European Monitoring Centre
for Drugs and Drug Addiction

EMCDDA certification of the Reitox national focal points

October 2020

Table of contents

1. Introduction

The Reitox certification project is a process for formal acknowledgement of the competence of a European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) national focal point (NFP) to carry out specific tasks in a reliable, credible and accurate manner and confirmation that it meets the minimum criteria for the fulfilment of the tasks of an NFP as set out in Article 5 of the EMCDDA regulation ([1]).

The **purposes of the certification** are, on the one hand, to increase the legitimacy of each NFP at national level by demonstrating how well it is contributing to the EMCDDA's core tasks of collecting and reporting consistent, harmonised and standardised information on the drug phenomenon across Europe and, on the other hand, to increase the degree of assurance at European Union (EU) level that the NFPs are fulfilling their role as national interfaces with the EMCDDA.

A self-assessment questionnaire has been developed to monitor the activities of the NFPs against **quality standards**. These standards are based on the functions of an NFP as described in *Building a national drugs observatory: a joint handbook* ([2]). They cover institutional context, the NFP's mandate, drug-related data collection, analysis and interpretation, reporting and dissemination. The standards are set out in Chapter 2 of this document.

The self-assessment questionnaire (Chapter 3) should be considered a quality control tool complementing other quality control procedures such as EMCDDA financial audits, annual quality reports and assessments of key indicators' implementation.

Nine questions have been identified as **key assessment questions**, in line with the quality standards. Numerical answers — on a scale from 1 (lowest) to 5 (highest) — to these nine key questions are added up and the total is the overall self-assessment score.

According to this final score, the NFP is assessed as having reached one of **four capability levels** defined as follows.

- **Prerequisite.** The NFP does not meet the standards (score between 9 and 18).
- **Moderate.** The NFP meets a few standards but further work is required to achieve high quality standards (score between 19 and 35).
- **Strong.** The NFP meets most of the standards but there is still some small room for improvement (score between 36 and 40).
- **Advanced.** The NFP has very high standards in place and goes beyond the required standards and regular tasks (score between 41 and 45).

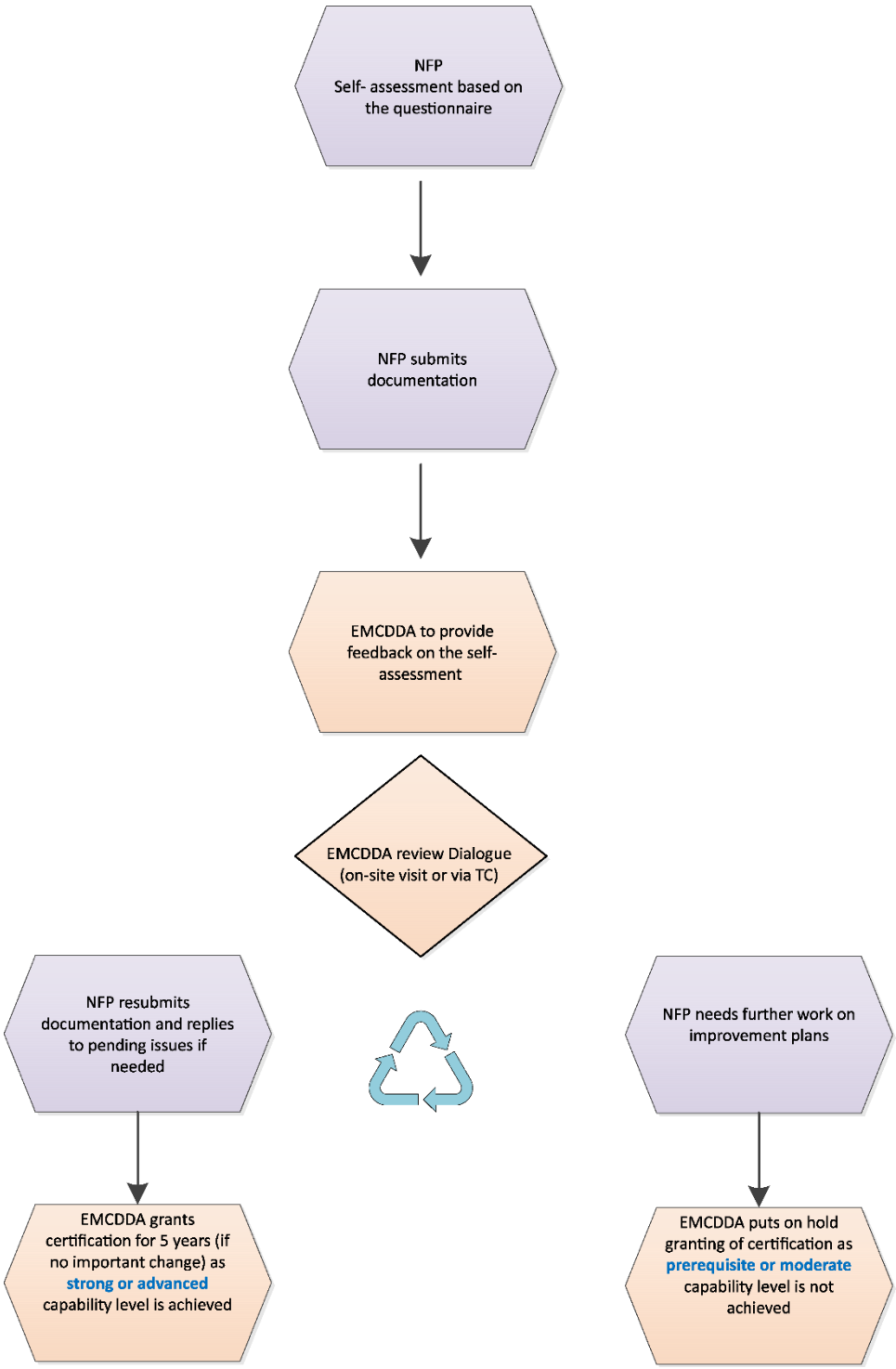
To be granted **certification**, the NFP must have reached a **strong or advanced** capability level. If the score corresponds to a lower level, the NFP needs to implement priority activities to overcome the challenges and should repeat the self-assessment to evaluate progress after six months to one year.

Once the self-assessment questionnaire has been completed by an NFP, there will be a review and dialogue with the EMCDDA on the results. An **action plan** will be prepared with the objective of implementing new activities with a view to improving some of the identified challenging areas. Ideally, the whole NFP team would participate in the dialogue with the EMCDDA dialogue.

Certification remains valid for five years, unless there is an institutional change (i.e. the NFP moves to another institution), in which case certification is suspended and a new self-assessment is carried out. If the results are unsatisfactory, a joint work plan will be developed with the EMCDDA and the self-assessment should be repeated between six months and one year later.

The figure below shows the main steps of the certification process.

([1]) COUNCIL REGULATION (EEC) No 302/93 of 8 February 1993 on the establishment of a European Monitoring Centre for Drugs and Drug Addiction https://www.emcdda.europa.eu/about
([2]) https://www.emcdda.europa.eu/publications/joint/ndo-handbook


NFP
Self- assessment based on the questionnaire
NFP submits documentation
EMCDDA to provide feedback on the self-assessment
EMCDDA review Dialogue (on-site visit or via TC)
NFP resubmits documentation and replies to pending issues if needed
EMCDDA grants certification for 5 years (if no important change) as strong or advanced capability level is achieved
NFP needs further work on improvement plans
EMCDDA puts on hold granting of certification as prerequisite or moderate capability level is not achieved

2. Quality standards for Reitox national focal points

2.1 Mandate and resources of the national focal point

The NFP's official mandate and the institutional support that it receives are key to the sustainability of the NFP and its ability to carry out its tasks successfully.

2.1.1 Official mandate

It is expected that the NFP:

- has a clear mandate to monitor and report on drugs and drug use to the national authorities (e.g. government, parliament);
- is referred to as a leading body for drug and drug use monitoring at national level in a national act;
- contributes to reporting to international organisations.

2.1.2 Resources

It is expected that the NFP:

- plans its activities using a (multi)annual work plan;
- has in its budget a specific (annual) budget line or lines for drug-related monitoring;
- receives adequate support from decision-makers and adequate resources to carry out its tasks, and specifically has:
  - sufficient human resources to fulfil its mandate and tasks;
  - qualified multidisciplinary staff involved in other activities in the drugs field (e.g. teaching, professional associations, scientific work);
  - sufficient equipment and facilities (a meeting room, IT equipment, etc.) to support its daily activities.

2.2 Core business

This refers to the three main functions of a national drug observatory: data collection, analysis and interpretation, and reporting and dissemination.

2.2.1 Data collection

It is expected that the NFP:

- collects and gathers information regarding all key/core indicators on the drug situation;
- promotes the use of the internationally agreed data collection protocols and standards to monitor drugs and drug use in the country;
- compiles an up-to-date inventory of national drug information sources;
- has a coordination role in relation to national partners and national drug-related data providers;
- maintains an extensive network of national partners and data providers, thus ensuring national coverage of data sources;
- regularly exchanges data with national partners and data providers;
- applies quality control processes to ensure the reliability of the data and information obtained from data providers.

2.2.2 Analysis and interpretation

It is expected that the NFP:

- plays a key role in the interpretation of the drug situation in the country;
- applies peer-review processes and other quality assurance mechanisms to data input and/or output;
- has its main information outputs endorsed by national stakeholders.

2.2.3 Reporting and dissemination

It is expected that the NFP:

- assesses the information needs of its national stakeholders;
- executes a dissemination/communication strategy or carries out other activities to present its information to professionals and/or the general public;
- provides information outputs and services to a wide range of audiences (policymakers, professionals and the public);
- ensures that its products are readily available to its audiences via modern communication tools (the internet and other electronic media).

3. Self-assessment questionnaire on quality standards for Reitox national focal points

General instructions for completing the questionnaire

The structure of the questionnaire is based on the quality standards set out in Chapter 2.

Some of the questions are single answer and others are multiple choice; instructions are given for each question. Some questions request that you provide a description, justification or comments. It is important to clearly describe the national context and the activities carried out or to provide examples. You may also include in these descriptive responses references or links to documents or to any other relevant information (e.g. a website, a database, or a project output). If the same explanation applies to several questions, you may use cross-references.

The action plan (Annex 1) helps you to summarise the principal strengths and weaknesses in relation to each standard and to identify some possible future actions for follow-up. The table can be adapted and you can add rows or columns or references to specific questions in the questionnaire. This action plan will be discussed during the review dialogue with the EMCDDA.

A key assessment question appears at the end of each section (nine in total). The numerical answers — on a scale from 1 (lowest) to 5 (highest) to these nine key questions should be reported using the assessment diagram (see Annex 2).

Part 1. Background information

Country	
NFP (name of institution)	
Contact person/person responsible for the certification	
List of persons/institutions contributing to the self-assessment	
Participation in the EMCDDA Reitox certification process (e.g. first time, second time)	
Other existing certification or accreditation of the institution/NFP (by a national or international recognised certification/accreditation body (e.g. the International Organization for Standardization)	
Reference year for the certification exercise	
Please describe the institutional context of the NFP and its mandate	
By whom was the NFP appointed to the EMCDDA ([3]) and when?	
Where is the NFP hosted ([4])?	
How broad is the area of work of your hosting institution in the field of addictions (illicit substances, licit substances, addictions, etc.)?	
Can your hosting institution initiate a legislative process?	
Other significant information	

([3]) Governmental agency, ministry, interministerial body, parliament, etc.

([4]) Governmental agency, ministry, inter-ministerial body, university, non-governmental organisation, prime minister's office, presidency of council of ministers, etc.

Part 2. Mandate and resources of the national focal point

This part looks at the NFP's official mandate and the institutional support that it receives, which are key to the sustainability of the NFP and its ability to carry out its tasks successfully.

2.1 Official mandate

It is expected that the NFP:

- has a clear mandate to monitor and report on drugs and drug use to the national authorities (e.g. government, parliament);
- is referred to as a leading body for drug and drug use monitoring at national level in a national act;
- contributes to reporting to international organisations.

2.1.1. What is the national authority to which the NFP is directly liable ([5])?

Multiple choice

☐ Governmental agency
☐ Ministry
☐ Interministerial body
☐ Parliament
☐ Government or prime minister
☐ Other, please describe

2.1.2. Does the NFP have a role specified in the national drugs strategy or similar national policy document (or a law) on drugs?

Please check one response

☐ Not relevant (no such documents in place)
☐ Monitoring drugs is not mentioned
☐ NFP is not mentioned
☐ NFP is mentioned in relation to tasks other than monitoring drugs (illicit substances)
☐ NFP is mentioned in relation to monitoring drugs (illicit substances)
☐ NFP is mentioned in relation to monitoring illicit and other substances and addictions

2.1.3. Are there other institutions/bodies with a similar mandate to that of the NFP, 'to coordinate the collection, the analysis and the reporting of official national information related to drug supply and demand'?

Please check one response

☐ Yes, there are other institutions with an overlapping mandate, not coordinated with the NFP
☐ Yes, there are a few such institutions, not coordinated with the NFP
☐ Yes, there are a few such institutions, but coordinated with the NFP
☐ No, there is only the NFP

2.1.4. Does the NFP report to national decision-makers (e.g. government and/or parliament)?

Please check one response

☐ Yes

☐ No

If yes, please describe the general practice:

([5]) With regard to regular administrative and financial reporting.

2.1.5. Does the NFP contribute to national official reporting to international organisations other than the EMCDDA (e.g. the United Nations Office on Drugs and Crime, the World Health Organization)?

Please check one response

☐ Yes
☐ No

If yes, please describe to whom and how:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

2.1.6. How would you assess the overall institutional position of the NFP as a 'leading national institution for drug monitoring'?

☐ 1. Very poor
☐ 2. Poor
☐ 3. Satisfactory
☐ 4. Good
☐ 5. Very good

Comments:

……

Recommendations for further action:

……

2.2 Resources

It is expected that the NFP:

- plans its activities using a (multi)annual work plan;
- has in its budget a specific (annual) budget line or lines for drug-related monitoring;
- receives adequate support from decision-makers and adequate resources to carry out its tasks, and specifically has:
  - sufficient human resources to fulfil its mandate and tasks;
  - qualified multidisciplinary staff involved in other activities in the drugs field (e.g. teaching, professional associations, scientific work);
  - sufficient equipment and facilities (a meeting room, IT equipment, etc.) to support its daily activities.

2.2.1.a. Is there a specific annual budget line or lines for the activities of the NFP?

Please check one response

☐ Yes, specific to the NFP
☐ Yes, in relation to broader drug policy
☐ No, there is no budget earmarked

Please explain:

……

2.2.1.b. Does the NFP have the opportunity to request additional funding either from the hosting institution or from another source?

Please check one response

☐ Yes
☐ No

Please explain from which institution or institutions and through what mechanism:

……

2.2.2. Has the NFP's overall/full annual budget been audited by an external auditor?

Please check one response

☐ Never
☐ Yes, annually
☐ Yes, regularly (not annually)
☐ Yes, on ad hoc basis
☐ Other, please describe

……

2.2.3. Have the NFP's grant agreement finances been verified (audited) by the EMCDDA?

Please check one response

☐ Yes in … (give year)
☐ No

If no, please go to **Question 2.2.5.**

2.2.4. How have you used the findings and recommendations arising from the verification?

Please comment:

……

2.2.5. Does the NFP have an annual work programme, project plan or equivalent document with clear objectives and staff assigned to its implementation?

Please check one response

☐ Yes
☐ No
☐ Other, please describe:

……

2.2.6. Please list the qualifications of each staff member assigned to drug-related issues and the full-time equivalent (FTE) staff dedicated to the activities of the NFP.

Please indicate your national FTE (hours per day)

……..

Position/function and qualifications ***(please give only functions, no names)***	**FTE (as a percentage)**
Add as many rows as needed	
TOTAL	

2.2.7. Does the NFP have the opportunity to contract external scientific resources?

Please check one response

☐ Yes
☐ No

Please describe:

……

2.2.8. Does the NFP accept trainees or collaborate with university students working on drug-related research theses (master's/bachelor's/PhD)?

Please check one response

☐ Yes
☐ No

Please describe:

……

2.2.9. Are any NFP staff members engaged in other activities (e.g. teaching, conferences, active involvement in community work, scientific projects, professional networks or associations) in drug-related disciplines?

Please check one response

☐ Yes
☐ No

Please describe:

……

2.2.10. Are the available office equipment and facilities sufficient to support the daily activities and work of the NFP (a meeting room, IT equipment, etc.)?

Please check one response

☐ No
☐ Partly
☐ Yes

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

2.2.11. How would you assess the operational capacity (budgets, facilities and staff to carry out basic functions) of the NFP?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

2.2.12. How would you assess the scientific capacity of the NFP?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

Comments:

……

Recommendations for further action:

……

Part 3. Core business

This part looks at the three main functions of a national drug observatory: data collection, analysis and interpretation, and reporting and dissemination. Some questions relate to cross-cutting issues and could just as well have been placed under another core business function to the one under which it occurs.

3.1 Data collection

It is expected that the NFP:

- collects and gathers information regarding all key/core indicators on the drug situation;
- promotes the use of the internationally agreed data collection protocols and standards to monitor drugs and drug use in the country;
- compiles an up-to-date inventory of national drug information sources;
- has a coordination role in relation to national partners and national drug-related data providers;
- maintains an extensive network of national partners and data providers, thus ensuring national coverage of data sources;
- regularly exchanges data with national partners and data providers;
- applies quality control processes to ensure the reliability of the data and information obtained from data providers.

Reference framework for reporting

3.1.1. What are the reference frameworks/standards for data collection and reporting that the NFP uses?

Please check one response

☐ No clear reference framework for data collection exists
☐ Several national data collection frameworks, not totally in line with EMCDDA protocols
☐ Several national data collection frameworks, some compatible with EMCDDA protocols
☐ Unique/integrated ([6]) national data collection framework, compatible with EMCDDA protocols
☐ Unique/integrated national data collection framework, compatible with EMCDDA protocols and going beyond their requirements

3.1.2. Does the NFP have a drug information map or a similar inventory of national drug information sources?

Please check one response

☐ No information map exists
☐ Information map exists but is not regularly updated
☐ Information map exists but is not used
☐ Information map is regularly updated and available for internal use only
☐ Information map is regularly updated and is publicly available

3.1.3. Do you have a national action plan for drug information systems (NAPDIS) ([7])?

([6]) In the context of this questionnaire, 'integrated' means that local or regional monitoring frameworks are integrated with each other and with a national monitoring framework.

([7]) A NAPDIS should identify the objectives and actions to be undertaken over several years. Budget might not be available for all actions to be taken in the short term.

Multiple choice

- ☐ No NAPDIS exists
- ☐ NAPDIS is not regularly updated
- ☐ NAPDIS exists but is not used
- ☐ NAPDIS is regularly updated
- ☐ NAPDIS is integrated into the drugs strategy

3.1.4. If there is a NAPDIS, how does it relate to the national strategy on drugs or any other national policy document on drugs?

Please comment:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

3.1.5. How would you assess the existing reference framework for data collection and reporting?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

Comments:

……..

Recommendations for further action:

……...

Cooperation with data providers

3.1.6. Does the NFP have a clear mandate/agreed rules for sharing and requesting data and information from other institutions and organisations?

Please check one response

- ☐ Yes
- ☐ No

Please describe briefly how you manage data collection processes and data sharing:

……

3.1.7. Who are your data providers?

Please check all relevant responses

- ☐ State institutions
- ☐ Non-governmental institutions
- ☐ Universities and academics
- ☐ Independent experts
- ☐ Other, please describe:

……

3.1.8. How do you ensure the coordination of your network of data providers?

Please check all relevant responses

- ☐ Formal meetings
- ☐ Email exchanges
- ☐ Informal contacts
- ☐ Special intranet page/web platform
- ☐ Other, please describe:

……

3.1.9. For which networks of data providers and on which topics have you organised one or more meetings in past 12 months? Please indicate the networks and topics and the number of meetings:

……

3.1.10. In general, what is the relationship between the NFP and the main official data providers?

Please check one response

- ☐ Informal (no contracts or agreements)
- ☐ Formal cooperation agreement
- ☐ Formal cooperation agreement and payment for data provision
- ☐ Other, please describe:

……

3.1.11. What proportion of potential data providers are not included in the NFP's networks?

Please check one response

- ☐ Less than 25 %
- ☐ Between 25 % and 74 %
- ☐ More than 75 %

Please give reasons if the coverage is lower than 75 %:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

3.1.12. How would you assess the cooperation of the NFP with the main data providers?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

Comments:

……

Recommendations for further action:

……

Data quality and data exchange

3.1.13. What type of datasets have you most recently produced or received from your data providers?

Please mark the appropriate cells with a cross or insert the appropriate comment

	GPS ([a])	PDU ([b])	DRID ([c])	DRD ([d])	TDI ([e])	Supply	Health responses	Other datasets (*feel free to add columns)*
Reference year								
Periodicity of data collection (monthly, quarterly, annually, other)								
NFP collects data directly								
Full dataset (database)								
Datasets and analysis based on NFP needs								
Aggregated data with metadata information								
Study reports or other reports without datasets and no further analysis possible								

([a]) General population studies.

([b]) Problem drug use indicator.

([c]) Drug-related infectious diseases indicator.

([d]) Drug-related deaths indicator.

([e]) Treatment demand indicator.

3.1.14. In general, what proportion of your external data providers have standards in place for data collection and transmission?

Please check one response

☐ More than 75 %
☐ Between 25 % and 74 %
☐ Less than 25 %
☐ Don't know

Please comment:

……

3.1.15. Do you have procedures in place to ensure that the standard protocols and definitions are applied by data providers?

Please check one response

- ☐ Yes, for more than 75 % of data providers
- ☐ Yes, for between 25 % and 74 % of data providers
- ☐ Yes, for less than 25 % of data providers
- ☐ No
- ☐ Don't know

Please comment:

……

3.1.16. Does the NFP have a reliable back-up of the datasets in place (with the support of an IT unit or (sub)contractor)?

Please check one response

- ☐ Yes
- ☐ No
- ☐ Don't know

If no, please explain how and where the data are stored (personal computer, cloud, etc.):

……

3.1.17. Do you share with data providers the EMCDDA's annual quality report or feedback received from the EMCDDA on data?

Please check one response

- ☐ No, it is not in the mandate of our institution
- ☐ Yes, informally
- ☐ Yes, written feedback is sent
- ☐ Yes, written feedback is sent with further suggestions for improvement
- ☐ Other, please describe:

……

3.1.18. Do you share with data providers the summary of the EMCDDA's assessment of the implementation of the five key indicators?

Please check one response

- ☐ No, it is not in the mandate of our institution
- ☐ Yes, informally
- ☐ Yes, written feedback is sent
- ☐ Yes, written feedback is sent with further suggestions for improvement
- ☐ Other, please describe:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following questions.

3.1.19. How would you assess the quality (e.g. with regard to timeliness, missing values, non-responses, etc.) of the data that your data providers supply compared with what you require from them?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

3.1.20. How would you assess the data exchange processes that your data providers follow compared with what you require from them?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

Comments:

……..

Recommendations for further action:

……

3.2 Analysis and interpretation

It is expected that the NFP:

- plays a key role in the interpretation of the drug situation in the country;
- applies peer-review processes and other quality assurance mechanisms to data input and/or output;
- has its main information outputs endorsed by national stakeholders.

3.2.1. In the most recent reporting cycle, what was the proportion of standard tables with new data?

Please check one response

- ☐ None
- ☐ Less than 25 %
- ☐ Between 26 % and 75 %
- ☐ More than 75 %

3.2.2. Was the last available assessment of the implementation of the five key indicators discussed at national level? Were the recommendations addressed? Please explain which recommendations were addressed:

……

3.2.3. How much of the analysis and/or interpretation of the data is done by the staff of the focal point?

Please check one response

☐ None
☐ Less than 25 %
☐ Between 26 % and 75 %
☐ More than 75 %

3.2.4. How much of the statistical analysis and interpretation of the data is done by external experts at the request of the NFP?

Please check one response

☐ None
☐ Less than 25%
☐ Between 26 to 75%
☐ More than 75%

3.2.5. What kind of statistical software does NFP staff use to analyse quantitative statistical data?

☐ None
☐ Excel
☐ SPSS
☐ STATA
☐ SAS
☐ R
☐ Other, please describe:

……

3.2.6. Is the statistical software available to support research and scientific analysis by the NFP staff sufficient?

Please check one response

☐ No
☐ Partly
☐ Yes
☐ Other, please describe:

……

3.2.7. What mechanisms are in place to ensure the quality and consistency of external experts' ([8]) contributions with regard to main data or contextual data?

Please describe:

……

3.2.8. Does the NFP have a scientific board (or similar scientific body, such as a scientific advisor or a scientific committee) that oversees and provides input to the NFP's scientific outputs/products?

Please check one response

☐ Yes
☐ No
☐ Other, please describe:

……

([8]) In the context of this questionnaire, 'an external expert' means a person or group of persons contributing to the analysis and interpretation of data, not solely to the provision of datasets.

3.2.9. Are the NFP's major scientific outputs/products, not only those that it provides to the EMCDDA, subject to peer review?

Please check one response

- ☐ Always
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

3.2.10. Are main outputs (annual reports, major surveys, etc.) officially endorsed by a national public or governmental body?

Please check one response

- ☐ No
- ☐ Sometimes
- ☐ Yes

Please explain:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

3.2.11. How would you rate the scientific value of your main outputs?

- ☐ 1. Very poor
- ☐ 2. Poor
- ☐ 3. Sufficient
- ☐ 4. Good
- ☐ 5. Very good

Comments:

……

Recommendations for further action:

……

3.3 Reporting and dissemination

It is expected that the NFP:

- assesses the information needs of its national stakeholders;
- executes a dissemination/communication strategy or carries out other activities to present its information to professionals and/or the general public;
- provides information outputs and services to a wide range of audiences (policymakers, professionals and the public);
- ensures that its products are readily available to its audiences via modern communication tools (the internet and other electronic media).

3.3.1. Do you have a strategy for communicating with the external audiences of the NFP?

Please check the response that best describes your situation

☐ No, and not aware that the hosting institution has a communication strategy
☐ No, but the hosting institution has a communication strategy
☐ Yes, but it is not implemented
☐ Yes, but it has not been revised within the past 5 years
☐ Yes, and it is implemented and has been revised in the past 5 years

3.3.2. How does the NFP know who the audiences for/users of its outputs are?

Multiple choice

☐ The NFP does not have data on this
☐ We assume based on the information we can obtain and contact with external audiences
☐ The main audiences of the NFP are determined by its mandate
☐ The outputs are distributed using a mailing list
☐ We carry out mapping exercises to identify our audiences
☐ Other, please describe:

……

3.3.3. Do you have a comprehensive national output on drugs that is presented on a yearly basis to your national stakeholders?

Please check one response

☐ Yes
☐ No
☐ Other, please describe:

……

3.3.4. Do you have different types of outputs to meet the needs of different audiences?

Please check one response

☐ Yes
☐ No
☐ Not sure

If yes, please comment:

……

3.3.5. How does the NFP request feedback from its main audiences/users on the outputs it produces?

Please check all that apply

☐ Client satisfaction survey
☐ Internal evaluation (informal)
☐ External evaluation
☐ No
☐ Other, please describe:

……

3.3.6. Does the NFP have a specific website where publications and other outputs are available?

Please check one response

☐ No
☐ Yes, integrated into the hosting institution's website, but with limited information and not up to date
☐ Yes, integrated into the hosting institution's website, up to date but with limited information
☐ Yes, maintained by the NFP but not up to date
☐ Yes, maintained by the NFP and up to date

3.3.7. What types of public events ([9]) has the NFP organised in the past 12 months?

Please check all that apply

☐ Press conference
☐ Launch of the *European Drug Report* to the media
☐ Launch of a national report or a country drug report
☐ International/national/regional conference on a drug-related topic
☐ Training session/seminar/workshop for data providers
☐ Training session/seminar/workshop for other professionals
☐ Other, please describe:

……

Taking into account all your answers in this section and the standards listed at the start of the section, please check one box only in answer to the following question.

3.3.8. How would you assess your understanding of key audiences' needs and satisfaction with regard to the outputs produced by the NFP?

☐ 1. Very poor
☐ 2. Poor
☐ 3. Sufficient
☐ 4. Good
☐ 5. Very good

Comments:

……

Recommendations for further action:

……

([9]) In the context of this questionnaire, 'public events' are events that the NFP has organised for its external audiences (which may include experts, data providers and others).

Annex 1. Action plan

Area *(you may add references to specific questions if useful)*	**Situation summary**		**Recommendations**				
	Principal strengths	Principal weaknesses	Action	Ownership	Timeline	Status	Priority
Official mandate							
Resources							
Core business: data collection							
Core business: analysis and interpretation							
Core business: reporting and dissemination							

Annex 2. Assessment diagram

The source data are the scores for assessment Questions 2.1.6, 2.2.11, 2.2.12, 3.1.5, 3.1.12, 3.1.19, 3.1.20, 3.2.11 and 3.3.8.