R03: Core treatment services

Purpose of collecting these data:

This module aims at providing information on the national coverage and quality of treatment services. Information is collected on the extent of treatment facilities available in the country, the type of services provided (by setting/modality and specific types of services provided) and accessibility and affordability of drug demand treatment services.

Item	Туре	Description	Response options	Definitions / Specific instructions	Disaggregation	Metadata	Justifications
Ranking and trends in the provision of treatment services	І	Ranking of drug treatment facilities which are most common in terms of the provision of specific treatment services in the country	1,2,3,		Disaggregation Specific groups according to the treatment service type and setting: • outpatient units - specialised outpatient treatment unit - low-threshold unit - general mental healthcare unit - general (primary) healthcare unit - other outpatient unit (specify)	Information on the procedure used for the qualitative assessment: specify number of experts, affiliation, method (e.g. Delphi). Primary sources used for the qualitative assessment: • national data (specify collection method) • periodic government	PoA: 4a, 4c, 10a-c, 14a (also sub-population groups), 15 (services in prisons), 16 (treatment as alternative to incarceration), 21, 32b, 38b-c UNGASS: 2a, 2b, 4c, 4m (prisons) EWG:
					• inpatient units - hospital-based residential treatment unit	report (link) • specific study (link) • expert assessment	Experts highlighted the need for:

		Trends in the provision of drug treatment: change in the number of facilities supplying treatment services relative to the last reporting	Large increase, Some increase, Stable, Some decrease, Large decrease, Unknown		- non-hospital-based residential treatment unit - therapeutic community unit - other inpatient unit (specify) - specialised social reintegration unit/aftercare unit - others (specify) Sources: WHO/UNODC Substance use disorder treatment facility survey and EMCDDA facility survey	other (specify) Geographcial coverage of the assessment: National / Sub-national, specify	improved measurement of quality and coverage of prevention and treatment services, the development of an information system that is able to measure the impact rather than only the processes Disaggregating data between national and subnational level Rotating module with information on coverage and
New developments	I	Specification of changes that might have occurred since the last reporting in terms of the supply of treatment facilities, e.g.: • major increase or decrease in the number of facilities, • changes in budget allocation, • changes in the distribution of services nationally and subnationally, • other new developments	Free text	New developments by service to be provided but if such detailed information is not available, a summary can be provided.	Treatment service type by setting		coverage and availability and an annual more detailed module
Qualitative assessment	I	Coverage: number of facilities relative to existing the need	Adequate to the demand, Existent but not adequate, Not existent	Glossary	Treatment service type by setting		
Affiliation	I	Affiliation of treatment facilities: Institution responsible for the transfer (management) of	- Ministry of Health - Ministry of Social Services - Ministry of Drug Control	Glossary	Not applicable		

					1	
		public resources provided	- Ministry of Justice			
		to treatment facilities (%)	- Ministry of			
			Interior			
			- Ministry of			
			Education			
			- Local budget (e.g.			
			city)			
			- Public health			
			insurance			
			- Private health			
			insurance			
			- International			
			Organization			
			- Other (to be			
			specified)			
			- Unknown			
			Source: WHO			
			UNODC Facility			
			Survey			
Impediments to the	1	Ranking of main	1,2,3,	Glossary	Type of constraint	Information on the
provision of treatment		constraints hindering	1,2,3,	Glossary	Legal framework	procedure used for the
services		efforts of treatment			Availability of trained	qualitative assessment:
Sel vices		services in the country by			Personnel	specify number of
		order of importance			Infrastructure and	experts, affiliation,
		order of importance			supplies (building,	method (e.g. Delphi).
						method (e.g. Delphi).
					equipment, medicines)	Primary sources used
					Linkages with support	for the qualitative
					services	
					Other (specify)	assessment:
						• national data (specify
						collection method)
						periodic government
						report (link)
						• specific study (link)
						• expert assessment
						• other (specify)
						Geographcial coverage
						of the assessment:
						National / Sub-national,
]					
						specify

Availability of data on treatment facilities	I	Availability of data on treatment facilities	Yes, no, unknown	If the answer is NO, respondent proceeds to the next topic	Not applicable	Not applicable
Information on the number of facilities	II	Number of facilities, beds and clients during the reporting period, by type of facility	Statistical data	A facility is a separate organisational entity (a medical centre, a department, a programme, etc.) that has its own defined objectives, procedures, rules and scope of services and interventions, its own target group(s), and a team and manager (team leader). These facilities can be standalone (e.g. national addiction treatment centres) or integrated with other health care centres, clinics or dispensaries (such as general health care or mental health centres or hospitals). Instruction Preferably, the respondent should provide data for the number of facilities as well as beds and clients but if all the information is not available, there is an option to specify which is available. Source: WHO/UNODC Substance use disorder treatment facility survey Capacity Facilities by type of institution Outpatient: facilities where treatment services are provided without admission for overnight stay; Inpatient: facilities that provide treatment services while the	Type of facility and services: Outpatient units Specialised outpatient treatment services Low-threshold services General mental healthcare services General (primary) healthcare services Other outpatient services (specify) Inpatient units Hospital-based residential treatment services Non-hospital-based residential treatment services Therapeutic community services Therapeutic rommunity services Other outpatient services Other outpatient services Other outpatient services Age: <18, 18-24, 25-64, >65	Geographical coverage: National / sub-national (space for specification) Year of estimate (preferably the last completed calendar year-January to December of a given year) Data source registries and/or reports Expert opinion: Evaluation of the reported figures relative to the total number of people in treatment Low <=25% Medium 25-75% High =>75 %

			patient is admitted and stays		
			overnight.		
			Number of beds for treating		
			substance use disorders		
			number of available beds for		
			clients in		
			inpatient/residential		
			treatment. At centres where		
			sleeping arrangements are		
			less formal (e.g. mats or		
			blankets spread on the floor),		
			the treatment program can		
			count the maximum number		
			of individuals that could		
			safely spend a night at the		
			facility, as 'bed' is understood		
			to be a measure of sleeping		
			capacity.		
			For definitions of types		
			services, refer to EMCDDA		
			and WHO UNODC Facility		
			survey.		
			,		
			Instruction:		
			The number of beds is to be		
			provided for in-patient		
			centres only.		
			certa es orny.		
	Number of beds and	Statistical data or	For each an option for a	Number of beds and	
	clients by type of services	qualitative	qualitative assessment is to	patients/clients by on-site	
	provided within treatment	assessment	be provided (to be filled in	service availability:	
	facilities during the		when data is not available,	a.) management of	
	reference year	Adequacy:	but an expert assessment is	withdrawal	
		Adequate to the	possible)	(detoxification)	
		demand, Existent		b.) opioids agonist	
		but not adequate,		maintenance (methadone	
		Not existent		or buprenorphine)	
				c.) psychosocial support	
				d.) naloxone overdose	
				management;	
				management,	

Availability of palliative care	II	Existence of palliative care as part of treatment services in treatment facilities Percentage of reported treatment facilities which	Yes, no, unknown Statistical data	Glossary	e.) income generation/vocational training; f.) housing/shelter support; g.) low threshold services-outreach or drop-in; h.) Other-to be specified • Sex • Location (rural, urban) Location: •hospital • community • home • other (specify) • not specified •not-known	
Funding of treatment facilities	I	Trend in funding of treatment facilities compared to the previous reporting period	Large increase, Some increase, Stable, Some decrease, Large decrease, Unknown	Glossary	Not applicable	Geographical coverage: national / sub-national, specify

II II	Source of funding for	Public, Private,	Public (government):	Not applicable	
	most treatment facilities	Mixed	treatment centres financed		
			by government (national,		
			regional, local) funds only		
			(includes NGOs funded only		
			by public funds)-use of taxes		
			or national health insurance		
			contributions; <u>privately</u>		
			financed centres (for profit		
			and not-for profit only):		
			contribution of clients and		
			private donors only (also		
			companies or organizations		
			that pay it from employer		
			private contribution schemes		
			matched with the company's		
			or organization's		
			contribution) and it includes		
			NGO centres with private		
			funds only; <u>centres with</u>		
			mixed financing: includes a		
			combination of the latter two		
			and NGO centres funded by		
			both private and		
			governmental (public) funds		
			and includes funding by		
			international organisations		
			and Global Fund Financing-		
			institution that fights AIDS,		
			tuberculosis and malaria		
			(https://www.theglobalfund.		
			org/en/)		

		Number and/or percentage of facilities by type of treatment provision (institution providing treatment). An option to tick boxes is to be provided	-Public insurance -Private insurance -Patients and/or their families -Government (free to patients) -Non-governmental organizations (free to patients)	Type of provision of services: <u>Public/Government:</u> Select if the facility is part of the public health care system, run by the government. <u>Non- government for profit</u> (<u>private):</u> Select if the facility is run by a for-profit company, whether publicly listed or privately held. <u>Non- government not-for-profit</u> (<u>NGO):</u> Select if the facility is	Type of provision: - Public / Government - Non-government for profit - Non-government not for profit Source of funding: - Public - Private - Mixed	Geographical coverage: national / sub-national, specify % of all facilities	
				a not-for-profit organization, or social enterprise			
Availability of studies / research / surveys	III	Link to any studies, reports, surveys or other research on drug use (including poly-drug use) in the general population, and/or within specific groups of people in	Provide link		Not applicable	Not applicable	

	vulnerable situations in			
	your country in the last 5			
	years			