



**Quality Action**  
Improving HIV Prevention in Europe

## Quality Action CASE STUDY

### 1. Name and country of the organisation

*(Please state the name and the country of the organisation that implemented this practical application of a QA/QI tool as part of Quality Action. We do not publish this information unless you agree. You can remain anonymous by adjusting the settings at the end of this form).*

Social AIDS Committee, Poland

### 2. Authors of the case study and contact details

*(Please provide the name of the author(s) of this case study and any contact names, Email address or websites where readers can access more information about this practical application of a QA/QI tool).*

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### 3. External support (facilitators/partners/technical assistance)

*(Please list the names of other organisations and/or people who were involved in this practical application of a QA/QI tool, e.g. project partners, technical assistance, external stakeholders etc.).*

National Bureau for Drug Prevention, Poland  
Open Society Foundation, Global Drug Policy Program  
Harm Reduction Foundation  
Active IDUs, therapists and outreachworkers

### 4. Project/Programme and key population/target group addressed

*(Please describe the project/programme to which you applied the tool and the key population/target group addressed).*

We applied the tool during a focus group. The meeting of the focus group was part of an evaluation process of a research project for acknowledging barriers and factors related to HIV and HCV testing and service providing for IDUs. People who attended the focus group were therapists, outreach workers and HIV counsellors, some of them took part in the process of recruitment and interviewing of IDUs, some attended workshops on HIV/AIDS/HCV prevention for staff and clients of fixed site treatment centers. There were 12 focus group attendants, one facilitator and the meeting took two hours.

## 5. Goals/aims of applying the QA/QI tool

*(Please list the goals you wanted to achieve with the practical application of the tool).*

The application of the tool aimed for different goals:

- exchange of different perspectives and experiences of experts working directly with IDUs in the different fields (outreach workers, prevention providers, therapists, HIV testing counsellors)
- generate recommendations of best practices in HIV prevention aimed at prevention policy and planning agendas - active discussion
- planning further project activities related both to prevention and advocacy.

## 6. Tool and methodology used

*(Please indicate which of the five tools you used (Succeed, QIP, PQD, PIQA, Schiff) and briefly sketch out the steps and measures of how you applied it).*

PQD: Focus group

We gathered a group of 12 people involved in the project (at different stages). The group was introduced to the idea of the whole project, then the facilitator suggested three areas of discussion. Participants could actively comment on proposed ideas and discuss them from different perspectives. The facilitator wrote down on a flipchart and then summarized all of the proposed statements and conclusions. As a result of the meeting, recommendations have been developed. They relate to the transfer of the lessons learned from the pilot project (regional) to a national level and for policy makers.

## 7. Results and benefits of applying the QA/QI tool

*(Please describe what resulted from applying the tool and if and how your project/programme benefitted).*

The meeting, gathering people with different experiences and approaches (harm reduction, drug-free, counselling) enabled the development of recommendations from different perspectives and focused on various levels. Thanks to this, the meeting was lively and dynamic.

The focus group showed that the most efficient approach is a multidisciplinary one:

- outreach programs (testing service and doctors), testing outside fixed site treatment centers, services linked with testing and treatment of HCV;
- linkage of health programmes offering different services: social and economic support, leisure activities;
- education about patient rights for both users and doctors (especially psychiatrists and therapists);

The group also recommended showing the importance of testing while using different medical services. Addiction as an indication for HIV/HCV testing.

The focus group also demonstrated the importance of including IDUs in project planning, not only in the implementation.

The ideas were gathered.

## 8. Recommendations

*(Please describe the lessons learnt from positive and negative experiences during the process of using the tool itself and about the quality of projects/programmes like yours).*

The tool and the method of using it demonstrated the importance of involving people from different backgrounds and with different experiences in the process of creating, implementing and evaluating the project . Creating multidisciplinary teams.

Regarding negative experiences during the process of using the tool, the problem was at the recruitment level. Without incentives (vouchers), it would be nearly impossible to recruit a group of experts (main reason: lack of time). What is more, our group was led by one facilitator, we recommend organising the meeting with two experts (one as a facilitator, the second one being responsible for writing down the main ideas coming from the group).

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