

## ANNEX 3

### Implementation of the 2016 work programme by objectives and expected outputs/results

This annex presents, in detail, the implementation of the EMCDDA's work programme by objectives, activities and expected results, in order to provide a clear picture of the work carried out by the agency in 2016.

The EMCDDA fully achieved 82 % of the applicable tasks <sup>(1)</sup> in the 2016 work programme (i.e. 121 out of 147). A further 16 % of the results were partially achieved (most of these were delayed and were in progress at the end of 2016) and only 2 % of the results were not achieved (either postponed or cancelled).

A further analysis of results by priority levels shows that the agency fully achieved 97 % of the applicable level 1 (L1) priority results, 83 % of the level 2 (L2) results and 60 % of the level 3 (L3) results. This gradually decreasing degree of achievement with decreasing priority reflects that the work carried out in 2016 was correctly focused on the activities which had the highest priority level.

In terms of the annual targets defined in the KPI GOV 2 — Degree of implementation of the 2016 work programme <sup>(2)</sup> (see also Annex 4 — KPIs), these were very slightly underachieved with regard to the level 1 priority results, but overachieved for the level 2 and level 3 priority results. Furthermore, it is important to highlight the fact that these targets measure only the proportion of the results fully achieved; they do not consider the results that were partially achieved and, therefore, do not provide a complete picture of the progress made with regard to the implementation of the 2016 work programme.

As regards the level 1 priority results, it should be noted that only one result was partially achieved, out of the 38 applicable. This concerns the drafting of the European Drug Responses Report, which was delayed in 2016 because of the competing priorities presented by the preparation of the major publications that were released in 2016 (see Key area 1 for details). Nevertheless, this delay will not have consequences on the delivery of the final report, the launch event for which is scheduled to take place in October 2017.

Another important point concerns the three results not achieved during the year — they are all related to level 3 priority projects.

In light of the results presented above, we can conclude that the EMCDDA managed to fulfil all of its legal obligations and achieve a very good level of implementation of its work programme. The deviations from the planned targets were minimal and work on residual activities will continue in 2017, in line with the available resources.

This annex presents the activities undertaken by the EMCDDA in 2016 in brief. For details about the achievements during the year, please see the [full report](#).

For acronyms and abbreviations used, please refer to Annex 7.

<sup>(1)</sup> Six results, which were not applicable, were excluded from the analysis.

<sup>(2)</sup> Annual targets: 100 % for level 1 results, 80 % for level 2 results and 50 % for level 3 results.

## Key Area 1: Communicating evidence and knowledge exchange

**Strategic objective:** Provide policy and practice with better evidence for decision-making and action, and serve as the European central reference point for drug-related information and analysis

Expected results	Implemented	Comments
<b>Action 1.1. Inform policy and practice by providing timely and high-quality data, strategic and situational analyses and threat assessments</b>		
Comprehensive annual situation assessment of trends and developments in drug use in Europe:		
<ul style="list-style-type: none"> <li>2016 EDR package published (L1):</li> </ul>	Yes	EDR package launched on 31 May 2016
<ul style="list-style-type: none"> <li>State-of-the-art strategic analyses of established and emerging challenges:</li> </ul>		
<ul style="list-style-type: none"> <li>Second edition of the EDMR published (L1)</li> </ul>	Yes	EDMR launched on 5 April 2016
<ul style="list-style-type: none"> <li>First edition of the EU Drug Responses Report (EDRR) — first draft (for publication in late 2017) (L1)</li> </ul>	Partially, delayed	The drafting of the EDRR started in 2016; however, the first draft was not finalised. This is a brand-new flagship EMCDDA publication, and developing the concept required more time than initially planned; in addition, work on three other major 2016 reports was carried out during the year, which stretched the relevant human resources. Despite the delay in 2016, the EDRR will be published on time in 2017
<ul style="list-style-type: none"> <li>Focused strategic analyses (short and policy oriented, topics defined by need) (L2)</li> </ul>	Not applicable	There was no need for additional strategic analyses in 2016
Threat assessment reports (event generated):		
<ul style="list-style-type: none"> <li>EMCDDA–Europol Joint Report(s) on NPS (L1)</li> </ul>	Yes	Three EMCDDA–Europol joint reports, on MDMB-CHMICA, acryloylfentanyl and furanylfentanyl, were launched, and the joint reports on MDMB-CHMICA and acryloylfentanyl were sent to the EU institutions by 31 December, in line with the applicable deadlines
<ul style="list-style-type: none"> <li>Risk assessment report(s) on NPS (L1)</li> </ul>	Yes	A risk assessment on MDMB-CHMICA was carried out by the EMCDDA's Extended Scientific Committee and the Risk assessment report was subsequently submitted to the EU institutions as stipulated by the Council Decision
<ul style="list-style-type: none"> <li>Joint threat assessments (e.g. with Europol, ECDC) (L2)</li> </ul>	Not applicable	No reports were required in 2016
<ul style="list-style-type: none"> <li>Trendspotting case study (L2)</li> </ul>	Yes	The results of the study carried out in 2015 on 'Recent changes in Europe's MDMA/ ecstasy market' were published in 2016
Topic overviews on important established or emerging issues:		
<ul style="list-style-type: none"> <li>Prevention systems (L2)</li> </ul>	Partially, delayed	Work in progress, planned for publication in 2017
<ul style="list-style-type: none"> <li>Misuse of benzodiazepines within context of polydrug use (L2)</li> </ul>	Partially, delayed	Work in progress, planned for publication in 2017
<ul style="list-style-type: none"> <li>Legal approaches to controlling drugged driving, and their enforcement techniques (L2)</li> </ul>	Partially, delayed	Work in progress, planned for publication in 2017

Expected results	Implemented	Comments
<ul style="list-style-type: none"> <li>National treatment systems in Europe (comparative analysis) (L3)</li> </ul>	Partially, delayed	Work in progress, planned for publication in 2017
<ul style="list-style-type: none"> <li>Health responses to NPS (L3)</li> </ul>	Yes	Published in June 2016
Online EU guidelines for the evaluation of national drug strategies (L2)	Partially, delayed	Work in progress, planned for publication in 2017
Joint EMCDDA–Europol annual report on the implementation of Council Decision 2005/387/JHA (or applicable legal framework) on NPS (L1)	Yes	Published in July 2016
Other joint publications:		
<ul style="list-style-type: none"> <li>ESPAD 2015 Report, including interactive web resources (L1)</li> </ul>	Yes	Launched on 20 September 2016
<ul style="list-style-type: none"> <li>Joint EMCDDA–ECDC guidance (update on the infectious diseases among PWID — if triggered and in line with available resources) (L3)</li> </ul>	Partially, delayed	Work in progress, planned for publication in 2017
Scientific articles in high-impact journals (L2)	Yes	27 scientific articles or book chapters (co-)authored by EMCDDA staff published in 2016
On the web: online top-level overviews and updates on emerging issues (all areas) (L2)	Yes	
Country overviews for candidate, potential candidate and ENP partner countries (L2)	Partially	Country overviews were published for several ENP countries: Israel, Moldova, Morocco and Ukraine. Updates of country overviews were also prepared for interested candidate and potential candidate countries: Albania, Montenegro and Serbia
<b>Action 1.2. Support services for relevant European and national-level policy and technical activities and meetings (knowledge exchange, institutional support, technical backstopping) (on request and resource dependent)</b>		
Support for EU institution-related activities, including:		
<ul style="list-style-type: none"> <li>Assessment of the 2013-16 EU drug action plan; the mid-term assessment of the 2013-20 EU drug strategy; and the preparation of the 2017-20 action plan (technical support to the NL and SK Presidencies) (L1)</li> </ul>	Yes	As required, the agency forwarded to the European Commission a comprehensive report on the actions for which the EMCDDA is a responsible party (18) and the actions for which the agency has been identified as a data provider (21)
<ul style="list-style-type: none"> <li>European Agenda on Security 2015-20 (L1)</li> </ul>	Yes	Core tasks were to support COSI, in particular as far as the priorities for heroin, cocaine and synthetic drugs in the OAPs were concerned
<ul style="list-style-type: none"> <li>Participation at key drug-related events (L2)</li> </ul>	Yes	The agency attended some 36 key EU and international drug policy meetings
<ul style="list-style-type: none"> <li>Activities with third countries (briefings, annual progress reports) (L2)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>Other policy initiatives relevant to EMCDDA activities (e.g. in relation to infectious diseases including HIV/AIDS prevention and regional reporting on HIV/AIDS (Dublin reporting); the EU alcohol strategy; Joint Declaration on enhancing cooperation on drugs and renewing the commitments of the EU–Western Balkans Action Plan on Drugs (2009-13), etc.) (L2)</li> </ul>	Yes	

Expected results	Implemented	Comments
<ul style="list-style-type: none"> <li>Support for EU-funded research (in areas relevant to the EMCDDA's mandate), including input to the Annual Dialogue on Research of the HDG and the dissemination of findings (L2)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>Data exchange and technical cooperation with the UN System (L2)</li> </ul>	Yes	
Support for EU Member States, including information requests and technical input to national initiatives (L2)	Yes	
<b>Action 1.3. Identify, promote and monitor best practice</b>		
BPP kept up to date and usability enhanced (L1)	Yes	
New modules of evidence on environmental prevention and responses to NPS (L2)	Yes	Three new modules — on interventions for dual-diagnosis patients, treatment options for substance use disorders and responses to NPS — were added in 2016
Implementation of minimum quality standards in drugs demand reduction monitored (L2) (upon request)	Yes	
Systematic review of global approaches to prevention (including law enforcement, health service providers and community actors) interventions in the community (L2)	Yes	
<b>Action 1.4. Support to practice in the Member States and third countries which are a priority for the EU (based on needs and available resources)</b>		
Follow-up of the first quality feedback on the workbooks provided in 2015 and preparation of second set of workbooks for implementation (L1)	Yes	
National academies and workshops (L2)	Yes	Two Reitox academies for Member States, plus one special format training event organised in 2016
Academies and workshops for third countries within the framework of the technical assistance projects (L2)	Yes	Five Reitox academies organised for third countries in 2016
European training module for prevention providers developed (in cooperation with the EDPQS, the UNODC and the Colombo Plan) (L3)	In progress, delayed	
Input to activities with partners (e.g. CEPOL) (L3)	Yes	Contribution to five training initiatives organised by CEPOL (> 440 participants)
<b>Action 1.5. Contribute to a better understanding of the European drug problem through engagement with policymakers, scientists, practitioners and civil society</b>		
Key events covered by EMCDDA presence (L2)	Yes	
Increased use of social and multimedia communication channels for immediacy and wider reach (compared with 2015) (L2)	Yes	
Stakeholder engagement strategy — action plan for 2016 executed (L2)	In progress, delayed	The activity will be re-launched in 2017 in line with the Strategy 2025

Expected results	Implemented	Comments
Efficient public enquiry service (according to European Ombudsman guidelines) (L2)	Yes	
Tailored information provided to visitors to the EMCDDA (L3)	Yes	In 2016, the EMCDDA welcomed 689 visitors to its headquarters in Lisbon. This represents an increase of nearly 50 % compared with the number of visitors in 2015
<b>Action 1.6. Communicate successfully with media</b>		
Well-paced news products generating high-quality news coverage of the EMCDDA's activities (L2)	Yes	<p>Three evaluation reports and six snapshot reports submitted by external contractor relating to the three main reports launched in 2016 (EDMR, EDR and ESPAD 2015 Report)</p> <p>43 news outputs were released on the website in 2016 (compared with 36 in 2015). These can be broken down as follows: 12 news releases (11 in 2015), 10 fact sheets (10 in 2015) and 21 web news items (14 in 2015)</p> <p>In addition, a total of 460 requests were received by the press office in 2016 (up from 339 in 2015)</p>

## Key area 2: Early warning and threat assessment

**Strategic objective:** Support rapid EU responses to new threats by providing EU institutions and Member States with prompt and scientifically sound information for action on NPS and emerging drug trends

Expected results	Implemented	Comments
<b>Responding to NPS — EU EWS and risk assessment</b>		
<b>Action 2.1. Implement the provisions of the legislative framework on EWS and risk assessment in place in 2016</b>		
Operational EWS and information exchange mechanism:		
<ul style="list-style-type: none"> <li>NPS appearing on the EU market are detected, notified in a timely manner, systematically monitored and action is taken as necessary (e.g. public health alerts are issued) (L1)</li> </ul>	Yes	66 NPS formally notified in 2016; 15 risk communications, including public health-related alerts, EWS advisories and briefings issued to EWS
<ul style="list-style-type: none"> <li>Joint reports are prepared as appropriate (L1)</li> </ul>	Yes	Three EMCDDA–Europol joint reports, on MDMB-CHMICA, acryloylfentanyl and furanylfentanyl, were launched, and the joint reports on MDMB-CHMICA and acryloylfentanyl were sent to the EU institutions by 31 December, in line with the applicable deadlines
<ul style="list-style-type: none"> <li>Structured data is collected periodically and NPS trends are identified and analysed (L1)</li> </ul>	Yes	Ongoing
<ul style="list-style-type: none"> <li>EWS network is operational and supported by the EMCDDA (L1)</li> </ul>	Yes	Ongoing

Expected results	Implemented	Comments
EU-level risk assessment procedure is implemented, as required: scientific evidence on the health and social risks posed by the use of NPS provided to the Council and the Commission, on the basis of which further action on measures to control these substances at EU level may be taken (L1)	Yes	A risk assessment on MDMB-CHMICA was carried out by the EMCDDA's Extended Scientific Committee and the Risk assessment report was subsequently submitted to the EU institutions as stipulated by the Council Decision
Guidelines, procedures, processes and tools adapted to the new legislative framework and implemented (as required) (L1)	Not applicable	The legislative framework did not enter into force in 2016
Strengthened capacity to identify emerging toxicological problems associated with the use of NPS (toxicovigilance) (L2)	Yes	
Strengthened proactive approach to the early detection and response to emerging threats through the use of OSI monitoring and analysis (L2)	Yes	
Improved knowledge of the NPS market (L2)	Yes	
<b>Action 2.2. Implement the provisions of Article 28c of the EU Pharmacovigilance legislation</b>		
Effective information exchange with EMA and the EU Pharmacovigilance system (L1)	Yes	
<b>Action 2.3. Support capacity development in the forensic science and toxicology area</b>		
Increased capacity and information sharing on forensic science data (L2)	Yes	
<b>Action 2.4. Support the use of EU data and analysis on NPS in international level activities (in line with reporting obligations and existing MoUs) and sustain third countries in building national EWS</b>		
Data exchange with international bodies (e.g. UNODC, WHO) to support prioritisation, scheduling discussions and information exchange activities (L3)	Yes	
Support to third countries (mainly candidate and potential candidate countries) to design and operate an EWS at national level (L3)	Yes	
<b>Emerging trends and threats</b>		
<b>Action 2.5. Timely identification of emerging threats through the use of rapid information assessment methods</b>		
Emerging trends and threats captured and reported in a timely manner:		
<ul style="list-style-type: none"> <li>Trendspotting methodology systematised (L2)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>Rapid and in-depth assessment of new threats as required (Trendspotter study) (L2)</li> </ul>	Yes	In 2016, the EMCDDA launched a 'Trendspotter' study to map and increase understanding of PDU and NPS in Europe
<ul style="list-style-type: none"> <li>Joint risk assessments on emerging threats (as required; e.g. with ECDC, Europol) (L2)</li> </ul>	Not applicable	Not required in 2016

Expected results	Implemented	Comments
<ul style="list-style-type: none"> <li>Expert network platform for rapid information collection and exchange created (L3)</li> </ul>	Not implemented	Postponed because of the lack of resources
<b>Action 2.6. Develop new methods and tools for timely identification and reporting</b>		
Development of OSI monitoring and analysis systems for monitoring online markets and drug user forums (L2)	Yes	
Online key informants network developed and maintained (L3)	Yes	
New online information collection methods for identification and monitoring of new trends and developments explored (expert meeting) (L3)	Not implemented	Postponed because of the lack of resources
<b>Action 2.7. Further develop and systematise existing timely and sensitive identification methods and tools</b>		
Findings from the 2015 wastewater monitoring campaign published in collaboration with the SCORE group (L2)	Yes	
<b>Action 2.8. Sensitise routine methods and tools</b>		
Annual review of new drugs/new patterns of use behaviours/new analytical methods and implications for monitoring tools (L2)	Partially	In progress (to be continued in 2017) because of the need to reprioritise resources in 2016

### Key area 3: Situation, responses and trend analysis

**Strategic objective:** Provide a holistic picture of the drug phenomenon, through an integrated and coherent core monitoring system

Expected results	Implemented	Comments
<b>Action 3.1. State-of-the-art monitoring necessary for European level assessment of the drug situation (core trends and developments in use, consequences and responses)</b>		
Quality monitoring and analytical work to inform key outputs (see KA 1) (L1)	Yes	
Consolidated European Model Questionnaire (EMQ), including new modules, where required (e.g. NPS) (L2)	Partially, delayed	In progress, to be completed in 2017
Drug-related deaths (DRD) review (comparative analyses and risk assessment in selected countries) (L2)	Yes	
Reporting instruments for drug seizures and drug law offences reviewed and fine-tuned (L2)	Yes	
Knowledge and expertise exchanged within the EMCDDA expert networks (L2)	Yes	

Expected results	Implemented	Comments
Functions and activities of the EMCDDA Reference Group on Drug Supply reviewed to ensure that they remain fit for purpose (L2)	Yes	
ESPAD coordination necessary for the 2016 joint programme (L2)	Yes	
EFSQ reviewed to reflect results of the 2015 pilot exercise (L3)	Yes	
Prison surveys (prisoner and health facilities) piloted (conditional upon resources) (L3)	Yes	
Results from new GPS carried out in candidate, potential candidate and ENP countries available (L3)	Partially, delayed	In progress, survey results in two countries to be completed in 2017
<b>Action 3.2. Develop and implement new tools and processes for monitoring drug demand and supply: situation and responses/interventions (developmental areas)</b>		
Revised reporting instruments on drug prices and on drug purity and contents completed and endorsed (L2)	Yes	
Methodological framework for monitoring responses to new drugs conceptualised and implemented (L3)	Partially, delayed	In progress, to be completed in 2017
Analysis of coverage provided by national drug treatment systems, with a focus on low-threshold and specialised treatment agencies (L3)	Yes	
New instruments for monitoring drug crime area conceptualised (conditional upon resources) (L3)	Partially, delayed	In progress, to be completed in 2017
Pilot project on market size estimation carried out with five countries (L3)	Yes	
Consensus on the framework for monitoring misuse of medicines reached with the NFPs (L3)	Partially, delayed	In progress, to be completed in 2017
Methodological framework for monitoring internet-based interventions developed (L3)	Postponed	Carried over to 2017



## Cross-cutting area A: Data collection and management

**Strategic objective:** Ensure the validity, consistency and reliability of the EMCDDA reporting system

Expected results	Implemented	Comments
<b>The annual information collection exercise</b>		
<b>Action A.1. Maintain and develop the computing tools to support the collection of data and information</b>		
Systems for data collection operational:		
<ul style="list-style-type: none"> <li>Fonte reporting system and data warehouse maintained and further developed, including work on cleaning of the data and new tools for constructing templates (L1)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>New tools to support workbook reporting system piloted (if appropriate and depending on available resources) (L2)</li> </ul>	Not applicable	The implementation conditions did not require this activity
<ul style="list-style-type: none"> <li>Prototypes piloted for deriving web-based output from the workbook input (L2)</li> </ul>	Yes	
<b>Action A.2. Maintain and develop the collection of data and information</b>		
New national reporting system consolidated and operational:		
<ul style="list-style-type: none"> <li>2015 workbook data collection evaluated and adapted for 2016 submission (L1)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>Workbook working process set up and formalised, including the dialogue with NFPs (L1)</li> </ul>	Yes	
<ul style="list-style-type: none"> <li>Structured questionnaire on prevention reviewed (L2)</li> </ul>	Yes	
<b>Action A.3. Further develop and operationalise the EDND, as the core monitoring tool of the EWS</b>		
Maintenance and regular update (L1)	Yes	Ongoing
Initiation of any necessary revision to ensure functionality is in line with the requirements of the new legislative framework on NPS (L1)	Not applicable	The new legislative framework on NPS did not enter into force in 2016
EDND ready for automatic/electronic data submission including the EWS progress and final reports (L2)	Partially, delayed	In progress, to be completed in 2017
Accessibility options for different categories of users (in line with the applicable policy for access levels) (L2)	Partially, delayed	In progress, to be completed in 2017
<b>Management of the Reitox NFPs</b>		
<b>Action A.4. Support the NFPs in the implementation of the new reporting package</b>		
Data provided to the EMCDDA's 2016 reporting exercise (L1)	Yes	

Expected results	Implemented	Comments
NFPs provided with technical assistance (e.g. Reitox Academies; see Key area 1) and institutional support (where required) (L2)	Yes	
<b>Action A.5. Strengthen the institutional capacity of the NFPs</b>		
2016 grant deliverables (financial and narrative reports) provided in line with the applicable rules and regulations (L2)	Yes	
Reitox accreditation system developed (phase 1, for piloting in 2017) (L3)	Yes	
<b>Action A.6. Enhance knowledge exchange among the Reitox community and between Reitox and other partners</b>		
Bi-annual meetings of the HFPs organised as platforms for knowledge exchange, with conclusions disseminated within four weeks (L1)	Yes	
Online Reitox forum up and running (L2)	Yes	

### Cross-cutting area B: Quality assurance

**Strategic objective:** Ensure that EMCDDA's tools, processes and outputs remain of high quality and fit for purpose through a process of continuous improvement and evaluation of efforts

Expected results	Implemented	Comments
<b>Action B.1. Implement quality assurance mechanisms for EMCDDA core processes and outputs</b>		
Core activities are coordinated, resources are efficiently used, objectives are achieved and quality control of outputs is maintained (L1)	Yes	Ongoing
<b>Action B.2. Coordinate, prepare and organise the meetings of the Scientific Committee, follow up on the conclusions and recommendations and provide support to their work</b>		
Further enhancement of the scientific quality of the EMCDDA's work through the provision of support and guidance by the Scientific Committee (L1)	Yes	
<b>Action B.3. Implement and review data/information input quality assurance mechanisms</b>		
Quality standards for workbooks in the framework of the new reporting system are available (L2)	Yes	
Reitox NFPs receive structured feedback and appropriate training/support on the new reporting tools (L2)	Yes	
<b>Action B.4. Implement and review data/information processing quality assurance mechanisms</b>		
Data processing and analysis methods are documented (L2)	Yes	

Expected results	Implemented	Comments
Key meetings contribute to enhancing the quality of data/information analysis, in particular through cross-indicator and cross-area analysis (L2)	Yes	
Improved processes and tools for content production and publication (L2)	Yes	
<b>Action B.5. Implement and review data/information output quality assurance mechanisms</b>		
Production process for scientific publications, including scientific content for the website, are underpinned by a specific quality framework (L2)	Yes	
Online resources comply with the defined web publishing quality standards (focused on accessibility of information and search engine optimisation) (L2)	Yes	
<b>Action B.6. Implement and review the overall data quality assurance framework</b>		
Handling of statistical data from input to output is guided by a specific quality framework (L2)	Yes	
EMCDDA core processes are planned, implemented and revised according to an overall data quality assurance framework (L2)	Yes	

## Cross-cutting area C: Cooperation with partners

**Strategic objective:** Enhance and further increase the quality of the services provided to EU and Member State stakeholders through a better strategic understanding of the drug phenomenon, catalysed by strong partnership with key players at European and global level, and by knowledge transfer to EU priority third countries and regional programmes

Expected results	Implemented	Comments
<b>Action C.1. Maintain and strengthen information and knowledge exchange with partners at European and global level (see Key area 1)</b>		
Quality input to EU's and global partners' work (L2)	Yes	
Joint outputs produced (L2)	Yes	
Contribution to key European and international drug events, expert meetings and technical/advisory groups (L2)	Yes	
<b>Action C.2. Support international monitoring and reporting systems and standards</b>		
EMCDDA's contribution to:		
<ul style="list-style-type: none"> <li>Contribution with the EMCDDA data sets or expertise to other relevant regional/global reporting activities (L2)</li> </ul>	Yes	

Expected results	Implemented	Comments
<ul style="list-style-type: none"> <li>Validation of the European data sets for international partners (L3)</li> </ul>	Yes	
<b>Action C.3. Assist EU priority countries (candidate, potential candidate and ENP countries) in developing their drug monitoring systems, especially for the establishment and development of national drug observatories</b>		
IPA 5 project implemented in line with the defined implementation plan and the applicable KPI (KPI C.2) (L2)	Yes	
ENP project implemented in line with the defined implementation plan and the applicable KPI (KPI C.3) (L2)	Yes	
<b>Action C.4. Contribute the EMCDDA's know-how to EU drug-related regional programmes (as requested and conditional upon resources)</b>		
EMCDDA's know-how supports programme design, implementation and evaluation (L3)	Yes	
Contribution to TAIEX drug-related training activities (L3)	Yes	
<b>Action C.5. Pursue new partnerships</b>		
Further synergies and more comprehensive drug analysis through accessing new networks and data sources (L3)	Yes	

## Corporate area Governance

**Strategic objective:** The EMCDDA functions as a modern, efficient and forward-looking EU administration, which is committed to providing high-quality service to its stakeholders and to the EU citizens in general; in achieving this, the agency will be guided by good governance, steered by sound management and leadership and operated by a highly motivated and well-performing workforce

Expected results	Implemented	Comments
<b>Action GOV.1. Support the EMCDDA's Management Board in fulfilling its governance role</b>		
Management Board, Executive Committee and Budget Committee meetings duly organised and decisions adopted (L1)	Yes	
Efficient transition between the outgoing chair of the Management Board and the incoming chair, who will take over at the beginning of 2016 (L2)	Yes	
<b>Action GOV.2. Implement efficient management and leadership of the EMCDDA</b>		
EMCDDA long-term strategy (until 2025) developed and adopted by the Management Board (L1)	Yes	

Expected results	Implemented	Comments
Full compliance of EMCDDA operations with the existing EU regulations and practices concerning data protection, internal control mechanisms and risk management (L1)	Yes	
Further efficiency gains through measures to rationalise use of resources and improve organisational performance, and through enhanced synergies with relevant partners (L2)	Yes	
<b>Action GOV.3. Further develop the managerial capacity</b>		
Enhanced managerial skills at middle management level (L2)	Yes	
<b>Action GOV.4. Support sound organisational performance management through state-of-the-art corporate planning, performance measurement and reporting</b>		
Single multiannual programming document (SPD) for 2017-19 adopted by the Management Board (L1)	Yes	
SPD for 2018-20 drafted (L1)	Yes	Activity scaled up in order to comply with the EC requirements: preliminary draft SPD 2018-20 prepared and adopted by the EMCDDA Management Board in December 2016
<i>General Report of Activities 2015</i> presented to key stakeholders and published in line with the recast Regulation (L1)	Yes	
Sound KPIs in place for all the areas (L2)	Yes	
MIS: concept developed and users' requirements defined (L2)	Partially, delayed	In progress, to be completed in 2017. Delays were due to the need to prioritise the L1 activities and cope with the increased demands faced during the year — see SPD 2018-20 above

## Corporate area Administration and ICT

**Strategic objective:** Ensure sound allocation and management of financial and human resources and assets, and the management of the ICT infrastructure and services, through further rationalising and automating of relevant processes and tools, enhancing efficiency and synergies, and developing the quality of services and support

Expected results	Implemented	Comments
<b>Administration</b>		
<b>Action ADM.1. Human resources management</b>		
Human resources are properly managed, in compliance with the rules set out in the staff regulations and their implementing provisions, and in line with organisational needs (L1)	Yes	

Expected results	Implemented	Comments
2016 training plan implemented (L2)	Yes	
Existing digital tools (HR database, e-recruitment) maintained and improved; new tool for working time management in place (L2)	Partially, delayed	In progress, tool for working time management to be put in place in 2017
<b>Action ADM.2. Financial and budget management and accounting</b>		
Updated procedures, manuals and templates produced and published and relevant staff trained to implement them (L1)	Yes, as needed	
2016 procurement plan successfully implemented (L2)	Yes	
Efficiency of the contracting and payment process, with special attention to the actual execution of payments due before the end of legal deadlines (L2)	Yes	
EMCDDA 2017 draft budget and 2018 preliminary draft budget submitted on time for internal approval and for adoption by the Management Board (L1)	Yes	
High rate of budget execution (at least 97 % for commitment appropriations and 93 % for payment appropriations; maximum 5 % for cancelled payment appropriations) (L1)	Yes	EMCDDA record high (almost 100 %) for payment appropriations
Effective follow-up to recommendations from external audits performed (L2)	Yes	
Timely publication of the report on the EMCDDA's annual accounts for 2015 (L2)	Yes	
Meeting-related expenditure electronic workflow procedures conceptualised and developed (L3)	Partially, delayed	In progress, to be completed in 2017
<b>Action ADM.3. Infrastructure management and logistics</b>		
Health and safety risks identified (L2)	Yes	
Security risk assessment delivered (L2)	Yes	
Measures to ensure efficient use of utilities (L2)	Yes	
Environmental report delivered (L2)	Yes	
Contribution to the Greening Network (L3)	Yes	
<b>Information and communication technology (ICT)</b>		
<b>Action ICT.1. Implement and support core business and corporate projects and processes</b>		

Expected results	Implemented	Comments
Infrastructure for the annual drugs data collection and analysis (Fonte, data warehouse, EDND) functional and further developed (see also Cross-cutting area A) (L1)	Yes	
Technical support for the implementation of the new reporting system (workbooks) (L1)	Not applicable	The implementation conditions did not require this activity
Web system functional and further developed (including collaborative platforms) (L2)	Yes	
Tools and processes developed to support efficient corporate planning and monitoring, and management of resources:		
<ul style="list-style-type: none"> <li>MIS: IT platform ready and requirements for customisation defined (L2)</li> </ul>	Partially, delayed	In progress, to be completed in 2017
<ul style="list-style-type: none"> <li>Leave management system in place (L2)</li> </ul>	Partially, delayed	In progress, to be completed in 2017
<b>Action ICT.2. Provide a continuously stable environment which supports existing basic and advanced services</b>		
BCP implemented (L1)	Yes	
Services implemented in line with the adopted ICT service catalogue (L2)	Yes	