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for Drugs and Drug Addiction

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EMCDDA STRATEGY AND WORK PROGRAMME

2013–15



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European Monitoring Centre
for Drugs and Drug Addiction

Cais do Sodré, 1249-289 Lisbon, Portugal
Tel. (351) 211 21 02 00 • info@emcdda.europa.eu
www.emcdda.europa.eu

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2007
2008
2009
2010
2011
2012
2013
2014
2015
2016
2017

Foreword by the EMCDDA Director

This is the third strategy and work programme since the EMCDDA's recast Regulation in 2006. It is being launched at a challenging and uncertain time with regard to the financial and institutional environment that we face in Europe. Whilst recognising this, I am pleased that we can launch a programme that I believe is forward-looking and that will deliver increased value from the work of the EMCDDA and its partners.

I can make this commitment because this strategy is built on sound foundations. Over the last six years, we have put in place the management, organisational and technical structures necessary for the agency to move up to the next level in terms of its capacity to provide Europe with a state-of-the-art information base to inform policy and action. At the heart of the strategy is a commitment to quality and value, and over the next three years we intend to improve not only the scientific standing of our outputs but also their usefulness and accessibility.

Our previous work plans have on occasion been criticised for being ambitious and I make no apologies for the fact that we remain ambitious in setting the goals for our work. However, this strategy and work programme is also a pragmatic and realistic one. We recognise the need to set priorities and review our approaches and to ensure that they remain relevant to the challenges we face. Across Europe, resources for interventions and data collection are coming under increasing pressure. The drug situation itself is evolving at considerable pace. New demands are being placed on the agency at a time when the need to maintain a comprehensive overview of the European drug situation remains with us. We must therefore strike a balance between maintaining our core information activities and ensuring that new important areas are adequately addressed. In order to achieve more within a limited budget, efficient working practices must be rigorously pursued and less productive activities eliminated. This perspective informs all aspects of our new strategy and work programme.

Three top-level commitments will underpin our work in 2013–15. First, we will focus on providing a relevant, timely and responsive analysis to the drug situation. We have refined our reporting on the past; we need to ensure that our work is relevant for the contemporary debate and that it keeps pace with developments. Part of the purpose of understanding today's drug situation is to anticipate the problems of the future, and a forward-looking perspective is therefore essential. Second, we will focus on efficiency and ensuring that maximum value is derived from our activities. This will be assured by strengthening our strategic and operational capacity and developing a more performance-based organisational culture. It will also require more interdisciplinary work and for us to streamline our outputs to ensure that they are fine-tuned to the needs of their target audiences. Our third commitment is to communication and a customer-orientated approach. We have always developed tailored outputs for our target audiences but we must keep pace with an evolving communication landscape and the changing culture on how information is utilised. We need to adapt our strategy not only to meet the growing expectations of our current information consumers but also to be ready to meet their future needs.

I am proud of the achievements we have made that make this work programme possible and I am excited about the opportunities it provides to further fulfil our mission. I am confident that this multi-year work programme will significantly contribute to providing the information and analysis necessary for a better response

to Europe's drug problem. I know, in making this commitment, that I can rely on a team in Lisbon that is committed, competent and highly professional. We benefit from an active and informed Management Board and the guidance we receive from a Scientific Committee comprising some of Europe's leading scientists working in the drugs area. Beyond this, however, I am also acutely aware that our success is built upon the close partnership we have with experts working across Europe, and, in particular, the Reitox network of national focal points. Our work also benefits from the active and ongoing support we receive from the European Commission, from a close working relationship with our sister EU agencies and the partnerships existing with international organisations working in our area. Therefore both a commitment to, and the recognition of, the value of partnership and effective joint working will remain a defining element of the EMCDDA approach and inform all aspects of our work and planning.

Wolfgang Götz

Director, EMCDDA

Context

Continuity and a commitment to progress remain at the heart of the EMCDDA's approach to planning. The bedrock on which this three-year strategy and work plan rests is the recognition that the achievements the agency has made since its inception have been delivered by maintaining clarity of purpose, technical rigour and a long-term vision. Our role is to provide Europe with a scientifically sound and comparable picture of the drug situation and to achieve this we have worked incrementally to develop high-quality tools and reporting mechanisms that are appropriate to the diverse national contexts in which we work. Partnership is essential for success in this endeavour. As the European hub for drugs information we can act as a catalyst and facilitator for national endeavours but cannot replace them. The success of the EMCDDA depends on the existence of its expert networks, in particular the Reitox network of national focal points (NFPs), which enables us to maintain ongoing dialogue with researchers and practitioners across Europe.

With commitment to continuity as the necessary starting point of the work programme, we recognise that both internal and external factors will inevitably shape the agency's work over the coming three years. We must ensure that our work is responsive to the challenges of monitoring the contemporary European drug situation. This the third triennial work programme since the EMCDDA's recast Regulation in 2006. As ever, we propose an ambitious set of objectives for our forthcoming work. We can do this because of the sound foundations laid in the previous two three-year strategies that have provided us with the administrative, technical and organisational infrastructure necessary to develop our work further. We know we are doing this at a difficult time. Across Europe resources for interventions and data collection are under increasing pressure — and this is at a time when the drug situation itself is evolving at considerable speed and new demands are being placed on the agency. We face, therefore, significant challenges for the next three years and a balance has to be struck between maintaining core information resources and ensuring that new important areas are adequately addressed. The agency needs to maximise the value of its work and increase the overall impact of the system with regard to its outputs, whilst at the same time recognising that capacity to report is finite and in some areas may need to be scaled down. This work programme has been tailored to address this difficult landscape in a realistic manner. It provides a strategic and substantive framework for providing a comprehensive state-of-the-art understanding of the European drug situation that is of direct relevance to policies and practice. It explicitly takes into account the need to set clear priorities, protect core activities and focus resources to achieve maximum benefits. Performance is ensured by placing emphasis on implementing a comprehensive internal planning, performance management and quality assurance system.

A necessary first step to conceptualise this strategy and work plan was to take stock of the progress made to date and to scope out the medium- and long-term challenges we face. To guarantee a sound framework for the agency's future activities, our preparatory work has been informed by internal and external reviews and dialogue with key stakeholders and partners. These reviews, intended to complement the formal consultation processes that take place prior to adoption of the work programme, have allowed more voices to be heard during the formative phase. Preparatory activities included a dialogue with the Scientific Committee and the Reitox community, as well as invited input from key institutional partners and external

stakeholders. A public consultation exercise by means of the EMCDDA's website was also undertaken. We have conducted an internal systemic review of reporting tools and analytical processes and taken into consideration the emerging findings from the current external evaluation of the agency's performance. Developments in the recent evaluation of the EU drug strategy and action plan have been followed closely too, as have early developments on a new EU policy framework. This approach has ensured that this strategy is informed by the lessons that can be learned from our past work; the views of our partners and stakeholders; and Europe's current and future information needs. Importantly, coherence emerged from the reflection process on a number of fundamental issues, which gives the agency confidence that its planning is on track and in line with current realities, expectations and information needs.



I. Information and analysis for policy and action: the EMCDDA's strategy and vision for 2013–15

Introduction: the EMCDDA's role in 2013–15

The utility of a holistic analysis of the European drug situation

The agency has been founded on the basic precept that a better understanding of the drug situation, in all its aspects, is a prerequisite to developing effective policies and actions. The drugs issue is not a simple one. Conceptually, it encompasses a range of behaviours and related health, social, criminal justice and ethical issues. Methodologically, it is equally challenging as it requires observing complex, hidden and often stigmatised behaviours. Interventions take place across a broad continuum, spanning prevention, treatment, harm reduction, social reintegration, legal control, market intervention and enforcement. Patterns of drug use and drug markets are dynamic, constantly changing and influenced by wider social phenomena. Against this backdrop, any information source is likely to be partial and any conclusion drawn needs to be carefully framed. The EMCDDA's unique strength is that it is a multidisciplinary agency that addresses all aspects of the drug situation.

We have been successful in working with EU Member States to significantly improve the quality and comparability of information available in many areas. Improving data quality is an ongoing task but we are now in a position to give greater emphasis to using the data for analytical purposes. This will allow us to test the available information sources against one another and produce analysis that is not only scientifically sound and sensitive to the complexity of the subject matter but also geared to identifying the bigger issues necessary to inform the policy debate at European level. We believe that we can better exploit our unique position as the central reference point for drug information in the EU by ensuring that maximum analytical value is derived from the data collected.

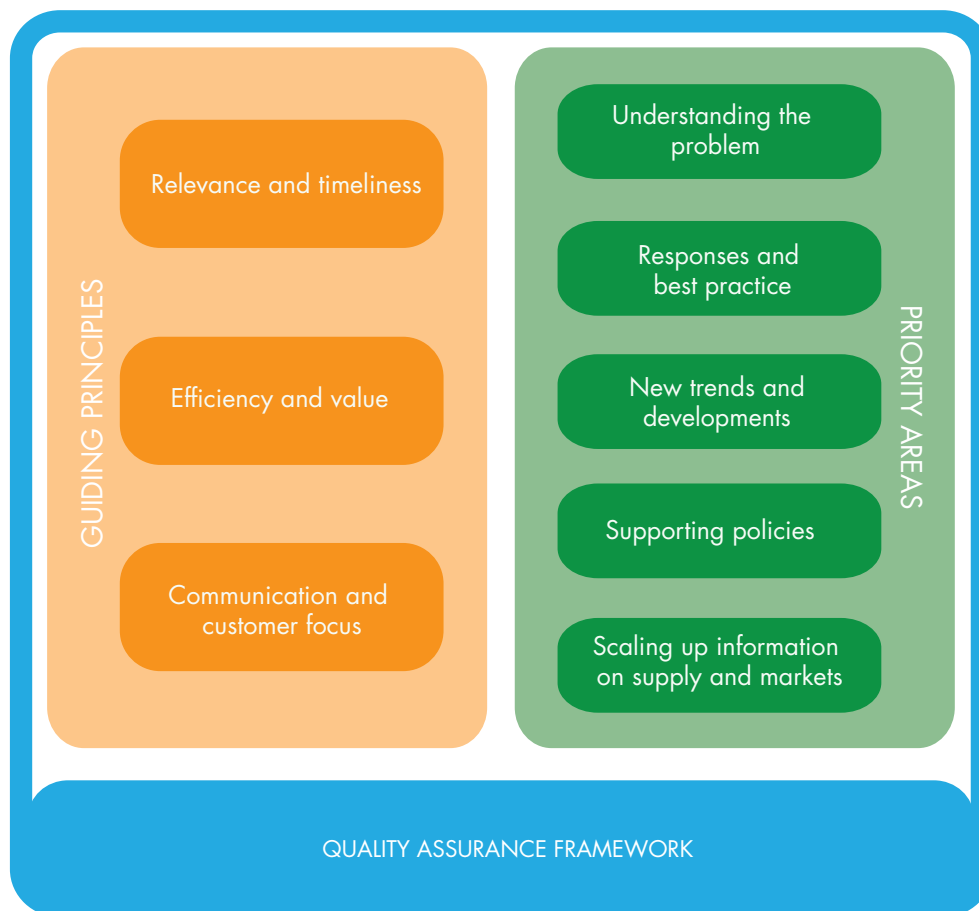
Thematic priorities: the conceptual building blocks for this work programme

This strategy and work plan is built around five thematic areas that are priorities for data collection and reporting. Together, these cover the agency's core tasks and form the conceptual building blocks needed to assemble a comprehensive understanding of the European drug phenomenon.

The priorities in the recast regulation are: (a) monitoring the state of the drugs problem, in particular using epidemiological indicators, and monitoring emerging trends; (b) monitoring the solutions applied to drug-related problems; (c) providing information on best practices in the Member States and facilitating information exchange among them; (d) assessing the risks of new psychoactive substances and maintaining a rapid information system; (e) developing tools and instruments to help Member States to monitor and evaluate their national policies, and the Commission to monitor and evaluate European Union (EU) policies. Their importance was highlighted in the recent external evaluation and in comments received from key stakeholders during the preparation of this document. Supply reduction

activities are an explicit part of our existing mandate to comprehensively monitor the drug situation. However, the need to scale up the monitoring of supply-side issues has become increasingly apparent in recent years. The EMCDDA has always collected supply data, as they are a key conceptual element for monitoring both the drug situation and the responses to it. However, to date there has not been the systematic approach adopted for demand-side information, which is a weakness in the current EU information system. Work is already being undertaken with the European Commission (EC) to define three new key indicators in the supply area. The importance of this task has been underlined by the external evaluators and emphasised by the European Commission and other stakeholders in the informal consultation process launched prior to drawing up this strategy; that lends further weight to the level of priority awarded to it here.

At a glance: Overview of the EMCDDA 2013–15 conceptual framework for monitoring Europe’s drug problem



Translating information into evidence: meeting Europe’s changing information needs

Collecting data is not an objective in itself; the information collected needs to be put to work. This requires sound analysis and interpretation as well as an integrated communication strategy that delivers outputs configured to the needs of our different target audiences. This work programme has been designed to

improve our performance in both these areas. We give emphasis to extending our quality assurance procedures into the area of statistical analysis and data manipulation. We will introduce new checks and balances to assure the quality and transparency of EMCDDA computations, and a quality assurance framework will underpin the agency's outputs. The new communication strategy will improve the relevance and coherence of the agency's portfolio of products. We need to keep pace with developments in the way information is utilised and exchanged and for this reason we have focused on improving our online presence. Online tools and resources will be enhanced to match the changing expectations of data users. This development will be complemented by a streamlined annual report that will deliver a more accessible overview of the drug situation and provide a window to a comprehensive set of online data and analysis. As well as better serving the information needs of policymakers, more attention will be given to producing outputs relevant for the scientific and practice community. Greater prominence will therefore be given to identifying guidelines, evidence synthesis and dissemination of best practice examples. The role of NFPs as active communicators of national data in contrast to passive data providers will also be strengthened. Finally, the needs of non-specialised data users will be better met through developing improved basic summary material, interactive online tools and source material for students and educators.

Principles for driving progress and guiding change

Beyond the substantive priorities, our work is informed by three transversal principles that will drive progress and guide change. These principles shape and focus activities and are interpreted in the detail found in each of the substantive work programme areas described in the second part of this document. These guiding principles are by necessity overarching and complementary, and re-emphasise a commitment by the agency to ensure that all aspects of the EMCDDA's work remain on track and remain focused on delivering quality.

A commitment to providing a relevant, timely and responsive analysis of the drug situation

Even within the priority areas outlined above, the choice of topics for analysis is large and it is always possible to increase the level of detail for data collection and reporting. Given that the capacity of the reporting system is finite, it is important to ensure the coherence of the system as a whole. We focus therefore on areas of particular analytical relevance and pay greater attention to defining (and limiting where necessary) the scope of activities. We have selected those areas most important for elaboration at EU level and those areas that match explicit information needs. Building on work already in progress, we will regularly review how data collection efforts inform analysis and outputs in order to concentrate efforts on those areas that are productive and identify areas where investments are not paying dividends. We will also focus on different topic areas across the three-year period to maximise the capacity of the system to address important issues whilst respecting the need to constrain the annual reporting burden and not overstretch limited resources.

To be useful for policy, information needs to be technically robust and timely. These two requirements do not always sit well together, as the time taken to assemble

sound data sets often results in a considerable delay in their becoming available. On the other hand, the validity or reliability of information that is rapidly available may be questionable. However, we recognise that the information we collect is of greater value if it can be quickly disseminated and that there is a parallel need to follow up more rapidly on emerging trends. This need is driven by the current speed at which the European drug situation is evolving and by the consumers of our information, who expect a rapid response to questions on important new developments. This situation has two important implications for our work. First, we will further streamline reporting processes to facilitate the earlier annual reporting of main findings. Second, based on learning from ongoing trend-spotting work and activities connected with implementing the European early warning system on new psychoactive substances, the agency will continue to invest in developing approaches to more rapidly identify and report on emerging trends. We will do this in an overall context of being proactive in bringing together diverse sets of information, informing analysis with contextual data, grading evidence and synthesising data. Such an approach can allow interpretation to be made from imperfect data and allow uncertainty to be reduced even where it cannot be eliminated. This illustrates how we are developing the role of the agency as a centre for analysis in addition to being an information hub. Moreover, by better exploiting the communication links existing with the Reitox network, and the opportunities provided by the regular contacts the EMCDDA has with experts across Europe, a more dynamic qualitative approach to investigating and cross-validating new developments will be pursued. Methodological developments will be accompanied by a series of short, online products (EMCDDA updates) that will be launched in 2013.

A growing challenge for the EMCDDA analysis is to reflect the complex nature of contemporary patterns of drug use in Europe. A key issue here is that polydrug use now predominates. This is not only important for understanding the health and social consequences of drug use but also central to informing the development and targeting of responses. Therefore, and fully respecting the mandate provided by the recast regulation, special attention will be given wherever possible in this work programme to analysis and reporting on the impact of the co-consumption of multiple psychoactive substances.

The capacity to be responsive to new developments is an important requirement for a sound, mid-term planning approach and we have left flexibility in the work programme to answer such needs. Whilst as far as possible the information requirements of a new EU drug strategy have been anticipated in this document, adjustments may still need to be made once the new EU strategy becomes available. Similarly, work is under way (at the time of drafting this document) to provide a new legal basis for tasks conducted under the EU mechanism for early warning and risk assessment for new psychoactive substances, and here again implications for the EMCDDA's future work are not known. Moreover, some capacity has to be retained to allow flexibility in the substantive day-to-day work of the agency. For this reason, the existing internal rapid response mechanism will be maintained to allow us to respond effectively to important ad hoc information requests. Given the dynamic nature of both patterns of drug use in Europe and the European drug market, the work programme will be reviewed as needed to ensure that it remains fit for purpose and that all important topic areas are being adequately addressed.

A commitment to efficiency: deriving maximum value from activities and investments

We are committed to continuing to improve the agency's performance with respect to its core business whilst also extending activities in strategically important areas. In an environment of fixed, or even declining, resources this means that every aspect of our work has to be informed by a need to gain efficiency and derive maximum value from efforts made. This can be achieved by rationalising processes so that the most productive activities are given priority; eliminating non-productive work streams; maintaining a clear focus on objectives; and seeking added value and synergy wherever possible. This principle will be supported by an improved planning, monitoring and quality assurance framework, which will be the basis for introducing a more performance-based culture for the agency's work. We will review all substantive activities to ensure that the methods used are optimal with respect to the expected results and could not be achieved better by another approach. We will pay attention to both process and substance, to ensure maximum value is obtained from the technical meetings held by the EMCDDA. We will continue to use technology to support networking, improve communication and facilitate data submission. We will pay particular attention to ensuring efficient data management processes and selecting the appropriate medium for outputs.

We recognise that the difficult economic situation facing many countries across Europe will have both a direct and indirect impact on the EMCDDA's work. Directly, data collection is always a secondary task with respect to measures taken to address drug problems. However, we believe that sound analysis is critical to ensuring that investments made are well targeted and that the most appropriate interventions are supported. It will be more important than ever for the EMCDDA to provide Member States with a realistic, scientifically sound and achievable set of core information tools for efficiently monitoring the drug situation. Equally important is the work to identify good practice, guidelines and disseminate knowledge of effective actions so that maximum value can be derived from the existing European evidence base. Indirectly, drug problems tend to be more pronounced in communities facing social and economic difficulties. In a climate in which investment in interventions is becoming more difficult to secure, and with possibilities of increased vulnerability to drug problems, our work to monitor and report on developments becomes more important than ever.

The EMCDDA does not work in isolation, and drug issues represent an important element in the bigger picture of protecting public health, security and community safety in Europe. We regard pursuing successful partnerships and seeking synergy wherever it can be found as the key to efficiency; that is why we give partnership and joint work such a high priority in this strategy. Core activities here include working closely with EC services to ensure synergy with financial initiatives; supporting research, capacity building and service development; and data sharing and dissemination. We will strengthen the sound partnerships we have with European agencies whose mandates partially cross over with the EMCDDA's such as the European Centre for Disease Prevention and Control (ECDC), Europol, the European Police College (CEPOL), the European Medicines Agency (EMA) and Eurojust. We have planned a number of joint publications and projects that benefit from the commitment across the family of European agencies to work together to avoid duplication of tasks, rationalise activities and generate added value. We would like to highlight a major analysis of the drug market conducted in partnership

with Europol, closer data sharing and new joint publications with the ECDC and Eurojust, and a new working arrangement with the EMA to meet the requirements of the European pharmacovigilance (PhV) legislation. Beyond our work within Europe, we will continue to maintain good links with appropriate regional information systems, such as that operated by the Organisation of American States (CICAD), and work as provider of European data and expertise within the terms of established practice with relevant international agencies, in particular the United Nations Office on Drugs and Crime (UNODC), the World Customs Organization (WCO), the World Health Organization (WHO) and Interpol.

The EMCDDA also maintains close links with a number of European research groups working in areas relevant to the agency's mandate. Of particular importance here is the link that exists with the European School Survey Project on Alcohol and Other Drugs (ESPAD) group. The network provides a valuable source of longitudinal data on drug and alcohol trends. Following a recent agreement to scale up cooperation, the EMCDDA will increase its support for ESPAD activities during the course of this new three-year work programme, which will over time be hosted by EMCDDA.

It is also recognised that the operation of some national Reitox focal points may come under pressure because of the current financial situation. In line with the proposals contained in the external evaluation and with standing rules and procedures, the EMCDDA might take a more differentiated approach to supporting and mentoring NFPs. This could result in EMCDDA support being focused on those focal points that need it most.

A commitment to communication and a customer-orientated approach

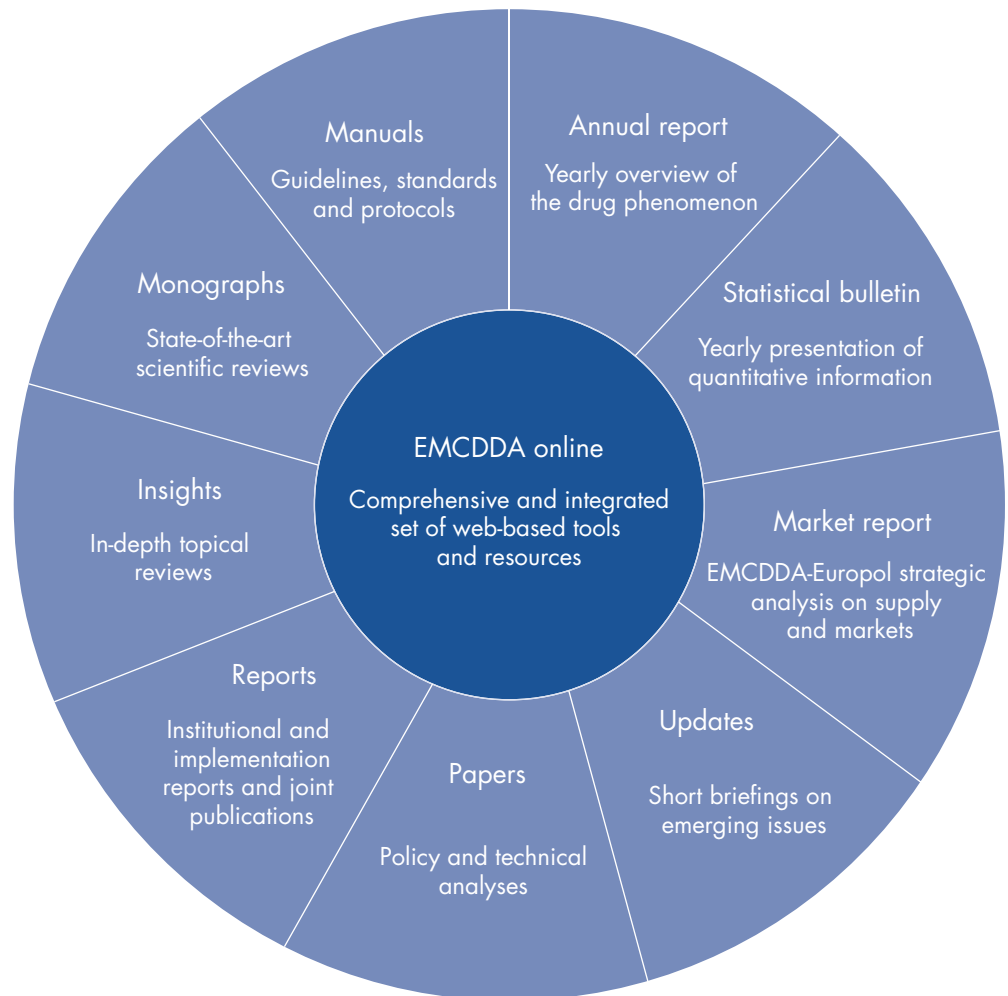
Communication is one of our core activities supporting our role as information agency and helping us further our reputation as the reference point on drugs in Europe. We regard communication not as an isolated function at project-end, but as an integral part of the agency's scientific and technical activity. We define our customers as all those individuals and bodies interacting with the agency. We are faced with a rapidly changing communication landscape in which consumers pick and choose the type of information they want, how and when they want it, and the quantity they need. Such dynamism requires us to respond with timely content, be attentive to emerging needs and deliver our information using an ever-expanding set of communication tools. Our commitment to do this is guided by the integrated communication strategy launched in 2012, which sets out the fundamental principles for communicating our knowledge and presents the tools available to build and nurture relations with the agency's stakeholders, target audiences and partners.

The channels we have at our disposal include the web, publications and print products, events and conferences, the media, audiovisual material and social media. These multiple, and often converging, information channels demand strong synergies between the different specialities in the agency's communication team. Such cross-functional working will allow the agency to shape and repurpose content efficiently and mobilise a mix of options, with the ultimate goal of maximising the impact for the customer.

The EMCDDA website is the agency's primary means of communicating across all target audiences and is key to reinforcing the agency's profile as the primary source of drug information in Europe. We need to concentrate over the next three years

on better delineating and developing our web-based products and to fit them into our quality assurance framework. We will work to strike a better balance between online and printed products. Moreover, the streamlining of some product lines and a redesign of others will be necessary to ensure content relevance and coherence for agency results.

At a glance: Overview of EMCDDA product lines in 2013–15





II. From strategic vision to getting results: the EMCDDA's work programme for 2013–15

Introduction

This operational section of the document presents the agency's goals and specific objectives for the next three years organised by main area of work. It provides a clear framework for ensuring that the strategic commitments set out above are put into practice.

Priority interventions and key expected results have been defined for each main area. If not otherwise specified, the timeframe for achieving the results is by the end of 2015, the last year of this programming period.

We have developed this multi-year operational plan from a thorough internal planning exercise. The annual work programmes will provide the detailed planning of activities and resources to implement the priority interventions and achievement of key results.

This multi-year approach will ensure continuity in planning of the agency's resources over the next three years and will facilitate the monitoring of results. It will be supported by an integrated performance measurement system, to be developed and implemented by the end of 2015.

Main area 1: Data collection, analysis and quality assurance

Overview

To fulfil its mandate, the EMCDDA has developed an integrated and detailed reporting system, based around data collection, analysis and quality assurance tools and processes. A main component of this system is a national reporting package developed and implemented in close collaboration with the NFPs. This reporting package provides data delivered through a set of standard instruments via Fonte (the online data collection system of the agency). The reporting package is updated annually to meet changing information needs.

Each year, an important aspect of our work revolves around data submission and management tasks, including the production of templates, data validation and further development of the Fonte system. This work ensures a methodologically sound, coherent and efficient annual reporting exercise.

During 2013–15, we will improve the performance of the reporting system based on the findings of a top-level review of reporting tools and practices, which was launched in 2011. The results of this exercise will be used to strengthen the overall coherence of the reporting package by introducing a stronger quality assurance framework for the processes and statistical procedures used.

In parallel with the revision of the overall national reporting package, we will also improve data collection instruments. Amongst the significant developments foreseen are improvements to the tools for collecting information on treatment provision including the implementation of the new treatment demand indicator (TDI) protocol (v. 3.0). This protocol will be accompanied by improved functionality for data submission, enabling an increased number of Member States to submit data automatically. EMCDDA staff will continue to provide bespoke support to focal points that wish to develop automated data submission capacity. In addition, we will implement a new data collection and analysis strategy for reporting on drug use in the prison setting. We will also introduce improved or new data collecting tools in the areas of problem drug use (PDU), supply responses and policies.

We will improve the EMCDDA's analytical processes, focusing on cross-referencing different data sources. This approach extends descriptive analysis to more than one indicator, provides a method for validation and coherency checking, and can help identify appropriate methods for estimating missing data.

Quality assurance is a priority for all areas of our work for the next three years. In the area of data collection, we will revise and streamline existing quality assurance procedures. Different approaches are required for the different types of data collected. Efforts will be made to improve, formalise and codify the informal processes used for ensuring quality. For the next three-year period, this will include the development and adoption of a statistical quality assurance framework along with agreed measurable indicators of achievement. We will revise the structure of the quality reports that provide feedback to the NFPs and a new format and tools will be implemented.

Goal: A coherent, reliable and valid data collection system, underpinned by a quality assurance framework

Specific objective 1.1: Improve data collection instruments and processes

Priority interventions	Key results
Revise the reporting system to improve coherence and efficiency	<ul style="list-style-type: none"> • New processes implemented • National reporting package and guidelines, adopted by the EMCDDA and the Reitox NFPs
Implement new data collection exercises, based on revised tools	<ul style="list-style-type: none"> • Revised data collection tools in place, reflecting strategies for treatment and prisons • Revised templates and new data collection exercises implemented in the areas of TDI, PDU, supply and policy • Increased capacity for automatic submission of TDI data
Maintain and further develop (as required) the Fonte reporting system and data warehouse	<ul style="list-style-type: none"> • Systems for data collection operational

Specific objective 1.2: Strengthen and develop the quality assurance framework to support data collection, statistical analysis and data reporting

Priority interventions	Key results
Develop a cross-indicator approach to improve data validation and analysis	<ul style="list-style-type: none"> • Integrated indexes developed • Thematic data tables available for analysis and coherence checking
Review, rationalise and develop existing quality assurance measures around data collection	<ul style="list-style-type: none"> • Improved validity and reliability of the data received • Overall quality assurance framework in place • Improved quality reports
Develop a statistical quality framework for the analysis, manipulation and reporting of data within the EMCDDA	<ul style="list-style-type: none"> • Improved transparency, appropriateness and utility of estimations • Framework for creating and documenting quantitative estimates in place • System of ratings obtained through expert opinion for semi-structured, qualitative information improved and documented

Main area 2: Monitoring and understanding drug use and problems: key indicators and epidemiology

Overview

The epidemiological monitoring of the drug situation is at the heart of the EMCDDA's work. These data provide the long-term, standardised time series analysis that is an important part of the added value provided by the European drug monitoring system. The task is to quantify, and describe over time, developments in the drug situation as well as the health and social consequences arising from drug use. We have developed standard methodologies to allow Member States to collect information in a sound and comparable way, which are centred on the five epidemiological key indicators. These indicators provide information on prevalence and patterns of use (through surveys and studies of special populations) and consequences (with a focus on infectious diseases and drug-related deaths). The data provided by the key indicators, when combined with research and contextual information, provide a valuable insight into developments in drug problems in Europe. As this area of work is now relatively mature, we are able to shift emphasis from developmental activities to more analytical ones, thereby increasing the value obtained from investments in this area. Moreover, as the analytical insights obtained from the indicators are enhanced when they are used in combination, efforts will be focused on moving from an individual indicator perspective to a multi-indicator platform to inform EMCDDA analysis and reporting.

One of the main purposes of understanding patterns of drug use and their consequences is to facilitate the targeting, design and evaluation of policies and interventions. To reflect this objective, many of the analyses we will undertake combine epidemiological data with response-side information and there is an emphasis on transversal and coordinated work. The key indicators provide the empirical building blocks on which many of these more complex analyses depend.

By placing emphasis on analysis, we are by no means neglecting our commitment to ensure high-quality data generation and efficient processes. Our priorities in this area are described in detail in the previous section. However, it is important to note here that the expert networks supporting each indicator are of critical importance for ensuring data quality and for gaining analytical insight. We will revise the current expert meeting format to give more opportunity for discussion and analysis. Where possible, we will hold expert meetings sequentially, with the objectives of, on the one hand, delivering efficiency savings and, on the other, allowing crossover sessions to be held in which experts from different disciplines can work together. As part of the commitment to quality assurance, we will better capture the findings from expert meetings and make them available more rapidly. The key indicator expert groups will also play an important role in the scientific conference planned for 2015.

Timeliness is a key aspect of any monitoring system. As many of the data sources on which the key indicators are based rely on annual registry data, some lag in reporting is unavoidable. Nevertheless, as already noted, we will review internal and external processes to ensure that they are as efficient as possible and that they accord with the new reporting perspectives outlined in the communication strategy. We will also pursue a more proactive approach to engaging with experts attending technical meetings to ensure latest developments can be taken into account. Indicator

data will also be used to complement trend-spotting activities and in forecasting exercises, to ensure that the analysis addresses contemporary information needs. It is appropriate for some areas to undertake more rapid data collection exercises, for example to address potential outbreaks of drug-related diseases or unusual clusters of drug-related deaths or medical emergencies.

Reflecting the move towards increased online dissemination, we will reorganise the EMCDDA's epidemiological information. This will require reviewing the existing resources for reporting summary and national data, methodological information and analysis. The Statistical bulletin will remain an important vehicle for presenting quantitative epidemiological data but its content and linkage to other online resources will be enhanced. We will rationalise the handling of national epidemiological data across the web platform, and new interactive options for data manipulation and summary analysis will be introduced in close collaboration with the NFPs. A new set of short, focused analyses will be produced to showcase standalone elaborations of key data sets. These analyses provide a flexible tool for exploiting the insights gained from the information collected.

Data collection takes place at the national level, as does much analysis, and technical capacities vary across Member States. This is why we provide significant support to data collection activities, data harmonisation and analytical work at the national level. The EMCDDA can act as a catalyst for improved performance in this area. For example, we will continue to support the data lab concept, in which common analysis is performed based on harmonised data sets and common guidelines. The key indicator implementation assessment we conducted in 2012 will highlight the countries most in need of technical support and we will focus our efforts on them. Similarly, we will conduct analytical exercises that are relevant to only some countries on a restricted basis in order to assure efficient use of resources. As the EMCDDA's data collection model is becoming internationally renowned, and in order to support both EU and international efforts to improve reporting capacity globally, we will work on an implementation model for drug information systems based around the common standards developed by the EMCDDA. This will complement the existing manual on focal point building by providing a 'tool box' for collecting drug information informed by EU and international standards and good practice.

With the European drug problem constantly evolving, it is important that the epidemiological approaches used by the EMCDDA keep pace and remain fit for purpose. Among the new developments planned are activities to ensure that codes and questions remain appropriate to new drugs and emergent patterns of drug use. As polydrug use and stimulants become a more important part of the drug situation, we have planned developmental work to explore how data on acute drug-related emergencies can be collected. We will also conduct an assessment of options to improve the coverage of the drug-related infectious diseases (DRID) indicator to infections not acquired by injection but where drug use is a mediating factor.

The consumption of multiple classes of psychoactive substance (polydrug use) is now common across the EU and this has important implications for both the harms associated with different consumption patterns and the design of responses. This kind of consumption is particularly challenging for traditional monitoring approaches, which are often based on a single substance. We will analyse key indicator data from general population surveys, treatment attendance and drug-related deaths to provide insights into the prevalence and patterns of polydrug use in the EU. This

information will be useful for developing a typology of polydrug use patterns and associated risks and harms. To take account of changing consumption patterns, we have already reviewed the PDU indicator to make the tool more discriminating across drugs. These activities will result in improved quantification of the European drug problem in the 2013–15 period. The TDI, which provides a window on those accessing treatment services, has also been revised to report better on the characteristics, drug use and risk profiles of those seeking help for drug-related problems. The experts for each indicator will be tasked with ensuring a regular critical review of the EMCDDA’s approach to ensure that it remains consistent with the drug situation and reporting needs.

We plan a number of new analyses over the work programme, which will be detailed in the annual planning exercise and selected on the basis of data availability, analytical value and topical relevance. We will give special attention to the issue of psychiatric co-morbidity with a topical review exploring the association between mental health problems and drug use, and how this can have an impact on the outcomes of treatment and the potential for recovery. How social, individual and environmental factors are associated with drug use will also form part of a major new scientific monograph.

Goal: Provide an integrated and insightful overview of the European drug situation by enhancing analysis of the epidemiological key indicators, including cross-indicator analysis and combined analysis with other sources of information, while ensuring the quality of the information collected by Member States and the EMCDDA

Specific objective 2.1: Ensure progress in the methodological development of the epidemiological key indicators (KIs)

Priority interventions	Key results
Maintain and further develop methodological tools for KI implementation	<ul style="list-style-type: none"> • Improved general population survey (GPS) guidelines for: <ul style="list-style-type: none"> – online surveys and handling non-response – new European Model Questionnaire (EMQ) module on ‘new drugs’ and updated module on alcohol and medicines • New guidelines for PDU (concepts and estimation) including stimulant use, cocaine, polydrug use, cannabis and alcohol • Improved implementation of TDI by <ul style="list-style-type: none"> – implementation of new TDI prevalence module – mapping of data availability on health and social correlates (pilot exercise) • Feasibility of using hospital emergencies as information source on health consequences (in collaboration with EWS) explored • Guidelines refined and coverage of DRID indicator extended (if feasible)

Priority interventions	Key results
Cooperate on methods and exchange information with other EU and international institutions (within mandate and where appropriate)	<ul style="list-style-type: none"> • Data exchange, cross checking, harmonisation and identification of redundant processes • Active participation in relevant technical initiatives at EU level
Scale up cooperation with ESPAD project	<ul style="list-style-type: none"> • ESPAD field-test trials in preparation for the 2015 survey supported • Joint analysis conducted
Rationalise and improve web-based information on the drug situation	<ul style="list-style-type: none"> • Integrated KI overviews linking methodological information, summary data and national data sets

Specific objective 2.2: Support the implementation of the key indicators by the Member States, through ongoing monitoring and provision of technical guidance and training

Priority interventions	Key results
Actively monitor implementation of KIs and identify implementation needs	<ul style="list-style-type: none"> • Triennial/annual assessment reports, including needs assessment
Provide expert advice and training to support the countries, as needed	<ul style="list-style-type: none"> • Training programmes developed and delivered as required, based on identified needs
Support key indicator implementation	<ul style="list-style-type: none"> • Updated EU questionnaires map • Proposal for harmonisation of national GPS surveys developed • Estimates based on new PDU protocol available for at least 50 % of Member States • TDI protocol (version 3.0) implemented: completeness of the data assessed and implementation issues addressed • Support for countries in setting up new mortality cohorts • Improved data quality through increased use of DRID toolkit
Support the implementation of KIs in third countries and international efforts to improve reporting capacity (for details see Main area 8: Cooperation and collaboration with key partners)	<ul style="list-style-type: none"> • Training and advice activities conducted, materials produced and implementation supported (where appropriate)

Specific objective 2.3: Maximise the value of key indicator information through analysis to provide a comprehensive, relevant and multi-source understanding of contemporary patterns of drug use, trends and related health and social consequences

Priority interventions	Key results
Organise European key indicator expert meetings	<ul style="list-style-type: none"> • New expert meeting concept implemented • Operational platform for methodological development and analysis

Priority interventions	Key results
Improve exploitation of data through standalone and cross-indicator analysis	<ul style="list-style-type: none"> • Structured analysis plans to support the annual reporting package analyses and other outputs • Data showcase — set of focused analyses, produced online with graphics and supporting notes (issues chosen for topical and analytical relevance) • Patterns and trends in drug use elaborated: technical/scientific papers providing a more detailed analysis (with responses/contextual data and research information) • Updates on topics of importance (rapid follow-up to important emergent information needs or outbreaks) including regular update on trends in behavioural surveillance indicators
Develop guidelines for and promote analysis at national level and act as a catalyst for multi-country analysis	<ul style="list-style-type: none"> • Guidelines developed and tested • New analyses conducted (standalone, data labs and multi-country)
Develop complex cross-epidemiological indicator analysis and analysis integrating epidemiological and responses indicators	<ul style="list-style-type: none"> • In-depth topical reviews on psychiatric co-morbidities and opioid overdose (EMCDDA Insights series)

Main area 3: Monitoring demand reduction responses to drug-related problems

Overview

Describing demand reduction measures that Member States take to address drug problems is a core aspect of the EMCDDA's work. These measures span prevention, treatment, harm reduction and social reintegration. Historically, the focus of our work in this area has been to provide a descriptive analysis of services available. We will now complement this approach by extending the analyses to cover the availability, coverage and quality of interventions delivered across Europe.

In the area of prevention, reporting is currently structured according to target group. We will continue to provide descriptive analysis of the availability of universal, selected and indicated approaches. However, reflecting emergent research findings we will place greater emphasis on analysing two relatively undeveloped areas that are likely to become important for future prevention work in Europe. These are environmental prevention and early intervention. We will explore these approaches to prevention through a mix of technical reviews, expert meetings and international collaboration. As these interventions often target a range of problem behaviours, a multidisciplinary approach will be necessary. We will bring together the EMCDDA's work across prevention in a new state-of-the-art scientific review that will consider the latest understanding of risk factors for developing drug problems and how they inform the responses agenda (EMCDDA Monograph).

In the areas of treatment, harm reduction and social reintegration, our integrated and system-based approach to monitoring will be further developed. The focus will be on providing a holistic analysis of responses available and, where possible, how they may match differing needs. Systems of health provision and drug problems vary between countries and so such an integrated approach will make comparisons more informative. By uniting epidemiological data with information on the configuration and availability of responses, analysis can address the extent to which service provision is in line with estimated needs. This information can help Member States identify gaps in current service provision.

The EMCDDA will also develop guidance on how to scale up services in those areas where it is assessed to be deficient. A new approach in this area will be the development of system maps that will provide a consolidated geographical overview of responses available across Europe. This approach will enable us to monitor the availability and coverage of responses as part of an integrated model, thereby increasing its analytical value.

We will continue to prioritise our work to identify effective practice and encourage the sharing of information on 'what works'. Ongoing dialogue with the scientific and practice community will ensure that we benefit from a state-of-the-art understanding of the available evidence for effectiveness. This dialogue will also provide a channel for disseminating results and increasing the overall impact of our work. The close collaboration we enjoy with the Cochrane group will be maintained and links with other relevant research bodies further developed. Inviting other appropriate networks to benefit from the EMCDDA's technical infrastructure, thereby facilitating their work and allowing the agency to act as a hub for debate and information exchange, will provide added value.

An important tool for disseminating information on effective programming is the Best practice portal. We will continue to develop the portal as a key European resource for collating examples of high-quality interventions. Future developments foresee a more important role for NFPs to ensure not only that national programmes of merit are identified, but also that learning is disseminated more effectively. The concept of best practice will also be extended to other response areas.

An understanding of what constitutes best practice is a critical requirement for developing sound standards and guidelines for service implementation. Working in close collaboration with the EC, the EMCDDA will continue to support the development of minimum quality standards and benchmarks across the drug demand reduction field. This work will build on the achievements of the EQUUS (EU framework for minimum quality standards and benchmarks in drug demand reduction) project and support monitoring of the implementation of high-quality demand reduction programmes across the EU.

We will provide new state-of-the-art reviews of areas in which information resources are underdeveloped. In-depth topical reviews will be published addressing the treatment of cannabis-related disorders, responses to drug use in the prison setting and the treatment of hepatitis C among drug-using populations (EMCDDA Insights series). We plan to complement these reviews with practical guidelines to inform service development.

Goal: To support high-quality service development by producing information and analysis on demand reduction interventions and best practices

Specific objective 3.1: To monitor prevention provision, implementation and outcomes and to improve reporting on important areas in which information resources are lacking

Priority interventions	Key results
Provide an ongoing overview of drug prevention provision	<ul style="list-style-type: none"> • Comprehensive web resources available and key analyses conducted • Up-to-date prevention profiles
Develop analysis on environmental prevention factors	<ul style="list-style-type: none"> • Analyses of social norms, school climate and parenting conducted and results integrated in prevention profiles • Cross-analysis of indicators on social norms, alcohol and prevention policies
Provide updated information on early intervention	<ul style="list-style-type: none"> • Evidence review on brief interventions for new target groups • Prevention profiles and Best practice portal updated and expanded
Develop information on coordinated programming	<ul style="list-style-type: none"> • Situation analysis on model coordination • Technical review and compilation on programmes with multiple outcomes • Self-assessment system for prevention policies • Prevention profiles and Best practice portal updated and expanded

Specific objective 3.2: To improve the monitoring and analysis of treatment, harm reduction and social reintegration interventions and provide an integrated model for understanding service provision in Europe

Priority interventions	Key results
Provide an ongoing overview of drug treatment, harm reduction and social reintegration	<ul style="list-style-type: none"> • Comprehensive web resources available and key analyses conducted • Up-to-date responses profiles
Implement the new treatment data collection and analysis strategy	<ul style="list-style-type: none"> • Harmonised and comparable data on treatment systems across EU countries • Improved capacity to develop treatment estimates at national level • Feasibility/pilot study of TDI treatment facilities
Conduct comparative analysis of drug treatment systems in Europe	<ul style="list-style-type: none"> • Conceptual framework for analysis developed • Comparative analysis (Technical papers)
Develop and test health and social responses target-and-indicator frameworks	<ul style="list-style-type: none"> • Fully integrated responses profiles • Reporting matrix/policy tool for treatment planning
Support the reporting on public health provision in Europe and assess gaps	<ul style="list-style-type: none"> • Consolidated data for reporting on drug-related issues for Dublin Declaration on partnership to fight HIV/AIDS in Europe and Central Asia • Gap analysis and guidelines on scaling up interventions developed

Specific objective 3.3: To identify and support dissemination and knowledge exchange on best practices

Priority interventions	Key results
Conduct state-of-the-art and evidence reviews	<ul style="list-style-type: none"> • In-depth topical reviews on treatment of cannabis-related disorders, drugs and prison, and hepatitis C treatment (EMCDDA Insights series) • Accompanying guidelines for best practice (EMCDDA Manuals series) • State-of-the-art scientific review on drug prevention (EMCDDA Monograph series)
Further develop the Best practice portal	<ul style="list-style-type: none"> • Best practice portal maintained and expanded to provide a comprehensive platform of resources
Disseminate knowledge on best practice	<ul style="list-style-type: none"> • Best practice promotion strategy implemented through tailored dissemination activities
Conduct analysis to identify gaps in the evidence available for interventions	<ul style="list-style-type: none"> • Information needs identified and guidelines prepared to inform and support future research and monitoring agenda

Main area 4: Monitoring drug supply and supply reduction interventions

Overview

The EMCDDA will reorientate its activity to fit better with the balanced approach in the field of drugs and to ensure that more high-quality analysis and information is available in the areas of drug supply and supply reduction. Information resources at European level are currently underdeveloped in these areas and comparable data and analysis are to a large extent lacking. The most significant developments in this area will be: first, to create a stronger information infrastructure by developing key indicators; and, second, to release a major new analysis of the European drug market, which will provide a policy relevant overview of this rapidly evolving area.

In order to address the lack of comparable and reliable data on drug supply in general, the EMCDDA was tasked by the European action plan on drugs (2009–12) to propose a set of key indicators in the fields of drug markets, drug-related crime and drug supply reduction. We have been working in close coordination with the EC to achieve this objective. The work undertaken during the 2010–12 period will culminate with the proposal of key composite indicators combining qualitative and quantitative data sets ('subindicators') in three core information domains. These key indicators will be developed in the 2013–15 programming period. This work will entail improving existing data collection mechanisms and establishing new measures. The NFPs will continue to play an important role as data providers in this area, although complementary sources of information also have to be explored. Methodological developments will be based on expert consensus, sensitive to reporting capacity and practice, and reflect priority information needs. Progress will be made incrementally and be dependent on availability of resources. Importantly, it will require the active support of Member States and recognition of the need for comparable data and reporting standards.

We will focus on developing data resources on drug seizures and drug production facilities. This information is a key input for the key indicators on drug markets and drug supply reduction. Moreover, under the new policy cycle described below, the EMCDDA together with Europol has been tasked with improving the quality of data analysis and reporting on these topics with reference to synthetic drugs.

The European drug market is dynamic, innovative and complex. In the area of synthetic drugs, developments are occurring particularly rapidly and analysis is complicated by the emergence of both new products and new methods of production. Beyond this, important changes have also been noted in the production and trafficking of established substances such as cannabis and heroin, which are likely to have important implications for the future. In recognition of this, the EC has identified the need for a comprehensive and integrated analysis of the European drug market. The EMCDDA, working jointly with Europol, will bring together the two agencies' perspectives and information sources in a new major publication that will provide a strategic overview of the drug market and identify policy considerations. This analysis will build upon the positive experience of previous joint work and will complement other major outputs planned by both agencies.

The EMCDDA has also been tasked, jointly with Europol, to implement activities under the operational action plan (OAP) for 2012–13 of the new policy cycle within the Council on Internal Security (COSI) of the European Union. The policy cycle is a structured priority-setting process for internal security. This process is a key strategic priority of the EU and therefore drugs are, and are likely to remain, a key issue on the European security agenda. We must therefore take the necessary steps to fulfil the tasks assigned to us under the OAP for 2013 and support the definition of priorities for the 2014 policy cycle that follows. The strategic market analysis to be produced with Europol may in time become a key instrument for helping to define security priorities on drugs in Europe, while the priorities of the policy cycle will be one of the inputs used in the planning and drafting of this document.

Successful reporting on supply reduction issues will require us to further develop synergies and partnership with other agencies working in this area. We will also have to invest in network building with the law enforcement and forensic science communities. Strong foundations already exist here. Maintaining the close working relationship we have with Europol will be critical for making progress at European level. In addition, we will develop our collaboration with Eurojust in order to support data collection and analysis of both quantitative and qualitative data on the European judiciary system. Links with the law enforcement community will be reinforced through the EMCDDA's training activities in partnership with CEPOL. The EMCDDA and CEPOL have established a successful track record of collaborating to provide training on drug issues for European law enforcement personnel. Enhancing activities in this area will support building law enforcement capacity on drugs and gradually assist in the setting of drug law enforcement priorities in Europe. In addition, and importantly, it will help foster ongoing information exchange and build the trust, awareness and credibility necessary for working effectively with operational law-enforcement bodies.

In order to support analytical capacity building in this area we will need to establish a reference group composed of appropriate experts. This reference group will assist us in improving the quality, contextualisation and interpretation of data. The group will also be useful for understanding and keeping up to date with law enforcement strategies and practices. In addition it will support work to identify and report on emerging drug supply trends and drug supply reduction interventions. Substantive work to be undertaken includes a review of the tools, tactics and practices of specialised drug law enforcement units in Europe ('drug squads'), which will build on an initial mapping exercise conducted in 2012.

Goal: Provide the EC and the Member States with a comprehensive overview of the supply of illicit drugs into Europe and of the responses developed to respond to it

Specific objective 4.1: Develop European key indicators and complementary information resources for understanding drug markets, drug-related crime and drug supply reduction

Priority interventions	Key results
Launch the implementation of the key indicators in the areas of drug markets, drug-related crime and drug supply reduction	<ul style="list-style-type: none"> • Mapping exercise on reporting practices in EU Member States and international partners • Key elements of a standard definition for subindicators (seizures, production facilities, prices, purity and contents) identified • Technical proposal for subindicators 'Drug seizures' and 'Drug production facilities' including a standard EU reporting instrument
Map drug supply reduction activities, focusing on 'drug squads'	<ul style="list-style-type: none"> • Report on tactics and practices, based on survey results
Develop understanding of the judiciary system as a data provider and an actor of drug supply reduction	<ul style="list-style-type: none"> • Enhanced collaboration with Eurojust • Conceptualisation of potential subindicators
Develop cooperation with external partners on supply indicators (EC, Europol, Eurojust, Interpol, WCO, Council of Europe/ Pompidou Group, CEPOL, UNODC, etc.)	<ul style="list-style-type: none"> • Coordination and data sharing on European indicators on drug supply

Specific objective 4.2: Establish networks in the area of drug supply and supply reduction

Priority interventions	Key results
Establish a European expert reference group on drug supply issues	<ul style="list-style-type: none"> • Reference group operational
Scale up training for the law enforcement community and promote exchanges	<ul style="list-style-type: none"> • Training programmes developed and delivered with CEPOL

Specific objective 4.3: Produce a strategic analysis of drug supply and supply reduction in Europe

Priority interventions	Key results
Strengthen capacity to report on international developments	<ul style="list-style-type: none"> • Support tool developed and implemented
Develop a data framework and input tools for drug seizures	<ul style="list-style-type: none"> • Historical data reconstructed and integrated into Fonte
Produce strategic overview of drug markets in Europe	<ul style="list-style-type: none"> • Two strategic overviews on drug markets developed jointly with Europol
Produce joint analyses	<ul style="list-style-type: none"> • Joint publication with Europol (cannabis or heroin) • Joint publication with Eurojust

Specific objective 4.4: Support the Internal Security Strategy of the European Union (COSI)

Priority interventions	Key results
Carry out activities 1.5 and 1.6 under OAP for the policy cycle 2012–13	<ul style="list-style-type: none"> • Activities 1.5 and 1.6 implemented
Support the definition of the following policy cycle and implement the activities for which EMCDDA has taken responsibility	<ul style="list-style-type: none"> • Activities tasked within the OAP of the following policy cycle implemented
Develop cooperation with EU and international partners in the fields of home affairs and justice	<ul style="list-style-type: none"> • Coordination and information exchange

Main area 5: Monitoring new trends and developments and assessing the risks of new substances

Overview

Providing timely information on new trends, together with an assessment of their potential to diffuse further and their possible impact, is one of the most important ways that the EMCDDA can deliver value from its work, and it can also play a critical role in facilitating timely and targeted interventions.

Activities conducted in support of the EU mechanism to monitor new psychoactive substances are important here. This mechanism established by Council Decision 2005/387/JHA provides Europe with an early-warning system (EWS). Recent developments have seen new psychoactive substances becoming available at an unprecedented rate and the EWS has established itself as a real-time vehicle for multidisciplinary information exchange. The EWS is now used extensively by the forensic science community and by health and law enforcement professionals throughout Europe and is becoming recognised internationally as a valuable alert system and information resource. It is implemented by the EMCDDA and its partners in the Member States (the Reitox network) in cooperation with Europol, and with the active contribution of the EMA and the EC. Its success is derived in part from the fact that it sits within, and benefits from, the broader framework for information collection and analysis the agency has established.

There is no sign that future information needs in this area will diminish and, if anything, the demands placed on the EMCDDA in this respect are likely to grow. The phenomenon itself is also likely to become more complex. Catalysts here are the growing global capacity for cheap organic synthesis matched with entrepreneurs who have developed sophisticated marketing and distribution approaches. It would appear that hundreds of potential psychoactive agents are being actively investigated. Some overlap and there is interaction with the illicit drugs market, which is likely to increase over time with the introduction of more established control measures. To date, most new substances have targeted the recreational stimulants market but now there appears to be a growing interest in targeting chronic/problematic drug users and in exploring the potential of psychoactive medicines. Work to monitor this rapidly evolving area is becoming an intrinsic element of our broader task to monitor developments in drug use in Europe.

A new legislative framework on new psychoactive substances is likely to enter into force during the course of this work programme. Consequently, the activities planned have been designed to provide continuity and at the same time anticipate future developments. We will continue to invest in the day-to-day work necessary for the real-time exchange of EWS information, as this is a key element of our current successful approach. As a main working tool of the EWS, the database on new drugs (EDND) will be updated and expanded, and, if required, risk assessment exercises will be carried out under the auspices of the EMCDDA's Scientific Committee.

The information exchange and risk assessment mechanism and related data collection tools and guidelines will need to be adapted to the new legislative framework when it becomes available. It is likely that some of the activities

conducted in support of the early warning framework will need to be scaled up or adapted. For example, the need for a more proactive approach to information collection is widely accepted, as is the need for increased capacity and information sharing of forensic science data. The lack of research findings on epidemiological and toxicological aspects of new psychoactive substances is also a well-identified, recurring problem that could be addressed by well-targeted studies. We have therefore taken into account in our planning the fact that our activities will have to be reviewed.

Among the most pressing challenges hampering responses in this area are the practical difficulties of identifying the chemicals contained in different products — the value of sharing information in this area at EU level is clearly apparent. Our current response to this problem is 'Project Match', which is a pilot exercise to build up a set of chemical profiles of new products in a central database. Also troublesome is the availability of reference materials, which are of critical importance if toxicology laboratories are to identify new psychoactive substances. At the moment, there is no system for the synthesis and sharing of reference substances of new drugs, although we have made some attempts to include information on these topics in the current data exchange system. Clear added value can be derived from EU-level information dissemination in this area, and the EMCDDA will continue to support it.

Our planning is based on anticipating future needs, an awareness that activities will need to be shaped by the new legal framework, and the fact that they need to be commensurate with resource availability. The EWS is working at maximum capacity, and a significant expansion to the work conducted under this remit is difficult to envisage without adjusting the resources dedicated to it. That being said, the EWS demonstrates the value obtained from even a modest investment when activities are well coordinated and integrated. We believe that the current system provides a strong framework for developing additional capacities should they be required.

The EMCDDA will contribute towards meeting the relevant objective 'Synthetic drugs, including new psychoactive substances' of the operational action plan for 2012–13 of the new policy cycle within the COSI. It is also possible that we will be given additional responsibilities in the new policy cycle period, and again the work programme may need to be adapted.

We will exchange data with the EMA as set out in Article 28c of the new PhV legislation. In consultation with the EC and in full compliance with the EMCDDA's mandate, we will assess the feasibility of implementing a new conceptual framework for monitoring the misuse of medicines. Initial activities will focus on the misuse of controlled medicine used in drug treatment, trends in polydrug use and efficient information exchange.

The dynamic nature of drug use requires an equally dynamic monitoring response. The detection and monitoring of new trends therefore remains one of our key tasks, of which the EWS is but one element. We will work, therefore, to strengthen the EMCDDA's system for monitoring and understanding new and emerging trends in drug use and drug markets. Integration with existing monitoring tools is important here, for example by ensuring that new codes are developed to include important new substances in established data collection mechanisms. New data sources are also required. We will continue to develop the use of accident and emergency room data, as this can provide a useful perspective of changes in the acute health effects that can accompany changes in drug consumption patterns. We will also continue to

explore the longer-term potential offered by sewage epidemiology and wastewater analysis for monitoring illicit drugs use in real time at the community level. We will continue to produce regular Internet snapshots using improved methodology to provide a more robust indicator of online activity.

We will track the use and availability of drugs such as ketamine, gamma-hydroxybutanoic acid (GHB), benzylpiperazine (BZP) and mephedrone — which have been risk assessed, but are now of growing importance in the illicit marketplace — and of important substances such as fentanyl and methamphetamine, whose patterns of availability and use appear to be changing. To help achieve this, we will further develop our trend-spotter methodology, which provides a rapid and flexible source for proactively exploring new developments. Increased sensitivity to emerging trends will be generated through exploiting our role as an information broker in regular contact with networks across Europe and our network of focal points in all Member States. We will give more attention to discussing new developments in expert working groups and to improving mechanisms for collecting and validating the information that this kind of expert networking can bring. A number of city monitoring systems exist across Europe keeping their fingers on the pulse of local developments; our plans to network with these systems will add a dimension to our understanding of new developments in Europe’s drug situation.

The identification of new developments requires an appropriate dissemination strategy. The EMCDDA will continue to issue warnings when these are required through the Reitox focal points as well as other expert information networks and channels. We will maintain our rapid response teams to ensure that, when important information requests are received that require immediate action, they are managed effectively. To support timely dissemination, we plan to introduce a short online rapid communication product (EMCDDA updates).

Goal: To provide a timely and sound information and analysis platform for identifying emerging trends and threats related to new psychoactive substances and their risks, new patterns of drug use, and new developments in drug availability

Specific objective 5.1: To ensure that the information exchange and risk assessment mechanism on new psychoactive substances is of high quality and implemented in a timely and efficient manner

Priority interventions	Key results
Implement the provisions of the Council Decision 2005/387/JHA on the information exchange, risk assessment and control of new psychoactive substances	<ul style="list-style-type: none"> • Operational EWS and information exchange mechanism • EMCDDA–Europol Joint reports prepared (if needed) • Multidisciplinary, scientifically sound risk assessment procedure implemented (if requested) • EMCDDA–Europol Annual reports on the implementation results
Implement the provisions of Article 28c of the EU Pharmacovigilance (PhV) legislation	<ul style="list-style-type: none"> • Information exchanged with EMA and the EU PhV system on medicines and substances with medicinal properties • EMCDDA use of the PhV web-based information system (EudraVigilance)

Priority interventions	Key results
Build up a formal forensic science and toxicology network (in line with OAP for 2012–13 of the new policy cycle within COSI)	<ul style="list-style-type: none"> • Forensic science network operational • Structured cooperation between EMCDDA and the European Network of Forensic Science Institutes (ENFSI)
Consolidate and improve the methodology for monitoring the Internet	<ul style="list-style-type: none"> • Internet snapshots conducted, data analysed and results disseminated • Improved Internet-monitoring methodology • Automatic tools developed and integrated • Web mapping of new drugs/'legal highs' online shops developed
Support the consolidation of information on the content of products by implementing a tool that matches 'legal high' products to new psychoactive substances ('Project Match')	<ul style="list-style-type: none"> • Automated 'Match' tool implemented • Database operational
Pilot monitoring of misuse of medicines (in the context of polydrug use and the EU PhV system)	<ul style="list-style-type: none"> • Better integration of information on misuse of medicines in EMCDDA reporting
Assist candidate and potential candidate countries to prepare for future participation in the EWS and the Internet snapshot exercise	<ul style="list-style-type: none"> • Training activities implemented at national and regional level (in context of IPA 4) • Selected countries participating in snapshot exercise

Specific objective 5.2: To adapt and implement the information exchange and risk assessment mechanism on new psychoactive substances to new legal and institutional requirements

Priority interventions	Key results
Assist the Commission and the Council with the preparation of new legislation to replace the Council Decision (if requested)	<ul style="list-style-type: none"> • EMCDDA contribution to the preparation of new legislation
Implement the new legal instrument and adapt the existing networks, reporting and monitoring tools and instruments to new legal and institutional requirements	<ul style="list-style-type: none"> • All guidelines, procedures, processes and tools in line with new requirements • Extended network operational • New risk assessment guidelines published
Develop and implement the new EDND adapted to new legal and institutional requirements	<ul style="list-style-type: none"> • New database implemented and fully operational • Public interface developed

Specific objective 5.3: Facilitate the development of early responses to potential threats by strengthening the systems for identifying, tracking and understanding new and emerging trends in drug use, availability and adverse consequences

Priority interventions	Key results
Improve monitoring of new drugs and links with epidemiology data sources and expert networks	<ul style="list-style-type: none"> • Internet survey on prevalence of new drugs/'legal highs' carried out • Knowledge management system for internal and external networks

Priority interventions	Key results
<p>Increase the capacity to monitor emerging trends</p>	<ul style="list-style-type: none"> • Trend-spotter methodology improved and consolidated • City network that helps assess emerging trends and threats established • Local-level piloting of tracking tools and thematic case studies produced • Rapid response team consolidated
<p>Explore the potential of wastewater analysis as an indicator to estimate population drug consumption</p>	<ul style="list-style-type: none"> • Follow-up of meetings and pilot studies • European Science Foundation (ESF) conference • Technical proposal for an indicator developed

Main area 6: Improving Europe's capacity to monitor and evaluate policies

Overview

Since its creation, the EMCDDA has monitored various aspects of drug policies including drug laws, drug strategies and action plans, drug policy coordination bodies, drug policy evaluation mechanisms and drug-related public expenditure. The information needs and data availability in these areas differ and therefore different strategies have been developed to describe and report on each element.

A database (ELDD) and network of legal correspondents constitute the main resources supporting the EMCDDA's reporting on drug laws. This has allowed the development of thematic analyses on topics such as penalties for drug use, threshold quantities, regulations for substitution treatment and control measures for new psychoactive substances. We will continue with this approach and have built in some flexibility to allow the EMCDDA to be reactive to requests for new policy analyses. Among the planned new thematic publications is an analysis of typical trafficking penalties in the EU Member States.

The monitoring of national drug strategies and national coordination bodies has up to now relied exclusively on data collection activities with the NFPs. In the coming years monitoring will be enhanced with the use of external experts and some small-scale studies planned. Different aspects of national drug strategies, such as the linkage between research and policy, will also be examined. In addition, analyses will explore the different drug policy models that exist in Europe and internationally.

Another development planned to improve the quality of the data and analysis in the drug policy area will be to strengthen the existing standing expert networks. The scope of the legal correspondents' expert meeting will be enlarged to take in a broader policy agenda covering legislative and strategic developments as well as public expenditure.

To date, the evaluation of national drug strategies has relied both on data provided by the NFPs and on specialist information from two technical meetings organised in 2008 and 2010. Routine monitoring in this area shows a rapid increase in the number of EU Member States that now evaluate their strategy or action plan. It also suggests that the methods used for these evaluations are not always optimal and could benefit from an exchange of knowledge and expertise between countries. For this reason, in 2012, the EMCDDA published European guidelines for the evaluation of national drug strategies. In addition, EMCDDA experts provided advice and support for the evaluation of different national drug strategies, an activity that will be continued in the future.

Another key part of our work in this area is the ongoing support provided in the framework of the progress reviews and final evaluations of the EU drug strategy and its action plans, and of new drug-related legislation developed at EU level. We will provide both methodological assistance and time trends analysis, and, when required and possible, develop specific data collection activities for this purpose. Close collaboration with the EC and other European agencies will be a key element for effective work in this area.

Over the last five years, we have invested in monitoring drug-related public expenditure. The data available are limited, however, and not sufficient to obtain a good European picture and make reliable comparisons between countries. As a consequence, we have developed a new, more delineated strategy whereby specific areas of expenditure will be identified and estimated separately. This approach will provide more useful analysis than that given by a cumulative estimate in which the constituent elements included are not standardised between countries. It is hoped that, by improving estimations in this manner, a more reliable total expenditure computation will be possible in the future. This implies not only collecting data in different areas but also developing guidelines and sharing knowledge on how best to obtain and analyse such data. We will focus on studying the impact of the recent economic recession on the content of drug policies.

To ensure that we disseminate the analyses produced in the policy area effectively, we will produce a set of short reviews which will address key policy issues or provide an illustrative overview of national policy examples.

In 2015, we plan to publish a state-of-the-art scientific review on future drug policy challenges in 2015 (EMCDDA Monograph). This monograph will address the key issues facing the European drug policy agenda with a perspective geared towards future challenges, which are likely to include developing policies in a context of austerity, building on evidence, and responding to innovation, social change and technological advances. The release of this monograph will be designed to stimulate discussions at a major conference planned to review the state of the European drugs problem, to be organised in Lisbon in 2015.

Goal: Improve the understanding of European and global policy developments by providing relevant and timely drug policy data, analysis and expertise

Specific objective 6.1: Develop European and global drug policy monitoring and analysis

Priority interventions	Key results
Review current knowledge on key drug policy issues and challenges	<ul style="list-style-type: none"> • State-of-the-art scientific review on drug policy challenges for the twenty-first century (EMCDDA Monograph series)
Examine different models of drug policy to provide a better understanding of current policy options and support decision-making processes	<ul style="list-style-type: none"> • Six to ten policy papers published on different characteristics of European, national and international drug policies and on drug policy typologies
Examine drug policies at the local level	<ul style="list-style-type: none"> • Drug policy paper on drug policies of large cities
Analyse the impact of the economic recession on drug policies	<ul style="list-style-type: none"> • Drug policy paper on trends in drug-related expenditure
Provide data and expertise for the evaluation of the new EU drug strategy and its action plans, and of other relevant EU legislation or activities	<ul style="list-style-type: none"> • Data and expertise in the areas of drug policy evaluation provided at EU level
Support Member States' activities in the area of drug policy evaluation	<ul style="list-style-type: none"> • Support and expertise provided on request for the evaluation of national drug strategies

Specific objective 6.2: Strengthen European networks in drug law and drug policy analysis

Priority interventions	Key results
Strengthen network of legal and policy correspondents to improve data collection, data validation and data analysis in the drug policy area	<ul style="list-style-type: none"><li data-bbox="959 405 1422 461">• Improved quality of the data and analysis in the drug policy area

Main area 7: Scientific coordination, research and content support

Overview

An ongoing commitment to improving the scientific quality of our work is a prerequisite for fulfilling our role as a centre of excellence for the collection, analysis and dissemination of drug-related information. It is therefore a primary objective for scientific management and coordination activities.

Europe's drug problem is complex and multifaceted. A major strength of the analysis provided by the EMCDDA is that it brings together data from across all aspects of the phenomenon to provide a holistic and neutral overview with data from different perspectives. This requires close coordination between the agency's different scientific units. This is delivered through the scientific coordination structure, with each unit having responsibility for a transversal activity as well as a technical specialism, and with the work of the individual units being coordinated centrally through a 'Division' management structure.

This integrated working practice is necessary for internal efficiency. It is required by the more integrated approach to communication, in which dissemination issues will be taken on board early in the technical product-planning process. It is also required to successfully support capacity-building work, both within the Reitox network and with external programmes. The scientific coordination team will facilitate the good communication and well-coordinated working practices that are essential for the success of this work programme.

The agency's focus on quality assurance will require new internal mechanisms to ensure that scientific and methodological standards are defined and met. These will be common across the EMCDDA's scientific work and audited centrally. A related task will be to help ensure the continued development, quality and coherence of the EMCDDA's information collection and reporting system. We have recently reviewed this and a number of improvements are planned to working practices. Within the current perspective of fixed resources, maximum efficiency is required to improve the overall quality of information available. Given that the data collection capacity is finite and dependent on national activities, ongoing review of existing demands on data and careful scrutiny of new requests are needed to ensure that demands on the system do not exceed capacity. Moreover, the EMCDDA's remit is a broad one, new areas of interest are developing and resources remain fixed. The sound management of scientific activities therefore requires oversight to ensure that the use of resources, be they financial or human, are matched to reporting needs and priorities and informed by the commitments made in the strategy and work programme.

We will develop a more robust protocol for handling requests for scientific advice and opinion. This will ensure that EMCDDA input on important issues is both timely and scientifically sound. This will be informed by a framework for grading types of information, both in order to provide a measure of data quality and to be able to better describe the level of uncertainty inherent in different types of analysis.

The EMCDDA editorial board and product management system support an integrated approach to output generation whereby scientific and communication issues can be brought together, processes assured and quality control maintained. The communication strategy on which this is based is described below (main

area 9). Within the scientific units, product creation, in the pre-editing phase, is supported by a content coordination and quality assurance system. This reflects the composite nature of many EMCDDA products, in which the work of different scientific units needs to be brought together into a coherent narrative. Content coordination also acts as a quality control mechanism and supports scientific writing. It is planned to systematise procedures in this area further, in close coordination with the communication team and reflecting the new integrated communication strategy. This will be particularly important for ensuring scientific quality control aspects in the development of online information resources. We will introduce a more systematic peer-review process for all major publications. A more rigorous approach will be adopted for the initial outline development of major products guided by clearer style and guidelines. The EMCDDA will continue to support the production of papers intended for publication in scientific journals. Work in this area will be guided by new procedures to ensure that the resources utilised in this area are well spent and that outputs produced are of high quality. Priority will be given to those analyses in which data held by the EMCDDA have the potential to impact on important contemporary scientific debates. Scientific papers will be recognised as formal outputs of the agency and detailed in annual work-planning exercises so that resource implications and support requirements can be better assessed.

The EMCDDA will continue to formalise and develop its programme of training activities and related resources in the 2013–15 period. Training activities developed at the EMCDDA cover a broad area of initiatives including academic-orientated training, capacity-building projects, specialised training of national experts, training initiatives undertaken with other agencies and international organisations, in-house traineeship opportunities and resources developed for external audiences. To ensure efficiency and minimise costs, an integrated approach is envisaged, with common materials developed for multiple purposes, and training activities linked where possible to expert meetings. This will be particularly relevant for training activities accompanying capacity-building work as it is cost-efficient and can lead to networking opportunities. Training materials will be web-based wherever possible to maximise their accessibility.

The EMCDDA works very closely with the research community, and EMCDDA activities both utilise research findings and act as a catalyst for new research questions. We collect and disseminate information on drug-related research activities in Europe and assist where possible with scientific networking and publicising funding possibilities — with an emphasis on the EU level. Researchers and experts in the field have welcomed this accessible provision of information. This approach will be maintained and outputs better systematised and integrated within the new web format.

Goal: To produce high-quality scientific work through efficient working practices

Specific objective 7.1: Ensure the coordination of scientific activities so that resources are efficiently used, objectives are achieved and quality control of outputs is maintained

Priority interventions	Key results
Improve handling of requests for scientific advice and opinion	<ul style="list-style-type: none"> • Protocol for 'Handling requests for scientific advice' operational • Framework for grading evidence developed
Develop EMCDDA strategy on training for external audiences	<ul style="list-style-type: none"> • Strategy developed and implemented
Ensure the coherence of the overall reporting system within a framework for quality assurance	<ul style="list-style-type: none"> • Systemic review: follow-up action plan implemented • Mechanism(s) for coherence, oversight and quality control established • Output-orientated and competitive approach to planning and resource allocation
Coordinate training activities	<ul style="list-style-type: none"> • Integrated training strategy developed and implemented • Improved availability of training resources
Support the production of high-quality scientific content	<ul style="list-style-type: none"> • Support provided for content production (pre-editing) • Scientific aspects required for overall quality control framework developed and implemented • Peer review system implemented (in consultation with Scientific Committee) • Strategy for supporting scientific publishing implemented

Specific objective 7.2: Support drug-related research, audit key developments and promote the use of research findings

Priority interventions	Key results
Monitor and disseminate developments in drugs research	<ul style="list-style-type: none"> • Improved online access to EU-funded research findings • Annual audit of important research developments
Provide input to the development of the EC research agenda	<ul style="list-style-type: none"> • Methodology for advising on research priorities endorsed by the Scientific Committee • Input to European Research Area Network on Illicit Drugs (ERANID) • Structured input on research priorities at the level of the EU and at the level of the Member States
Further develop collaboration with the scientific community through dissemination of findings and increased contribution to relevant events	<ul style="list-style-type: none"> • Increased input, visibility and standing of EMCDDA outputs

Main area 8: Cooperation and collaboration with key partners

Overview

Partnership and effective collaboration is necessary for delivering the overall objectives of this work programme. The EMCDDA actively pursues partnerships and working synergies with EU institutions and agencies, civil society, international organisations, specialised government agencies and third countries.

For activities within the European family the main priorities of work are to support the EU policy debate technically through close work with EU institutions; fulfil institutional responsibilities; and ensure efficient and productive working arrangements with other agencies with an interest in the drugs area. For activities beyond the EU, the work is guided by the agency's mandate and its international cooperation strategy. It is also informed by the need to support EU programmes and initiatives or relevant international endeavours technically, while recognising that resources are limited and that additional activities should not undermine core priorities.

The EMCDDA has provided technical input and review documents to support the implementation and monitoring and evaluation of the 2005–12 EU drug strategy and its accompanying action plans. We expect that we will be tasked with new responsibilities within the new EU policy framework; if so we may need to adjust this work programme. The EMCDDA works closely with the Commission, the Council and the Parliament within the context of its mandate to provide technical support and information. Of particular note here is the input we provided on demand to the Horizontal Working Group on Drugs and to bilateral dialogues between the EU and third countries. The EMCDDA also supports the work of the EC on an ongoing basis, providing technical input in those areas where it is requested. Building on the successful work conducted during the 2010–12 period, we remain committed to joint work with other EU agencies.

The EMCDDA will also work to improve the dialogue that exists between the agency, civil society, national policymaking bodies and relevant technical and scientific organisations. Civil society plays an important role in the European drug policy debate as well as acting as a service provider in many Member States. It is also an important consumer of our information and data provider. We will scale up our efforts to report on developments in the civil society area and increase our investment in establishing effective channels for communication and information exchange. We also recognise that national policymaking bodies are an important audience for our work and here again a two-way information flow is desirable, as debates within Member States can be of wider interest. To help improve the targeting of products, in line with the communication strategy, we will seek to understand better the needs of national policymakers and what constitutes effective channels of communication for them.

In recognition of the global nature of the drug problem and the value of promoting the EU model of policymaking informed by scientifically sound information, the EMCDDA pursues technical collaborations with appropriate international bodies. Work focuses around developing common reporting standards, sharing methodologies and information exchange. The agency is increasingly identified as a centre of excellence and a key reference for drug monitoring: its methods, tools,

analysis and publications have become the main European reference for regional and international organisations.

A more specific area of substantive work that we will develop is cooperation and capacity building with countries that represent a priority for EU action, notably the candidate and potential candidate countries and the countries covered by the European Neighbourhood Policy (ENP). The EMCDDA has a proven track record of delivering high-quality capacity-building activities reflecting established reporting standards and methods. Activities in this area will be structured around three groups. For the candidate countries (the Former Yugoslav Republic of Macedonia, Montenegro, Serbia and Turkey) and potential candidate countries (Albania, Bosnia and Herzegovina, and Kosovo, under UNSCR 1244/99), new technical cooperation project(s) will be implemented in the western Balkan countries, with the aim of enhancing the scientific value of drug-monitoring activities. For the ENP countries, capacity-building activities will be open to the Eastern partnership and the Southern partnership, as well as the Russian Federation. The objective will be to support the use of the EMCDDA methods among interested countries, in order to improve analysis and reporting. Scientific support will also be provided to other non-EU countries, such as countries of Central Asia or Latin America and the Caribbean. Activities in this area, commensurate with resources, are based around EU regional programmes (such as the Central Asia Drug Action Programme, CADAP, and Cooperation Programme between Latin America and the European Union on Drugs Policies, COPOLAD) or through bilateral agreements.

Goal: To support EU drug policy debate and effective actions and increased capacity for reporting on drug use in non-EU countries with an emphasis on countries that represent a priority for EU action in the drugs area

Specific objective 8.1: Coordinate, cooperate and provide technical support at the EU level

Priority interventions	Key results
Provide technical support to EU policy deliberations	<ul style="list-style-type: none"> • Support for the EC and European Parliament (as requested) • EMCDDA technical backstopping and support to policy debate at the Horizontal Drugs Group (HDG) and other appropriate fora (when requested) • Support to the EU drug strategy after 2012 (to be defined) • Support for the implementation and/or monitoring of policy documents: OAP on synthetic drugs, HIV/AIDS action plan, EU alcohol strategy (as regards polydrug use etc.) as required

Priority interventions	Key results
Ensure effective collaboration with other EU agencies	<ul style="list-style-type: none"> • Working synergies, joint projects and information exchanged • Work programmes and cooperation agreements endorsed and implemented • Effective cooperation with Europol, CEPOL, Eurojust, ECDC, EMA • Participation in the Justice and Home Affairs (JHA) cluster • Framework for cooperation with other EU agencies established and developed (where appropriate)

Specific objective 8.2: Improve dialogue with policy audience, civil society and relevant technical and scientific bodies

Priority interventions	Key results
Monitor key developments and improve information exchange with civil society partners	<ul style="list-style-type: none"> • Monitoring and report on key developments made by civil society in the drugs field • Improved dialogue and information exchanged in relevant areas
Improve understanding of information needs and identification of effective communication channels with national policy bodies	<ul style="list-style-type: none"> • Better targeting of information products and improved communication
Maintain awareness and identify synergies with appropriate technical and scientific bodies working in the drugs field	<ul style="list-style-type: none"> • Overview of activities, information exchange, networking with research and monitoring centres and, if appropriate, joint activities

Specific objective 8.3: Coordinate, cooperate and provide appropriate technical input to work conducted by international bodies in the drugs field

Priority interventions	Key results
Provide technical input and information (in line with the mandate and strategy) to international activities	<ul style="list-style-type: none"> • EMCDDA contribution to expert meetings, international projects, trainings and seminars • Information exchange with international partners and regional bodies [including UNODC, Joint United Nations Programme on HIV/AIDS (UNAIDS), WHO, Interpol and WCO, Pempidou Group and CICAD]
Support the development of coherent information standards and information resources at international level	<ul style="list-style-type: none"> • Input provided and, where possible, data validation exercises conducted and codes harmonised
Develop and implement joint work with key external partners	<ul style="list-style-type: none"> • Work programmes and cooperation agreements endorsed and implemented • Joint publications produced and published

Specific objective 8.4: To support capacity development and enhance the scientific value of drug-monitoring activities within candidate (CCs) and potential candidate countries (PCCs)

Priority interventions	Key results
Consolidate institutionalisation of NFPs within CCs and PCCs	<ul style="list-style-type: none"> • Roadmaps for joining the EMCDDA adopted by countries • All countries have officially appointed an NFP to the EMCDDA and NFPs are functional
Foster scientific cooperation in relation to data collection, interpretation and analysis and accrue added value from cooperation activities	<ul style="list-style-type: none"> • Better data and better analysis of available data • National reports following the EMCDDA guidelines • Data from CCs and PCCs integrated into EMCDDA products

Specific objective 8.5: Support capacity development, information availability and exchange with interested ENP and other non-EU countries

Priority interventions	Key results
Launch the EMCDDA technical cooperation with interested ENP partner countries and improve knowledge base	<ul style="list-style-type: none"> • Information maps and country overviews available on the EMCDDA website • National action plans for drug information system (NAPDIS) adopted • EMCDDA strategic report on drug situation in ENP countries
Exchange information, working practices and methodology on the identification of new psychoactive substances with other interested regional and national monitoring systems	<ul style="list-style-type: none"> • Information exchanged • Increased knowledge base on new psychoactive drugs • Participation of interested countries in the Internet snapshot exercise (if appropriate)
Provide ad hoc scientific support to ongoing EC regional programmes	<ul style="list-style-type: none"> • Scientific support provided to COPOLAD, CADAP etc. (subject to resources)
Develop training materials and training modules on EMCDDA standards	<ul style="list-style-type: none"> • Reitox academy summer course • Handbook II on key indicators published

Main area 9: Communicating the EMCDDA's findings to external audiences

Overview

Independent, science-based information is a vital resource to help Europe understand the nature of its drug problems and better respond to them. Communication is one of our core activities in our role as information agency and the reference point on drugs in Europe. Two important elements will reshape our work in this area in 2013–15. On the one hand, this will be a time of budgetary austerity in Europe, which will bring with it a heightened need to ensure increased cost-effectiveness of our operations. On the other hand, we will be facing the backdrop of a rapidly changing communication landscape, requiring the agency to respond with timely content, be attentive to emerging needs and deliver its information using an expanding set of communication tools.

Communication work will be developed across several cross-cutting themes and guided by the integrated communication strategy developed in 2012. The thrust of this strategy is to ensure that communication activities are not an isolated function at project-end, but an integral part of the agency's scientific and technical activity. Clarifying relevance of content and its intended audience at product conception phase will facilitate timely and cost-effective follow-up.

An integrated communication strategy to support:

- relevant, timely and responsive analysis of the drug situation, through focused and dynamic production of information with early discussion of audience and channel;
- efficiency, through upstream guidance on the communication tool that can provide the highest impact for the content in question, also leading to more cost-effective choices;
- a more customer-orientated approach, by regularly analysing audience needs and preferences and ensuring emphasis is shifted appropriately.

Part of the added value of the agency is to interpret complex information into meaningful and useful messages for policymakers, scientists and researchers, practitioners and the general public. Improving how we communicate our findings is a key strategic aim for 2013–15, which is supported by some core communication values: quality, consistency, efficiency, relevance and transparency. Activities to support this aim range from the way we structure and share information to the way we visualise our data.

Developing communication services in light of the digital evolution and social web is a key challenge and includes dealing with demands for transparency and engaging actively with audiences. Building and maintaining trust is a core consideration when adopting a new approach.

We have a well-established set of communication channels and tools that we use to engage with key stakeholders and target groups, including web publications and print products, social media, audiovisual, media relations, face-

to-face communication (conference, visits etc.), marketing (branding, reputation management, promotions etc.), general enquiries desk and targeted distribution. We will review the channels used for each output and target audience to ensure that they are appropriate. We will look to expand tools in line with needs identified, for example e-books and post-PC tools. We will work to strike a better balance between web-based and printed products. Streamlining of some product lines and a redesign of others will be necessary to ensure content relevance and coherence for agency results.

We will respond to the need for active communication by participating in conferences and meetings and will ensure that the knowledge imparted is shared with a wider audience. Particular emphasis will be placed on ensuring better dissemination of results from our expert and technical meetings. We will promote communication as a responsibility for all staff and provide ongoing training for this task. We will work with NFPs to further develop their role as communicators of EMCDDA knowledge.

In 2015, we will organise an international conference on drug policy challenges in the twenty-first century that will bring together the best experts in the drugs area. The conference is an integral part of the work programme and is timed to provide Europe with an audit of the state of play of the situation, responses and policy developments. This event will provide an ideal opportunity to present the EMCDDA's work in the context of important ongoing political developments and future challenges. It will also be a useful forum to interact with our target audiences and solicit feedback from them on our work.

The priority to increase the impact of the agency's online presence noted throughout this document requires action on several fronts. We will put in place a web governance strategy that sets out the procedures and responsibilities for maintaining a web resource that is up to date and quality controlled. We will introduce a more sophisticated content management capability to facilitate publishing and managing content. We will develop a set of web-based products matching our revised reporting processes. For example, a streamlined and better-focused printed Annual report is foreseen within the revised annual reporting package, which will provide a window into a comprehensive set of web-based resources. We will also ensure that web development activities are adequately resourced, and will invest in writing and conceptual skills.

The EMCDDA will evaluate the impact and effectiveness of communication activities, taking into account learning from consumer and target audience research, media monitoring and analysis, output analysis (e.g. understanding of messages), web traffic analysis, web user surveys, etc. In particular, we will seek to gain better insight into our professional influence (outreach) and conduct return on investment (ROI) and cost-benefit analyses (linguistic policy).

The priority to match communication services better to the overall EMCDDA strategy foresees improving knowledge – i.e. helping staff match their work to product types and training users better as regards the communication resources available – and improving multi-year planning of outputs with better phasing for content development, peer review, editing, production and launch. The investments outlined above cannot be accommodated without identifying some areas for disinvestment. These include reduction in printed products/print runs; revision of linguistic policy (relevant outputs in relevant languages in line with audience needs, paying attention

to quality over quantity); reduction in distribution costs (development of electronic mailing lists); and adopting an approach based on real needs for library resources and distribution.

Goal: EMCDDA information and analyses of high quality reach their intended audience in a timely and cost-efficient manner

Specific objective 9.1: Implement the integrated communication strategy and action plan (adopted in 2012)

Priority interventions	Key result
Develop procedures to integrate communication perspective at product conception	<ul style="list-style-type: none"> • Improved planning and shaping of products upstream • Better-paced and -targeted launches
Redesign product range to reflect new EMCDDA strategy and work programme (brand refresh)	<ul style="list-style-type: none"> • Balanced products mix with cost and efficiency savings • Refreshed product lines with improved design and format
Implement revised linguistic policy	<ul style="list-style-type: none"> • Better quality and relevance of multilingual products • Increased value from investment in translation (based on cost benefit and ROI analyses)
Implement revised media relations strategy	<ul style="list-style-type: none"> • Enhanced EMCDDA exposure to media around the world (through an up-to-date strategy reflecting developments in new media and the agency's international outreach)
Match communication and dissemination channels to needs and preferences of target audiences	<ul style="list-style-type: none"> • Improved impact through differentiated use/mix of communication channels • Interactive communication channels • Content adapted to different communication channels (tone, language) • Increased use of electronic means for dissemination • Various alternatives to physical distribution introduced and promoted
Monitor and evaluate the impact of communication activities	<ul style="list-style-type: none"> • Better knowledge of outreach and impact gained in order to inform future EMCDDA strategies

Specific objective 9.2: Publish high-quality and timely products in line with targets committed to in the 2013–15 work programme

Priority interventions	Key result
Assure publication, launch and dissemination of EMCDDA products	<ul style="list-style-type: none"> • Planned products published, launched and disseminated • Improved internal procedures and tools to better plan and monitor production
Reconceive and reshape printed Annual report	<ul style="list-style-type: none"> • Streamlined and electronically integrated Annual report produced and launched in the first half of the year • More efficient use of resources

Specific objective 9.3: Increase the relevance and impact of the EMCDDA's online presence

Priority interventions	Key result
Develop web content in line with integrated communication strategy	<ul style="list-style-type: none"> Website is up to date and reflects the EMCDDA's knowledge on the drug situation in Europe
Increase interactivity and targeted approach of the website	<ul style="list-style-type: none"> New areas targeted at specific audiences introduced More user-centred access to information
Introduce new quality assurance system for web content	<ul style="list-style-type: none"> Web governance strategy implemented and content quality assured Better content management tool to monitor updates and modifications in place
Install new content management tool and migrate content	<ul style="list-style-type: none"> Content migrated to new content management tool Better-linked and -integrated web content Improved findability of content

Specific objective 9.4: Enhance the EMCDDA's reputation and recognition as the European central reference point for drugs information

Priority interventions	Key result
Organise European drugs conference in 2015	<ul style="list-style-type: none"> Successful conference informing on the state of drug policy in Europe
Ensuring visibility of EMCDDA across multiple communication platforms	<ul style="list-style-type: none"> Awareness raising and positioning of the EMCDDA's work, results and scientific expertise More active approach to providing publications and information at international events and conferences
Continue to build sound contacts and relations with journalists and provide media-friendly information with clearly defined messages	<ul style="list-style-type: none"> High-quality press products and appropriate EMCDDA presence in relevant media
Public information service	<ul style="list-style-type: none"> Efficient public information desk operates in line with guidelines set by the European Ombudsman

Main area 10: Governance, management and networks

Overview

The core focus of governance work in 2013–15 is to provide the direction the agency needs to perform the tasks set out in its Regulation and achieve its objectives. This is even more essential within the current dynamic EU political and financial environment, which requires the agencies to strengthen their strategic and operational capacity and develop a more performance-based organisational culture.

Over the next few years, we will develop a strategic development framework for the EMCDDA's work. This includes aligning the vision, mission and core organisational values with the top-level commitments and new medium- and long-term developments identified in this work programme. To this end, one of the priorities for 2013–15 will be to review the EMCDDA's ethical and organisational values and reshape the organisational culture around new values.

In order to facilitate the strategic decision-making process and ensure good governance, we will provide ongoing support to the Management Board by having regular contacts with the Board members, organising the statutory meetings and preparing documents to support their work. Both the Management Board and the Director rely on the independent expertise and advice of the Scientific Committee, which is the cornerstone of the agency's scientific quality and standing. In 2014, the current committee will reach the end of its mandate and the profile of the new committee will be reassessed in light of the EMCDDA's current and future areas of work. Increased support for the agency's scientific activities is foreseen, including peer review of some of the products, advice to staff and feedback on findings.

Successful implementation of the strategic decisions made by the Board requires effective management organisation and practices. Of utmost importance will be to ensure that the agency's resources are used in the most efficient, effective and economical manner. Given the scenarios of budget constraints ahead, we will give special consideration to rationalising use of agency's resources and to further promoting cost-effectiveness, accountability and transparency. This is a top-level commitment for 2013–15 and the EMCDDA Director will hold the key role, in particular by orienting and supporting the units in performing their tasks and ensuring that the agency's organisational structure remains appropriate.

At operational level, we will follow up on the processes and procedures used for the implementation and control of activities and will review the internal document management process, in order to ensure that it is secure, efficient and compliant with the applicable legislation.

Improving efficiency in our operations to get the best results is a core focus for the next three years. We will further strengthen the strategic planning, monitoring and reporting capacity to achieve this. Our main priority will be to build an integrated performance measurement system, allowing the EMCDDA to monitor its achievements and adjust its operational objectives and processes. The design of the performance measurement system will be based on our organisational needs, including the need to ensure full transparency of and accountability for our operations towards the EMCDDA's stakeholders and the general public. In order to generate continuity and optimise use of resources, we will make full use of the

existing monitoring mechanisms. There will be two major components developed in parallel: the first will focus on defining performance indicators for all areas of work; the second will be the design of the monitoring and evaluation system used to support the collection, analysis, interpretation and reporting of performance data. To the extent possible, and in line with the principles of activity-based budgeting (ABB) and activity-based management (ABM), the system will integrate operational and financial data. This task will involve joint work between the operational and the financial planning actors and will allow the agency to analyse the results achieved in light of the resources deployed, and hence to measure its efficiency and find the best options to improve it.

In the area of the internal control system and risk management, an ongoing task will be to maintain an updated repository of the state of compliance with the EMCDDA Internal Control Standards (ICS) for effective management and control. This effort will be combined with regular updates of the central risk register already introduced in 2010. The implementation of our business continuity plan will be an important development. We will continue the thorough verification of financial transactions, to ensure that they are made in accordance with the relevant regulatory requirements, including sound financial management. Best practices on cost-effectiveness of operations will be promoted as appropriate. The already existing monitoring effort will be better documented with a view to identifying possible weaknesses or areas for improvement in the quality of the ICS.

The good cooperation with the European Court of Auditors and the EMCDDA’s Internal Audit Service (IAS) will continue, with a view to taking stock of recommendations arising from audits in areas identified as of strategic importance. Appropriate implementation and follow-up of such recommendations will continue to be done along suitably designed action plans.

Goal: The EMCDDA attains good performance in carrying out the tasks set out in its Regulation and achievement of its objectives. This will be accomplished through good governance and efficient management and leadership, supported by enhanced planning, monitoring and reporting and an effective internal control and risk management system

Specific objective 10.1: Ensure good governance to provide the strategic guidance and direction for the work of the EMCDDA

Priority interventions	Key results
Implement strategic decision-making process at the level of the Management Board	<ul style="list-style-type: none"> • Multi-year and annual work programmes, budget, reports of activities and other key decisions adopted
Provision of support and guidance by the Scientific Committee, to further enhance the scientific quality of the EMCDDA’s work	<ul style="list-style-type: none"> • Improved scientific work, through guidance and peer review of outputs • New Scientific Committee in place

Specific objective 10.2: Ensure efficient management and leadership to support achievement of results and efficient use of resources

Priority interventions	Key results
Implement sound management organisation and practices	<ul style="list-style-type: none"> • Further improved working structure, organisation and methods, to support efficient implementation of activities • Annual work programmes implemented as planned and/or measures to improve performance taken, when necessary

Specific objective 10.3: Improve and implement the agency's strategic planning and programming cycle processes, to support timely delivery of results and sound decision making concerning allocation of resources and actions to be taken to enhance performance

Priority interventions	Key results
Design and put in place an integrated performance measurement system to allow EMCDDA to track progress of its achievements better and detect implementation challenges in a timely way	<ul style="list-style-type: none"> • Performance measurement system operational, including performance indicators defined and monitoring and evaluation system in place
Prepare the documents required by the strategic planning and programming cycle	<ul style="list-style-type: none"> • 2013–15 annual work programmes, management plans and general reports of activities • 2016–18 strategy and work programme

Specific objective 10.4: Ensure effective internal control and risk management system

Priority Interventions	Key results
Implement sound internal control system	<ul style="list-style-type: none"> • Full compliance of EMCDDA operations with the existing EU regulations and practices • Business continuity plan adopted and implemented

The Reitox network

Data collection and reporting are the main tasks of the Reitox network, and NFPs are considered the national authorities for providing the EMCDDA with information. The performance of the NFPs is influenced by the level of institutional and financial support available and the development of information sources and reporting capacity at national level. The current financial perspective may present challenges in both these areas. The EMCDDA works closely with NFPs to provide a framework for quality reporting using comparable tools. Information is collected through an annual reporting package consisting of national reports, standard statistical tables and structured questionnaires. During the next three-year period there will be a need to review, and in some areas adjust, the current reporting framework to be sure it remains fit for purpose.

The main priorities for EMCDDA in its work with NFPs during the new work programme will be (1) consensus building to refine the existing reporting frameworks and agree the annual reporting package, including revisions when necessary; (2)

strengthening the Reitox network and in particular its role at national level as a high-quality provider of information; (3) developing an integrated approach to capacity development and quality assurance, in the context of the overall strengthening of the quality assurance framework of the EMCDDA; and (4) continuing to strengthen the management and organisation.

Specific objective 10.4: Ensure that the Reitox network is efficiently managed and structured to meet future needs and requirements

Priority interventions	Key results
Agree the annual reporting package and necessary developments to the overall reporting framework	<ul style="list-style-type: none"> • National reporting package agreed and implemented • Reporting framework adapted to work programme requirements
Strengthen the Reitox network at national level as a high-quality provider of information	<ul style="list-style-type: none"> • Accreditation programme adopted and tool for the self-assessment of strategic and operational capacity of NFPs implemented
Develop an integrated approach to capacity development and to quality assurance	<ul style="list-style-type: none"> • Quality assurance framework in place • Coordinated Reitox training and support activities in place
Strengthen the management and organisational processes and procedures	<ul style="list-style-type: none"> • Organisational structures and processes configured to meet future needs • The 'Reitox week' meeting of Heads of focal points to provide a vehicle for exchange, training and development • More capacity for delivering added value at national level as an information provider

Main area 11: Administration — supporting core business

Overview

The existence of effective administration and support services is an essential requirement necessary to support the scientific and technical work programme of the Centre. Our main commitments in this area are to enhance efficiency, to further develop sound management of the resources available and to provide service-orientated administrative support to the agency's operations.

In the financial management area, we will focus on aligning the EMCDDA's financial rules to the revised EU financial regulations and updating the relevant processes. We will strive to improve efficiency in financial transactions and procurement operations. The introduction of digitised tools and processes such as the electronic workflow for financial transactions, the information technology-based tool for staff missions' management and the management of meetings-related transactions will contribute to achieving this, as will rationalising and optimising tendering processes.

Improving overall execution of the budget is also a key aim. This involves timely preparation and use of budget planning and management tools (such as draft budget, amending budgets and budget transfers) as well as further developing the EMCDDA's ABM and ABB system.

We will improve the quality of the EMCDDA's accounting management and reporting activities by developing the accounting of assets with new solutions integrated into statutory accounting principles (SAP)-based accounting systems.

In human resources (HR) management, we will concentrate on providing the conditions for staff to deliver results efficiently, based on the principles of excellence and transparency. A first priority is to align EMCDDA HR processes and policies to the forthcoming reform of the EU staff regulations. This will require preparing and implementing rules and training staff on the main aspects of the reform. Further digitising the HR management processes is another priority to increase efficiency. We will use training opportunities to develop the EMCDDA's working and production capacity. The needs and priorities for training will be regularly updated, and dedicated training for staff (including management) will be developed. Defining a clear framework for staff career development is also an important intervention.

In the area of logistics and infrastructure, we will concentrate on optimising the use of the available facilities, equipment and infrastructure and ensure a healthy working environment for the agency's staff. We will prioritise safety at work, sound environmental management and security in the buildings, including reducing utility costs and promoting use of renewable energy.

Goal: Ensure effective and efficient allocation and management of financial and human resources and assets, through further rationalising internal processes, while developing the quality of services and support provided

Financial and budget management, and accounting

Specific objective 11.1: Enhance effectiveness and efficiency in the execution of the budget and in the management and accounting of financial resources

Priority interventions	Key results
Align the EMCDDA financial rules to the revised EU financial regulation and ensure their implementation	<ul style="list-style-type: none"> • EMCDDA revised financial rules and processes defined in accordance with the forthcoming revision of the relevant EU legislation, adopted and implemented
Further improve effectiveness and efficiency of financial transactions (payment process) and procurement processes	<ul style="list-style-type: none"> • Payments successfully made within the time limit stipulated in the financial rules • Average deadlines for payment reduced (compared with 2011) • Rationalised and optimised tendering processes
Ensure effective and timely preparation and use of budget planning and management tools in line with EMCDDA priorities and constraints and in accordance with ABM/ABB principles	<ul style="list-style-type: none"> • Adoption of the budget for year N and preliminary draft budget for year N + 1 by the end of year N – 1 in line with ABM and ABB system in place • Budget forecast for year N + 2 (at level of chapter) • High budget execution rate maintained
Develop customised reporting on budget execution	<ul style="list-style-type: none"> • Stakeholders needs met through regular statistical reports and customised reports on budget execution
Improve the accounting of EMCDDA assets, and further define the conditions and requirements for the function of accounting officer at the EMCDDA according to applicable financial rules	<ul style="list-style-type: none"> • Improved system in place for accounting of assets

Human resources management

Specific objective 11.2: Maximise efficiency and effectiveness of HR management at the EMCDDA

Priority interventions	Key results
Align EMCDDA HR processes and policies to the forthcoming reform of the EU staff regulations	<ul style="list-style-type: none"> • Implementation of the 'reformed' staff regulations without hampering the continuity of the main HR processes (i.e. payment of salaries, carrying out of annual processes such as performance appraisal of staff, promotion/reclassification exercise)
Further digitise HR management processes through the development of information and communication technology tools to increase their efficiency and effectiveness	<ul style="list-style-type: none"> • Additional HR processes digitised further to the introduction of the HR database and e-recruitment tool

Priority interventions	Key results
Develop career paths by relying on the concept of 'job families' to define a clear framework for career development and effective management of expectations	<ul style="list-style-type: none"> • Career paths in place for managerial and non-managerial positions
Further develop EMCDDA working and production capacity by maximising training opportunities for EMCDDA staff	<ul style="list-style-type: none"> • Training initiatives reflect EMCDDA working priorities and need for improved managerial capacity

Infrastructure and logistics

Specific objective 11.3: Ensure a healthy working environment and further reduce utility costs by optimising the use of the available facilities, equipment and infrastructure

Priority interventions	Key results
Ensure safety at work, sound environmental management and security in the buildings, including reducing utility costs and promoting use of renewable energy	<ul style="list-style-type: none"> • Reduction of costs for utilities and contracted services
Provide a suitable working environment and related services, and improve efficiency and effectiveness through promoting a customer-orientated approach	<ul style="list-style-type: none"> • Compliance with applicable standard requirements for space allocation, meeting and mail handling

Main area 12: Information and communications technology

Overview

Information and communications technology (ICT) activities need to support the agency's core development objectives and to guarantee the smooth operation of all up and running services, including corporate application hosting and management of the data centre.

In times of swiftly developing technologies and of the agency's growing expectations, applying best practices in terms of ICT governance and investment management is at the core of the planning process. The governance of ICT comprises different areas: business architecture development and its technical implementation; service management; project evaluation and project (and activities) portfolio management.

With regard to the technical infrastructure, the core objective will be to ensure well-planned maintenance and evolution of the EMCDDA's technical environment. In practical terms, this will lead to the planned replacement of central server components, network equipment and standard software.

In relation to ICT service management, we will continue to introduce formal procedures in various aspects, to ensure service availability and to leverage the advantages associated with any modifications, also considering the principle that services are the object of life-cycle management.

Concerning project (activities) portfolio management, in line with best practice, as described in the recommendations following an IAS risk assessment and the EMCDDA risk register, it is essential to engage the executive level of EMCDDA management.

The newly established ICT Steering Committee currently oversees the main priorities and activities. The direction it gives to the ICT work programme will be formalised with defined and formal criteria in order to arrive at an annual ICT Project (and activities) Portfolio aligned to EMCDDA strategies, while ensuring smooth running of all existing services, as well as steering and endorsing core ICT strategies.

All the areas of ICT governance are meant to support the EMCDDA business requirements, both for existing services and for those reflecting new or changed objectives. The pillar work processes of the agency, including data collection and data analysis, the development and dissemination of the EMCDDA products, and governance processes, have to be taken into account, and constitute the majority of the priority interventions listed below.

Goal: Support the agency in achieving its objectives by providing high-quality and efficient ICT services

Specific objective 12.1: Develop and maintain ICT solutions and tools to support the EMCDDA's work, while applying best practices and standards of ICT governance, planning and service management

Priority interventions	Key results
Develop and maintain instruments for supporting core business	<ul style="list-style-type: none"> • Infrastructure for the annual drugs data collection and analysis functional and further developed, reflecting the evolution of the drugs data set and its protocols • Best practice portal roadmap implemented, resulting in new portal fully integrated in the agency's work process • New EDND conceptualised and operational • Roadmap for the development of a collaborative content editing platform • New web content management tool implemented
Implement 'Business and information architecture management' programme	<ul style="list-style-type: none"> • First complete versions of the business and information architectures
Implement 'Technical services management' programme	<ul style="list-style-type: none"> • Formal definition and adoption of a service catalogue

Risk assessment

The main risks posed to the EMCDDA's activity and achievement of objectives during the course of the 2013–15 work programme are summarised below.

A. External risks with a direct link to specific fields of annual work programmes

- Tightening of the already visible budget constraints faced by the EMCDDA: Whilst sizeable cuts in the EC grant appear to be unlikely, it can be expected that the present budget situation at EU level will not improve significantly in the years to come, implying that (at best) our present budget constraints will not ease for the foreseeable future. Should this risk materialise, the following course of action should sequentially be envisaged: (a) to reduce support to partners for non-core tasks and activities, (b) to delay or postpone developmental work, support and capacity-building activities, (c) to reduce analytical work and development of transversal products and (in a worst-case scenario) (d) to lower the scope and/or quality of planned outputs.
- Emergence of specific supplementary requests from EU institutions to provide technical support for the implementation of EC programmes and actions: In such a case, priorities would have to be reviewed along the lines described in the point above, notably by delaying or downsizing certain projects in this area and reallocating resources appropriately. The same approach would have to be followed should there be supplementary requests for expertise in specific domains arising from Member States and third parties.
- Lack of sufficient funding for the Reitox NFPs in certain Member States, which might have a negative impact on their capacity to comply with their reporting obligations towards the EMCDDA: This risk, which has already materialised in the past, could be compounded by lack of adequate funding for information collection in a Member State as a whole — that is to say upstream of the NFP — thereby affecting its capability to provide reliable information to the EMCDDA. Should this risk materialise, priorities assigned to the particular NFP(s) affected would have to be reviewed, in order to preserve availability of core information.
- Unauthorised use or misuse of EMCDDA products by external entities, for purposes other than those pursued by the agency, such as for commercial and profit-making activities: Such abuses might entail reputation risks to the EMCDDA, notably if the contents of the original publications were modified or rendered incomplete or inaccurate and the agency were cited as the editorial source. This risk materialised at the beginning of 2011 as far as violation of copyrights is concerned. Mitigating measures such as warnings to entities violating copyrights, clearer disclaimers in the EMCDDA publications prohibiting use for any commercial purposes and tighter controls on the downloading of our external products have been envisaged and ought to be applied in case of need.

B. External events that might negatively impact the implementation of the work programme as a whole

- Occurrence of natural catastrophes such as major earthquakes (possibly leading to tsunamis), landslides or floods:

This risk exists because of the location of the EMCDDA's facilities, bordering the River Tagus and in a seismic activity area. If a worst-case scenario (a major earthquake) were to occur, emergency actions carried out under a comprehensive business continuity plan would have to be implemented in a timely manner. Even so, some disruption of EMCDDA activities would most probably ensue, the respective duration being dependent on the severity of the catastrophe and the promptness of aid received from public and/or private sources.

The following mitigating measures have been envisaged to deal with the risks mentioned above:

- As far as floods are concerned, improvements regarding the protection of the building (including garage) shall be implemented in agreement with the respective owner, the Administration of the Port of Lisbon. Efforts have already been made but have so far not yielded concrete results; efforts should therefore be continued until sufficient protection is guaranteed.
 - A very comprehensive insurance contract, covering, inter alia, adverse effects arising from earthquakes, landslides and floods, is in force and would provide financial compensation in case these events materialise.
- Terrorist attacks and social unrest, the latter linked to a possible deterioration of the country's socio-economic situation:
This risk, although considered to be low, in view of Portugal's peaceful record in this respect, should not be disregarded altogether. The EMCDDA insurance policy covers damages caused by this kind of event, which is a measure that has so far been considered adequate to deal with this risk.

C. Internal risks

C.1. Information technology area

A comprehensive set of governance, technical and security risks in the ICT sector has been identified and assessed; consequently, adequate mitigating measures have been either taken or proposed in order to tackle these risks. A suitable action plan has been defined and implemented internally, aimed at reducing residual risks to tolerable levels. The main risks still outstanding and areas where progress is required are very briefly summarised below:

- As regards governance: (a) sound investment decisions will be further pursued; (b) ICT projects management should be improved; (c) licensing and asset management procedures could be strengthened; (d) ICT applications deployed in production should be better tested; and (e) times of response from ICT unit in cases of emergency should be shortened.

- As regards technical risks: (a) software configuration should be improved; (b) patching procedures should be made more consistent; (c) business continuity and recoveries in cases of incidents and disasters should be ascertained more effectively; and (d) security violations of our ICT systems should be reduced.

All in all, the progress envisaged in the areas above is expected to contribute towards obtaining better 'value for money' from ICT purchases, enhanced daily effectiveness of the ICT systems in place, a quickening of the response times in cases of disaster or emergency and, last but not least, the reduction of security violation risks.

C.2. Unexpected departure of key staff members

The risk exists that replacement could be difficult in some cases. A number of mitigating measures have been consistently adopted and further action in this regard shall be implemented as already planned: (a) the reinforcement of staff training initiatives; (b) a stronger pursuance of stable contracts with key staff (notably in scientific areas); (c) better development of tasks of a transversal nature (with a view to fostering sharing of knowledge and expertise); and (d) optimising recruitment planning.

List of abbreviations and acronyms

ABB	activity-based budgeting
ABM	activity-based management
CADAP	Central Asia Drug Action Programme
CC	candidate country
CEPOL	European Police College
CICAD	Inter-American Drug Abuse Control Commission
COPOLAD	Cooperation Programme between Latin America and the European Union on Drugs Policies
COSI	Council on Internal Security of the European Union
DRID	drug-related infectious diseases
EC	European Commission
ECDC	European Centre for Disease Prevention and Control
EDND	European database on new drugs
ELDD	European legal database on drugs
EMA	European Medicines Agency
EMQ	European Model Questionnaire
ENFSI	European Network of Forensic Science Institutes
ENP	European Neighbourhood Policy
ESPAD	European School Survey Project on Alcohol and other Drugs
EU	European Union
EWS	early-warning system
EQUS	EU framework for minimum quality standards and benchmarks in drug demand reduction
GPS	general population survey
HDG	Horizontal Drugs Group
HR	human resources
IAS	Internal Audit Service
ICT	information and communication technology
IPA	Instrument for Pre-Accession Assistance
JHA	Justice and Home Affairs group, European Commission
KI	key indicator
NAPDIS	National action plans for drug information system
NFP	national focal point
OAP	operational action plan
PCC	potential candidate country
PDU	problem drug use
PhV	pharmacovigilance
ROI	return on investment
SAP	statutory accounting principles
TDI	treatment demand indicator
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
WCO	World Customs Organization
WHO	World Health Organization

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About the EMCDDA

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is one of the European Union's decentralised agencies. Established in 1993 and based in Lisbon, it is the central source of comprehensive information on drugs and drug addiction in Europe.

The EMCDDA collects, analyses and disseminates factual, objective, reliable and comparable information on drugs and drug addiction. In doing so, it provides its audiences with an evidence-based picture of the drug phenomenon at European level.

The Centre's publications are a prime source of information for a wide range of audiences including policymakers and their advisers, professionals and researchers working in the field of drugs, and, more broadly, the media and general public.

The EMCDDA's three-year work programme and strategy sets out the agency's objectives and expected results for the medium term.



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