9 General Service Matters

NSP coordinator satisfaction is an important indicator of how an NSP is operating in the community and how staff view the program. NSP coordinators were asked to indicate their level of satisfaction with the way their NSP operates within their community. In the 2022-23 survey, 23 respondents (30%) were very satisfied, 36 respondents (46%) satisfied, 14 respondents (18%) were neutral, 5 (6%) respondents were dissatisfied, and no respondents indicated they were very dissatisfied.

Figure 1: NSP coordinator satisfaction with the way their NSP operates within their community.



4.9.1 Support provided by SHBBVP

Four NSP coordinators (5%) indicated they would benefit from additional support specifically from SHBBVP for their NSP. Their suggestions included that the SHBBVP provide increased training and workforce development opportunities related to NSP. Requested topics were harm reduction and safe disposal. Workforce development requests included increased promotion of the NSP online training and mentorship for NSP coordinators.

For additional information regarding resources and support for NSP coordinators and sites provided by the SHBBVP, refer to section 6.0: 'Resources and support available for NSP coordinators' below.

5.0 Conclusion

During this reporting period, NSP coordinators and staff continued to provide sterile needles and syringes to PWID and showed commitment to the principles of harm reduction.

Compared to the last reporting period, this report showed an increase in the number of NSP sites that distributed printed materials, resources, and information; and in the number of NSP sites that made referrals to other services. This increase is likely due to lifting of COVID-19 restrictions and the overall increase seen in the distribution of needles and syringes during the reporting period (see Appendix A: WA NSP distribution: Table 1 Needle and syringe distributions by NSP outlet type)

The number of services who reported disposal issues increased, with 12 sites reporting disposal issues in 2022-23 and only 4 sites reporting disposal issues in 2021-22. In this reporting period, the number of NSP coordinators stating they were not aware of other sharps disposal bin locations in their local area (excluding their health facility) remained stable, from 38% of coordinators not aware of other disposal bin locations in 2021-22 to 31% in 2022-23.

In the period 2022-23, there was an increase in reported issues due to NSP clients compared to the 2021-22 reporting period (which was the lowest number reported in the last four reporting periods). Operational issues due to staff increased from 2% in 2021-22 to 8% in 2022-23 and operational issues due to NSP coordination remained relatively stable. The SHBBVP notes the suggestions for improving the NSP in WA and the requests for additional assistance.

6.0 Resources and support available for NSP Co-ordinators

SHBBVP in collaboration with the Mental Health Commission (MHC) developed and continues to provide both the Generic and Pharmacy Online NSP Orientation and Training Packages, which can be accessed at: E-learning@MHC.

SHBBVP also provides a two-day face to face NSP training course annually in collaboration with the MHC. For more information regarding upcoming trainings, please contact SHBBVP on (08) 9222 2355 or e-mail NSP@health.wa.gov.au.

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

If further NSP-related training is required, it is recommended that all regional enquiries are directed to the appropriate Regional NSP coordinator in the first instance. The SHBBVP can advise and/or support the Regional NSP coordinators with arranging training if required or giving consideration to mentoring opportunities. The Regional NSP coordinator can assist with other matters including issues with needle and syringe dispensing machines, staff who may have moral objection or anxiety distributing needles and syringes, questions around protocol or guidelines for NSPs and general support relating to NSPs.

For regional safe disposal issues, the SHBBVP advises enquiries to be initially directed to the Regional NSP coordinator and for collaborative work to be undertaken with the local government authority where possible. The SHBBVP can provide contact details for the Regional NSP coordinators if required.

For metropolitan enquiries, please contact SHBBVP on (08) 9222 2355 or e-mail NSP@health.wa.gov.au.

WA Health Quickmail provides all STI/BBV resources as downloads and depending on stock levels, also in hard copy. NSP coordinators and health service providers can access the free online ordering system: [Department of Health Online Ordering System \(getquickmail.com\)](http://Department of Health Online Ordering System (getquickmail.com)).

Additional resources are available from key partner organisations in the sector including [Peer Based Harm Reduction WA](#), [WAAC](#), [HepatitisWA](#), the [Mental Health Commission](#) and the [Aboriginal Health Council of WA](#) (AHCWA). The SHBBVP will continue to work in collaboration with these organisations to develop new resources and update existing resources to meet the needs of the community.

[Information for needle and syringe program \(NSP\) providers can be found at this link.](#)

The following Guidelines and WACHS Policy on the operation of NSP across WA and the provision of needle and syringe vending/dispensing machines from sites across WA can be found at the links below:

- [Guideline: Provision of Needle and Syringe Programs \(NSP\) in Western Australia](#)
- [Guideline for the Operation and Maintenance of Needle and Syringe Vending Machines \(NSVM\) and Needle and Syringe Dispensing Machines \(NSDM\)](#)
- WACHS Policy: [Needle and Syringe Program provision from WA Country Health Service facilities Policy](#).

Appendix A: WA NSP distribution

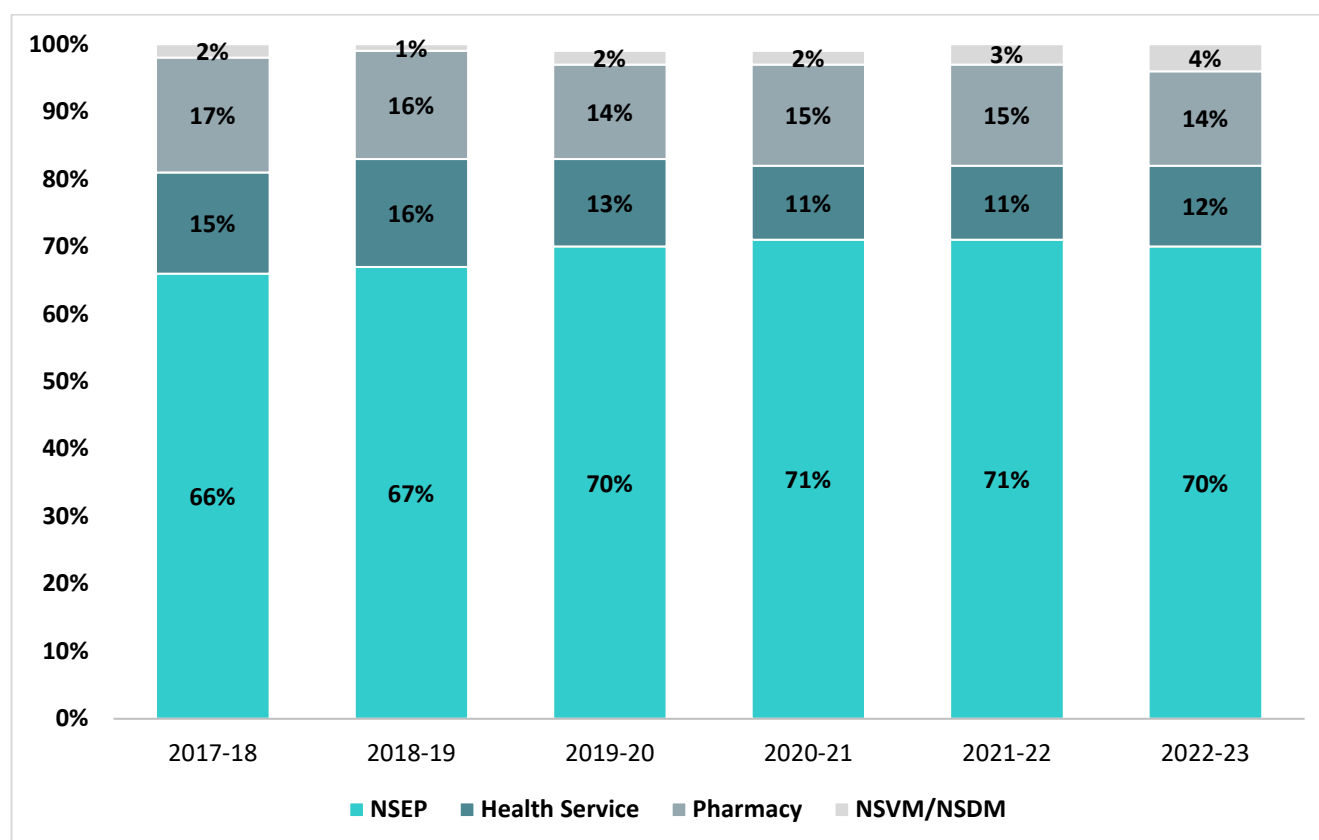
The following table and graph show needle and syringe distribution across the state. All outlet types saw an increase in distribution in the 2022-23 period compared to 2021-22 period.

Table 1: Needle and syringe distributions by NSP outlet type

	2018-19	2019-20	2020-21	2021-22	2022-23
NSEP	4,256,705	4,576,848	4,005,421	3,252,228	4,245,084
Health Service NSP	1,012,668	874,509	659,550	493,666	700,808
Pharmacy	992,868	932,595	852,110	681,708	818,508
NSVM/NSDM	69,000	116,400	107,700	132,300	238,100
TOTAL	6,331,241	6,500,352	5,624,781	4,559,902	6,002,500

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

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



Appendix B: Participating sites in the Needle and Syringe Program Annual Survey 2022-23

Albany Regional Hospital	Kununoppin Health Service
Augusta Hospital	Lake Grace District Health Service
Boddington Hospital	Laverton District Hospital
Boyup Brook Soldiers Memorial Hospital	Leonora Community Health
Bridgetown District Hospital	Leonora Hospital
Bruce Rock Memorial Hospital	Marble Bar Nursing Post
Bunbury Regional Hospital	Margaret River District Hospital
Busseton Hospital	Meekatharra Hospital
Carnarvon Community Alcohol Drug Service	Merredin District Hospital
Cockburn Super Clinic Pharmacy	Moora Hospital
Collie Health Service	Morawa Perenjori Health Centre
Coolgardie Health Centre	Mount Magnet Health Centre
Coral Bay Nursing Post	Mullewa Health Service
Cunderdin Health Centre	Nannup Hospital
Dalwallinu Hospital	Narembeen Memorial Hospital
Denmark District Hospital	Narrogin Hospital
Department of Health, Integrated Case Management Program	Newman Hospital
Derbarl Yerrigan Health Service Inc	Night and Day Pharmacy Bayswater
Dongara Eneabba Mingenew Health Service	Norseman Community Health Centre
Donnybrook Hospital	Norseman Hospital
Dumbleyung Memorial Hospital	North Midlands Health Service
Esperance Population Health Centre	Northam Regional Hospital
Esperance Regional Hospital	Northampton Health Service
Exmouth Hospital	Onslow Health Service
Fiona Stanley Hospital	Palmerston Association Katanning
Geraldton Hospital	Pemberton Hospital
Gnowangerup District Hospital	Pilbara Population Health Unit
Goldfields Public Health Services	Pingelly Health Centre
Goomalling District Hospital	Plantagenet Hospital
Great Southern Community Drug Service Team	Roebourne Hospital
Harvey Hospital	Rottneest Island Nursing Post
Jurien Bay Health Centre	Southern Cross District Hospital
Kalbarri Health Service	St Andrew's Pharmacy
Kalgoorlie Regional Hospital	Tambellup Health Centre
Kambalda Health Centre	Tom Price Hospital
Karratha Health Campus	Wagin Hospital
Katanning Hospital	Warren District Hospital
Kellerberrin Memorial Hospital	Wongan Hills Hospital
Kimberley Public Health Unit	Wyalkatchem District Hospital
Kojonup Hospital	Yirrigan Drive-In Chemist
Kondinin Districts Health Service	York Hospital

Appendix C: Survey results

1.0 COVID-19 impact on NSPs

1.1 Operating hours during COVID-19

Four sites (5%) indicated that their NSP made changes to its operating hours due to COVID-19 during the 2022-23 period.

1.2 Changes implemented to operating hours

NSP coordinators were asked to provide details of any changes made to the operating hours of the NSP during the COVID-19 pandemic. Four respondents indicated that there were changes made. One site reduced hours due to staffing issues, one site only allowed urgent patients into the hospital, and two sites returned to pre-COVID-19 operating hours.

1.3 Changes to service delivery during COVID-19

NSP coordinators were asked to provide details of any changes made to service delivery in their NSP during the COVID-19 pandemic.

Ten (13%) respondents indicated changes made to service delivery during COVID-19. Seven respondents indicated that the NSP altered service delivery to reduce face-to-face contact which included installation of NSDM and implementing concierge and screening to access the NSP. Two respondents indicated reduced hours of NSP operation due to staff availability. Changes to service delivery due to COVID-19 are outlined in Table 1, below.

Table 1: Changes to service delivery due to COVID-19

Type of service delivery change	NSPs that made this change n
Operational changes/access location	3
Concierge/screening process implemented	3
Reduced hours	2
NSDM	2

Note: Operational changes included changes in delivery method and location.

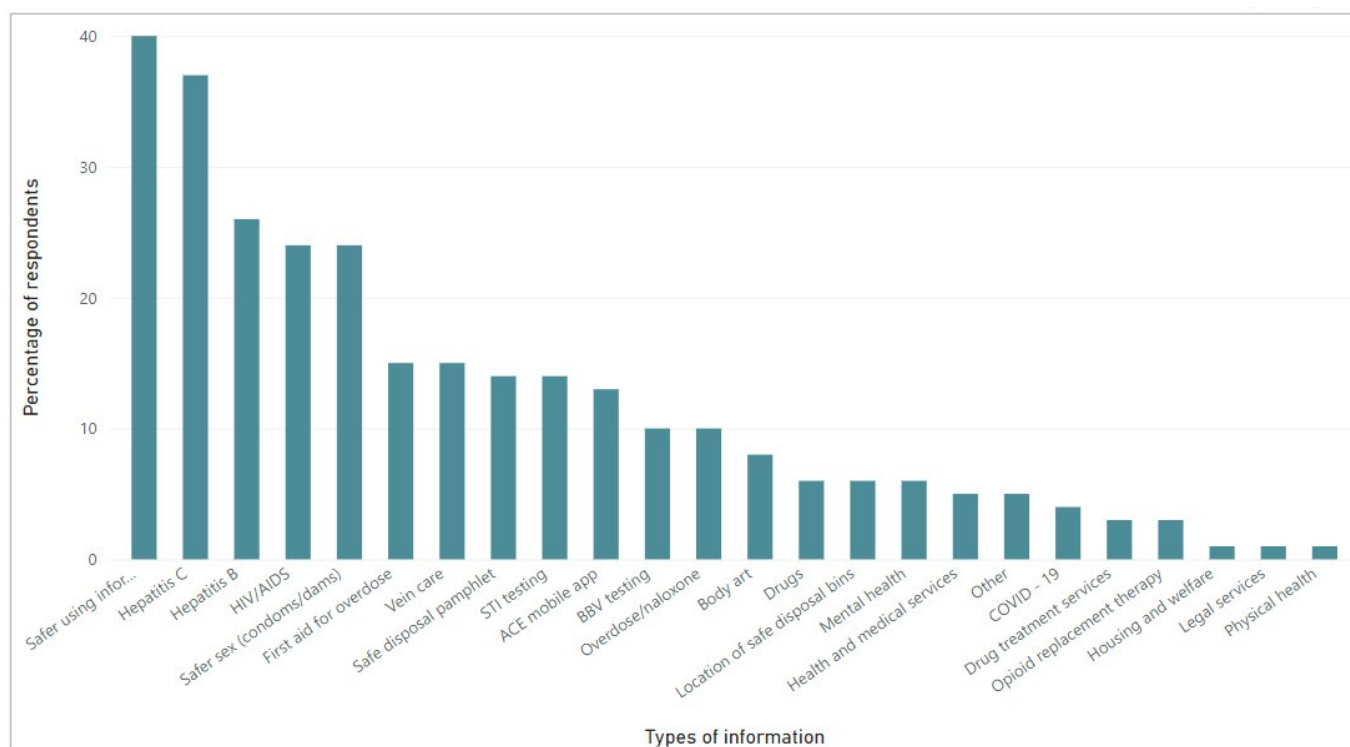
1.4 Other COVID-19 related issues

NSP coordinators were asked about any other issues encountered relating to the COVID-19 pandemic. There was only one respondent who indicated that the emergency department requirement for NSP clients having to use a speakerphone to request equipment was a barrier so the site adjusted screening processes to allow for easier access to NSP.

2.0 Service Provision

2.1 Information Distributed

Figure 1: Types of information distributed by NSPs 2022-23



Notes: Multiple responses possible. The "Other" category included Family and Domestic Violence Services and accessing HIV and hepatitis C care.

2.2 Referrals Provided

NSP clients may request referrals to other services. NSP coordinators were asked what type of services they referred NSP clients to during the 2022-23 reporting period. Table 2 outlines the types of, and number of referrals made.

Table 2: Type of service clients are referred to.

Type of service referred to	NSPs that made a referral n
Drug and alcohol counselling	13
STI testing	10
Mental health care services	7
BBV testing	7
Treatment and rehabilitation services	7
Detoxification services	6
Hospital	6
Peer based service	4
Other NSP outlet	4
Legal services	4
Another medical practitioner	3
Accommodation services	3
Sexual health service	2
Hepatitis service	1
HIV/AIDS service	1
Other (please specify)	0

Note: Multiple responses possible. A total of 17 respondents completed the question.

2.3 Additional Equipment

Most NSPs that completed the NSP annual report for 2022-23 only distributed pre-packaged 'FITSTICK®' packs, a packaged product that contains five syringes and five black disposal sleeves, from their service. Over this reporting period, 5 NSP coordinators (6%) had reported that clients had at some stage requested different equipment from what was available from their NSP. Table 3 details the equipment requested.

Table 3: Most commonly requested equipment outside FITSTICK®

Types of equipment requested	n
Water	3
Different sized needles	2
Syringes	1
Swabs	1

Note: Multiple responses possible.

3.0 Disposal Matters

NSP coordinators were asked if their NSP experienced any disposal issues and what actions were taken to resolve them. Twelve responses (15%) were analysed and categorised into various themes seen in Table 4 below.

Table 4: Disposal Issues and Actions Taken

Disposal issues	Reoccurrence of theme
Incorrect disposal of injecting equipment - found in the community, including parks and gardens	10
Incorrect disposal of injecting equipment - found in/around the hospital and health service grounds and carparks.	9
Public safety concerns- complaints from the public	4
Limited disposal options & systems	1
Malfunctioning disposal unit	1
Other - lack of staff	1
Needle exchange volume issues	0
Actions taken to resolve disposal issues	
Injecting equipment was safely disposed by staff	4
Education and information disseminated to clients	2
Request for Shire to perform extra cleaning services	2
Changes to environment, including additional / larger disposal units	2
Education to staff to help educate clients of safe disposal	1

Note: Multiple responses possible.

4.0 Operational Issues

NSP coordinators were asked to report any issues experienced that were staff-related, or in the operation of the NSP, or client-related. Six respondents experienced staff-related issues and three experienced operational issues in coordination of the NSP during the reporting period; while four respondents indicated issues with clients. The type of issues experienced are outlined in Table 5.

Table 5: NSP coordination issues

Staff-related	Occurrence of theme
Staff turnover	4
Insufficient staffing	3
Moral objection or anxiety to distributing needle and syringes	2
Stigma and discrimination from staff members	2
Limited education and training	2
Objection to process around Fitpack packing and distribution	1
Lack of support from staff	1
High staff turnover	1
Operational	Occurrence of theme
Community opposition	1
NSDM operation issues	1
Emergency departments too busy to service NSP clients	1
Clients	Occurrence of theme
Disruptive behaviour	2
Injective drug use onsite	2
Clients requesting equipment outside of NSP operating hours	2
Language barriers	1
Cultural barriers	1
Clients requesting large quantities of equipment	1

Note: Multiple responses possible.

5.0 Professional Development

Fifty-five NSP (71%) coordinators participated in some form of professional development in 2022-23. Table 6 details the professional development activities undertaken.

Table 6: Professional Development by NSP Coordinators

Activity	No. of responses
Read NSP information on WA health websites	41
Read printed NSP resources	21
Completed Online NSP Orientation and Training Package	21
Attended online/face to face seminars/lectures/workshops	15
Read professional publications	11

Note: Multiple responses possible.

Appendix D: Report Pro-forma

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NSP coordinator details

Please note that under the Medicines and Poisons Regulations 2016 it is a condition of any needle and syringe program (NSP) approval that a report be submitted at the end of every financial year. The information provided assists in planning for the future development and expansion of NSP provision state-wide.

This survey will take approximately 10 to 15 mins to complete.

1. NSP coordinator details

Program location

Program number

Coordinator name

Email address

Phone number

Did your service dispense any injecting equipment from 1 July 2022 to the 30 June 2023?

☐ Yes

☐ No

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Part 1. COVID-19

The following questions are related to service impacts from the 1 July 2022 to the 30 June 2023 financial year due the COVID-19 pandemic.

2. Did your NSP change its operating hours during the reporting period due to the COVID-19 pandemic during the period 1 July 2022 to 30 June 2023?

☐ Yes

☐ No

2A. What were the changes to the operating hours?

3. Did your NSP make any changes to service delivery (NOT INCLUDING operating hours) due to the COVID-19 pandemic during the period 1 July 2022 to 30 June 2023?

☐ Yes

☐ No

3A. What changes did your NSP make to service delivery?

4. Were there any other issue, related to the COVID – 19 pandemic, for your NSP?

- ☐ Yes
- ☐ No

4A. What were the issues related to COVID - 19?

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Part 2. Service provision

The following questions are related to general service provision during the 2022/23 financial year.

5. Did your NSP distribute any information (e.g pamphlets, flyers, brochures, posters, booklets, stickers, social media posts) to clients in 2022/23??

- ☐ Yes
- ☐ No

5A. What type of information was distributed by your NSP in 2022/23? (Please select all that apply)

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

Please specify "Other":

6. Were any referrals made for clients in 2022/23? (Referrals can be as simple as providing clients with a contact number to another health service or directing a client to other services located on-site.

- ☐ Yes
- ☐ No

7. What types of referrals were made by your NSP in 2022/23? (Please select all that apply)

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

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

7. If your NSP only provides Fitsticks (containing 1ml syringes), have any clients requested different injecting equipment in 2022/23 (eg: alternative tips/needles, barrels etc)

- ☐ Yes
- ☐ No
- ☐ Not Applicable (Not applicable- NSP already provides different equipment)

7A. What type of equipment has been requested?

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Part 3. Disposal matters

8. Has your NSP experienced any issues regarding needle and syringe disposal in 2022/23?

- ☐ Yes
- ☐ No

8A. Please select which options apply?

- ☐ Incorrect disposal of injecting equipment- found in the community, including parks and gardens
- ☐ Incorrect disposal of injecting equipment- found in/around the hospital and health service grounds and carparks.
- ☐ Limited disposal options & systems
- ☐ Malfunctioning disposal units
- ☐ Public safety concerns- complaints from the public
- ☐ Needle exchange volume issues
- ☐ Other (please specify)

Please specify other issues with disposal:

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

9. Are sharps disposal bins available at the NSP site for public use?

- ☐ Yes
- ☐ No
- ☐ Unsure

9A. Where are the safe disposal bins located? (Please select all that apply)

- ☐ Inside the health facility
- ☐ Outside the health facility building/s but within the grounds of the health facility
- ☐ Unsure
- ☐ Other

Please specify other:

10. Are you aware of the locations of safe disposal bins in the community which are available for public use (excluding those available at your health facility)?

- ☐ Yes
- ☐ No
- ☐ There are no safe disposal bins available in the community

If there is a lack of disposal options available, you can speak with your regional NSP coordinator and local council to address safe disposal within your community. Alternatively, you can request support by sending an email to NSP@health.wa.gov.au.

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Part 4. Operational matters

11. Have any issues been experienced with NSP clients in 2022/23?

- ☐ Yes
- ☐ No

11A. Please select which options apply?

- ☐ Language barriers
- ☐ Cultural barriers
- ☐ Disruptive behaviour
- ☐ Injecting drug use on site
- ☐ Clients requesting large quantities of equipment
- ☐ Clients requesting equipment outside of NSP operating hours
- ☐ Service complaints
- ☐ Vandalism of needle and syringe vending machine/dispensing machine
- ☐ Other (please specify)

Please specify other issues experienced with NSP clients:

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

12. Have any staff-related issues been experienced that impacted the NSP in 2022/23??

☐ Yes

☐ No

12A. Please select which options apply:

- ☐ Moral objection or anxiety to distributing needle and syringes
- ☐ Stigma and discrimination from staff members
- ☐ Objection to process around Fitpack packing and distribution
- ☐ Limited education and training
- ☐ Lack of support from staff
- ☐ Staff turnover
- ☐ Insufficient staffing
- ☐ Other (please specify)

Please specify other staff related issues:

12B. Was any action taken to address the issue/s (please specify)?

Education and training around NSPs can help give staff a greater understanding and confidence in providing NSP services.

Speak to your regional NSP coordinator about training opportunities for staff. You can also contact the Department of Health at NSP@health.wa.gov.au

13. Have you experienced any issues (not related to COVID-19) in coordinating your NSP in 2022/23?

- ☐ Yes
☐ No

13A. What was the issue/s?

- ☐ Resources
- ☐ High staff turnover
- ☐ Limited capacity to focus on NSP
- ☐ Opening hours
- ☐ Location
- ☐ Community opposition
- ☐ Legal and regulatory (e.g. maintaining permits and approvals)
- ☐ Supplies and inventory management (NSP equipment/NSDM installation)
- ☐ Collaboration with Department of Health
- ☐ Confidentiality and privacy
- ☐ COVID-19 physical distancing or screening issues
- ☐ Other, please specify

Please specify other:

13B. What actions were taken to address the issue/s selected above? (Please specify)

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Part 5. Professional development The following questions are related to professional development for your role as an NSP co-ordinator in the 2022/23 financial year and future needs.

14. Between 1 July 2022 and 30 June 2023, what type of education and training related to NSPs have you participated in? (Please select all that apply)

- ☐ Completed Online NSP Orientation and Training Package
- ☐ Read NSP information on WA Health websites
- ☐ Printed NSP resources
- ☐ Read professional publications (e.g.: Anex Bulletin)
- ☐ Attended on-line and/or face-to face seminars/lectures/workshops
- ☐ None
- ☐ Other

Please specify other (e.g. title, topic, and name of the host organisation):

Specific to professional development education and training, what topics would you like the Department of Health to offer? (Please specify)

Part 6. General service matters

15. Have you done any of the following to enhance your in 2022/22? (Please select all that apply)

- ☐ Provided short orientation sessions for new staff
- ☐ Encourage staff to complete online NSP orientation and training package
- ☐ Provide in-house staff training
- ☐ Provided staff with region specific information
- ☐ Provided debrief sessions for staff
- ☐ Conducted community education sessions
- ☐ Established rapport and networks with regular clients
- ☐ Developed a list of harm reduction brief information questions for NSP staff
- ☐ Reviewed or updated NSP guidelines
- ☐ None of the above
- ☐ Other

Please specify "Other":

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

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied

17. What suggestions do you have that may improve your NSP?

18. Do you require any additional support from the Department of Health for your NSP?

- ☐ Yes
- ☐ No

18A. In what ways can the Department of Health further support your NSP?

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on request for a person with disability.**

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