

Minutes  
of  
Policy and Advocacy Advisory Council Meeting: 4

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The PAAC meeting was held at the NCDCPH on September 7, 2016 at 13:00.

**Objectives:**

Review of draft harm reduction service package and its costing.

**Attendees:**

Tamar Gabunia - CCM Vice-Chair  
Irma Khonelidze – National Center for Disease Control and Public Health (NCDC), Deputy Director  
Irine Javakhadze - Ministry of Finance of Georgia, budget department, chief specialist  
Anna Dovbakh - Eurasean Harm Reduction Network (EHRN), acting executive director  
Paata Sabelashvili – Eurasean Harm Reduction Network (EHRN) consultant  
Medea Khmelidze – Georgia Harm Reduction Network (GHRN)  
Dali Usharidze – NGO New Way  
Ketevan Stvilia – NCDC, GF HIV Program Manager  
Alexander Asatiani – GFATM/NCDC  
Giorgi Soselia – GFATM/NCDC  
Nino Badridze – AIDS Center, Head of Epidemiological Department  
Ucha Nanava – National Center for TB and Lung Diseases  
Sopio Aspanidze - Tbilisi City Hall, head of healthcare programs  
Tea Jibuti – Curatio International Foundation (CIF), TB expert  
Natalia Gordeziani – CIF, Project Coordinator  
Ketevan Chkhatarashvili – CIF, President  
Giorgi Magradze – Georgia Health Promotion and Education Foundation  
David Kakhaberi – LGBT Georgia  
Lasha Tvaliashvili – RPRV  
Irakli Katsitadze – LFA  
Irina Grdzeldze – CCM, Executive Secretary  
Maka Danelia – PAAC, Policy and Advocacy Specialist

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The meeting was opened by CCM vice-chair Dr. Tamar Gabunia who welcomed the attendees, presented the meeting objectives and underlined the importance of harm reduction services.

Ms. Medea Khmelidze presented the draft package of harm reduction services. The presentation covered key results of service monitoring conducted by PUD community, services prioritized by NSP and OST service beneficiaries, basic Harm Reduction Services package to be transitioned from GF to domestic funding including NSP, OST and rehabilitation

programs, costing of these services as well as key steps and achievements of the regional program “Harm reduction works –fund it” and priorities for transition period.

The presentation was followed by discussion. Dr. Gabunia raised a question on major changes in the presented package as compared to the current package. Ms Khmelidze responded that the package was revised taking into consideration the beneficiaries expectations and attitudes, namely focus was made on social attendance and peer education, woman-friendly services, mobile ambulatories as well as and integration with Hepatitis C and TB programs. She also emphasized the importance of regional dialogue facilitating the state responsibilities to sustain services.

Dr. Irma Khonelidze argued that the presented package is not precise enough for costing and decision-making. For instance, women-friendly services may capture a wide area of activities. These activities should be specified and besides, supported by evidence. When such list of activities within the package is known, costing is not problematic. The idea was supported by Dr. Tamar Gabunia who pointed at the need to have detailed package and thus, opportunity to identify the main cost-drivers. Dr .Khoneidze – it is already known that 2/3 of the costs are related to human resources. Ms. Anna Dovbakh replied that optimization may be guided by the service standards describing the need of HR per site and number of clients. Dr. Dali Usharidze mentioned that such work on service standards is underway. Dr. Irakli Katsitadze asked if such standards will be developed in regards with consumables, for instance, number of syringes given to one person. Ms. Anna Dovbakh – WHO has certain recommendations on these issues and there is international experience. Although, different countries use different standards, there is opportunity to make calculations based on historical evidence.

Dr Ketevan Chkhatarashvili mentioned that details like service standard will not be included in the transition plan and may be added as annexes. However, before starting costing it is necessary to have agreed service package. Besides, if service cost in Georgia is higher compared to other countries in the region, analysis is warranted to identify optimization possibilities. Ms. Anna Dovbakh – substitution therapy is expensive, but if we look at approaches in different countries the trade-off between price and quality should be considered. Harm reduction services do not capture the same package throughout the region. Ms. Medea Khmelidze mentioned that the presented package of services has been agreed with the organizations currently providing the services and their beneficiaries.

Besides the national standard of harm reduction services it was suggested to develop Operational Manual for State NGO Contracting. As Dr. Khonelidze explained such contracting is subjected to the State Procurement Law and thus, no operational manual may amend its requirements. These requirements are strict, but they are strict for any organization irrespective of the ownership status. Currently NCDC contracts civil society organizations within the GF project and the process will not be different after transition to budget funding. The operational manual may be used for clarification of legal requirements to civil society organizations; however, there is no need for clarification for purchasing entities as the Law is quite explicit.

Ms. Dovbakh mentioned that EHRN is ready to provide technical assistance but will need close communication and commitment from NCDC as a counterpart.

As a summary Dr. Tamar Gabunia stressed that the process is important, the transition plan has to outline the major steps with associated costing. Harm reduction is a critical

component to be sustained. To describe the inputs, process and outputs of service the guideline should be developed with corresponding protocols to facilitate implementation. Technical assistance from EHRN and GNRN is more than desirable, PAAC as an advisory body is ready to ensure feedback and advocacy at CCM when well elaborated documents are presented.

**Decision points:**

EHRN will provide technical assistance to elaborate detailed and costed harm reduction service package.

National standard for Harm Reduction (HR) Services (NSP/OST) -reflecting optimized HR package will be developed with the support of national consultant who will be accountable to thematic working group representing NCDC, Tanadgoma, EHRN, GHRN, National Drug Policy Platform.

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