

# Supporting managers of SUD treatment services: the "Management Handbook"

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### Overview

- **Background**: International guidelines and the 'Key Quality Standards'
- **Why** did we develop the "Management handbook"
- What: the target audience and brief overview of content
- Next steps





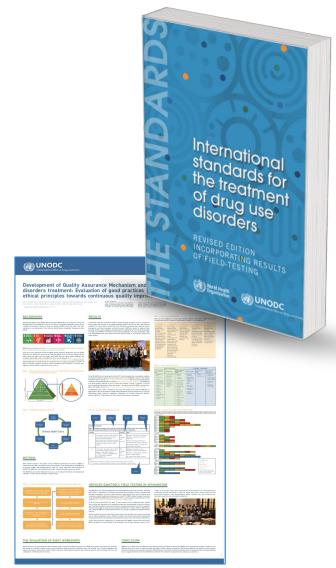
## The QA backstory: outlined by Narendra Narotama

The Management Handbook stands on the shoulders of decades of international work on QA in substance use disorder treatment by international agencies. Including:

- WHO and UNODC "International Standards for the Treatment of Drug Use Disorders" (WHO/UNODC 2020) and the UNODC QA Toolkits for Services and Systems with training and technical assistance countries
- European Union "Minimum Quality Standards in Drug Demand Reduction EQUS, Minimum Quality Standards in Drug Demand Reduction in the European Union", FENIQS-EU project
- **COPOLAD/CICAD** programmes of QA work in Latin America and the Caribbean in partnership with the European Union
- The African Union: African Continental Minimum Quality Standards for Drug Treatment.

#### Also – significant on standards and quality assurance by

- Many countries around the work including Indonesia
- Quality Assurance organizations





## **Key Quality Standards 2021**

(22 Standards, 59 Criteria)

2020/21 project to achieve consensus amongst the International Organizations on **most important subset of SUD treatment service quality standards.** This work resulted in the 'Key Quality Standards'

EFFECTIVE MANAGEMENT OF THE SERVICE	INDIVIDUALIZED, PATIENT- CENTRED TREATMENT AND CARE	TIMELY ACCESS TO EVIDENCE- BASED INTERVENTIONS	PROMOTION OF PATIENT HEALTH, SAFETY AND HUMAN RIGHTS
M2. The service operates within established financial regulations	PC1. Patient assessments are comprehensive and participatory	E1. The service ensures timely access for its target groups	Pl. Patients are treated with respect and protected from abuse, malpractice, and discrimination
M3. The service adequately manages its human resources to provide effective and caring treatment	PC2. Treatment and care provided based on informed consent from patients	E2. The service monitors and improves its outcomes and performance	P2. Patients are fully informed about service rules, policies and procedures protecting confidentiality
M4. The service meets national/local requirements for providing drug use disorder treatment	PC3. All patients have a written individual treatment plan that is regularly reviewed and helps coordinate treatment and care	E3. Interventions are evidence- based and underpinned by established protocols	P3. The service promotes patients' health, wellbeing and social functioning.
M5. The service has adequate facilities and equipment for service delivery	PC4. The service works in partnership with other services to meet patient needs		P4. The service has a procedure of independent complaint for patients
M6. The service has a patient record system that facilitates treatment and care	PC5. The service meets the needs of diverse groups of patients		P5. The service actively ensures the cleanliness, fire &infection control and other serious incidence protection
M7. The service has sustainable quality assurance mechanism	PC6. The service involves patients in service design and delivery		













#### Quality assurance in treatment for drug use disorders: key quality standards for service appraisal

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isclaimer

This document has not been formally edited.

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#### One of the core documents to ICQ.



## Why develop a management handbook?

Substantial evidence that **effective leadership and management** in healthcare services is associated with **improved patient safety, higher quality** of care, and **better health** outcomes.

- Patient Safety and Quality of Care: Services with strong leadership, effective organizational processes, and continuous quality improvement have lower rates of medical errors, infections, and adverse events.
- 2. Operational Efficiency: Good management leads to optimal resource utilization, reduced waiting times and improving access to care, which can positively influence health outcomes.
- 3. Staff management and satisfaction: Effective human resources management fosters staff competence; a supportive work environment, and reduces staff turnover, which correlates with higher quality care delivery.
- **4. Evidence from Research:** Numerous studies, systematic reviews, and reports (such as those from the WHO and healthcare quality organizations) confirm that healthcare organizations with strong management practices achieve better patient outcomes.

#### **References:**

- Harper, P., & Andersen, T. (2022). "Leadership and management in healthcare: a systematic review of their effects on health outcomes." Published in BMJ Open, 12(4), e058835.
- Evidence from substance use disorder treatment services research including seminal work of Prof Dwayne Simpson et al: service effectiveness and organisational readiness to implement change



## Why develop a management handbook?

So - Managers and Clinical Leads are very important to the quality and impact of SUD treatment services

We have a range of **excellent international guidance and standards** on SUD treatment

**BUT** 

- · Variable requirements on skills and qualifications for managers and
- A lack of international guidance written specifically for substance use disorder (SUD) treatment service leaders and managers on how to manage SUD treatment services

ICQ identified we could do more to help capacity-build management and leadership skills



## Why develop a management handbook?

#### Building some pre-existing work

some training on some aspects of management UNODC TreatNet Volume D (2017)
 (pre-international standards)

Previous UK publication on managing drug treatment services ('Enhancing drug treatment services: a management handbook for quality and effectiveness' P. Child

and A. Dale (1997) SCODA, London

#### ICQ project – agreed &funded by US State Department (INL)

- The Management Handbook: "Managing drug use disorder services in line with international Key Quality handbook for managers" May 2025
- In-person training course 16<sup>th</sup>/17<sup>th</sup> Sept 2025 ISSUP Bali the **DISCOVERY MANAGEMENT CHAMPIONS** trained this week
- On-line training course Sept 24<sup>th</sup>/30<sup>th</sup> 2025





### Management Handbook development process

- First draft published 2022
- Product feedback from international
  - **SUD treatment experts** from South America; USA; Africa (Nigeria); Europe (UK and Spain); Middle East and the UNODC TreatNet D developers.
  - Organisations UNODC; Colombo Plan; COPOLAD; OAS; African Union and EMCDDA
- Revised Final document with endorsement from: UNODC; OAS/CICAD; US State
   Department (INL)
- Launch event via ISSUP May 2025: THANK YOU ISSUP!

#### Thank you's

- Dedication to Mr Peter Child co-author of Enhancing drug services.
- ICQ Colleagues: Dr Mariano Montenegro, Rita Notarandrea, Rodrigo Portillo, Marta Zuniga, Paulina Vargas
- All reviewers
- Rodrigo Portillo translation into Spanish June 2025
- **Dr Sultan Ibrahim** translation into Arabic September 2025
- Rita Notarandrea Comments on drafts and co-development of training course
- Narendra Notama (UNODC Indonesia) promise to translate into Bahasa.....



## Management handbook: a brief overview

#### **Target audience**

All those involved in **leadership, management and quality assurance** of specialised SUD treatment services (services primarily designed to treat patients or clients with drug and alcohol use disorders). May be useful for funders and commissioners

#### **Content**

- Outlines what managers need to do to ensure their service has good management practice and meets Key Quality Standards
  - Effective management
  - Individualised person-centred treatment
  - Providing evidence-based interventions
  - Monitoring service access, performance and patient outcomes
  - Ensuring the service promote patients' health, safety and human rights
- How to audit SUD treatment services using the 'KQS'
- Provides audit checklists and suggested evidence

2.9	Management Standards Checklist				
No	Standard	Evidence	Yes/ No		
ип	The service adequately plans the delivery of t	reatment and care for drug use disord	ers		
	a) The service has a written action plan for its functioning and development	Written Action Plan			
М2	cial procedures				
	a) The service has procedures to manage and report on financial resources	Financial procedures     Evidence procedures are implemented			
	b) The service has a budget allocated according to the written plan	Budget that matches written plan			
мз	esources to provide effective and carir	ng			
	a) The service staffing structure meets na- tional regulations or the current service plan	Records of staffing, staff profiles and patient numbers/ attendance			
	b) M3b: The service ensures that personnel are competent and have the necessary education and training	Documents of staff profiles, qualifications, and training			
М4	The service meets national/local requirements for providing drug use disorder tre (if applicable)				
	a) The service is locally registered/ accredited/certified to provide drug use disorder treatment	Registration, certification, or accreditation documents			
М5	The service has adequate facilities and equipment for service delivery				
	a) The service facilities are adequate for type of service and interventions offered	Documents/floor plans of service rooms and space			
	b) Service equipment is adequate and 'fit for purpose' for the service and interventions offered	List of equipment, current safety, and maintenance checks for equipment			
м6	The service has a patient record system that facilitates treatment and care				
	a) The service has a comprehensive patient record system	Paper or electronic patient record system			
	b). The service has an established information management procedure for patient records	Information management procedures     Evidence procedures are implemented			
M7					
	a) The service has defined standards for service provision	Written standards			
	b) The service monitors and regularly audits its practice against its standards	Monitoring data or audit reports comparing practice to standards			
	c) The service has an established mechanism to involve patients in the quality assurance of the service	Reports of regular patient surveys and/or consultation on service quality			
	d) The service regularly reviews and improves practice if required	Monitoring or audit reports     Minutes of management meetings where reports are discussed, and action decided     Service improvement plans where standards are not met			



# Content: What managers need to do to ensure Effective Management

- Effective leadership and management mission, vision, values, governance structures
- Strategic and annual planning
- Management of financial resources
- Management of contracts and funders
- Human resource management
- Management of facilities and equipment
- Quality of patient record systems
- Effective **Quality Assurance systems** and in place







# Content: What managers need to do to ensure quality Individualised person-centred treatment

- Patient screening, assessment, (and risk assessment) and diagnosis
- Informed consent processes
- Patient treatment planning, review and discharge
- Partnership with other providers
- Meeting the needs of different patient groups
- Involving patients in service design and delivery

Figure 4: Assessment, treatment planning and review process



#### Box 18: Standards related to involving patients in service design and delivery

Key Quality Standards (2021)

PC6. The service involves patients in service design and delivery

#### Criterion:

- a. The service has established mechanisms to involve patients in the design of the service
- People with 'lived experience' of drug use disorders and recovery are involved in service delivery

#### Evidence:

- a. Patient advisory group, meeting minutes showing involvement, Information from service users
- People with lived experience' mentioned in service provision documentation, staff record audit shows that some volunteers/staff have 'lived experience'.
   Information from managers and staff

#### UNODC Service Standards: Core Management

CM7: The service involves patients and experts by experience in the service development, quality assurance and delivery



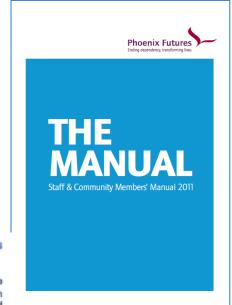
# Content: What managers need to do to ensure the service provides evidence-based interventions

- The importance of a documented approach
- Standard Operating Procedures
- Ensuring **specific SUD interventions** are in line with international guidelines
  - Interventions to reduce negative health and social consequences of drug use
  - Psychosocial interventions
  - Pharmacological interventions
  - Recovery management interventions
  - Co-occurring health issues are met

#### 4.2 Standard Operating Procedures (SOPs)

A protocol or Standard Operating Procedure (SOP) is a document that explains an intervention or procedure in detail to staff and normally includes as a minimum:

- The purpose of the SOP
- An introduction
- The scope: the area and context of the SOP
- Definitions
- Responsibilities
- Specific procedures: step by step detail of how to deliver the intervention.
- Reporting requirements and what forms or templates to use.
- How this SOP relates to other SOPs
- A history of updates to the SOP (who, when and what changed) and the date of review.





# Content: what managers need to do to ensure consistent monitoring and management of patient access, service performance and patient outcomes

- Ensuring **timely access** for patients
- Service performance monitoring and management
- Patient outcome monitoring and management

	5.4 The service monitors performance and outcomes and tries to improve: Checklist						
No	Standard	Evidence	Yes/ No				
El	The service ensures timely access for its target groups						
	a) The service ensures and monitors timely access of patients to treatment	Patient access monitoring reports     Evidence of service action to improve access					
	See also PC5a) maximising access for dive	PC5a) maximising access for diverse patient groups					
E2	The service monitors and improves its outcomes and performance						
	a) The service has targets or key performance indicators (KPIs) including patient outcomes						
	b) The service monitors its targets or KPIs	<ul> <li>Target or KPI monitoring reports</li> </ul>					
	c) The service has mechanisms to improve its performance based on results of the monitoring	Evidence of service action to improve performance if required					







# Content: what managers need to do to ensure the service promote patients' health, safety and human rights

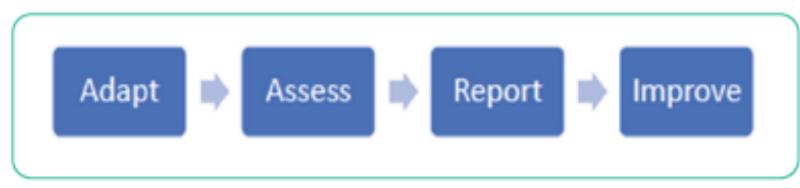
- Ensure patients are treated with respect and protected from abuse, malpractice and discrimination
- Informing patients of service rules, policies and procedures
- Promoting patient health, well-being and social functioning
- Have an independent complaints procedure for patients
- Ensure cleanliness, infection control, fire and prevention serious incidents
- Ensure Medicines management





# Content: how to audit a service using the 'Key Quality Standards' and implement quality improvement

- Plan an audit
- Allocate resources for auditing
- Adapt (Key Quality Standards)
- Assess (against Key Quality Standards)
- Report
- Improve







# Conclusion: Call to action - with great power comes great responsibility

- Leadership and management of SUD treatment services has a major impact on patient outcomes. It is an honor and responsibility
- ICQ wants to educate, support and train managers to do this job well for the patients and communities
- The Handbook and new training are TOOLS TO HELP IMPLEMENTATION of good practice and standards
- ICQ would be pleased to work with countries to rollout this resource and training





# You can access the English document via the link or QR code



https://www.issup.net/knowledge-share/resources/2025-05/managing-drug-use-disorder-treatment-services

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