

# Supervised consumption rooms: Lesson from program perspective



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Gabi Becker Integrative Drogenhilfe e.V., Frankfurt, Germany

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#### idh...

- > ...was founded as registered association in 1986
- …runs 8 low-threshold facilities in Frankfurt/Main
- …has 170 employees
- > ...provides services for ca. 5.500 clients a year
- ➤ ...needs 7.5 Mio. € per year (social and youth welfare office, City of Frankfurt, State of Hessian, European Social Fund, pension insurance organisations, Jobcenter, donations, own resources and penalties)

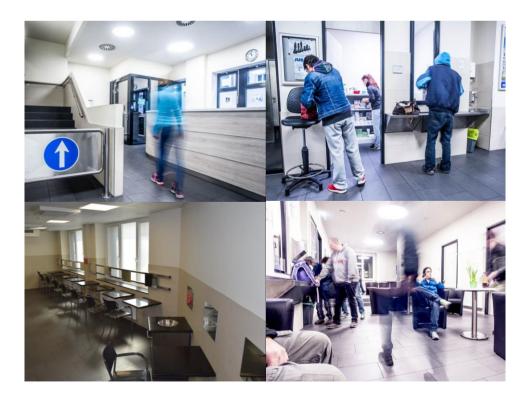
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## **Our facilities**

- Eastside Low threshold Facility with Overnight stay, Drug consumption room, Café a.s.o
- > Job projects: Werkstätten
- > Job projects: Arbeit Technik und Kultur
- Drug Consumption Room Niddastraße and Hotline, OSSIP and OS Night,
- > Housing area support Niddastr.
- FriedA OST and crisis center
- Lichtblick care for parents and their children
- > Assisted Living Kriegkstr. (in- and outpatient)

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## **Daily Practice at DCR Niddastr.**

- > Opening hours: daily 11 am -11 pm, 365-days a year
- services: survival help, needle- and syringe exchange, overdose prevention and first aid, prevention of HIV/Hepatitis, HR, recreation area (drinks), streetwork
- > 12 places for i.v. consumption / 4 places for smoking/inhaling drugs
- > 1 room for needle- and syringe exchange
- recreation room for 40 people and one smoking room for 15 persons (nicotine)
- > 1 treatment room for in-house medical aid
- > Staff situation: 7 social workers, 35 employees
- Staff is regularly trained in: First aid, Motivational Interviewing, Hepatitis and HIV prevention, De-escalation, handling with traumatized persons
- > Annual costs of DCR Niddastr.: 1,30 Million €
- Key figures of 2017: 12.483 registered clients since 2005, 3.000 different users per year, 772 new entries, 86.427 consumption processes, 207 placements to inhouse doctors, 192 emergency cases, 344.050 syringes and 461.829 needles were exchanged

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### **DRCs – Connecting clients to Hepatitis Treatment**

- Frankfurt has 4 DRCs which are embedded in the system of addiction care
- in general the DCRs connect clients to health care for Hepatitis testing, vaccination and treatment
- at DCR Niddastr. we provide HCV/HIV testing in cooperation with Malteser Werke gGmbH
- direct-acting antivirals (DAAs) HCV-treatment for almost all infected PWUD (94-99% cure rate) is recommended
- > HCV treatment in Germany is **covered by health insurance**
- however, many registered doctors are still very reserved in treating HCV because of the high costs of treatment and low expectations in the commitment of our clients
- clients do still have prejudices against HCV-treatment (many sideeffects, very expensive etc.) and myths are widely spread (HCVtreatment immunises against re-infection)

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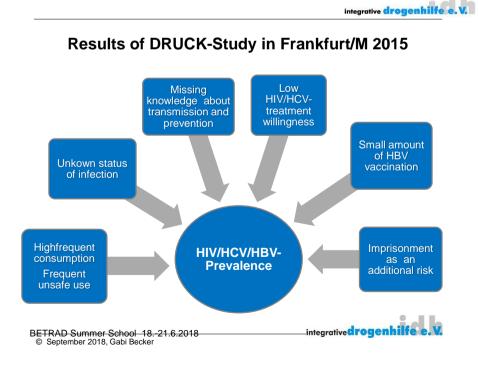
## idh goes - prevention

- initial situation: Results of DRUCK-Study of Robert-Koch-Institute in 2015 (Frankfurt was one of 5 German cities)
  - > clients perspective on Hepatitis prevention and treatment:
    - missing knowledge about transmission (e.g. filters, water), prevention and treatment (myths about HCV treatment side-effects and costs)
    - > low motivation and commitment regarding HCV treatment
    - > unknown infection and vaccination state and only few clients were tested against HBV
- implementation of project team "idh goes prevention" in 2016 focusing on Hepatitis and HIV prevention

Goals:

- 1. Staff training (on epidemiology, transmission, prevention, trainings with clients and treatment)
- Improving hygiene standards in all of our facilities (development of checklists for each working area, hazard analysis critical control point in all facilities, continuous monitoring of hygiene standards, structural changes, changing and adapting work routine to new standards)
- 3. Prevention and health-care as essential part of counselling and support
- Improving safer-use knowledge: Interventions and events on a regular basis and dispense of enough and additional consumption equipment in DCRs (e.g. filters, water, etc.), annual Hepatitis campaign
- 5. Treatment: Cooperation with doctors, vaccination campaign with Malteser Werke gGmbH

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Organisational measures	Training and intervention measures
Wash-bowls were installed before the entrance of the consumption rooms	All clients have to wash their hands before entering the consumption room and again leaving the room (!!!)
Sufficient consumption equipment for consuming illicit drugs in the DCR is offered for free	Vaccination and infection state are regularly assessed by social workers
Free needle- and syringe-exchange for external drug use	Continuous and case-by-case Safer use/Safer sex counselling
Proper disposal of used equipment	Clients are connected to external infection disease specialists and internal specialists for vaccination, testing, treatment
Professional disinfection of consumption room, handrails, restrooms etc. at several times of a shift	Displays and leaflets with relevant information on HCV prevention
	Annual one-week Hepatitis campaign

## Hepatitis prevention at DCR Niddastr.

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#### **Requirements for Hepatitis prevention in DCRs**

- > Funding: many clients do not have a health insurance
- structural measures: wash-bowls, displays with hygiene instructions for clients and professionals, enough safe injection equipment (needles, syringes, swabs, ascorbic acid and patches), additional injection equipment (water, filters, spoons) and hygiene products (surface disinfectants, safe disposal boxes for used needles), syringe vending machines outside of DCR in the city
- continuous HR-interventions with clients (HCV transmission, testing, treatment, using Motivational Interviewing)



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### **Requirements for Hepatitis prevention in DCRs**



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- in-house or external cooperation with internal/infectious diseases specialists and addiction medicine which provide HCV/HBV testing, HCV treatment and HBV vaccination for PWUD
- > funding of HCV/HBV testing and treatment (health insurance)
- regular training for professionals (HBV/HCV vaccination/treatment, hygiene interventions)
- regular medical screening for employees of DCRs
- hazard analysis and development of checklists and hygiene plans

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## **Challenges running DCR Niddastr.**

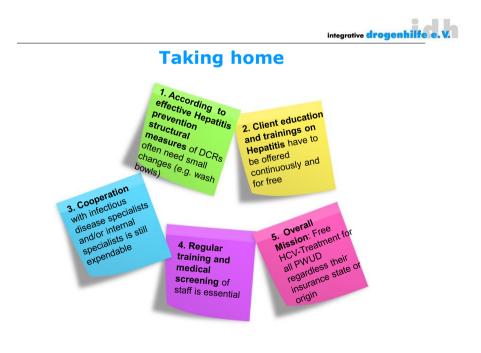
#### In general:

- public acceptance and gentrification
- > decreasing numbers of addiction medicine specialists
- > overloading of the facility

#### According to Hepatitis Prevention:

- no exclusive funding for HCV/HBV prevention
- by now lacking of a stable cooperation between DCR Niddastr. and infectious disease specialists or internal specialists testing and treating HBV/HCV – (we have this in our other facilities)
- transferring Hepatitis prevention trainings in daily practice
- missing of systematic evaluation of the effects of Hepatitis prevention at DCR Niddastr. and in Frankfurt

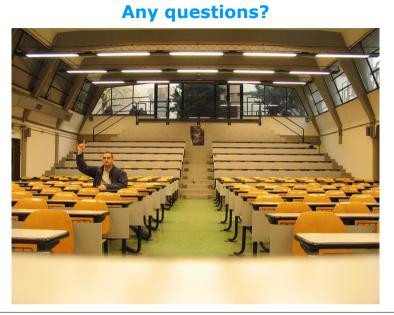
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## Thank you very much for your attention!

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