At its meeting of 3 March, the Management Board requested the Director to present concrete proposals for the reorganisation of the internal structure of the centre in accordance with the conclusions and recommendations set out in the evaluation report, taking into account the discussions at the Management Board meeting in March, timely before the meeting in September, particularly on the following issues:

- management decentralisation, quality management, improved internal horizontal coordination
- improved budgetary planning and monitoring and new contracting approach
- improved two way relationship with REITOX
- structured communication and dissemination strategy
- consequences of enlargement in work and resource planning.

Following the decision of the Management Board, the Director drew up an internal reform plan. Attached is a copy of this plan, as adopted by the Management Board on 8 September 2000.

**Decision**

The Management Board endorses the Internal Reform Plan proposed by the EMCDDA Director with some amendments. As a consequence, it DECIDES in particular:

- to approve the proposed **approach to quality management (QM)**, including the recruitment of an Auxiliary staff before the end of 2000 to ensure a quick implementation of QM, followed by the creation of a full time specific post for QM under EMCDDA budget for 2001;
- to approve the proposed **new working framework**; (as outlined in paragraph 3.1., and in particular tables n° 1, 2 and 3);
- to approve the proposed **programme/project approach**; (as outlined in paragraph 3.2.1. and in particular table n° 4);
- to approve the proposed **approach to Activity Based Management (ABM), Financial Management and Control** and to **cost-effectiveness** ; (as outlined in paragraphs 3.3.3., 3.3.4. and 3.3.5.);
- to approve the proposed **decision making procedures** (as outlined in paragraph 3.4. and in particular table n° 6);
- to approve the proposed **outlines of the new organisational structure** (as outlined in paragraph 4 and in particular in table nº7) and to call on the Director to prepare on this basis a detailed “organigramme” by the end of 2000;
- to take note of the proposed **outlines of the human resource policy** (as outlined in paragraph 5.1.) and to call on the Director to prepare a detailed operational plan on this issue to be adopted by the Management Board at its meeting of January 2001;
- to take note of the proposed **new approach to improve the functioning of REITOX and the relationship between the Centre and the National Focal Points** (as outlined in paragraph 5.2.) and to set up immediately a steering group (MB+NFP+SC+EMCDDA) to work out the terms of reference of an evaluation of the Focal Points to be decided on at the meeting of January 2001;
- to approve the proposed **outlines of the communication strategy** (as set out in paragraph 5.3.) and to call on the Director to prepare a comprehensive operational plan on this issue, to be adopted by the Management Board at its meeting of January 2001;
- to endorse the proposed **EMCDDA strategy for Enlargement** (as outlined in paragraph 5.4. - see also document EMCDDA/26/00).
INTERNAL REFORM PLAN

(presented by the Director and amended by the Management Board)
# EMCDDA INTERNAL REFORM PLAN

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1. General Introduction

1.1. The evaluation of the EMCDDA

The Management Board decided in 1999 to commission an external evaluation on EMCDDA activities and organisation. The key issues for this evaluation, carried out by Deloitte & Touche, were:

- the relevance and quality of EMCDDA’s activities since inception;
- the degree of success in establishing and operating networks (particularly REITOX) to enhance the Centre’s ability to carry out its functions;
- the logistical and administrative efficiency, and value for money;
- the adequacy of EMCDDA’s resources to meet its operational challenges;
- the Centre’s potential to cope with the growing issues of EU enlargement.

Deloitte & Touche delivered in January 2000 a complete evaluation report with specific recommendations for the improvement of the organisation, working methods and outputs of the EMCDDA.

1.2. Decision of the Management Board of 3 March 2000

In its decision of 3 March 2000, relating to the evaluation of the EMCDDA, the Management Board took various steps to improve its own working methods and organisation (cf. point 4 of the decision). It also requested the Director to present concrete proposals for the internal reform of the Centre, particularly on the following issues:

- management decentralisation, quality management, improved internal horizontal co-ordination;
- improved budgetary planning and monitoring and new contracting approach;
- improved two way relationship with REITOX;
- structured communication and dissemination strategy;
- consequences of enlargement in work and resource planning.

In parallel with this request the Management Board:

- set up a working party on Medium Term Perspectives (chaired by Sir Jack Stewart Clark);
- set up a working party on Enlargement (chaired by Mr. Reimen);
- requested a fundamental analysis of the situation of REITOX (to be prepared by the Director).
1.3. **Preparation of the Reform Plan by the EMCDDA**

According to the Management Board request, the EMCDDA prepared an Internal Reform Plan by means of:

- the creation of several internal volunteers working groups;
- the definition of a Corporate Plan (cf doc.EMCDDA/31/00);
- the analysis requested on the REITOX network;
- the incorporation of the recommendations of the working parties set up by the Management Board on Medium Term Perspectives and Enlargement;
- the adaptation of the European Commission reform orientations;
- the benchmarking with EUROSTAT.

In drafting this Internal Reform Plan the Director could rely on the technical assistance of the evaluators, Deloitte & Touche, and the guidance of the Bureau, which has closely followed this process (meetings on 29-30 June 2000 and on 28 July 2000).

**The decision of the Management Board on 3 March 2000, the Reports on Medium Term Perspectives and Enlargement, together with the Internal Reform Plan and the Corporate Plan, constitute the full Reform Package asked for by the Evaluation.**

1.4. **The Phases of the Reform Plan**

The fundamental reform proposed below should be articulated and implemented in four phases:

- Firstly, a decision of the Management Board is needed on the general orientations and related strategic issues in September 2000.
- Secondly, and according to this decision, additional detailed operational documents should be drafted for approval by the Management Board in January 2001.
- Thirdly, the overall implementation of the Reform Plan should start in January 2001 in the context of the new 3 year work programme (2001-2003). Nevertheless, a set of measures should be launched before the end of 2000 and some urgent decisions will be needed during the period between September and December 2000, which could be taken, if necessary, by the Bureau.
- Fourthly, according to the Management Board decision of 3 March 2000, an evaluation of the implementation of the reform should be carried out in 2002.

1.5. **The New policy agenda**

The reform of the EMCDDA is taking place at a time when other major changes are happening in its operating environment. These have to be taken into account in planning the changes for the Centre. The three main areas of change are in the fields of European drugs policy, and in the institutional context of the Commission, both in terms of internal reform and in terms of enlargement and working with the candidate countries.
European Drugs policy
The most important aspect of this is the adoption of the new EU strategy on drugs 2000-2004, which sets out new priorities for the EMCDDA. These have been developed into a new framework by the Centre, identifying new targets and new work areas (see point 3.1 below). However, to achieve these new objectives it is crucial to ensure that the reform takes place effectively.

Commission reform
The Commission itself, the parent institution of the EMCDDA, is in the process of major procedural and organisational reform. This clearly has implications for the Centre, particularly in the fields of financial management and human resources. It is important, therefore, to take into account these new developments.

Specific examples of this would include the development of “activity based costing” within the Commission – a pilot system is being tested in DG Regional Policy at present – or the developments in the Commission’s policy on externalisation. The EMCDDA is itself one form of externalisation of the activities of the Commission. However, it then itself externalises certain aspects of its work.

Enlargement
The integration of a large number of new countries into the work of the EMCDDA is clearly not without implications. Beyond this, however, the process itself of enlargement is having an impact on the wider operating environment and some of these effects will also have an impact on the EMCDDA.

1.6. The key functions of the EMCDDA
The Management Board working party on Medium Term Perspectives has reformulated the key functions of the EMCDDA:

The EMCDDA provides a high quality information service on drugs, drug addiction and their consequences.

The EMCDDA has three target audiences, which have now been ranked in order of priority. This reflects a change from the previous situation and makes the focus of the work much more precise.

These audiences are:
- Policy makers
- Actors
- General public

The EMCDDA has to provide a clear picture of the drugs phenomenon in EU and member States (situation, responses and impact). The EMCDDA has to cover all priority areas set up in the Regulation and the Joint Action on New Synthetic Drugs.
2. A new approach to Quality

2.1. Quality

Quality has always been one of the obvious features of the collection and analysis of data. With its scientific bent, the EMCDDA has always endeavoured to measure the accuracy of its findings.

But the notion of quality is changing nowadays. On the one hand, the accuracy of data is still important, of course, but the EMCDDA should also focus on the relevance of concepts, speed and promptness of results, ease of access and clarity of the information put out, comparability, consistency and exhaustiveness in view of a clear global picture of the drugs phenomenon in the EU and MS.

On the other hand, within public management, quality is being focused on more and more. In several countries specialised units have been created to support quality management in government. Furthermore, a series of special models for quality management have been developed.

The EMCDDA is opting for the concept of Total Quality Management (TQM). This concept is at the heart of its Internal Reform Plan. Total quality looks at the overall operation of the organisation and is based on the idea that, if any aspect is disregarded, quality will suffer. It covers a variety of aspects such as the existence of a strategic vision, training and motivation of staff, proper control of information processing methods and – as the central aim – customer satisfaction.

The EMCDDA sets out five objectives along the way to Total Quality:

- User satisfaction
- Product quality
- Development of the Reitox network
- Staff satisfaction, and
- In-house productivity

The Quality Management Policy will offer everyone – management and staff, at their individual levels of responsibility – a series of tools to enable them to achieve these objectives.

But the EMCDDA is not alone in this. It is working closely with all the National Focal Points of the Reitox network. Progress towards total quality, and especially the quality of information, can be achieved only if the network as a whole can respond to these demands.

The response has to be in the quality of operation (common vision, decision-making process, mutual trust, production of data, etc) and in the quality of the outline of each part involved, both in the Centre and in the National Focal Points.

2.2. The issues for Quality management

To reach the above mentioned goals, the Centre needs to take the following steps:

Setting-up internal capacity for effective Quality management

- Setting up of a full-time specific management of QM issues by creating a new full time post.
- Conception and implementation of a QM model by adapting the EFQM (the European Foundation for Quality Management) one to the needs of the Centre.
Improved planning method and process

- Introducing goal-oriented project planning/management covering all EMCDDA activities including internal production process.
- Focusing on the gradual development and implementation of a limited set of relevant indicators for each area of work (quality), rather than trying to cover everything at the same time (quantity).
- Reducing overall production and concentrating on more targeted products, the top priority target group being those who are creating drug policy at European, national, regional or local level.

Improved budgetary planning and allocation of resources

- More functional/operational budget (activity/project-based budgeting).
- Structured and planned policy/strategy for providing human resources required achieving planned objectives/results.
- Targeted and continual structured training.
- Periodic screening of existing human resources to assess cost-effectiveness of their allocation/employment.

Clear job description and competency framework (required capacity) for each post

- Clear definition of scheduled, achievable and measurable operational objectives (performances targets) for each staff member, in accordance with his job description.

More effectiveness-oriented organisational chart to better cope with defined operational objectives

- Establishing efficient management of personnel-related issues, developing effective management of human resources.
- Adequate working conditions.
- Improved and more rational procedures and clear, uniform and foreseeable rules for each actor.
- Simpler and documented procedures (manuals, guidelines) with special attention for quality control processes.

2.3. Terms of Reference for a Quality Manager

Responsibilities of the QM

- To propose EMCDDA Quality Policy and QM model
- To propose strategies to support the Quality Policy
- To propose specific actions for each strategy within the Quality Implementation Plan
- To evaluate and follow the progress of EMCDDA’s clients satisfaction
- To initiate, co-ordinate and follow the implementation of actions that will improve the quality of EMCDDA products and services.

Timing

- the creation of a new post will be proposed for the 2001 budget;
- in the meantime the recruitment of a Quality Manager as “Auxiliary staff”, for a short period of time (preparatory phase) should be done before the end of 2000 in order to ensure the “quality dimension” of the implementation of the reform since the beginning.
3. The key elements of the Reform

3.1. Priority setting: THE NEW WORKING FRAMEWORK

In accordance with relevant recommendations expressed by the Management Board working party on Medium Term Perspectives for the Centre and REITOX, the EMCDDA should focus its operational objectives on three main working priorities:
- **Monitoring the drug phenomenon,**
- **Monitoring responses to the drug phenomenon,**
- **Preparing tools for policy assessment and evaluation,**

The implementation of such working priorities should be carried out by the EMCDDA in its six priority areas of activity, as set out in its founding regulation and in the EU- Joint Action on New Synthetic Drugs.

The operational activities for the implementation of the referred working priorities should focus on the conception, implementation and exploitation of specific core indicators and core data.

Table n° 1 shows the New Working Framework.

Table n° 1

<table>
<thead>
<tr>
<th>NEW WORKING FRAMEWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reform Plan</td>
</tr>
<tr>
<td>Implementing EMCDDA Reform Plan and QM Strategy</td>
</tr>
<tr>
<td>Monitoring drug phenomenon (drug situation in EU and its MS) according to defined indicators and developing harmonised indicators</td>
</tr>
<tr>
<td>Implementing Joint Action on New Synthetic Drugs</td>
</tr>
<tr>
<td>• EMCDDA Regulation</td>
</tr>
<tr>
<td>• Joint Action on New Synthetic Drugs</td>
</tr>
<tr>
<td>• Medium Term Perspectives</td>
</tr>
<tr>
<td>• EU Drugs Strategy</td>
</tr>
<tr>
<td>EMCDDA Work Programmes</td>
</tr>
<tr>
<td>Monitoring EU/MS responses to the drug phenomenon (drug strategies) according to defined indicators and developing and implementing harmonised indicators and core data and qualitative information</td>
</tr>
<tr>
<td>Developing methods/tools for assessment/evaluation</td>
</tr>
<tr>
<td>Enlargement Strategy</td>
</tr>
<tr>
<td>Defining and implementing EMCDDA strategy for enlargement</td>
</tr>
<tr>
<td>Preparing tools for policy assessment/evaluation</td>
</tr>
</tbody>
</table>

Tables n° 2 and n° 3 show respectively how EMCDDA could cope with this objective and which information needs EMCDDA should meet.
### WORKING PRIORITIES OF EMCDDA IN ITS PRIORITY AREAS OF ACTIVITY

<table>
<thead>
<tr>
<th>EMCDDA Added Value</th>
<th>EMCDDA 3 working priorities</th>
<th>Data collection and comparative analysis of the drug situation in the EU and its MS</th>
<th>Data collection and comparative analysis of responses in the EU and its MS</th>
<th>Establishing tools for the analysis of responses in the EU and its MS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EMCDDA : Primary information producer in the EU</strong></td>
<td>(1) Demand and reduction of demand *</td>
<td>* Implementing the 5 harmonized epidemiological key indicators * Developing social core data</td>
<td>Developing and testing a core data set on demand reduction</td>
<td>Analysis of the impact of demand reduction on the drug situation</td>
</tr>
<tr>
<td></td>
<td>(2) National and Community strategies and policies *</td>
<td></td>
<td>Developing and testing a core data set on international, bilateral and Community policies *action plans *legislation *activities and agreements</td>
<td>Analysis of the impact of international, bilateral and Community strategies on the drug situation</td>
</tr>
<tr>
<td><strong>EMCDDA : Secondary information producer in the EU, in partnership with European and International Organisations</strong></td>
<td>(3) International cooperation and geopolitics of supply*</td>
<td>Supporting the development and testing of a core data set on producer and transit countries (UNDCP, INTERPOL, EUROPOL, WCO, CICAD)</td>
<td>Supporting the development and testing of a core data set on cooperation programmes (UNDCP, WHO, CICAD, EC)</td>
<td>Analysis of the impact of international cooperation</td>
</tr>
<tr>
<td></td>
<td>(4) Control of trade in narcotic drugs, psychotropic substances and precursors *</td>
<td>Supporting the development and testing of a core data set on law enforcement (EC, EUROPOL, WCO, INTERPOL, UNDCP)</td>
<td>Supporting the development and testing of a core data set on action against trafficking (EC, EUROPOL, WCO, INTERPOL, UNDCP)</td>
<td>Analysis of the impact of law enforcement</td>
</tr>
<tr>
<td></td>
<td>(5) Implications of the drugs phenomenon for producer, consumer and transit countries (including money laundering) *</td>
<td>Supporting the development and testing of a core data set on market * illicit financial flows (EC, FATF, UNDCP)</td>
<td>Supporting the development and testing of a core data set on antimoney laundering instruments and cooperation (EC, FATF, UNDCP)</td>
<td>Analysis of the impact of anti laundering measures</td>
</tr>
<tr>
<td><strong>EMCDDA : Primary Information producer in partnership with Europol and EU Organisations</strong></td>
<td>(6) Joint Action of 16 June 1997 on New Synthetic Drugs <strong>(&quot;Early Wearing System&quot;)</strong></td>
<td>Rapid collection and exchange of information on New Synthetic Drugs</td>
<td>Risk assessment, assessment of health and social consequences of New Synthetic Drugs</td>
<td>Assessment for the preparation of control measures to be implemented in MS, monitoring of these measures once taken</td>
</tr>
<tr>
<td><strong>EMCDDA : Primary information producer</strong></td>
<td>Synthesis and review of the global phenomenon in the EU and MS</td>
<td>Global synthesis on the drug situation in the EU and its MS</td>
<td>Global synthesis on drug responses in the EU and its MS</td>
<td>Analysis of the impact of global responses on the global drug situation in the EU and its MS</td>
</tr>
</tbody>
</table>

* According to EMCDDA Regulation of 8 February 1993
** According to the Joint Action of 16 June 1997 on New Synthetic Drugs

Priorities in italics were not yet activated.
### Table 3: Core Data and Indicators

<table>
<thead>
<tr>
<th>A. Analysis of the Drug Situation</th>
<th>B. Analysis of the Responses</th>
<th>C. Impact - Cross Analysis</th>
</tr>
</thead>
</table>
| Implementing 5 harmonised epidemiological key indicators  
- Drug use in the general population.  
- Prevalence of problematic use.  
- Demand for treatment.  
- Death and mortality.  
- Drug related infectious diseases.  
Developing a core data set on:  
- Drug related urban delinquency.  
- Drug related exclusion. | Developing a core data set on:  
- National demand reduction strategies.  
- Prevention.  
- Treatment facilities availability.  
- Harm reduction measures.  
- Measures to accompany drug addicts in prisons. | Developing cross analysis of standardised “situation” and “responses” data.  
( performance indicators) |
| Support the development and testing of a core data set on:  
- producer countries;  
- transit countries.  
Primary data developers: UNDCP, INTERPOL, EUROPOL, WCO, CICAD. | Support the development and testing of a core data set on:  
Co-operation programmes between the EU and third countries.  
Primary data developers: Member States, UNDCP, CICAD, EC. | Developing tools to assess the impact of international co-operation on the drug situation in the producer and transit countries.  
( performance indicators) |
| Support the development and testing of a core data set on:  
- Drug related organised crime.  
- Availability of illicit drugs (including at street level).  
- Drug seizures.  
- Diversion of precursors.  
Primary data developers (in part): EUROPOL, INTERPOL, WCO, UNDCP. | Support the development and testing of law enforcement core data set on:  
- Action against drug related organised crime.  
- Drugs supply reduction.  
- Supply reduction of diverted precursors. | Developing tools to assess the impact of the law enforcement measures on the supply of drugs and precursors.  
( performance indicators) |
| Support, develop and test a core data set on:  
- market.  
- illicit financial flows.  
Primary data developers: EC, FATF, UNDCP | Support the development and testing of a core data set on:  
- anti money laundering. | Developing tools to assess the impact of anti laundering measures.  
( performance indicators) |
| Implementing exchange of information on new synthetic drugs pursuant to Art. 3 of the Joint Action. | Implementing risk assessments pursuant to Art. 4 of the Joint Action. | Preparing and monitoring the implementation of the decisions taken by the Council and their consequences and impact.  
( performance indicators) |
| Global synthesis and analysis of the drug situation and major trends in the EU and its Member States (statistical and qualitative data). | Global synthesis on the drug responses in the EU and its Member States. | Analysing the impact of global responses on the global drug situation in the EU and its MS  
( performance indicators) |
3.2. New working methods

3.2.1. Programme/project approach

In order to implement the new priorities of the New Working Framework and to achieve a more effective planning and management of activities, it is proposed to move to a programme/project approach. This means that each task of the centre will take the form of a project. Some projects may be relatively "vertical" in that they relate to specific programme areas. Others will be more "horizontal" or “transversal” taking in several areas of the Centre's work. The majority of projects will be time limited, but some will be continuous or recurring (for example the Website or the Annual Report). Groups of projects will be linked into programmes. The important factor to be stressed is that once they have been approved, activities will be managed at project level, financial and managerial authority having been devolved to the project manager. This represents a fundamental change of approach, and requires the programming process to be effectively run, such that project approval is linked clearly to the work plan and the objectives of the EMCDDA.

Three key changes need to be introduced to allow this to happen effectively:

- **A system of budgeting and recording expenditure on a project by project basis (Activity based management)** is required. In the short term it may be necessary to continue reporting to the Commission on the basis of the current system, but it should be possible to automate this to avoid extra work and to avoid duplication and potential errors.

- **A system of planning and recording time spent on projects** is also needed to see how time is spent within the Centre. This should not be a complex system and should not be applied to the support staff. It will require careful introduction to avoid being seen as a method of controlling staff rather than a planning system.

- **Before any project is approved it should identify the financial and human resources involved**, and also clearly identify
  - How it meets the objectives set out in the 3 year plan and annual work programme
  - What it seeks to achieve
  - How this will be measured
  - Resources required
  - Timing.

The activities of the EMCDDA will therefore be distributed as set out in Table n° 4:
3.2.2. Priority Programmes

I. PRIORITY PROGRAMMES: INDICATORS (PPI)*

EMCDDA = PRIMARY PRODUCER

PPI 1: 5 HARMONISED EPIDEMIOLOGICAL INDICATORS + 2 SOCIAL INDICATORS
       (analysis of situation)

PPI 2: SET OF CORE DATA ON DEMAND REDUCTION
       (analysis of responses)

PPI 3: SET OF PERFORMANCE INDICATORS ON DEMAND REDUCTION
       (assessment of effectiveness)

PPI 4: SET OF CORE DATA ON GLOBAL STRATEGIES AND LEGISLATION IN MS + EU
       (analysis of responses)

PPI 5: SET OF PERFORMANCE INDICATORS OF GLOBAL STRATEGIES IN MS + EU
       (assessment of effectiveness)

EMCDDA = SECONDARY PRODUCER, IN COOPERATION WITH RELEVANT PARTNERS

PPI 6: SET OF SUPPLY CORE DATA
       (analysis of situation)

PPI 7: SET OF CORE DATA ON LAW ENFORCEMENT RESPONSES
       (analysis of responses)

PPI 8: SET OF PERFORMANCE INDICATORS ON LAW ENFORCEMENT RESPONSES
       (assessment of effectiveness)

II. PRIORITY TRANSVERSAL PROGRAMMES (PTP)

PTP 1: IMPLEMENTATION OF JOINT ACTION ON NEW SYNTHETIC DRUGS

PTP 2: WEBSITE

PTP 3: REITOX

PTP 4: ANNUAL REPORT

PTP 5: ENLARGEMENT

III. PERMANENT ACTIVITIES
     DISSEMINATION
     MANAGEMENT
     SUPPORT

* Each Priority Programme is composed of a limited number of projects: see example in table nº 6, page19
3.3. Management implications

The implications of this shift are multiple. However, effective management is clearly a pre-requisite. This is the case at several levels:

3.3.1. Strategic management

The EMCDDA has now identified clear targets and objectives at a strategic level, which will enable it to assess its performance in a way which has not been possible until now. One element which will be key is to ensure that this assessment is carried out on an on-going basis, not on the basis of measuring against goals set 3 years previously. For this reason also it will be important to keep the 3 year plan under constant review.

3.3.2. Operational management

The measurement of operational performance is key. Without this the Board cannot execute its responsibilities in terms of governance, and the centre itself cannot operate or plan effectively.

In order to do this, the centre needs to set goals which are specific, measurable, attainable, realistic and time bound. This applies at both strategic and operational levels.

3.3.3. Activity Based Management (ABM)

Introduction of Activity Based Management is not something to be undertaken lightly, as it has implications for a number of critical areas. However, it is the model, which is most pertinent to the programme/project-based approach proposed.

The ultimate goal of the ABM model is for it to be incorporated into the Management Information System (MIS) of the organisation, and used on a regular basis by management to plan and operate the Centre. It should be seen as a practical tool that enhances the decision-making ability of management.

This principle is especially pertinent when developing the activity list and timesheets, and selecting cost drivers.

Tailored training should be developed and given to both the personnel who will be responsible for maintaining the model, and the personnel who will use the information provided by the model.

The EMCDDA intent to closely follow the pilot system which is being tested in the European Commission DG Regional Policy. Nevertheless, external assistance will be required to develop and implement the ABM model.

3.3.4. Financial Management and Control

One of the central objectives of the internal Reform Plan, in line with the European Commission reform, is the creation of an administrative culture that encourages officials to exercise responsibility for actions over which they have control, over the actions for which they are responsible. Improving and modernisation in financial management are, therefore, needed on their own merits in order to make a direct and practical contribution to raising operational standards generally.

The former Commission's systems for financial management and control followed by the EMCDDA are no longer adapted to the type and quantity of transactions with which they have to deal.
Procedures, consequently, need to be simpler, faster and more transparent and decentralised. There needs to be a clear distribution of tasks and responsibilities to all participants – financial and ‘technical’ – who have a role in managing operations with financial implications and adequate organisational structures and rules are also essential.

A key component of better financial management will be the new discipline introduced by Activity-Based Management in the allocating resources of all kinds to the EMCDDA’s priorities. This should lead to a situation where the EMCDDA no longer finds itself in a position where it has taken on tasks without the means to execute them properly.

In addition, the following actions are needed:

• it must ensured that authorising officers and the whole management line take responsibility, regularity and efficiency of their actions. Rules consequently need to be communicated to all officials in a consolidated, simplified and easily accessible format.

• The financial management, control and audit system in the EMCDDA needs to be radically overhaulded, brought up to date and made consistent with best pratice in the same line which is currently proposed by the European Commission. A proposal for the modification of the EMCDDA financial regulation will be prepared for the approval by the Management Board after consultation of the European Commission and the Court of Auditors.

3.3.5. Cost effectiveness

To become cost effective the Centre must establish and implement a clear strategy to optimise the balance between internal and external work:

♦ priority should be given to developing the Centre’s own capacity to collect, analyse and synthesise information on the situation of drugs, responses to the problem and on establishing evaluation tools;

♦ activities not directly related to this core tasks should be dropped;

♦ external studies and contracts should be limited to activities which are necessary for the Centre, but which are not necessarily best done by the Centre, taking into account its limited financial and human resources. In every case an assessment must be made both of the cost of the project and the best value for the money to be expended ‘in house’ or externally;

♦ the financing system of the REITOX network should be carefully reviewed and, if found necessary, be replaced by a more adequately targeted, technical assistance mechanism, taking fully into account the individual needs of the National Focal Points;

♦ human and financial resources should be reoriented and redeployed according to the new priorities and working design of the Centre;

♦ self-financing activities should be explored and developed, in particular in the field of publications and dissemination, using to the full the possibilities offered by the development of the new technologies (INTERNET).

3.4. Decision making procedures

In accordance with the underlying principles of the EU, it is important that decisions be taken at the most appropriate level.

The decision-making levels at the EMCDDA have grown up as a result of the process of implementing the Observatory, taking into account the founding regulation. Thus at present there is a concentration of decision making in the Management Board which has resulted in a focus on detailed issues and a loss of the strategic picture.
This has been recognised by all parties and one of the future steps will be the implementation of the reinforced Bureau. **It is important to set out the proposed competencies of the various bodies and levels involved to ensure that the process of decision making is as smooth as possible.**

**The Management Board and Bureau**

On the basis of the external evaluation, the Management Board, in its decision of 3 March 2000, decided on a series of changes in its working methods and organisation (cf. in particular point 4 of the decision). One of these important changes relates to the composition and the responsibilities of the Bureau; in line with the recommendations of the external evaluation, new internal rules are now being proposed to the Management Board (cf. doc EMCDDA/23/00) to enlarge and to improve the work of the Bureau.

**Internal Decision Making**

Within the EMCDDA, decision making has tended to be centralised in the Director. However, now the organisation has reached a size where this is no longer desirable or possible. **While responsibility rests with the director, decisions here also need to be delegated to the most appropriate level.**

The competencies of the various actors and levels could be distributed as follows (cf. table n°5):
<table>
<thead>
<tr>
<th>MANAGEMENT BOARD</th>
<th>STRATEGY</th>
<th>STAFFING</th>
<th>FINANCE</th>
<th>PROJECT MANAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>In general:</td>
<td>- approves the strategic plans;</td>
<td>In particular:</td>
<td>- decides on all matters related to the good governance of the Centre;</td>
<td></td>
</tr>
<tr>
<td>In particular:</td>
<td>- adopts the three-year work programme;</td>
<td>- adopts the appropriate rules to the staff regulation;</td>
<td>In particular</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- adopts the annual work programme;</td>
<td>- adopts the establishment plan attached to the budget;</td>
<td>- adopts the preliminary draft budget;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- adopts the general report of activities;</td>
<td></td>
<td>- adopts the budget;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- appoints the Director;</td>
<td></td>
<td>- gives discharge to the Director;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- draws up its own rules of procedure;</td>
<td></td>
<td>- adopts the internal financial provisions;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- appoints 6 additional members to the Scientific Committee;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- may take a decision on the involvement of experts proposed by the non Community countries in the outworking parties;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- designates the specialised centres in the context of article 5;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- adopts non binding recommendations pursuant to Art. 2.6 of the regulation;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management Board</td>
<td>makes the necessary adjustments to the workprogrammes;</td>
<td>- decides on the non automatic carry over of credits;</td>
<td>- is responsible for the performance of the tasks referred to in Article 1 and 2 of the regulation;</td>
<td></td>
</tr>
<tr>
<td>Bureau</td>
<td>- Preparates the decisions of the Management Board;</td>
<td>- decides on the transfer of credits from chapter to chapter;</td>
<td>- is responsible for the preparation and publication of the reports provided for in the founding regulation of the EMCDDA;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Gives specific support and advice to the Director</td>
<td>- decides on twelfth;</td>
<td>- is responsible for the preparation of a statement of revenue and expenditure and on the implementation of the budget;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- authorises subventions and credits from third parties;</td>
<td>- decides on transfers from article to article;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- designates the accountant;</td>
<td>- adopts measures for the management of the credits in the context of the implementation of the budget;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- draws up the report for the Court of Auditors;</td>
<td></td>
</tr>
<tr>
<td>DIRECTOR</td>
<td>prepares and implements the decisions and programmes adopted by the Centre’s Management Board;</td>
<td>- is responsible for all staff matters;</td>
<td>- is responsible for the implementation of the final working structure;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- is responsible for the day-to-day administration of the Centre;</td>
<td>- executes the powers devoted to the appointing authority (AIPN);</td>
<td>- delegation of powers of AIPN according to the final working structure;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- prepares the Centre’s work programmes;</td>
<td>- decides on transfers from article to article;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STAFF</td>
<td>- an internal management co-ordination committee (composed of the Programme Coordinators) assists the Director in the preparation and implementation of the centre’s work programmes;</td>
<td>- adopts measures for the management of the credits in the context of the implementation of the budget;</td>
<td>- delegation of powers of authorising officer to the co-ordinator of administrative and support activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- draws up the report for the Court of Auditors;</td>
<td>- delegation for the operational implementation of programmes to the Programme Co-ordinators according to the final working structure;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- delegation for the operational implementation of projects, to Project Managers according to the final working structure</td>
<td></td>
</tr>
</tbody>
</table>
4. New organisational structure

4.1. General Orientation

In order to implement the new activity based system, a new organisational structure is required. This provides a framework where the staff has a clear structure within which to develop, but the actual work is carried out on the basis of teams drawn across the organisation, depending on the needs of the individual projects (cf. table n° 6 below).

4.2. Internal Management Co-ordination

An internal management co-ordination committee will be created to assist the Director in the preparation and Implementation of the work programmes and to ensure the co-ordination of the different teams and the global coherence of the work of the Centre.

4.3. Organisational chart

The proposed organisational chart (table n°7) does reflect the new priorities (tables n° 2 and 3), their distribution in priority programmes and projects (tables n° 4 and 6).

If accepted by the Management Board, the new organisational chart will be the base for a more detailed organigramme, to be drawn up by the Director until the January 2001 Management Board meeting, taking also due account of the review of the existing and potential competencies of the EMCDDA staff, of the identified gaps and needs (as described under point 5 below), and of the possibilities of converting previously externalised financial means into new positions, in order to ensure the full coverage of the tasks foreseen for the 3 year work programme 2001-2003.
### EXAMPLE: PPI 1: 5 HARMONISED INDICATORS + 2 SOCIAL INDICATORS

#### Structure of programme

<table>
<thead>
<tr>
<th>Programme Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project 1:</strong> DRUG USE GENERAL POPULATION (Project manager)</td>
</tr>
<tr>
<td><strong>Project 2:</strong> PREVALENCE OF PROBLEMATIC USE (Project manager)</td>
</tr>
<tr>
<td><strong>Project 3:</strong> DEMAND OF TREATMENT (Project manager)</td>
</tr>
<tr>
<td><strong>Project 4:</strong> DEATH AND MORTALITY (Project manager)</td>
</tr>
<tr>
<td><strong>Project 5:</strong> DRUG RELATED INFECTIONS DISEASES (Project manager)</td>
</tr>
</tbody>
</table>

| Project 6: DRUG RELATED URBAN DELINQUENCY (Project manager) |
| Project 7: DRUG RELATED EXCLUSION (Project manager) |

#### Structure of project

<table>
<thead>
<tr>
<th>Project Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> Scientific aspects (Scientific staff: full/part time)</td>
</tr>
<tr>
<td><strong>2.</strong> Institutional and International aspects (Institutional support: part time)</td>
</tr>
<tr>
<td><strong>3.</strong> Publications and Website aspects (Dissemination staff: part time)</td>
</tr>
<tr>
<td><strong>4.</strong> REITOX aspects (REITOX staff: part time)</td>
</tr>
<tr>
<td><strong>5.</strong> Enlargement aspects (Enlargement staff: part time)</td>
</tr>
<tr>
<td><strong>6.</strong> Annual report aspects (Communication staff: par time)</td>
</tr>
<tr>
<td><strong>7.</strong> Financial + administrative aspects (Administrative staff: part time)</td>
</tr>
</tbody>
</table>
Table nº 7

**ORGANISATIONAL CHART**

**DIRECTOR**

- **Assistant**
- **Quality Manager**

**INTERNAL MANAGEMENT CO-ORDINATION**

- **PTP 5 Enlargement**

**CO-ORDINATION OF COMMUNICATION AND DISSEMINATION**

**PTP**
- **PTP 2 Website**
- **PTP 4 Annual Report**

**DISSEMINATION**
- Dissemination strategy
- Documentation
- Publications on line
- Publications off line

**CO-ORDINATION OF PRIORITY INDICATOR PROGRAMMES: PPI**

- **PPI 1 Epidemiological indicators**
- **PPI 6 Supply core data**

**CO-ORDINATION OF PRIORITY INDICATOR RESPONSES**

- **PPI 2 Demand reduction core data**
- **PPI 4 Global strategy core data**
- **PPI 7 Law enforcement core data**

**CO-ORDINATION OF PRIORITY INDICATOR IMPACT**

- **PPI 3 Performance indicators DR**
- **PPI 5 Performance indicators global strategies**
- **PPI 8 Performance indicators law enforcement**
- **PTP 1: EWS/Joint Action**

**CO-ORDINATION OF ADMINISTRATIVE AND SUPPORT ACTIVITIES**

**ADMINISTRATION**
- Personnel
- Programming
- Budget
- Finance
- Logistics
- Informatics

**PTP**
- **PTP 3 REITOX**

---

PPI : Priority Programmes on Indicators and core data
PTP : Priority Transversal Programmes
EWS : Early warning system
5. New specific Strategies

Strategic orientation is needed for some specific areas such as Human Resources, REITOX, Communication and Enlargement.

After the discussion of these orientations by the Management Board in September 2000, the respective operational plans will be worked out and presented to the Management Board in January 2001 for adoption.

5.1. Human resources

The major changes in operational procedures will also require changes in the area of human resources. In order that people can make the best use of their skills (and that the EMCDDA can use its people in the most effective manner) a fundamental action is required in this area. This will be the most complex area to implement, as people may be resistant to change.

Three fundamental actions are required:

- **An assessment of the competencies to be found among the existing staff** – this is not limited to technical issues but also covers the wider range of skills – and a review of how this fits with the needs of the EMCDDA.

- **A shift in working style towards a greater focus on team working** - this is essential to ensure proper information sharing, and to enable balancing of resources.

- **Introduction of a consistent human resource policy**, which increases motivation and effectiveness and enables members of staff to see a valid development path within the organisation.

It is important not to lose sight of the fact that these are major changes and will take some time to plan and implement effectively. Typically it takes an organisation up to two years to fully integrate a new consistent human resource policy into all management processes. Clearly therefore, it is essential for the process to start as soon as possible to avoid missing the decision making cycle.

5.1.1. Human Resource Policy

The EMCDDA relies on its staff for the quality of its work. In order to do this it needs to have a highly trained and motivated workforce.

As an organisation, it finds itself in a complex situation, being at the same time a small entity relatively isolated from its parent and part of a large bureaucratic organisation with personnel practices and traditions related to a relatively large and complex organisation.

In addition to this, people working within the EMCDDA do so on a number of different bases, which again leads to additional complexity.
Finally, despite being part of the larger group of European institutions, the EMCDDA has a quite specific task which means that it is viewed externally and can be assessed in quite a different manner from the more generic administrative body to which it ultimately belongs. This has also implications for the staff.

However, since the EMCDDA belongs to the European Public Service the general feeling among the staff is that its Human Resource Policy should be built on the principles and rules that apply to the civil servants of the European Public Service.

In top performing organisations, the HR strategy fits into the organisation strategy and is designed to deliver against business objectives. HR strategy is defined in terms of:

- business processes
- management structures and systems
- roles and responsibilities (i.e. job designs)
- competencies (skills, knowledge and individual qualities)
- rights and obligations

The HR function is seen and understood as integral to the team responsible for leadership and business success.

This needs to be translated into an approach so that at the process level:

- Relationships are managed with perceived fairness, involving employees collectively and individually in those decisions that affect their work.
- Recognition is given to the different stakeholder relationships, which include clients and suppliers.
- The management approach is inculcated through an appropriate organisation culture, i.e. the values and behaviours that define “the way we do things around here.”
- Employee creativity and innovation is developed.
- There is an organisation-wide approach to learning and development.
- There is an effective system to facilitate two-way communication.
- Managers are trained to evaluate from the same frame of reference, appraisals are perceived as fair and accurate.
- Feedback is delivered in a timely and constructive way and is perceived as usable by employees.
- The physical and mental well being of employees is central to organisational life.
- Recognition is given to the significance of the home/work life balance.

5.1.2. HR Best Practice Benchmarks

There is no ‘right’ way to manage human resources. What is appropriate depends on the strategic objectives at an organisational level. The challenge is to develop and operationalise strategy that is appropriate for the organisation.
Examples of HR best practices of high performing companies include:

- Three common traits in these organisations:
  - There are significant opportunities available to staff for personal/professional development - internal transfer, promotions from within, formal training, educational support programs, and international assignments.
  - Quality of life and organisation culture is deemed important to meeting business objectives.
  - The work environment encourages suggestions, two-way communication, empowerment/decision making at all levels and open sharing of information about the business.

Looking at these best practice examples, three key issues arise for the EMCDDA, which can be categorised as: attracting and involving new staff, training and developing existing staff, and working methods.

5.1.3. Recruitment and Induction

At present the recruitment process for the EMCDDA is extremely cumbersome and costly, involving large interview panels, which do not necessarily best assess the suitability of the candidates for the posts concerned.

In addition, with the development of new areas of work for the EMCDDA, new recruitment sources will need to be identified to ensure that the new competencies required can be attracted to the centre.

It is important that a system of induction training be implemented to provide people with an introduction to the country and to the organisation.

5.1.4. Training and Development

As the EMCDDA faces new challenges, it will rely on its staff to meet these to a large extent. Therefore it is critical that they are able to undertake training in both content and technical areas to enable them to grow with the organisation.

In some cases this may be external training, but in others it can be delivered in house. It is, however, important to establish for each employee a training plan, which forms part of their personal development plan. This needs to be focused on the needs of the organisation as well as the individual, so a proper training and development framework for the organisation needs to be developed to ensure fairness and transparency.

5.1.5. Working methods

The EMCDDA is basically a knowledge organisation and needs to have appropriate working methods. This may mean introducing an element of flexibility into working hours for some staff and increasing the opportunities for flexible working for others (eg working from home, telecommuting, etc). This flexibility should not interfere with the operational needs of the centre.
5.1.6. Managing the change

Introducing the new structure, the new working methods and the new work areas will mean a significant challenge for all the staff of the agency. It is important that they be involved in the process and, to a large extent, take ownership of the change.

This process has already begun with the internal working groups, which have contributed significantly to the reform. However, it should also be recognised that this very process may have raised expectations and that it is important that these be met. **Thus it is crucial that not only the administrative but the HR reforms are introduced as soon as possible to build on the body of goodwill and willingness to change which has been built up.**

5.1.7. Operational issues

- A person should be identified and given responsibility for HR issues at a strategic level.
- All staff should take part in a competency assessment process and recognise their skills to identify training opportunities.
- Training should be offered to all staff according to their needs and the identified needs of the organisation.
- On the basis of an agreed framework, staff should be given feedback on their performance and the opportunity for growth either within the organisation, or by the development of opportunities for personal development.
- A proper induction package should be developed for new staff. This could take the form of an employee handbook, together with the appointment of a “mentor” within the organisation to assist them in the first weeks.
- New professional profiles and skills will be requested to cope with the new areas to be covered by EMCDDA (in particular: policy analysis). These should be identified immediately after the adoption of the Reform Plan; it will be necessary to create a minimum of new positions to fill the identified gaps both in terms of quality and quantity.
- The recruitment process will be made more open and more flexible, with the size and composition of interview panels being related to the level of the post being filled.
- Significant financial resources should be devoted to the HR aspects of the reform, especially in the training area to ensure that staff can acquire the new skills and competencies they will need.
- Working methods appropriate to a knowledge-based organisation should be adopted, fostering an attitude of trust in the staff and a sense of being valued.
- The HR reforms should begin immediately; to avoid any loss of momentum and to ensure that current enthusiasm is harnessed to the best effect.

5.1.8. The European Public service

The EMCDDA staff should be seen as belonging to the European Public Service. And the necessary measures should be taken to fully implement this, in accordance with the human resources aspects of the European Commission reform. This implies that in the following months the EMCDDA should move towards:

- Adopting formally the implementing rules of the Regulations and rules applicable to officials and other servants of the European Communities;
• Adopting formally the rules applicable to the local agents;
• Adopting formally the rules applicable to detached national experts and trainees;
• Transforming progressively temporary agent posts into permanent posts accordingly to the previous decision of the Management Board in this field;
• Drawing up an evaluation/assessment and promotion policy;
• Developing mobility.

5.1.9. Further developments

After the approval of these strategic orientations, a more detailed operation plan will be prepared for adoption by the Board in January 2001.

5.2. REITOX

As noted by the Management Board working party on the Medium Term Perspectives “There is an urgent need to clearly define and obtain agreement concerning the relationship between the EMCDDA and the National Focal Points”.

In its decision of 3 March 2000 the Management Board requested a fundamental analysis of the situation of REITOX. The Director submitted to the Management Board the requested analysis (see document EMCDDA/27/00), which provides background information and concrete steps to be taken in order to improve the effectiveness of the NFPs and of the network.

The issue of REITOX cuts across many of the issues identified in the Reform Plan. In particular the Focal Points need to be involved in:

• Strategic planning – which needs to be a bottom up process. Specifically they can give input on capacity and, in conjunction with their Management Board member, on emerging issues from a Member State perspective.
• The communication strategy – this will rely on the Focal Points to act as the EMCDDA antenna in the Member State and thus they must also buy into the strategy.
• The Quality strategy - the Focal Points are one of the key information sources and thus their commitment to the quality policy is absolutely crucial.

However, the role of the Focal Points needs to be supported by the Member State, to give them the status and resources required to act effectively. This is an action for the Management Board Members.

In the same way as a competence assessment of the staff is required to maximise the potential of the Centre, so an assessment of the strengths and weaknesses of the various Focal Points is needed. This would enable the EMCDDA to provide the most effective support to each Focal point, and also enable the Focal Points to act as a support for each other in terms of organisational and knowledge development. This could also be used to build relationships and expertise with a view to managing enlargement.
Therefore, it is suggested that, in line with the orientation taken already by the Bureau, the Management Board decide to launch immediately an evaluation of the NFP’s with the view to identify their existing capacities and potential gaps to be able to implement the reform package.

To this end, the Management Board decided, on proposal of the Bureau, to set up a Steering Committee composed of representatives of the Management Board, the NFPs, the Scientific Committee and of the EMCDDA. This Steering Committee should in particular establish the Terms of Reference of the evaluation.

5.3. Communication Strategy

This chapter sets out the key elements of a new dissemination strategy for the EMCDDA. It reflects both the new focus of the work of the centre and the proposed new structure and working methods. Detailed work on elements of the strategy is already in progress at the EMCDDA.

5.3.1. Dissemination as focal point of EMCDDA Activity

The main function of the EMCDDA is as a, and potentially "the", provider of comparative and reliable information on the drugs situation in Europe. The logical implication of this is that dissemination should be the focal point of all EMCDDA activities. This means that all activities should be assessed in the light of how the information will be used, prior to commitment to undertake the work. This does not mean that all activities must be destined for publication, but that they should feed into a process which ultimately leads to the provision of information for the targeted end users.

5.3.2. New Purpose

In the first years of its activity, the EMCDDA pursued a fairly broad approach to dissemination, with a slight focus on the scientific community. This was inevitable in the start-up phase, as the Centre had to establish its presence not only with policy makers and the wider public, but also with the scientific community and general drugs experts. This latter was crucial as a source of information for the Centre in its start-up phase. Now however, there has been a redefinition of the target audiences and their priorities, reflecting the maturity of the centre. The new targets are:

- Policy makers at both European and national levels. This group includes not only the policy makers themselves but also their key advisors.
- Drugs professionals working in the field with a need for more detailed but still analysed and comparable information.
- Academic and scientific researchers in the field who are interested in detailed information in a much more "raw" state.
- In addition the EMCDDA has a responsibility to provide information to the wider public. Finally the dissemination activity has to target the media, as a conduit to reaching the remainder of the target audiences.

5.3.3. New Methods

In reaching these audiences the EMCDDA has to tailor its methods to the audiences and to the tools at its disposal. This entails a fundamental reappraisal of the methods currently used.

5.3.4. Key elements of the strategy
The strategy can be divided into three main areas as shown in the diagram below:

![Diagram showing three main areas]

This gradation between highly synthesised information disseminated in a very proactive way, through structured information available on a more demand led manner to unstructured and unanalysed information available only on request is key to the strategy.

**It defines the types of dissemination activity associated with the different target groups, and enables decisions to be made about the appropriate outputs from the EMCDDA, including tools, channels and costs.** It also clearly identifies the fact that some activities may contribute to the accumulation of data for the lowest portion of the triangle, but that these should be the building blocks for the next levels.

The wider public which would use the same information as policy makers, since this is provided in a form for the “intelligent layman”, and the press, are not an audience in themselves, but rather a channel through which to reach the main targets.

Just as information has to be processed in a specific way for the Web site, so it may need to be processed for the press.

Furthermore, the Centre has now to develop a general marketing policy. A policy on sales of outputs is required and a feasibility study should be launched immediately to this effect.

**Tools**

The EMCDDA has a number of tools at its disposal for communicating with its “customers”. These range from sophisticated electronic tools, to traditional paper publications. Each of these has a validity and must be considered in the context of the purpose in hand.

**Electronic media**

Electronic media have a great number of advantages for both users and the EMCDDA. They provide the advantage of instant information at low/no cost to the user, and also often mean that the
information can be re-used with minimum effort – an important factor when dealing with policy makers and their advisers.

However, the effective use of electronic media requires an investment in the infrastructure required to provide the service – not just the hardware, but the processing of the information into a suitable format. This investment must be quantified and regarded as a priority.

➢ Web site
The EMCDDA website is the most widely available public face of the EMCDDA. It is also probably the most flexible tool at its disposal.

Currently the website is used mainly (although not exclusively) as a repository for documents stored in electronic format. There is the opportunity for it to become much more interactive and to exploit the EMCDDA information to a much greater extent.

A number of activities also need to be undertaken to ensure that the website is more visible. A significant investment of time to promote the site and ensure it is easily located is required. This is continuing commitment, rather than a one-off activity. The tools exist within the existing website to build on this but as the scope of the EMCDDA is extended in terms of subject matter, this will need to be constantly reviewed and expanded.

At present, the website is focused on the EMCDDA itself, rather than the information it contains. The opportunity exists to change the focus significantly towards the content and away from the institutional structure (without losing the visibility of the EMCDDA itself). A feasibility study should be launched as soon as possible to this effect, as the Website is becoming a Priority Transversal Programme of the Centre (see table n° 4).

➢ Electronic documents
Documents produced by the EMCDDA are often made available via the website. However, at the moment these documents are just electronic versions of paper documents. The scope exists for at least some of these to be true electronic documents, allowing flexibility of access, dynamic links and a real use of the potential of the medium. A prime candidate for this is DrugNet where there is true potential to provide an on-line magazine which could be built dynamically and enable readers to tailor it to their own interests, as well as providing dynamic links to the more detailed information referred to. The creation of this on-line version would not imply abolishing the paper version as the two media have significantly different audiences.

➢ Paper media
Among certain audiences paper publications still have a strong role to play – not everyone yet has easy access to the web and some people still have a strong preference for paper versions. This needs to be taken into account when deciding on the format for outputs from the EMCDDA, as the important issue is reaching the intended audience in the most cost-effective manner.

Paper publications fall into two categories:

• Standard documents
  Standard documents are those which are produced by the EMCDDA in the normal course of its activities and which are circulated by them to their mailing list of clients, or sent out on demand. The intention is to reach a wide audience and the distribution process is one which could be easily devolved outside the Agency.

• Tailored documents
  By better exploiting the potential of electronic media, there is much scope for the production of tailored documents, wither for specific users, for specific groups or specific
events. This would enable lively, up-to-date and authoritative documents to be quickly and easily produced in response to demand or need.

**Distribution Strategy**
The EMCDDA needs to examine closely the distribution strategy for its paper publications. The activity is highly time consuming and may be an area where the new policy towards externalisation could be brought into play. A number of options exist and different ones may be appropriate to different publications.

The EMCDDA also needs to develop a general marketing policy and system for the Centre’s outputs; a policy on sales and outputs is required and should be prepared by a feasibility study.

- **Multi-lingualism**
The new user focus means that language will become more of an issue, at least for the synthesised information, if it is to reach those for whom it is intended.

For the moment the website is only in English, although the documents which can be accessed may be in several languages. As the interactive content grows this will become an increasing important issue, otherwise navigation will become extremely complex. A multi-lingual version of the website is already in a test phase, but the investment in maintaining this should not be underestimated.

This whole question needs to be addressed, possibly in conjunction with the REITOX network, to see how this can most effectively be dealt with to ensure people have the information they need in the language they want, whether on paper or electronically.

- **Monitoring and Evaluation**
As with all other aspects of the work of the EMCDDA, a feedback element will be essential to ensure that the strategy is meeting its objectives and to enable it to be modified in line with changing requirements, resources and technologies.

**Further developments**
According to these strategic orientations, a more detailed operational plan will be prepared for adoption by the Board in January 2001.

**5.4. Enlargement**
INTRODUCTION

In line with the conclusions of the European Council of Luxembourg, the opportunity has been given to the Candidate Countries to take part in some Community programmes and Agencies, with a priority to be given to the EMCDDA.

The Candidate Countries are:
- 10 countries covered by the Phare Programme (Bulgaria, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Romania, Slovak Republic and Slovenia)
- Cyprus, Malta and Turkey

The strategy is based on a two step process:
- the Preparation Phase, which includes a technical assistance to be provided by the EMCDDA to the Candidate Countries (CCs), and to be funded by Community programmes (Phare, Meda)
- the Pre-Accession Phase, which foresees the participation of the CCs in the activities of the EMCDDA. The terms of this participation will be negotiated by the Commission with the CCs, according to the mandate to be given by the Council to the Commission before end 2000.

1. PREPARATION PHASE (2000-2002)

OVERALL OBJECTIVE
To prepare the integration of the candidate countries in the EMCDDA.

BUDGET AND HUMAN RESOURCES
As far as the Preparation Phase is concerned, the immediate impact of Enlargement on the workload and budget of the Centre will be secured, either by the Phare Programme or by other Community programmes like MEDA.

10 Phare Countries

- The Technical Assistance to be provided by the Centre will be covered by the Phare Programme up to 2 M Euros, and is supposed to cover the costs exclusively related to the project and to the activities to be developed in the “Phare” CCs.
- The following human resources will be financed by the Phare project:
  - a full-time Project Assistant for 16 man/months (m/m);
  - assisted by a full-time Administrative Assistant for 16 m/m;
  - a full-time Epidemiologist for 12 m/m (to be confirmed);
  - a pool of short-term technical experts. The maximum short term expertise available is 25 m/m.
- The 10 Phare CCs have also a drug-related component in their 2000 Phare National Programmes (1 M Euro per country, until end 2002), which includes the strengthening of their National Focal Points.

Cyprus, Malta and Turkey

- The MEDA Programme could fund such activities, on the base of the new pre-accession strategy approved by the Commission in March 2000 for Cyprus and Malta, or on the base of the existing Association Agreement with Turkey.
ACTIVITIES TO BE DEVELOPED DURING THE PREPARATORY PHASE
Taking into account the elements described above, the activities to be developed during the Preparatory Phase will be in particular the following:
- to limit the content of the work to the 5 key epidemiological indicators, to the Joint Action on Synthetic Drugs and to the already available data on drugs seizures and drugs-related arrests;
- to limit the contribution of the CCs to the production of the National Reports, and to the production of a specific chapter in the 2001 and 2002 Annual Reports;
- to provide a limited technical assistance, in order to allow the CCs to meet the basic requirements for a further participation in the activities of the Centre.

2. PRE-ACCESSION PHASE
The participation of the CCs to the activities of the EMCDDA during the Pre-Accession phase will be based on the individual application of each country, to be negotiated by the Commission on a Council’s mandate. The Nice European Council of December 2000 is expected to take a decision on the timetable for Enlargement. Until now, only Bulgaria expressed a formal interest, while some other countries have contacted, or have paid a visit to the Centre: Cyprus, Estonia, Latvia, Malta, Poland, Slovak Republic.

OVERALL OBJECTIVE
To give the CCs the opportunity to fully take part in the activities of the Centre as observers, without voting right.

BUDGET AND HUMAN RESOURCES
The full participation of these countries in the Centre’s work will involve their full participation in the financing of this work. These costs could be partly covered by the Phare National Programmes if the CCs so wish.

The EMCDDA is expected to present in January 2001 an estimate of the impact of the participation of the CCs on its budget and on its human resources, including the office and equipment issues.

In the hypothesis that the Negotiation mandate will be given by the Council to the Commission in the Autumn 2000, this estimate will serve as an element of the bilateral negotiation, in order to define the cost of the participation for each country.

ACTIVITIES TO BE DEVELOPED DURING THE PRE-ACCESSION PHASE
The participation of the CCs will be done incrementally, according to the number of countries who will have applied, and according to the provisional calendar of the negotiations and their outcome. These activities will be the following:
- to invite the representatives of the CCs to take part in the statutory bodies of the Centre;
- to integrate their National Focal Points in the REITOX network;
- to integrate progressively the CCs in the EMCDDA work programme and to highlight the specific situation of the drug phenomenon in the CCs.
6. Decision

The EMCDDA Management Board,

having regard to its decision of 3 March 2000, which requested the Director to present concrete proposals for the internal reform of the Centre;

whereas the Director has submitted an Internal Reform Plan (document EMCDDA/25/00),

DECIDES to endorse the Internal Reform Plan proposed by the EMCDDA Director.

As a consequence it DECIDES in particular:

- to approve the proposed approach to quality management (QM), including the recruitment of an Auxiliary staff before the end of 2000 to ensure a quick implementation of QM followed by the creation of a full time specific post for QM under EMCDDA budget for 2001;

- to approve the proposed new working framework; (as outlined in paragraph 3.1., and in particular tables n° 1, 2 and 3);

- to approve the proposed programme/project approach; (as outlined in paragraph 3.2.1. and in particular table n° 4);

- to approve the proposed approach to Activity Based Management (ABM), Financial Management and Control and to cost-effectiveness; (as outlined in paragraphs 3.3.3., 3.3.4. and 3.3.5.);

- to approve the proposed decision making procedures (as outlined in paragraph 3.4. and in particular table n° 6);

- to approve the proposed outlines of the new organisational structure (as outlined in paragraph 4 and in particular in table n°7) and to call on the Director to prepare on this basis a detailed “organigramme” by the end of 2000;

- to take note of the proposed outlines of the human resource policy (as outlined in paragraph 5.1.) and to call on the Director to prepare a detailed operational plan on this issue to be adopted by the Management Board at its meeting of January 2001;

- to take note of the proposed new approach to improve the functioning of REITOX and the relationship between the Centre and the National Focal Points (as outlined in paragraph 5.2.) and to set up immediately a steering group (MB+NFP+SC+EMCDDA) to work out the terms of reference of an evaluation of the Focal Points to be decided on at the meeting of January 2001;

- to approve the proposed outlines of the communication strategy (as set out in paragraph 5.3.) and to call on the Director to prepare a comprehensive operational plan on this issue, to be adopted by the Management Board at its meeting of January 2001;

- to endorse the proposed EMCDDA strategy for Enlargement (as outlined in paragraph 5.4. - see also document EMCDDA/26/00).