



Further Enhancing the
Implementation of Quality
Standards in drug demand
reduction across Europe

Scoping review of implementation models

Palma de Mallorca, 6th May, 2022

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Review of implementation models and strategies

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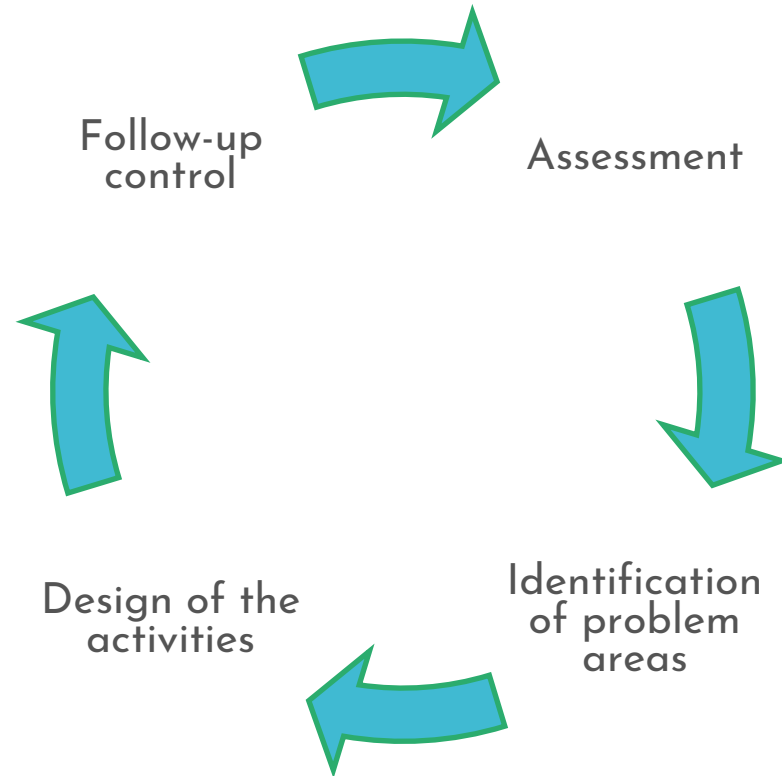


Content

- Introduction
- Review objective
- Methods
- Results (prevention; treatment / social reintegration / harm reduction)
- Discussion & implications for practice

Quality Assurance & Quality Standards (QS)

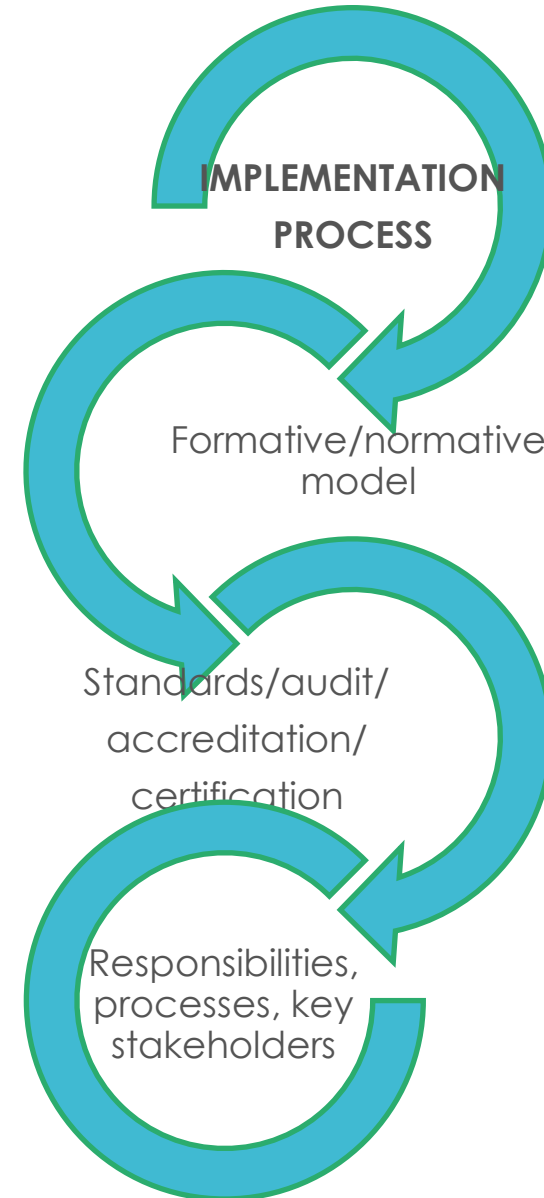
- Quality Assurance: continuous process of monitoring and improving of quality.



- QS: One of the (crucial) tools in QA process

Implementation models?

- Different implementation models
- Formative / normative (Miovský et al., 2015)
- 6 step QA mechanisms implementation (EMCDDA, 2021)
- Phases for using „Key QS“ (WHO & UNODC, 2021)
- Numerous factors influence successful QS implementation



Review objective

- To identify effective QS implementation models / strategies that
 - will be further discussed with experts in DDR field during the FENIQS-EU Quality Champions Day 2
 - and to complement the practice-based “do’s and don’ts” resulting from WP 3



Methods

Databases:

- EBSCO
- eBooks
- JSTOR
- Scopus
- SALIS
- Web of Science
- Science Direct
- Google Scholar
- ResearchGate

In total, 45 documents were consulted

Table 1- Key words for databases search by DDR areas.

Prevention	Treatment	HR
Prevention	Treatment	Harm reduction
Prevention systems	Treatment system	Risk reduction
Preventive policy	Recovery	Public health interventions
Drug prevention	Social reintegration	Outreach work
Substance use prevention	Therapeutic communities	Drop-in centres
Prevention workforce	Psycho-social interventions	Low-threshold services
Prevention professionals	Implementation	Quality standards
Key competences	Evaluation	Quality assurance
Implementation	Evidence-based interventions	Quality control
Evaluation	Gold standard	Quality
Evidence-based	Effectiveness	Quality management
Evidence-based interventions	Efficacy	Measures
Standards of evidence	Quality assurance	Implementation
Quality	Quality standards	Regulation
Quality standards	Accreditation	Competency model
Quality assurance	Certification	Competencies
Quality control		Education
		Training

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Factors for successful QS implementation - prevention

- Political will
- Incentives and support to organizations
- Involvement of various stakeholders
- Experts' consensus
- Communication, training & supervision
- Multilingual materials
- Continuous evaluation
- Transferability (adaptations, without losing core elements)
- Knowledge translation

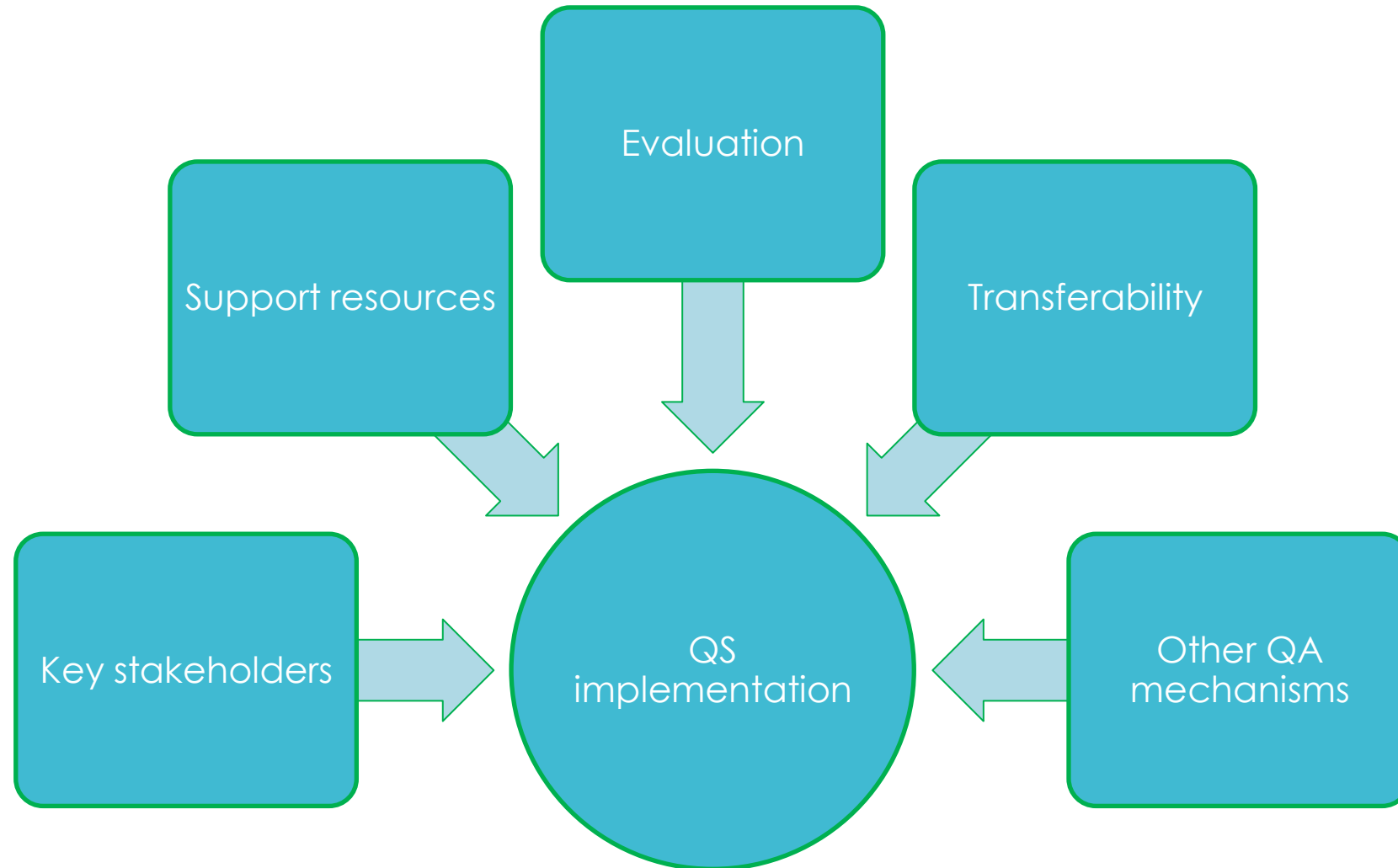
Factors for successful QS implementation - treatment / social reintegration

- Inclusion of various stakeholders (including civil society)
- Cooperation with the local, regional and national authorities
- In TCs, staff and residents should understand the reason or rationale for the standard
- Additional tools (e.g. guidelines)
- Coaching & support on demand
- Monitoring of quality indicators
- Learning culture - sharing of knowledge

Factors for successful QS implementation - harm reduction

- Coherent system with well defined roles
- Incentives / obligation
- Range of available resources on implementation
- Training & support / education (part of the health & social curriculum; interdisciplinarity)
- Monitoring of quality indicators
- Comprehensive information on effective strategies
- Clear definition of benefits of evaluation of HR services

Common elements for successful QS implementation in all DDR areas



Implications for practice

- Wide range of QS is available, but these standards are not widely applied
- Scepticism about further implementation without incentives or real need/obligation

The main challenge remains:
How to better implement / apply QS in daily practice?

Implications for practice: needs





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Thank you for your attention!