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## Information and Notices

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Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
Objective	8. a. Scale up where applicable, availability, coverage and access to risk and harm reduction services e.g. needle and syringe exchange programmes, opioid substitution treatment, opioid overdose management programmes, to lessen the negative consequences of drug use and to prevent and to substantially reduce the number of direct and indirect drug-related deaths and infectious blood-borne diseases associated with drug use but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis in accordance with the WHO recommendation on the comprehensive package of health services for people who inject drugs  b. Better prevent drug related deaths according to national circumstances as for example in the case of opiates, by providing access to authorised pharmaceutical dosage forms of medicinal products containing naloxone specifically certified to treat opioid overdose symptoms by trained laypersons in the absence of medical professionals	Ongoing	Responsible party  MS EMCDDA COM	<ul> <li>Over-arching indicators 2, 3, 4, 11</li> <li>Extent of increased availability of and access to evidence-based risk and harm reduction measures in MS where applicable</li> <li>Overview of exchanges of best practices on risk and harm reduction measures</li> <li>Number of MS reaching the WHO recommendation on the comprehensive package of health services for people who inject drugs:         <ul> <li>Needle/Syringe programmes</li> <li>Opioid substitution treatment</li> <li>HIV testing and counselling</li> <li>HIV treatment and care</li> <li>Condom programmes</li> <li>Behavioural interventions</li> <li>Prevention and management of hepatitis, tuberculosis and mental</li> </ul> </li> </ul>	Data collection/assessment mechanisms  EMCDDA Reporting/ Reitox network national reporting package  MS Reporting Civil Society Forum on Drugs Civil Society Forum on HIV/AIDS, Viral Hepatitis and Tuberculosis
				Naloxone training for laypersons as an irreplaceable prerequisite for safe take-home programmes	