

SUBSTANCE MISUSE IN WALES 2008-09

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Introduction

This report summarises Substance Misuse Statistics for Wales for 2008-09. It is structured as follows:

- Part 1 includes statistics from the Welsh National Database for Substance Misuse. The profile of referrals during 2008-09 to substance misuse treatment services is described as well as treatment service activity between 2006-07 and 2008-09. Results are presented in a series of tables and summarised on pages 4 and 5.
- Part 2 provides additional substance misuse related information currently available from routinely published sources in Wales to support and add to the information gained through the Welsh National Database for Substance Misuse. Evidence is drawn from a number of data sources including information from the hospital admission data (Patient Episode Database Wales (PEDW)), Office for National Statistics (ONS) information, Home Office and Education data. The information is summarized in a Summary on page 38.

Hard copies of this report, the database guidance and information about the Welsh Assembly Government's Substance Misuse policy and key performance indicators can be obtained from the Welsh Assembly Government's Strategy Implementation & Finance Team by e-mailing Mrs Angela Gutierrez at angela.gutierrez@wales.gsi.gov.uk

Part I. Welsh National Database for Substance Misuse 2008-09

1. Background

- 1.1. The overall management of the system, including advice on enhancements to the system, national performance issues linked to the data and the analysis of other routinely collected data is overseen by the national Management Information Board.
- 1.2. All substance misuse treatment service providers in Wales that are in receipt of Welsh Assembly Government funding via the Community Safety Partnerships are required to comply with the reporting requirements of the database. Comprehensive guidance "The Welsh National Database for Substance Misuse – Guidance for Community Safety Partnerships and Service Provider Agencies", which includes the common dataset and definitional guidance was first issued on 1 March 2006 and has been revised on 15 March 2007. This guidance is available electronically at <http://new.wales.gov.uk/substancemisuse>. A copy of the Common Dataset is at Annex 3.
- 1.3. Information from the database is the official source of validated data for treatment service providers and Community Safety Partnerships to monitor and report performance against the national Key Performance Indicators (KPIs) 2-6. These KPIs were launched in August 2006 for immediate implementation. The document "Tackling Substance Misuse in Wales – Performance Management Framework – Key Performance Indicators" can be accessed at <http://new.wales.gov.uk/substancemisuse>.

2. Executive Summary: Welsh National Database for Substance Misuse

2.1 General

- 58 per cent (16,173) of referrals related to alcohol misuse (Table 1).
- 38 per cent (10,437) related to misuse of drugs (Table 1).
- Self referrals were the most common source of referrals both for alcohol (31 per cent) and for drugs (24 per cent) (Table 3a and 3b).
- Heroin accounted for just over half (51 per cent) of all referrals for which drugs were specified as the main substance (Table 4).
- Cannabis (17 per cent) and amphetamines (7 per cent) were the next most common drugs reported (Table 4).

2.2 Demographics

- Males accounted for over two thirds of all referrals for both alcohol (67 per cent) and drugs (70 per cent) (Table 1).
- The median age on referral for alcohol (39) was substantially higher than that for drugs (29) (Table 2).
- 53 per cent of referrals for drug use were aged under 30 (Table 2).
- There were significant differences in the age profiles of the users of different drugs with the median age of clients ranging from 20 for cannabis to 25 for cocaine and 30 for heroin (Table 5).

2.3 Previous history of treatment

- The 27,662 referrals in 2008-09 equate to 14,383 individuals (Table 6).
- Of these individuals 9,318 (63 per cent) were new to the database (Table 6).
- The percentage of individuals who were new to the database was higher for alcohol (69 per cent) than for drugs (60 per cent).

2.4 Geographical distribution of incidence

Estimated incidence rates per 100,000 population varied markedly across Wales: for alcohol the range was from 175 (Monmouthshire) to 464 (Merthyr) and for drugs it was from 91 (Gwynedd) to 306 (Merthyr) (Table 11 and Chart 3).

2.5 Comparison with earlier years

The database is dynamic allowing treatment providers to amend records as and when new data becomes available and as data quality issues are resolved. This means that the figures in this report are not strictly comparable with those contained in earlier reports. It is possible, however, to use the data file frozen in June 2009 to compare 2008-09 figures with the amended figures for 2006-07 and 2007-08. Interesting trends are shown in Table A below:

Table A: Comparison of key data 2006-07 to 2008-09

	<u>2006-07</u>	<u>2007-08</u>	<u>2008-09</u>
Referrals	30,946	31,023	27,662
Individuals	13,929	14,259	14,383
New cases	11,001	9,818	9,318
% new cases	79.0	68.9	64.8
Incidence per 100,000:			
Alcohol	284	288	294
Drugs	183	191	189

Although the number of referrals notified to the database fell by over 10 per cent in 2008-09, the number of individuals remained effectively constant. The percentage of these individuals who were new to the database fell steeply from year to year, as would be expected from a database only set up in 2005. More comparisons of activity over these three years are shown in Tables 12 to 16. Note that late submissions from the agencies may have a considerable effect on the figures for 2008-09 and there may be subsequent revisions.

2.6 Waiting times

Table 17 shows for 2006-07, 2007-08 and 2008-09 separately the times between referral and assessment for all cases assessed in those years, for which referral and assessment dates are available. The percentages being assessed within 10 days of referral in 2008-09 were 57 per cent for alcohol and 56 per cent for drugs. There have been no significant changes in these percentages over the period. Table 18 shows the times between assessment and treatment commencing, again where both dates are recorded. The percentages with treatment starting within 10 days of assessment in 2008-09 were 90 per cent for alcohol and 88 per cent for drugs – both slightly down on previous years.

Tables 19 and 20 show the length of time which open cases appeared to have been waiting for assessment or treatment at 31 March 2009 and at the comparable dates in 2008 and 2007. The steady increase in numbers reflects deficiencies in the data recording at some agencies which do not submit closure details for all closed cases (see Annex 2).

3. Data quality

All Service Providers in receipt of Welsh Assembly Government funding, either directly or via the Community Safety Partnerships, to deliver substance misuse services are required to comply fully with the reporting requirements of the database.

The Welsh Assembly Government's Substance Misuse Advisory Regional Teams (SMARTs) have been working with treatment services to improve data quality. However, care needs to be exercised when looking at trends as a number of agencies have not submitted all of the relevant fields by the freeze date of 26 June 2009. For the purpose of this report, the data quality issues that affect this report are:

- Some of the demographic data may be inaccurate since some clients are reluctant or unable to provide accurate responses to some questions. However, this will always be the case with a system that relies largely upon self-reporting.

- There is under-reporting of secondary problem substance which inhibits the identification of emerging trends and patterns in substance misuse.
- Some agencies are failing to close cases where a client is transferred between agencies. This means that individuals could be counted more than once on the database.

4. Results

4.1 Structure

The profile of referrals in the current year is presented in the first group of results tables: Tables 1 to 11 of the report analyse the 27,662 referrals to substance misuse treatment providers in Wales during 2008-09 which have been assessed and/or treated or which remain open. They exclude referrals which were closed for non-attendance before assessment or treatment. There were 6,392 such cases (see Chart A1 in Annex 2).

In order to look at trends in activity the remainder of the results tables present activity data for the last three years. Tables 12 to 16 compare the numbers of assessments, treatments started and cases closed over the 3 year period 2006 to 2009. These tables categorise activity by the year in which it took place and not by the year in which the original referral was made.

Tables 17 to 20 relate to waiting times over the same 3 year period.

4.2 Tables

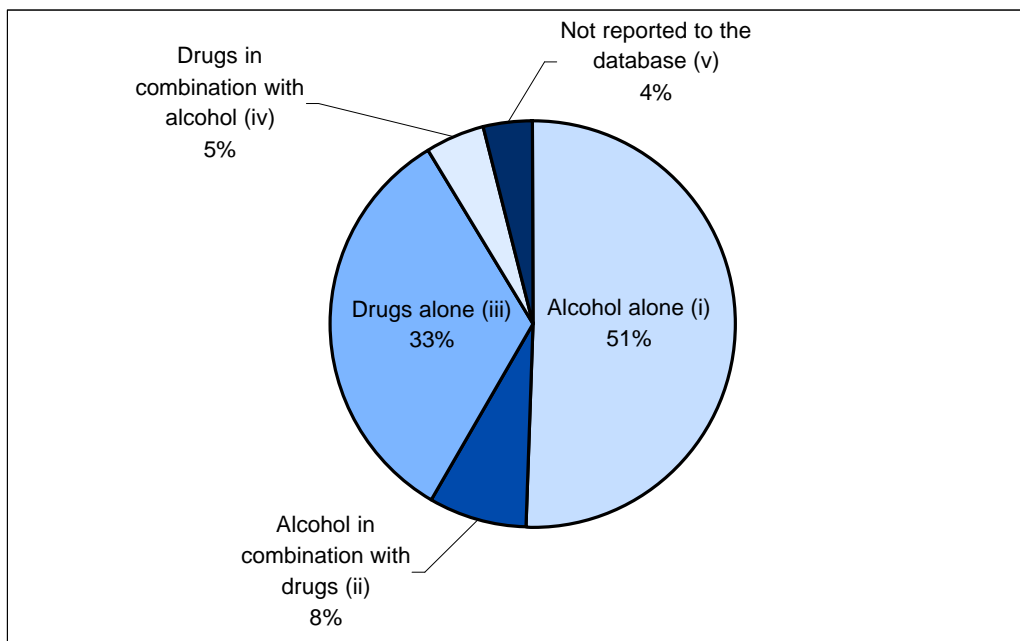
Table 1: Referrals in 2008-09 by main substance

Main Substance	Male		Female		Total	
	Number	Per cent (a)	Number	Per cent (a)	Number	Per cent (b)
Alcohol alone (i)	9,253	66.1%	4,749	33.9%	14,002	50.6%
Alcohol in combination with drugs (ii)	1,563	72.0%	608	28.0%	2,171	7.8%
Drugs alone (iii)	6,374	69.9%	2,741	30.1%	9,115	33.0%
Drugs in combination with alcohol (iv)	977	73.9%	345	26.1%	1,322	4.8%
Not reported to the database (v)	738	70.2%	314	29.8%	1,052	3.8%
All Referrals	18,905	68.3%	8,757	31.7%	27,662	100.0%

Source: WNDSM, Health Solutions Wales

(a) Male and female referrals as a percentage of all referrals for which the gender is reported.
 (b) Percentage of all referrals.

Chart 1: Referrals in 2008-09 by main substance



The main substance categories in Table 1 and Chart 1 are:

- (i) Alcohol recorded as the main substance with no other substance reported.
- (ii) Alcohol recorded as the main substance but with misuse of drugs also being reported.
- (iii) Drugs recorded as the main substance with no alcohol reported.
- (iv) Drugs recorded as the main substance but with alcohol also being reported.
- (v) No main substance reported to the database; note that this does not imply that no substance was reported by individuals to treatment services.

Table 2a: Main substance alcohol (a) - distribution of referrals in 2008-09 by age

Age on Referral	Male	Female	Total	
			Number	Rate (b)
Under 15	116	130	246	47.6
15 – 19	748	437	1,185	581.0
20 – 29	2,246	875	3,121	839.9
30 – 39	2,891	1,277	4,168	1,150.7
40 – 49	2,765	1,517	4,282	1,020.0
50 – 59	1,446	728	2,174	562.1
60+	574	367	941	130.8
All ages (c)	10,816	5,357	16,173	542.7
<i>Median (d)</i>	39	40	39	.
<i>Percentage aged under 30</i>	28.8%	26.9%	28.1%	.
<i>Percentage aged 50 or over</i>	18.7%	20.4%	19.3%	.

Source: WNDSM, Health Solutions Wales

(a) Alcohol alone and alcohol in combination with other drugs

(b) Rate per 100,000 population

(c) Includes 56 referrals where age is unreported

(d) Equal number of referrals above and below the median age

. Data item not applicable

Table 2b: Main substance drugs (a) - distribution of referrals in 2008-09 by age

Age on Referral	Male	Female	Total	
			Number	Rate (b)
Under 15	159	58	217	42.0
15 – 19	907	401	1,308	641.3
20 – 29	2,668	1,337	4,005	1,077.8
30 – 39	2,543	856	3,399	938.4
40 – 49	867	336	1,203	286.6
50 – 59	148	56	204	52.7
60+	47	36	83	11.5
All ages (c)	7,351	3,086	10,437	350.2
<i>Median (d)</i>	29	27	29	.
<i>Percentage aged under 30</i>	50.8%	58.2%	53.0%	.
<i>Percentage aged 50 or over</i>	2.7%	3.0%	2.7%	.

Source: WNDSM, Health Solutions Wales

(a) Drugs alone and drugs in combination with alcohol

(b) Rate per 100,000 population

(c) Includes 18 referrals where age is unreported

(d) Equal number of referrals above and below the median age

. Data item not applicable

Table 3a: Main substance alcohol (a) - distribution of referrals in 2008-09 by source of referrals

Source of Referral (b)	Male	Female	Total	
			Number	Per cent (c)
Self	3,296	1,642	4,938	30.5%
Family/Friends	266	155	421	2.6%
Non-Statutory Service Provider	1,084	551	1,635	10.1%
Statutory Service Provider	458	184	642	4.0%
GP	1,345	721	2,066	12.8%
CPN/Community Mental Health	243	146	389	2.4%
Psychiatry	150	73	223	1.4%
Midwife	.	3	3	0.0%
NHS A&E	75	39	114	0.7%
NHS Other	748	382	1,130	7.0%
Needle Exchange	0	0	0	0.0%
Court	172	97	269	1.7%
Drug Intervention Programme (DIP)	189	44	233	1.4%
Drug Rehabilitation Requirement (DRR)	22	4	26	0.2%
Police	241	117	358	2.2%
Prison	48	15	63	0.4%
Probation Service	1,097	237	1,334	8.2%
Youth Offending Team (YOT)	347	137	484	3.0%
Solicitor	9	2	11	0.1%
Social Services	247	307	554	3.4%
Educational Establishment	31	65	96	0.6%
Job Centre	49	15	64	0.4%
Community Care Assessment	4	1	5	0.0%
Support Agencies (d)	403	247	650	4.0%
Other	292	173	465	2.9%
All Sources	10,816	5,357	16,173	100.0%

Source: WNDSM, Health Solutions Wales

(a) Alcohol alone and alcohol in combination with other drugs

(b) As specified in the guidance for Community Safety Partnerships and Service Provider Agencies – March 2007

(c) Percentage of all referrals

(d) Including Women's Refuge; Hostel; Night Shelter; etc.

. Data item not applicable

Table 3b: Main substance drugs (a) - distribution of referrals in 2008-09 by source of referrals

Source of Referral (b)	Male	Female	Total	
			Number	Per cent (c)
Self	1,777	759	2,536	24.3%
Family/Friends	177	47	224	2.1%
Non-Statutory Service Provider	606	342	948	9.1%
Statutory Service Provider	441	232	673	6.4%
GP	880	371	1,251	12.0%
CPN/Community Mental Health	137	67	204	2.0%
Psychiatry	61	30	91	0.9%
Midwife	.	18	18	0.2%
NHS A&E	7	5	12	0.1%
NHS Other	222	145	367	3.5%
Needle Exchange	88	8	96	0.9%
Court	152	98	250	2.4%
Drug Intervention Programme (DIP)	479	165	644	6.2%
Drug Rehabilitation Requirement (DRR)	260	80	340	3.3%
Police	325	62	387	3.7%
Prison	208	67	275	2.6%
Probation Service	656	129	785	7.5%
Youth Offending Team (YOT)	260	50	310	3.0%
Solicitor	3	1	4	0.0%
Social Services	132	149	281	2.7%
Educational Establishment	102	48	150	1.4%
Job Centre	29	5	34	0.3%
Community Care Assessment	4	4	8	0.1%
Support Agencies (d)	131	106	237	2.3%
Other	214	95	309	3.0%
All Sources (e)	7,351	3,086	10,437	100.0%

Source: WNDSM, Health Solutions Wales

(a) Drugs alone and drugs in combination with alcohol

(b) As specified in the guidance for Community Safety Partnerships and Service Provider Agencies – March 2007

(c) Percentage of all referrals

(d) Including Women's Refuge; Hostel; Night Shelter; etc.

(e) Including 3 cases where source of referral was not specified.

. Data item not applicable

Table 4: Referrals in 2008-09 by individual main substance

Main substance	Male	Female	Total	
			Number	Per cent (a)
Alcohol	10,816	5,357	16,173	58.5%
Amphetamines	453	291	744	2.7%
Anti-depressants	5	5	10	0.0%
Barbiturates	1	0	1	0.0%
Benzodiazepines	197	103	300	1.1%
Cannabis	1,428	349	1,777	6.4%
Cocaine	478	103	581	2.1%
Crack Cocaine	99	43	142	0.5%
Ecstasy	25	8	33	0.1%
Hallucinogens	36	10	46	0.2%
Heroin	3,677	1,670	5,347	19.3%
Methadone	388	267	655	2.4%
Other opiates (b)	324	156	480	1.7%
Poly use; no details	63	26	89	0.3%
Solvents	36	27	63	0.2%
Steroids	87	0	87	0.3%
Other drugs (c)	54	28	82	0.3%
Not reported (d)	738	314	1,052	3.8%
All referrals	18,905	8,757	27,662	100.0%

Source: WNDSM, Health Solutions Wales

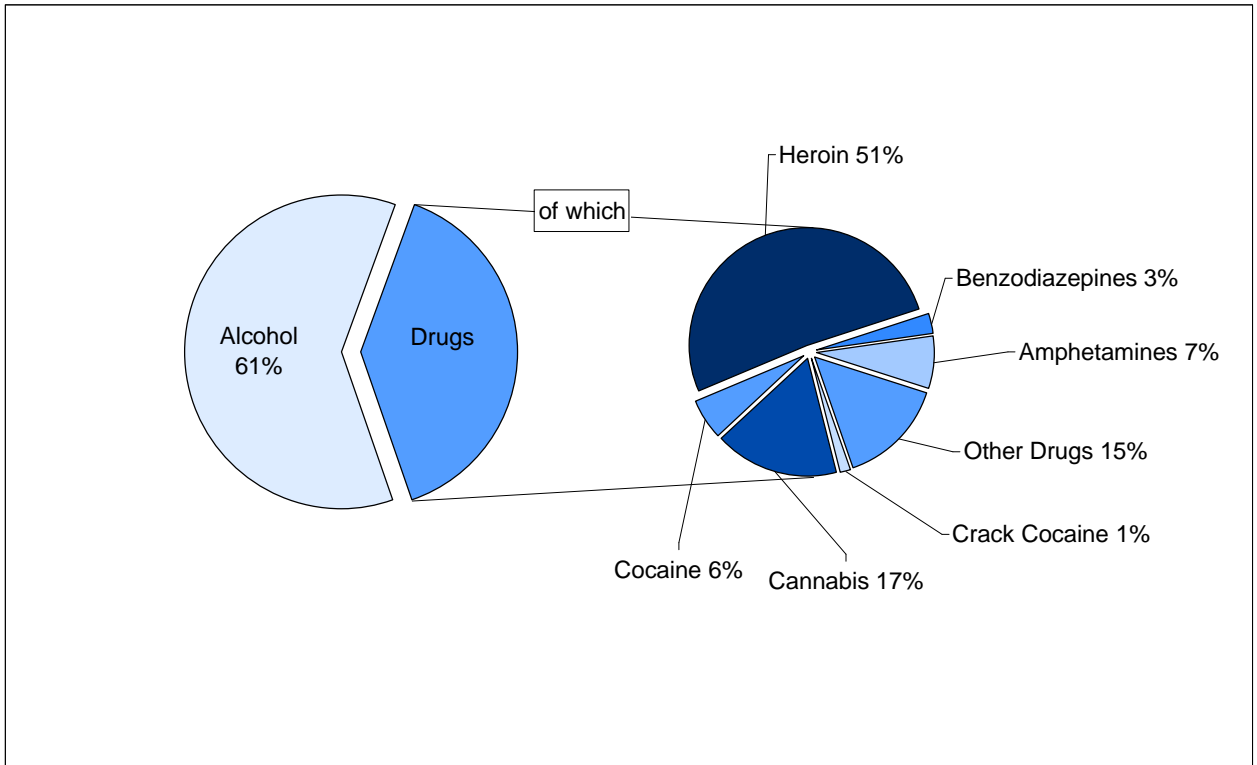
(a) Percentage of all referrals for which the main substance is reported.

(b) See Annex 2 for a list of drugs included under "Other opiates"

(c) See Annex 2 for a list of drugs included under "Other drugs"

(d) No main substance reported to the database; note that this does not imply that no substance was reported by individuals to treatment services.

Chart 2: Referrals in 2008-09 by individual substance



(a) Percentages are based on all referrals where the main substance is specified

Table 5a: Profile of referrals in 2008-09 with alcohol reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	116	130	246	47.6
15-19	748	437	1,185	581.0
20-29	2,246	875	3,121	839.9
30-39	2,891	1,277	4,168	1150.7
40-49	2,765	1,517	4,282	1020.0
50-59	1,446	728	2,174	562.1
60+	574	367	941	130.8
All ages (b)	10,816	5,357	16,173	542.7
Median age (c)	39	40	39	.
% under 30	28.8%	26.9%	28.1%	.
% 50 or over	18.7%	20.4%	19.3%	.
By Source of Referral				
Self	3,296	1,642	4,938	165.7
GP	1,345	721	2,066	69.3
Criminal Justice System (d)	2,116	651	2,767	92.9
Other	4,059	2,343	6,402	214.8

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 56 referrals where the age is unreported

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5b: Profile of referrals in 2008-09 with heroin reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	11	5	16	3.1
15-19	133	147	280	137.3
20-29	1,355	833	2,188	588.8
30-39	1,602	493	2,095	578.4
40-49	486	158	644	153.4
50-59	70	19	89	23.0
60+	17	14	31	4.3
All ages (b)	3,677	1,670	5,347	179.4
Median age (c)	31	28	30	.
% under 30	40.8%	59.0%	46.5%	.
% 50 or over	2.4%	2.0%	2.2%	.
By Source of Referral				
Self	1,019	427	1,446	48.5
GP	453	189	642	21.5
Criminal Justice System (d)	1,103	411	1,514	50.8
Other	1,102	643	1,745	58.6

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 4 referrals where the age is unreported.

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5c: Profile of referrals in 2008-09 with cannabis reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	122	34	156	30.2
15-19	530	107	637	312.3
20-29	431	128	559	150.4
30-39	219	48	267	73.7
40-49	88	17	105	25.0
50-59	28	7	35	9.1
60+	6	4	10	1.4
All ages (b)	1,428	349	1,777	59.6
Median age (c)	20	21	20	.
% under 30	75.8%	77.1%	76.1%	.
% 50 or over	2.4%	3.2%	2.5%	.
By Source of Referral				
Self	249	83	332	11.1
GP	121	22	143	4.8
Criminal Justice System (d)	583	64	647	21.7
Other	475	180	655	22.0

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 8 referrals where the age is unreported.

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5d: Profile of referrals in 2008-09 with amphetamines reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	6	2	8	1.5
15-19	33	46	79	38.7
20-29	142	90	232	62.4
30-39	165	91	256	70.7
40-49	88	53	141	33.6
50-59	17	4	21	5.4
60+	2	4	6	0.8
All ages (b)	453	291	744	25.0
Median age (c)	32	30	31	.
% under 30	40.0%	47.4%	42.9%	.
% 50 or over	4.2%	2.7%	3.6%	.
By Source of Referral				
Self	89	80	169	5.7
GP	56	33	89	3.0
Criminal Justice System (d)	168	40	208	7.0
Other	140	138	278	9.3

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 1 referral where the age is unreported.

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5e: Profile of referrals in 2008-09 with cocaine reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	0	2	2	0.4
15-19	77	18	95	46.6
20-29	261	49	310	83.4
30-39	95	24	119	32.9
40-49	39	6	45	10.7
50-59	1	4	5	1.3
60+	4	0	4	0.6
All ages (b)	478	103	581	19.5
Median age (c)	26	24	25	.
% under 30	70.7%	67.0%	70.1%	.
% 50 or over	1.0%	3.9%	1.5%	.
By Source of Referral				
Self	173	29	202	6.8
GP	60	13	73	2.4
Criminal Justice System (d)	126	21	147	4.9
Other	119	40	159	5.3

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 1 referral where the age is unreported.

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5f: Profile of referrals in 2008-09 with crack cocaine reported as the main substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	0	0	0	0.0
15-19	2	3	5	2.5
20-29	42	23	65	17.5
30-39	42	8	50	13.8
40-49	11	7	18	4.3
50-59	1	0	1	0.3
60+	1	2	3	0.4
All ages	99	43	142	4.8
Median age (b)	30	28	30	.
% under 30	44.4%	60.5%	49.3%	.
% 50 or over	2.0%	4.7%	2.8%	.
By Source of Referral				
Self	23	11	34	1.1
GP	12	3	15	0.5
Criminal Justice System (c)	46	14	60	2.0
Other	18	15	33	1.1

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Equal number of referrals above and below the median age.

(c) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 5g: Profile of referrals in 2008-09 with crack cocaine reported as the main or secondary substance

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	1	0	1	0.2
15-19	21	18	39	19.1
20-29	231	125	356	95.8
30-39	262	87	349	96.4
40-49	53	26	79	18.8
50-59	6	1	7	1.8
60+	1	2	3	0.4
All ages (b)	575	260	835	28.0
Median age (c)	31	28	30	.
% under 30	44.0%	55.0%	47.4%	.
% 50 or over	1.2%	1.2%	1.2%	.
By Source of Referral				
Self	157	71	228	7.7
GP	46	16	62	2.1
Criminal Justice System (d)	256	96	352	11.8
Other	116	77	193	6.5

Source: WNDSM, Health Solutions Wales

(a) Rate per 100,000 population.

(b) Includes 1 referral where the age is unreported.

(c) Equal number of referrals above and below the median age.

(d) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

. Data item not applicable

Table 6: Individuals with multiple referrals in 2008-09 by main substance, age, and source of referral

Profile	Previous history since the database was established on 1 April 2005				Number	Per cent	
	All Referrals (A)	No previous history (B)	With any earlier referral (C)	With an earlier referral during 2008-09 (D)	Individuals referred in 2008-09 (E) (a)	Individuals as percentage of all referrals (F) (b)	New cases as percentage of all individuals (G) (c)
Main Substance							
Alcohol	16,173	5,751	10,422	7,783	8,390	51.9%	68.5%
Drugs	10,437	3,215	7,222	5,065	5,372	51.5%	59.8%
Not reported (d)	1,052	352	700	431	621	59.0%	56.7%
All substances	27,662	9,318	18,344	13,279	14,383	52.0%	64.8%
Age							
Under 20	3,031	1,630	1,401	990	2,041	67.3%	79.9%
20-29	7,409	2,480	4,929	3,482	3,927	53.0%	63.2%
30-39	7,905	2,207	5,698	4,111	3,794	48.0%	58.2%
40-49	5,656	1,708	3,948	2,920	2,736	48.4%	62.4%
50+	3,493	1,208	2,285	1,733	1,760	50.4%	68.6%
All ages (e)	27,662	9,318	18,344	13,279	14,383	52.0%	64.8%
% under 30	37.7%	44.1%	34.5%	33.7%	41.5%	.	.
% 50 or over	12.6%	13.0%	12.5%	13.1%	12.2%	.	.
Source of Referral							
Self	7,584	2,953	4,631	3,152	4,432	58.4%	66.6%
GP	3,437	1,418	2,019	1,360	2,077	60.4%	68.3%
Criminal Justice System (f)	4,092	1,326	2,766	1,903	2,189	53.5%	60.6%
Other (g)	12,549	3,621	8,928	6,864	5,685	45.3%	63.7%
All Sources	27,662	9,318	18,344	13,279	14,383	52.0%	64.8%

Source: WNDSM, Health Solutions Wales

(a) $E = A - D$

(b) $F = E / A * 100$

(c) $G = B / E * 100$

(d) No main substance reported to the database; this does not imply that no substance was reported by individuals to treatment services.

(e) Including 168 referrals with unknown age.

(f) Comprising Court, DRR, DIP, Prison, Police, Probation, and YOT sources.

(g) Other includes unreported source of referral.

. Data item not applicable

Table 7: Referrals in 2008-09 by ethnic origin

Ethnic Origin	Male	Female	Total	
			Number	Per cent
British	13,131	6,117	19,248	69.6%
Irish	41	27	68	0.2%
Any other white background	157	60	217	0.8%
White and Black Caribbean	23	8	31	0.1%
White and Black African	7	4	11	0.0%
White and Asian	7	3	10	0.0%
Any other mixed background	40	15	55	0.2%
Indian	15	3	18	0.1%
Pakistani	23	3	26	0.1%
Bangladeshi	9	0	9	0.0%
Any other Asian background	29	4	33	0.1%
Caribbean	18	4	22	0.1%
African	32	5	37	0.1%
Any other black background	20	11	31	0.1%
Chinese	0	0	0	0.0%
Any other ethnic group	31	11	42	0.2%
Not Stated	5,322	2,482	7,804	28.2%
Total	18,905	8,757	27,662	100.0%

Source: WNDSM, Health Solutions Wales

Table 8: Referrals in 2008-09 by Community Safety Partnership

Community Safety Partnership	<i>Number</i>			Percentage of cases with no main problem reported	Ratio of alcohol to drug referrals
	Referrals with main problem alcohol	Referrals with main problem drugs	All Referrals (a)		
Anglesey	356	175	534	0.6%	2.03
Gwynedd	515	234	756	0.9%	2.20
Conwy	814	305	1,485	24.6%	2.67
Denbighshire	833	349	1,182	0.0%	2.39
Flintshire	666	287	953	0.0%	2.32
Wrexham	817	474	1,301	0.8%	1.72
<i>North Wales</i>	<i>4,001</i>	<i>1,824</i>	<i>6,211</i>	<i>6.2%</i>	<i>2.19</i>
Powys	405	240	645	0.0%	1.69
Ceredigion	371	215	603	2.8%	1.73
Pembrokeshire	634	263	910	1.4%	2.41
Carmarthenshire	765	579	1,466	8.3%	1.32
<i>Dyfed Powys</i>	<i>2,175</i>	<i>1,297</i>	<i>3,624</i>	<i>4.2%</i>	<i>1.68</i>
Swansea	1,573	1,789	3,395	1.0%	0.88
Neath Port Talbot	440	561	1,010	0.9%	0.78
Bridgend	729	394	1,131	0.7%	1.85
Vale of Glamorgan	611	281	942	5.3%	2.17
Cardiff	1,740	1,036	2,855	2.8%	1.68
Rhondda Cynon Taff	2,046	1,018	3,198	4.2%	2.01
Merthyr Tydfil	372	269	713	10.1%	1.38
<i>South Wales</i>	<i>7,511</i>	<i>5,348</i>	<i>13,244</i>	<i>2.9%</i>	<i>1.40</i>
Caerphilly	725	402	1,159	2.8%	1.80
Blaenau Gwent	360	241	625	3.8%	1.49
Torfaen	244	156	421	5.0%	1.56
Monmouthshire	186	216	411	2.2%	0.86
Newport	842	823	1,700	2.1%	1.02
<i>Gwent</i>	<i>2,357</i>	<i>1,838</i>	<i>4,316</i>	<i>2.8%</i>	<i>1.28</i>
Outside Wales	129	130	267	3.0%	0.99
Total	16,173	10,437	27,662	3.8%	1.55

(a) Including 1,052 referrals where the main substance is not reported to the database

Source: WNDSM, Health Solutions Wales

Table 9: Referrals in 2008-09 by Community Safety Partnership and Individual Drug

Community Safety Partnership	Main Substance									
	Heroin		Cannabis		Amphetamines		Cocaine		Crack Cocaine	
	Number	Per cent (a)	Number	Per cent (a)	Number	Per cent (a)	Number	Per cent (a)	Number	Per cent (a)
Anglesey	91	52.0%	42	24.0%	10	5.7%	14	8.0%	2	1.1%
Gwynedd	132	56.4%	37	15.8%	23	9.8%	18	7.7%	1	0.4%
Conwy	162	53.1%	34	11.1%	16	5.2%	20	6.6%	1	0.3%
Denbighshire	196	56.2%	55	15.8%	10	2.9%	30	8.6%	1	0.3%
Flintshire	149	51.9%	36	12.5%	20	7.0%	51	17.8%	1	0.3%
Wrexham	270	57.0%	41	8.6%	32	6.8%	55	11.6%	8	1.7%
<i>North Wales</i>	<i>1,000</i>	<i>54.8%</i>	<i>245</i>	<i>13.4%</i>	<i>111</i>	<i>6.1%</i>	<i>188</i>	<i>10.3%</i>	<i>14</i>	<i>0.8%</i>
Powys	76	31.7%	83	34.6%	29	12.1%	15	6.3%	2	0.8%
Ceredigion	63	29.3%	69	32.1%	9	4.2%	11	5.1%	1	0.5%
Pembrokeshire	38	14.4%	94	35.7%	33	12.5%	19	7.2%	3	1.1%
Carmarthenshire	187	32.3%	156	26.9%	22	3.8%	23	4.0%	0	0.0%
<i>Dyfed Powys</i>	<i>364</i>	<i>28.1%</i>	<i>402</i>	<i>31.0%</i>	<i>93</i>	<i>7.2%</i>	<i>68</i>	<i>5.2%</i>	<i>6</i>	<i>0.5%</i>
Swansea	1,230	68.8%	125	7.0%	79	4.4%	86	4.8%	10	0.6%
Neath Port Talbot	368	65.6%	54	9.6%	44	7.8%	12	2.1%	3	0.5%
Bridgend	199	50.5%	77	19.5%	42	10.7%	17	4.3%	1	0.3%
Vale of Glamorgan	102	36.3%	78	27.8%	34	12.1%	8	2.8%	0	0.0%
Cardiff	579	55.9%	158	15.3%	54	5.2%	49	4.7%	43	4.2%
Rhondda Cynon Taff	346	34.0%	198	19.4%	119	11.7%	50	4.9%	5	0.5%
Merthyr Tydfil	105	39.0%	62	23.0%	32	11.9%	11	4.1%	2	0.7%
<i>South Wales</i>	<i>2,929</i>	<i>54.8%</i>	<i>752</i>	<i>14.1%</i>	<i>404</i>	<i>7.6%</i>	<i>233</i>	<i>4.4%</i>	<i>64</i>	<i>1.2%</i>
Caerphilly	169	42.0%	99	24.6%	53	13.2%	24	6.0%	7	1.7%
Blaenau Gwent	112	46.5%	49	20.3%	27	11.2%	16	6.6%	0	0.0%
Torfaen	44	28.2%	60	38.5%	20	12.8%	8	5.1%	5	3.2%
Monmouthshire	92	42.6%	54	25.0%	12	5.6%	14	6.5%	4	1.9%
Newport	576	70.0%	107	13.0%	22	2.7%	24	2.9%	38	4.6%
<i>Gwent</i>	<i>993</i>	<i>54.0%</i>	<i>369</i>	<i>20.1%</i>	<i>134</i>	<i>7.3%</i>	<i>86</i>	<i>4.7%</i>	<i>54</i>	<i>2.9%</i>
Outside Wales	61	46.9%	9	6.9%	2	1.5%	6	4.6%	4	3.1%
Total	5,347	51.2%	1,777	17.0%	744	7.1%	581	5.6%	142	1.4%

Source: WNDISM, Health Solutions Wales

(a) Percentage of all drug referrals

Table 10: Individuals with multiple referrals in 2008-09 by Community Safety Partnership

Community Safety Partnership	Previous history since the database was established on 1 April 2005				Number	Per cent	
	All Referrals	No previous history	With any earlier referral	With an earlier referral during 2008-09	Individuals referred in 2008-09	Individuals as percentage of all referrals	New cases as percentage of all individuals
	(A)	(B)	(C)	(D)	(E) (a)	(F) (b)	(G) (c)
Anglesey	534	170	364	292	242	45.3%	70.2%
Gwynedd	756	259	497	392	364	48.1%	71.2%
Conwy	1,485	224	1,261	948	537	36.2%	41.7%
Denbighshire	1,182	260	922	770	412	34.9%	63.1%
Flintshire	953	305	648	453	500	52.5%	61.0%
Wrexham	1,301	345	956	726	575	44.2%	60.0%
<i>North Wales</i>	<i>6,211</i>	<i>1,563</i>	<i>4,648</i>	<i>3,581</i>	<i>2,630</i>	<i>42.3%</i>	<i>59.4%</i>
Powys	645	294	351	165	480	74.4%	61.3%
Ceredigion	603	222	381	248	355	58.9%	62.5%
Pembrokeshire	910	334	576	442	468	51.4%	71.4%
Carmarthenshire	1,466	549	917	634	832	56.8%	66.0%
<i>Dyfed Powys</i>	<i>3,624</i>	<i>1,399</i>	<i>2,225</i>	<i>1,489</i>	<i>2,135</i>	<i>58.9%</i>	<i>65.5%</i>
Swansea	3,395	752	2,643	2,004	1,391	41.0%	54.1%
Neath Port Talbot	1,010	337	673	472	538	53.3%	62.6%
Bridgend	1,131	388	743	536	595	52.6%	65.2%
Vale of Glamorgan	942	321	621	463	479	50.8%	67.0%
Cardiff	2,855	934	1,921	1,422	1,433	50.2%	65.2%
Rhondda Cynon Taff	3,198	1,073	2,125	1,625	1,573	49.2%	68.2%
Merthyr Tydfil	713	280	433	285	428	60.0%	65.4%
<i>South Wales</i>	<i>13,244</i>	<i>4,085</i>	<i>9,159</i>	<i>6,807</i>	<i>6,437</i>	<i>48.6%</i>	<i>63.5%</i>
Caerphilly	1,159	587	572	312	847	73.1%	69.3%
Blaenau Gwent	625	357	268	151	474	75.8%	75.3%
Torfaen	421	217	204	115	306	72.7%	70.9%
Monmouthshire	411	231	180	111	300	73.0%	77.0%
Newport	1,700	682	1,018	669	1,031	60.6%	66.1%
<i>Gwent</i>	<i>4,316</i>	<i>2,074</i>	<i>2,242</i>	<i>1,358</i>	<i>2,958</i>	<i>68.5%</i>	<i>70.1%</i>
Outside Wales	267	197	70	44	223	83.5%	88.3%
Total	27,662	9,318	18,344	13,279	14,383	52.0%	64.8%

Source: WNDSM, Health Solutions Wales

- (a) E = A - D
- (b) F = E / A *100
- (c) G = B / E *100

Table 11a: Main Substance alcohol: estimated incidence (a) rates per 100,000 population (b)

Area	Number of individuals referred			Estimated incidence rate (f)	Possible Range (g)
	Minimum (c)	Preferred Option (d)	Maximum (e)		
Anglesey	168	169	169	244	243-245
Gwynedd	254	256	258	217	215-218
Conwy	234	352	430	315	209-385
Denbighshire	270	270	270	278	278-278
Flintshire	317	317	317	211	211-211
Wrexham	334	339	342	257	253-259
<i>North Wales</i>	<i>1,577</i>	<i>1,702</i>	<i>1,786</i>	<i>251</i>	<i>232-263</i>
Powys	321	321	321	243	243-243
Ceredigion	229	234	238	301	294-306
Pembrokeshire	294	298	300	252	249-254
Carmarthenshire	422	475	510	264	235-284
<i>Dyfed Powys</i>	<i>1,266</i>	<i>1,328</i>	<i>1,369</i>	<i>262</i>	<i>250-270</i>
Swansea	777	787	793	345	341-348
Neath Port Talbot	272	273	274	199	198-199
Bridgend	382	386	389	288	285-290
Vale of Glamorgan	299	313	323	253	241-260
Cardiff	789	813	829	253	246-258
Rhondda Cynon Taff	906	962	1,000	412	388-428
Merthyr Tydfil	246	258	266	464	442-478
<i>South Wales</i>	<i>3,671</i>	<i>3,793</i>	<i>3,874</i>	<i>307</i>	<i>298-314</i>
Caerphilly	542	557	567	324	315-330
Blaenau Gwent	303	315	323	455	438-467
Torfaen	184	195	202	214	202-222
Monmouthshire	150	154	157	175	170-178
Newport	582	603	617	430	415-440
<i>Gwent</i>	<i>1,761</i>	<i>1,824</i>	<i>1,866</i>	<i>325</i>	<i>314-333</i>
Outside Wales	113	117	119	.	.
Total	8,388	8,764	9,014	294	281-302

Source: WNDSM, Health Solutions Wales

(a) Number of individuals referred in the year per 100,000 population; See Annex 1 for methodology.

(b) ONS 2007 mid year population estimates.

(c) Assuming that referrals with no main substance reported are all "drug" referrals.

(d) Assuming a 60/40 split in the no main substance reported between alcohol and drugs (preferred option).

(e) Assuming that referrals with no main substance reported are all "alcohol" referrals.

(f) Based on the preferred option of allocating referrals with no main problem substance.

(g) Range from minimum where none of the "not reported" referrals are counted as alcohol to maximum where all of them are counted.

If there are no "not reporteds" then there is no difference between the minimum and the maximum e.g. in Powys.

. Data not applicable

Table 11b: Main Substance drugs: estimated incidence (a) rates per 100,000 population (b)

Area	Number of individuals referred			Estimated incidence rate (f)	Possible Range (g)
	Minimum (c)	Preferred Option (d)	Maximum (e)		
Anglesey	73	73	74	106	106-107
Gwynedd	106	108	110	91	90-93
Conwy	107	185	303	166	96-271
Denbighshire	142	142	142	146	146-146
Flintshire	183	183	183	122	122-122
Wrexham	233	236	241	179	177-183
<i>North Wales</i>	<i>844</i>	<i>928</i>	<i>1,053</i>	<i>137</i>	<i>124-155</i>
Powys	159	159	159	120	120-120
Ceredigion	117	121	126	155	150-162
Pembrokeshire	168	170	174	145	142-148
Carmarthenshire	322	357	410	199	179-228
<i>Dyfed Powys</i>	<i>766</i>	<i>807</i>	<i>869</i>	<i>159</i>	<i>151-171</i>
Swansea	598	604	614	265	262-269
Neath Port Talbot	264	265	266	193	192-194
Bridgend	206	209	213	156	154-159
Vale of Glamorgan	156	166	180	134	126-145
Cardiff	604	620	644	193	188-201
Rhondda Cynon Taff	573	611	667	261	245-285
Merthyr Tydfil	162	170	182	306	291-327
<i>South Wales</i>	<i>2,563</i>	<i>2,644</i>	<i>2,766</i>	<i>214</i>	<i>208-224</i>
Caerphilly	280	290	305	169	163-178
Blaenau Gwent	151	159	171	230	218-247
Torfaen	104	111	122	122	114-134
Monmouthshire	143	146	150	165	162-170
Newport	414	428	449	305	295-320
<i>Gwent</i>	<i>1,092</i>	<i>1,134</i>	<i>1,197</i>	<i>202</i>	<i>195-214</i>
Outside Wales	104	106	110	.	.
Total	5,369	5,619	5,995	189	180-201

Source: WNDSM, Health Solutions Wales

(a) Number of individuals referred in the year per 100,000 population; See Annex 1 for methodology.

(b) ONS 2007 mid year population estimates.

(c) Assuming that referrals with no main substance reported are all "alcohol" referrals.

(d) Assuming a 60/40 split in the no main substance reported between alcohol and drugs (preferred option).

(e) Assuming that referrals with no main substance reported are all "drug" referrals.

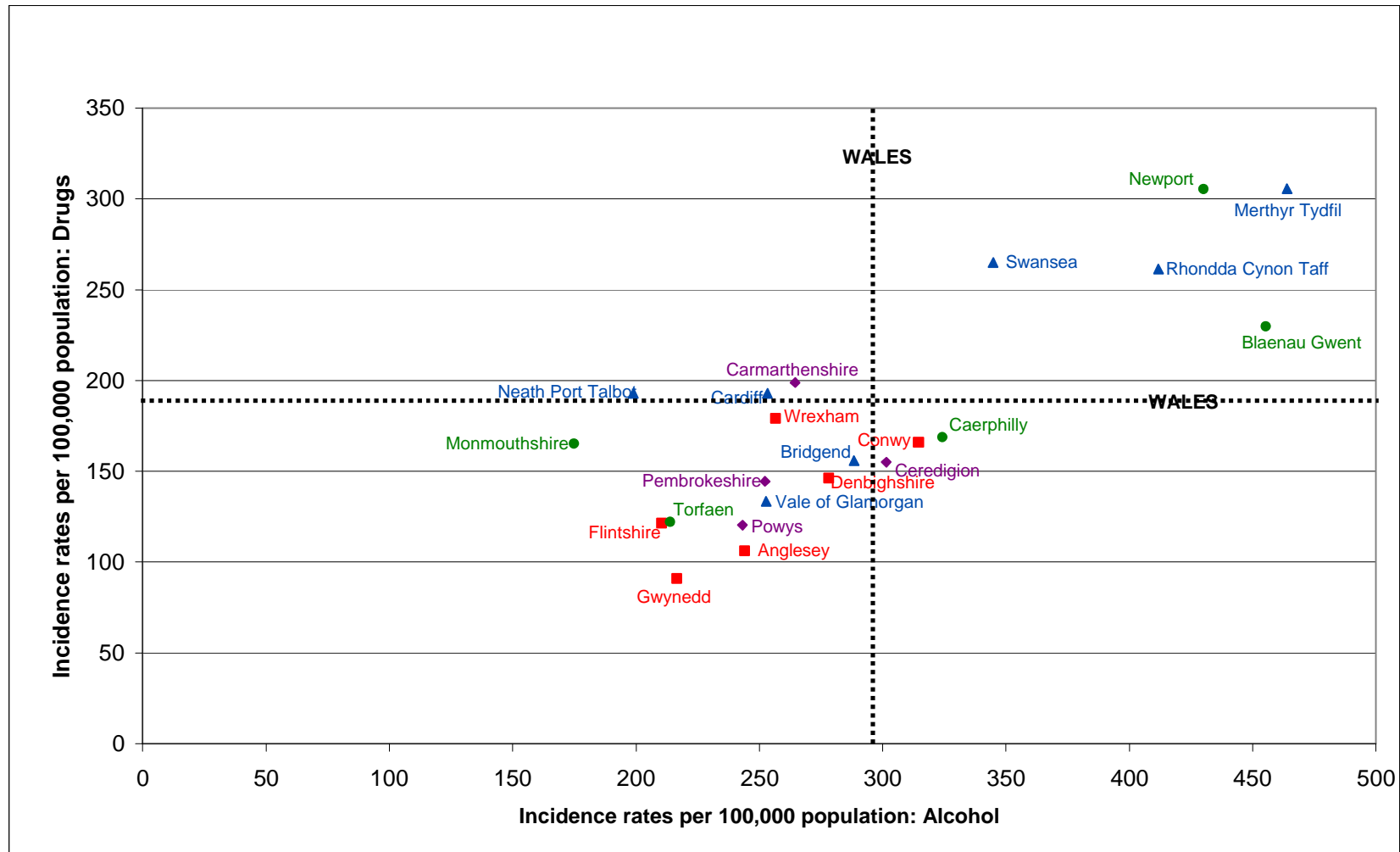
(f) Based on the preferred option of allocating referrals with no main problem substance.

(g) Range from minimum where none of the "not reported" referrals are counted as drugs to maximum where all of them are counted.

If there are no "not reported" then there is no difference between the minimum and the maximum e.g. in Powys.

. Data not applicable

Chart 3: Estimated incidence rates by Community Safety Partnership



Areas are coded according to region:

North Wales (square), Dyfed Powys (diamond), South Wales (triangle), Gwent (circle)

The dotted line labelled "WALES" represents the incidence per 100,000 population for Wales as a whole for drugs (189) and alcohol (294).

Table 12: Assessments carried out: 2006-07, 2007-08, 2008-09

Main substance on referral (a)	Year of assessment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	10,445	59.7%	11,860	59.8%	13,025	59.5%
Heroin	3,798	21.7%	4,272	21.6%	4,519	20.6%
Cannabis	1,062	6.1%	1,111	5.6%	1,249	5.7%
Amphetamines	561	3.2%	643	3.2%	589	2.7%
Cocaine	211	1.2%	263	1.3%	448	2.0%
Crack Cocaine	97	0.6%	104	0.5%	104	0.5%
Other Drugs	1,157	6.6%	1,150	5.8%	1,396	6.4%
Not reported (b)	175	1.0%	416	2.1%	576	2.6%
Total	17,506	100.0%	19,819	100.0%	21,906	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005

(b) No main substance reported to the database; this does not imply that no substance was reported by individuals to treatment services.

Table 13: Treatments commenced: 2006-07, 2007-08, 2008-09

Main substance on referral (a)	Year of treatment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	12,560	57.2%	13,930	58.3%	13,062	60.1%
Heroin	4,628	21.1%	4,977	20.8%	4,315	19.9%
Cannabis	1,334	6.1%	1,346	5.6%	1,282	5.9%
Amphetamines	722	3.3%	826	3.5%	585	2.7%
Cocaine	298	1.4%	418	1.7%	457	2.1%
Crack Cocaine	124	0.6%	108	0.5%	110	0.5%
Other Drugs	1,358	6.2%	1,328	5.6%	1,341	6.2%
Not reported (b)	937	4.3%	966	4.0%	576	2.7%
Total	21,961	100.0%	23,899	100.0%	21,728	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005

(b) No main substance reported to the database; this does not imply that no substance was reported by individuals to treatment services.

Table 14: Case closures: 2006-07, 2007-08, 2008-09

Main substance on referral (a)	Year of closure					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	11,608	54.9%	14,482	58.3%	14,930	60.0%
Heroin	3,758	17.8%	5,128	20.6%	5,002	20.1%
Cannabis	1,216	5.8%	1,448	5.8%	1,487	6.0%
Amphetamines	671	3.2%	854	3.4%	716	2.9%
Cocaine	274	1.3%	489	2.0%	526	2.1%
Crack Cocaine	118	0.6%	119	0.5%	135	0.5%
Other Drugs	1,049	5.0%	1,393	5.6%	1,514	6.1%
Not reported (b)	2,445	11.6%	928	3.7%	594	2.4%
Total	21,139	100.0%	24,841	100.0%	24,904	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005

(b) No main substance reported to the database; this does not imply that no substance was reported by individuals to treatment services.

Table 15a: Main substance "alcohol" - reason for closure: 2006-07, 2007-08, 2008-09

Closure reason (a)	Year of closure					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Planned						
Treatment complete	4,119	35.5%	5,309	36.7%	5,595	37.5%
Referral to other service	611	5.3%	793	5.5%	1,212	8.1%
Unplanned						
Treatment withdrawn	134	1.2%	197	1.4%	270	1.8%
Moved	311	2.7%	352	2.4%	357	2.4%
Prison	123	1.1%	194	1.3%	256	1.7%
Deceased	80	0.7%	136	0.9%	143	1.0%
Inappropriate Referral	291	2.5%	501	3.5%	555	3.7%
DNA						
Did not attend or respond to follow up contact	5,600	48.2%	6,530	45.1%	6,021	40.3%
No information supplied	339	2.9%	470	3.2%	521	3.5%
Total	11,608	100.0%	14,482	100.0%	14,930	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005.

Table 15b: Main substance "drugs" - reason for closure: 2006-07, 2007-08, 2008-09

Closure reason (a)	Year of closure					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Planned						
Treatment complete	1,719	24.3%	2,873	30.5%	2,644	28.2%
Referral to other service	1,034	14.6%	1,123	11.9%	1,077	11.5%
Unplanned						
Treatment withdrawn	162	2.3%	225	2.4%	346	3.7%
Moved	337	4.8%	504	5.3%	399	4.3%
Prison	347	4.9%	560	5.9%	747	8.0%
Deceased	28	0.4%	40	0.4%	51	0.5%
Inappropriate Referral	234	3.3%	311	3.3%	486	5.2%
DNA						
Did not attend or respond to follow up contact	2,903	41.0%	3,423	36.3%	3,309	35.3%
No information supplied	322	4.5%	372	3.9%	321	3.4%
Total	7,086	100.0%	9,431	100.0%	9,380	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005.

Table 15c: All Substances (a) - reason for closure: 2006-07, 2007-08, 2008-09

Closure reason (a)	Year of closure					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Planned						
Treatment complete	6,873	32.5%	8,335	33.6%	8,317	33.4%
Referral to other service	1,924	9.1%	2,018	8.1%	2,335	9.4%
Unplanned						
Treatment withdrawn	323	1.5%	435	1.8%	632	2.5%
Moved	729	3.4%	893	3.6%	781	3.1%
Prison	525	2.5%	788	3.2%	1,030	4.1%
Deceased	127	0.6%	183	0.7%	196	0.8%
Inappropriate Referral	705	3.3%	900	3.6%	1,075	4.3%
DNA						
Did not attend or respond to follow up contact	9,052	42.8%	10,307	41.5%	9,620	38.6%
No information supplied	881	4.2%	982	4.0%	918	3.7%
Total	21,139	100.0%	24,841	100.0%	24,904	100.0%

Source: WNDSM, Health Solutions Wales

(a) Including cases where the primary substance is unreported.

(b) For all referrals since April 2005.

Table 16: Non-attenders: 2006-07, 2007-08, 2008-09

Stage of non-attendance (a)	Year of closure					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
Before assessment (b)	5,720	38.7%	6,064	37.0%	7,314	43.2%
Between assessment and start of treatment	419	2.8%	438	2.7%	684	4.0%
During treatment	8,633	58.4%	9,869	60.3%	8,936	52.8%
Total	14,772	100.0%	16,371	100.0%	16,934	100.0%

Source: WNDSM, Health Solutions Wales

(a) For all referrals since April 2005

(b) Cases which were closed before assessment and treatment are excluded from the main analyses

Table 17a: Time between referral and assessment: alcohol

Waiting times	Year of assessment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	5,836	56.7	6,357	54.5	7,331	57.3
2-4 weeks	2,121	20.6	2,252	19.3	2,453	19.2
5-12 weeks	1,752	17.0	2,073	17.8	1,886	14.8
3-6 months	454	4.4	635	5.4	626	4.9
6-9 months	95	0.9	171	1.5	169	1.3
9-12 months	16	0.2	92	0.8	77	0.6
>12 months	23	0.2	82	0.7	241	1.9
Total	10,297	100.0	11,662	100.0	12,783	100.0

Source: WNDSM, Health Solutions Wales

Note: In addition, in each year there were a number of referrals for alcohol with no assessment date

Table 17b: Time between referral and assessment: drugs

Waiting times	Year of assessment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	4,133	61.5	4,193	56.2	4,595	56.4
2-4 weeks	1,105	16.5	1,137	15.2	1,251	15.4
5-12 weeks	963	14.3	988	13.2	1,168	14.3
3-6 months	349	5.2	464	6.2	472	5.8
6-9 months	94	1.4	273	3.7	236	2.9
9-12 months	36	0.5	162	2.2	130	1.6
>12 months	35	0.5	247	3.3	292	3.6
Total	6,715	100.0	7,464	100.0	8,144	100.0

Source: WNDSM, Health Solutions Wales

Note: In addition, in each year there were a number of referrals for drugs with no assessment date

Table 17c: Time between referral and assessment: all referrals (a)

Waiting times	Year of assessment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	10,073	58.6	10,728	54.9	12,085	56.4
2-4 weeks	3,244	18.9	3,444	17.6	3,762	17.6
5-12 weeks	2,743	16.0	3,140	16.1	3,137	14.6
3-6 months	816	4.7	1,140	5.8	1,154	5.4
6-9 months	192	1.1	468	2.4	433	2.0
9-12 months	54	0.3	271	1.4	232	1.1
>12 months	59	0.3	339	1.7	625	2.9
Total	17,181	100.0	19,530	100.0	21,428	100.0

Source: WNDSM, Health Solutions Wales

(a) Includes referrals where the main substance is unreported

Note: In addition, in each year there were a number of referrals with no assessment date

Table 18a: Time between assessment and treatment: alcohol

Waiting times	Year of treatment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	9,089	96.0	10,032	95.0	10,165	89.9
2-4 weeks	173	1.8	297	2.8	445	3.9
5-12 weeks	127	1.3	143	1.4	335	3.0
3-6 months	53	0.6	36	0.3	223	2.0
6-9 months	12	0.1	13	0.1	52	0.5
9-12 months	10	0.1	19	0.2	17	0.2
>12 months	1	0.0	19	0.2	70	0.6
Total	9,465	100.0	10,559	100.0	11,307	100.0

Source: WNDSM, Health Solutions Wales

Note: In addition, in each year there were a number of referrals for alcohol with no assessment date

Table 18b: Time between assessment and treatment: drugs

Waiting times	Year of treatment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	5,954	91.9	6,157	91.0	6,149	87.5
2-4 weeks	215	3.3	412	6.1	359	5.1
5-12 weeks	170	2.6	86	1.3	267	3.8
3-6 months	83	1.3	44	0.7	131	1.9
6-9 months	23	0.4	15	0.2	43	0.6
9-12 months	14	0.2	13	0.2	27	0.4
>12 months	17	0.3	37	0.5	48	0.7
Total	6,476	100.0	6,764	100.0	7,024	100.0

Source: WNDSM, Health Solutions Wales

Note: In addition, in each year there were a number of referrals for drugs with no assessment date

Table 18c: Time between assessment and treatment: all referrals (a)

Waiting times	Year of treatment					
	2006-07		2007-08		2008-09	
	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	15,169	94.4	16,530	93.4	16,710	89.0
2-4 weeks	389	2.4	735	4.2	831	4.4
5-12 weeks	299	1.9	234	1.3	611	3.3
3-6 months	138	0.9	81	0.5	360	1.9
6-9 months	35	0.2	29	0.2	95	0.5
9-12 months	24	0.1	33	0.2	44	0.2
>12 months	18	0.1	56	0.3	119	0.6
Total	16,072	100.0	17,698	100.0	18,770	100.0

Source: WNDSM, Health Solutions Wales

(a) Includes referrals where the main substance is unreported

Note: In addition, in each year there were a number of referrals with no assessment date

Table 19a: Clients referred and still awaiting assessment: alcohol

Waiting Times	Waiting as at 31.3.07	Waiting as at 31.3.08	Waiting as at 31.3.09
< 10 working days	348	291	319
2-4 weeks	213	286	198
5-12 weeks	436	504	401
3-6 months	225	307	218
6-9 months	109	99	220
9-12 months	100	68	230
>12 months	159	270	586
Total	1,590	1,825	2,172

Source: WNDSM, Health Solutions Wales

Table 19b: Clients referred and still awaiting assessment: drugs

<u>Waiting Times</u>	<u>Waiting as at 31.3.07</u>	<u>Waiting as at 31.3.08</u>	<u>Waiting as at 31.3.09</u>
< 10 working days	238	181	178
2-4 weeks	214	194	108
5-12 weeks	425	376	264
3-6 months	362	277	218
6-9 months	197	204	160
9-12 months	190	203	180
>12 months	351	589	939
Total	1,977	2,024	2,047

Source: WNDISM, Health Solutions Wales

Table 19c: Clients referred and still awaiting assessment: all referrals (a)

<u>Waiting Times</u>	<u>Waiting as at 31.3.07</u>	<u>Waiting as at 31.3.08</u>	<u>Waiting as at 31.3.09</u>
< 10 working days	619	491	539
2-4 weeks	461	527	317
5-12 weeks	983	958	750
3-6 months	805	692	562
6-9 months	413	382	477
9-12 months	345	366	555
>12 months	616	1,344	2,326
Total	4,242	4,760	5,526

Source: WNDISM, Health Solutions Wales

(a) Includes referrals where the main substance is unreported

Table 20a: Clients assessed and still awaiting treatment: alcohol

Waiting Times	Waiting as at 31.3.07	Waiting as at 31.3.08	Waiting as at 31.3.09
< 10 working days	52	72	244
2-4 weeks	83	220	293
5-12 weeks	391	480	909
3-6 months	140	173	167
6-9 months	28	60	71
9-12 months	19	37	56
>12 months	33	64	284
Total	746	1,106	2,024

Source: WNDMS, Health Solutions Wales

Table 20b: Clients assessed and still awaiting treatment: drugs

Waiting Times	Waiting as at 31.3.07	Waiting as at 31.3.08	Waiting as at 31.3.09
< 10 working days	62	77	231
2-4 weeks	86	161	241
5-12 weeks	335	501	721
3-6 months	124	172	161
6-9 months	31	58	79
9-12 months	35	52	40
>12 months	57	116	279
Total	730	1,137	1,752

Source: WNDMS, Health Solutions Wales

Table 20c: Clients referred and still awaiting treatment: all referrals (a)

<u>Waiting Times</u>	<u>Waiting as at 31.3.07</u>	<u>Waiting as at 31.3.08</u>	<u>Waiting as at 31.3.09</u>
< 10 working days	118	152	477
2-4 weeks	180	394	540
5-12 weeks	761	1,018	1,643
3-6 months	278	355	333
6-9 months	61	121	152
9-12 months	61	91	97
>12 months	97	200	607
Total	1,556	2,331	3,849

Source: WNDISM, Health Solutions Wales

(a) Includes referrals where the main substance is unreported

Part II. Additional evidence

5. Routinely collected data

5.1 Introduction

This chapter provides additional routinely available substance misuse related evidence currently in Wales. Evidence is drawn from a number of data sources including information from the Patient Episode Database Wales (PEDW), Office for National Statistics (ONS) information, Education, Drug Intervention Programme (DIP) and Home Office data. Chapter 6 aims to provide brief summaries of, and links to, other relevant documents and reports relating to substance misuse.

5.2 Executive Summary

- The number of exclusions from schools in Wales (both permanent and fixed term) resulting from substance misuse increased by 14.1% from 2006-07 to 2007-08.
- There were a total of 479 alcohol related deaths in Wales in 2007 according to ONS, representing a 10% increase from 2006.
- Over the five years 2003-2007 there has been an increase in alcohol related deaths of 21.5% in males and 5% in females in Wales according to ONS.
- Using capture – recapture methods, provisional estimates for the year 2006-07 indicate that there were approximately 19,500 problematic drug users in Wales, a rate of 10.1 per 1000 population aged 15 to 64 years.
- According to the ONS, there were 96 drug misuse related deaths in Wales in 2008. This represents a decrease of 14 deaths from the previous year. However, over the last five years, the total number of drug related deaths have increased by over a third.
- Of the total number of drug misuse related deaths in 2007-08, 25% occurred in females.
- From 2004 – 2008, admissions for mental and behavioural disorders due to opioids have increased overall by 41.4% (34.5% in males and 54.4% in females).
- Admissions for mental and behavioural disorders due to cocaine have also increased over the five year period 2004 to 2008, an overall increase of 144%.
- For 2008-09, a total of 13,326 drugs offences were reported by police forces across Wales, representing a 5% increase from 2007-08.
- There were 13,128 seizures of controlled drugs in Wales in 2008-09 which represents an increase of 18.5% on the previous year.

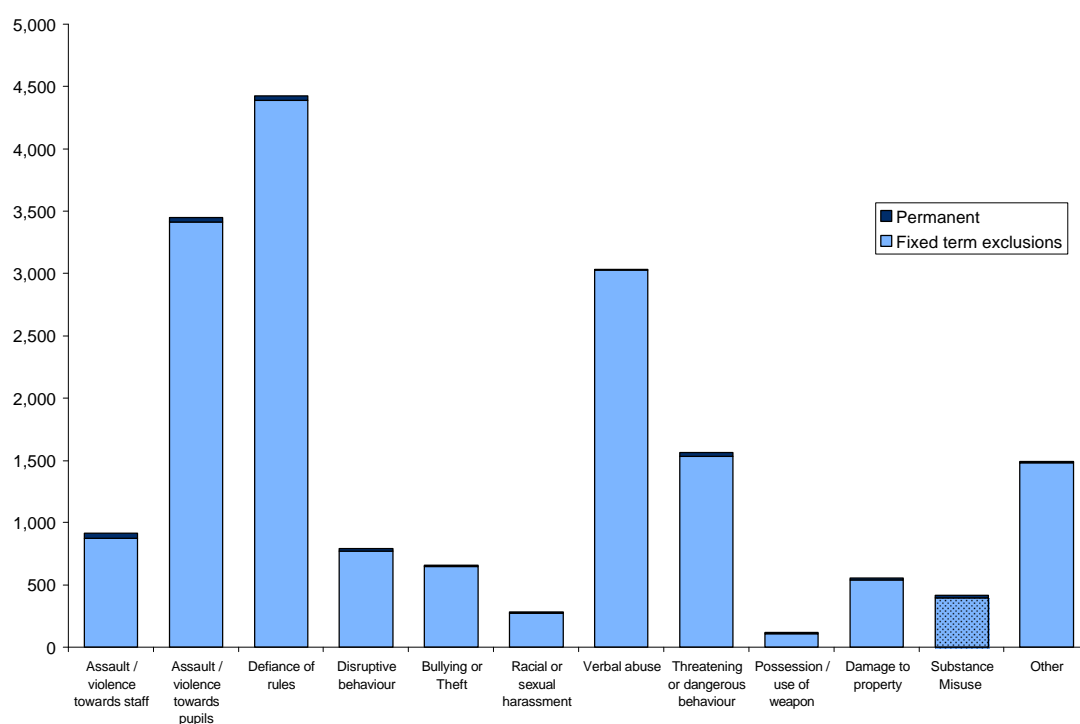
5.3 Education

In 2007/08, there were a total of 241 permanent exclusions, 17,365 fixed term exclusions of five days or less and 1,863 exclusions of 6 or more days in school children aged up to 16 years. ¹ Substance misuse accounted for:

- 10.4% (n=25) of the permanent exclusions,
- 1.8% (n=313) of the fixed term exclusions of 5 days or less and,
- 4.4% (n=82) of the fixed term exclusions of 6 or more days.

The number of exclusions from schools in Wales (both permanent and fixed term) has increased by 14.1% from 2006/07 to 2007/08.

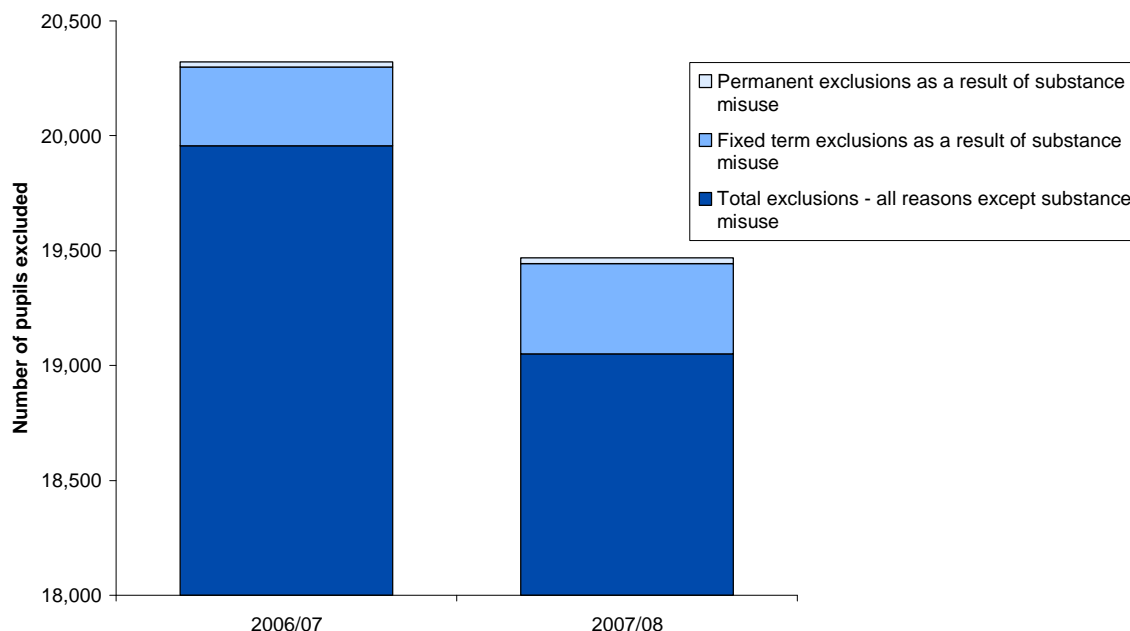
Chart 4: Number of pupils (aged up to 16) excluded (permanently or fixed term) from schools in Wales by reason for exclusion 2007/08



Source: Exclusions from Schools in Wales 2007/08 Statistical Directorate, Welsh Assembly Government

From 2006/07 to 2007/08, the total number of permanent exclusions (all reasons) decreased by 20%, however, within this, the proportion permanently excluded due to substance misuse increased from 7.6% in 2006/07 to 10.4% in 2007/08. Similarly, the total number of fixed term exclusions (all reasons) decreased by 4%, however, the proportion of fixed term exclusions due to substance misuse increased from 1.7% in 2006/07 to 2% in 2007/08 ^{1,2} as illustrated in Chart 5.

Chart 5: Number of pupils (aged up to 16) excluded (permanently or fixed term) due to substance misuse from schools in Wales 2007/08



Source: Exclusions from Schools in Wales 2007/08 Statistical Directorate, Welsh Assembly Government

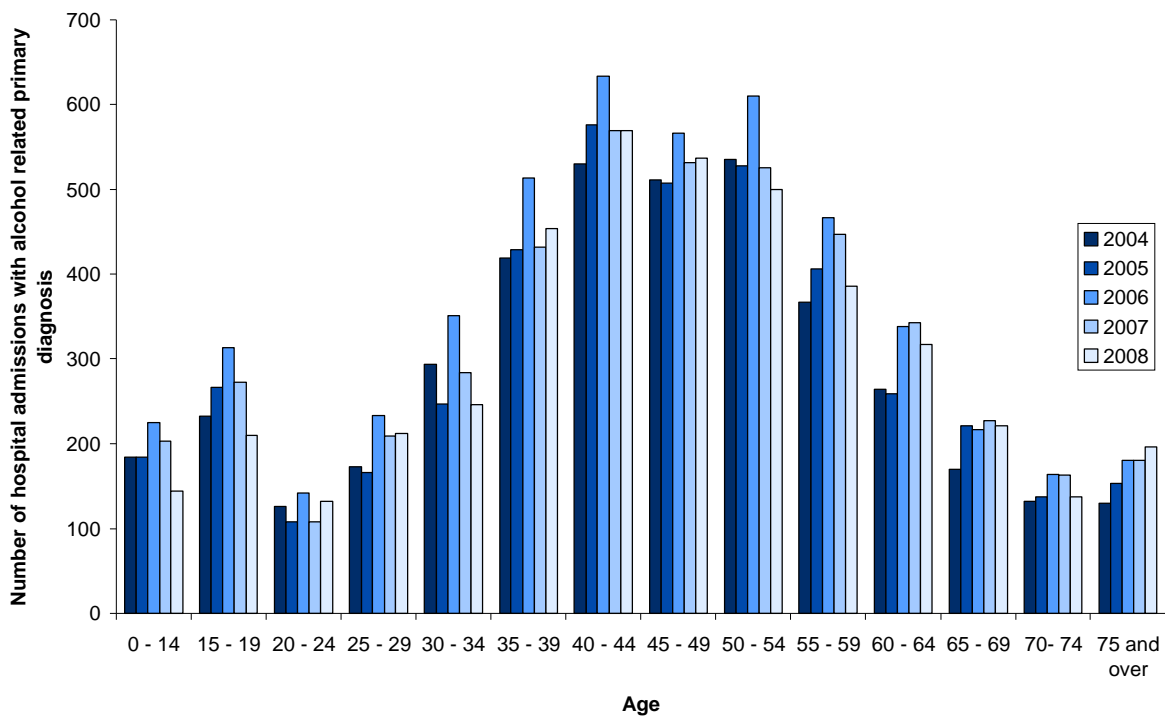
5.4 Alcohol

5.4.1 Alcohol related disease rates

There are a number of specific acute and chronic health problems associated with alcohol misuse. These include damage to the digestive system, mental and behavioural disorders, and liver damage including hepatitis and alcoholic cirrhosis of the liver. The patient episode database Wales (PEDW) provides information on hospital episodes within the general population in Wales. Following admission, diagnosis is made either as 'primary', indicating in this context that alcohol represents the primary reason for the diagnosis, and 'any mention of' indicating that alcohol is one of the factors contributing to the resultant diagnosis.

Chart 6 indicates the total number of admissions to hospital with an alcohol related primary diagnosis by age over the period 2004 - 2008. There has been a decrease in the number of admissions with primary alcohol diagnosis for both males and females in the 0 to 14 years and the 15-19 year age bands however increases are observed in the 20-24 years (male and female), 25-29 years (females only) and 35-39 year age bands (male and female). Overall the total number of primary alcohol related diagnoses increased by 25.9% from 2004 to 2008 (23.6% in females and 27.1% in males).

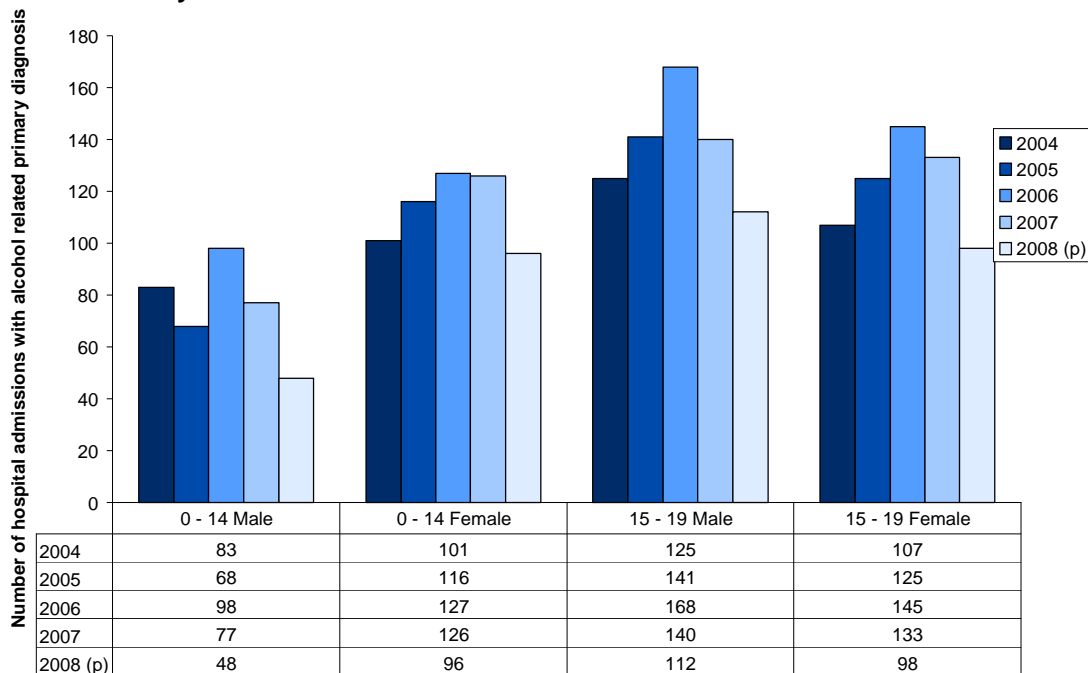
Chart 6: Hospital admissions with a primary alcohol related diagnosis by age, 2004-2008



Source: PEDW – Patient Episode Database for Wales 2004 - 2008

Year on year consistently higher rates are reported for females aged under 15 compared to males as indicated in Chart 7, however, rates of primary related alcohol admissions for all these groups have fallen in 2008.

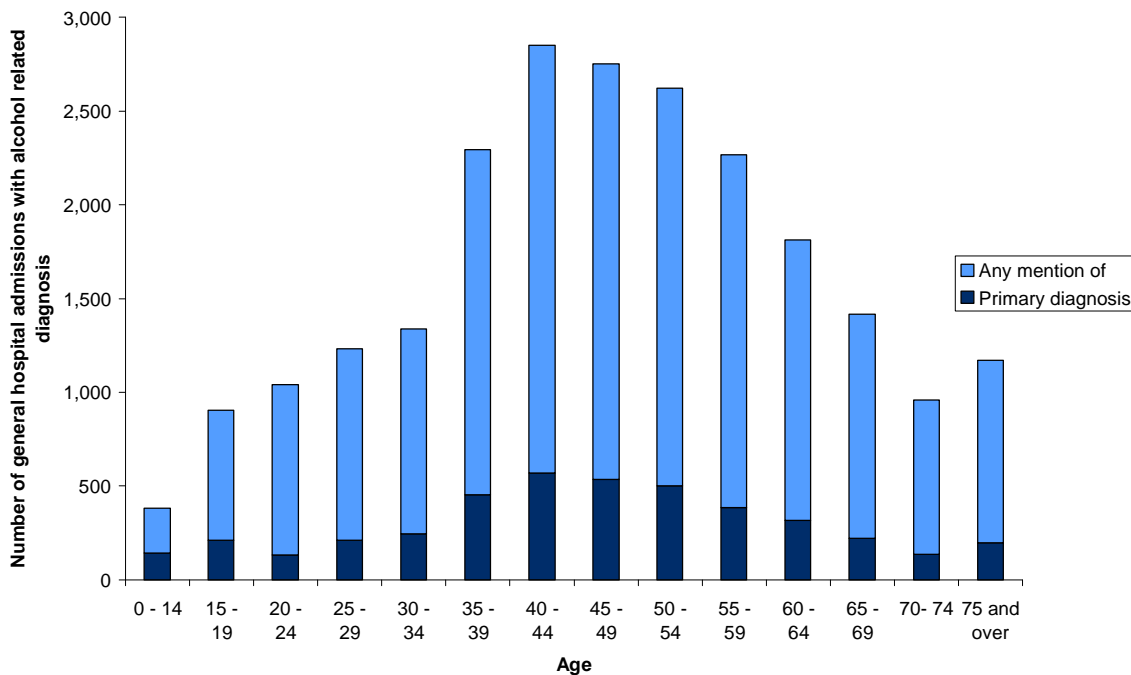
Chart 7: Hospital admissions with an alcohol related primary diagnosis in males and females aged under 15 and 15-19 years 2004 to 2008



Source: PEDW – Patient Episode Database for Wales 2004 - 008

The number of primary alcohol related admissions represents a small proportion of the overall alcohol related admissions as indicated in Chart 8.

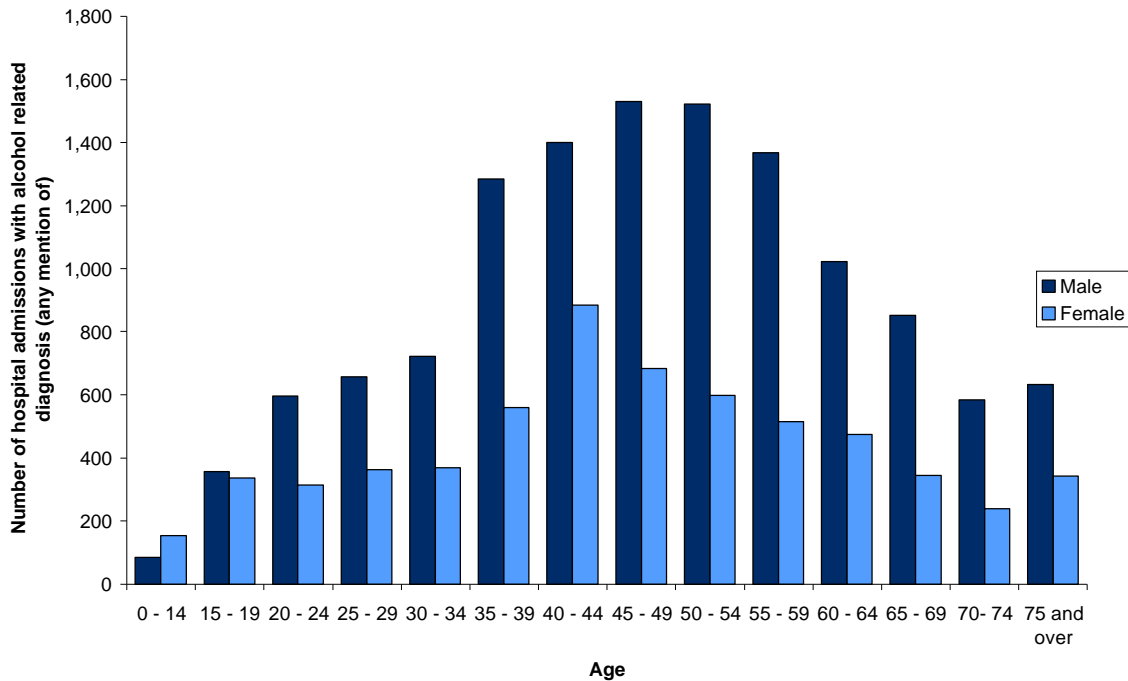
Chart 8: Hospital admissions with an alcohol related diagnosis (primary and any mention of) by age in 2008



Source: PEDW – Patient Episode Database for Wales 2004 - 2008

With the exception of those aged under 15 years, higher rates of admissions are seen in males. Chart 9 indicates the age and gender profile of alcohol related admissions for 2008 by age and gender. The proportion of male to female admissions has remained relatively steady over the previous five years with around half the number of female admissions to male admissions.

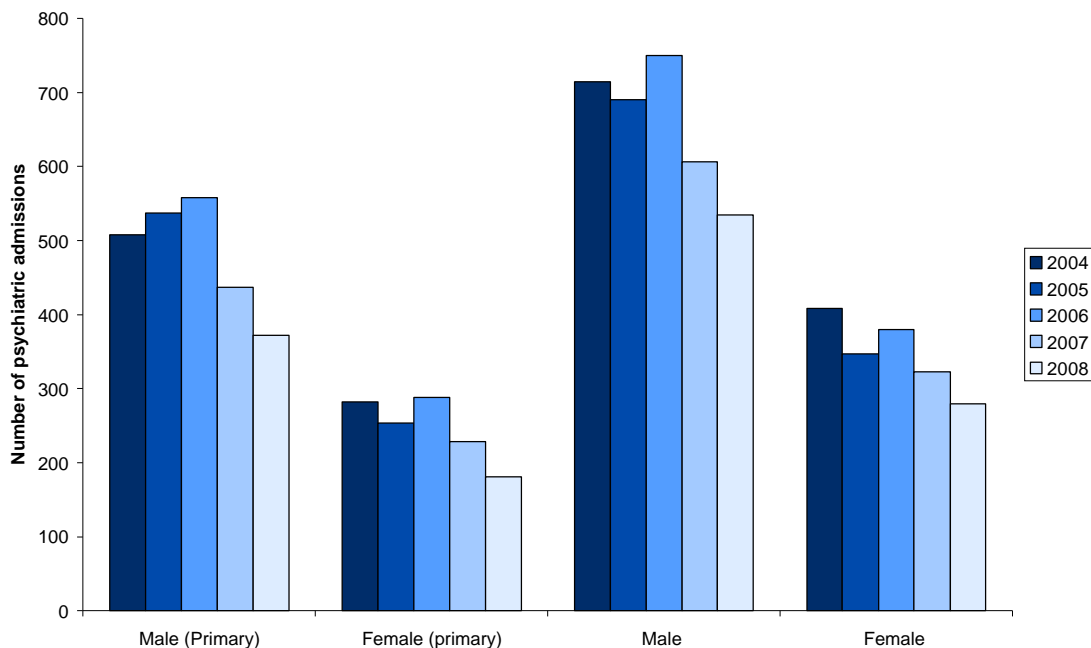
Chart 9: Hospital admissions with an alcohol related diagnosis (any mention of) by age and gender 2008



Source: PEDW – Patient Episode Database for Wales 2004 - 2008

Admissions to psychiatric hospitals for patients with an alcohol related diagnosis have dropped year on year over the previous 3 years (2006-2008) as shown in Chart 10.

Chart 10: Psychiatric hospital admissions with an alcohol related diagnosis (any mention of) by gender 2004 to 2008

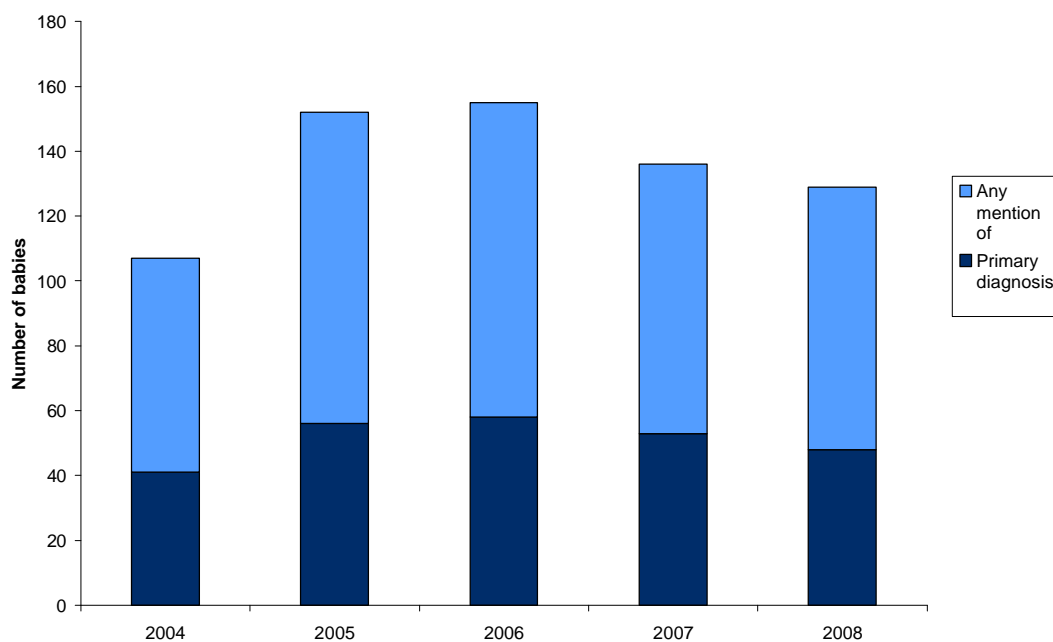


Source: PEDW – Patient Episode Database for Wales 2004 – 2008

5.4.2 Foetal alcohol syndrome

The number of babies born with foetal alcohol syndrome in Wales has fallen gradually over the past three years as indicated in Chart 11.

Chart 11: Number of babies born with foetal alcohol syndrome diagnosis (primary and any mention of) 2004 to 2008

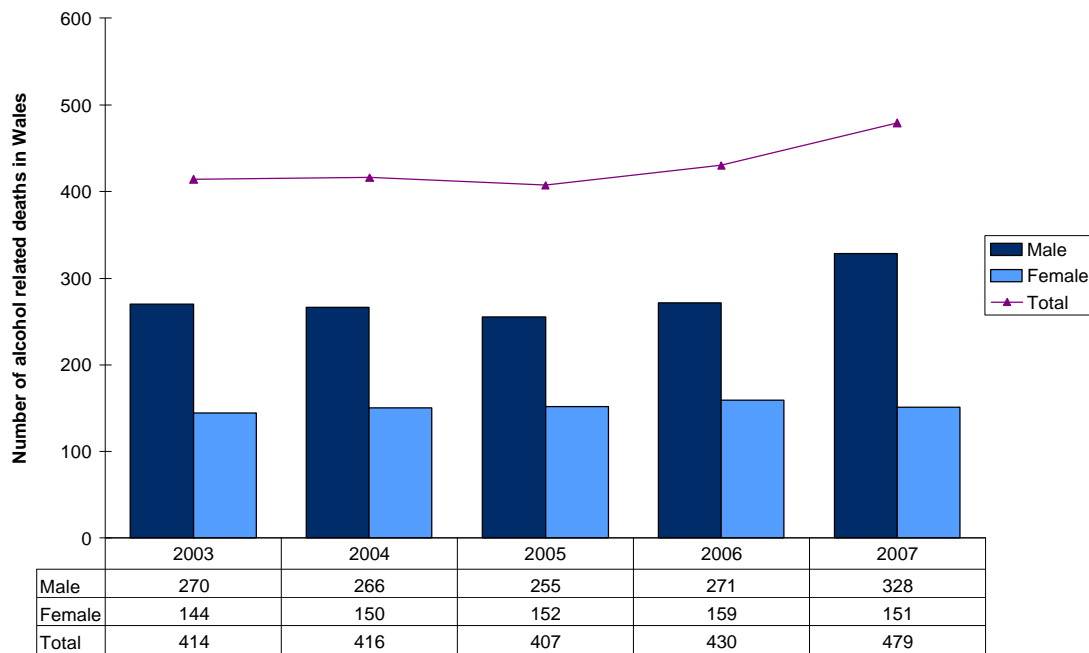


Source: PEDW – Patient Episode Database for Wales 2004 – 2008

5.4.3 Alcohol related deaths

Within Wales there has been an overall increase of 11.4% in the number of alcohol related deaths in the last year. Over the last five years (2003-2007) there has been an increase in alcohol related deaths of 21.5% in males and 5% in females in Wales according to ONS³ data as indicated in Chart 12.

Chart 12: Number of alcohol related deaths in Wales by gender 2003 to 2007



Source: ONS , 2009

5.5 Drugs and injecting drug use

5.5.1 Provisional prevalence estimate of problematic drug use in Wales 2006-07

The National Public Health Service for Wales (NPHS) has undertaken a capture-recapture study designed to provide an estimate of the prevalence of problematic drug use in Wales. Problematic drug use in this context refers to injecting drug use or long duration or regular use of heroin, other opioids, cocaine and crack cocaine. Datasets were drawn from the Police Forces and Probation Services in Wales and the Welsh National Database for Substance Misuse in Wales. The information outlined in the table below refers to provisional findings relating to the period 2006-07. Further analysis and validation of the data is required before publication of the final estimates for this period by NPHS. It should be noted that an estimate of injecting drug use could not be provided as this information is not routinely specified within the datasets used.

Individuals included in this study are Welsh residents aged 15 to 64 and the data in Table 21 has been analysed and reported by age group and gender. The estimate totals and range represent a combination of the regional figures.

Table 21: Provisional prevalence estimate of problematic drug use in Wales 2006-07

WALES	Estimate	Range	Rate per 1000 population (15 – 64 years)
Males 15-29	8,039	6,015–11,782	29.4
Males 30-64	7,041	5,760–11,790	10.6
Females 15-29	2,502	1,940–5,641	9.0
Females 30-64	1,812	1,370–2,567	2.6
Total	19,394	15,085 – 31,780	10.1

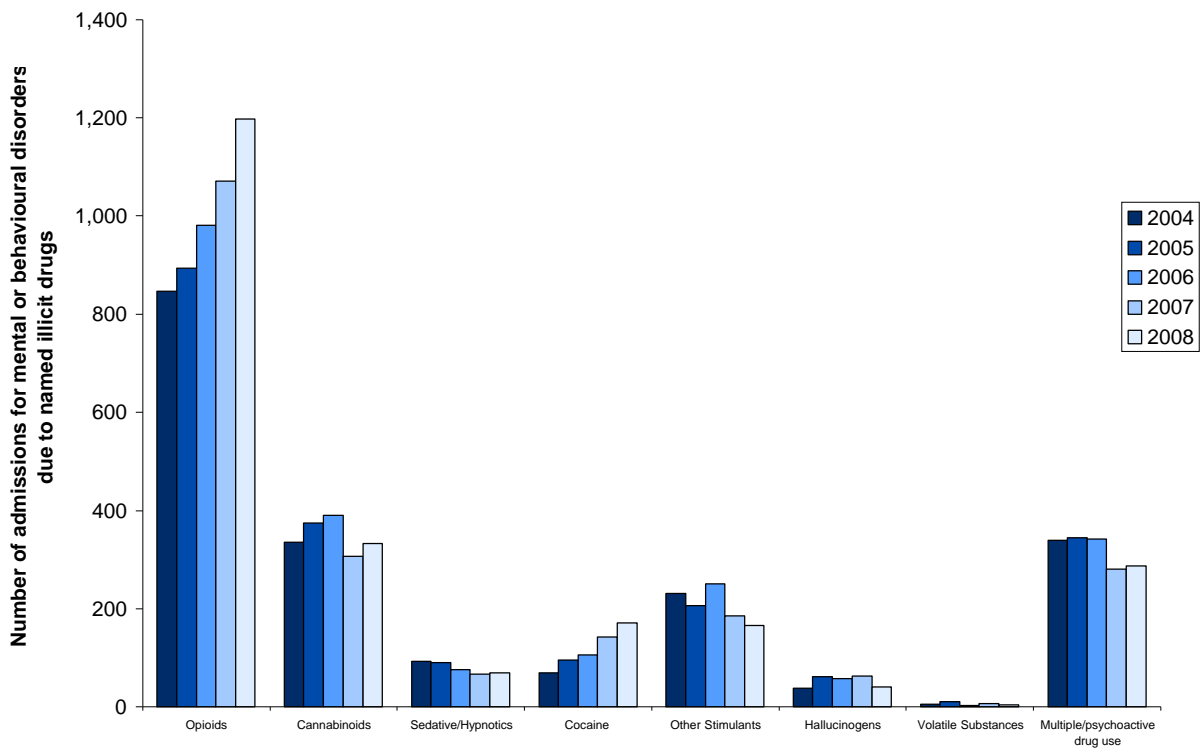
N.B. The rates outlined above represent provisional figures and may be subject to change following further analysis and validation of the data and models

In relation to prevalence estimates of problematic drug use elsewhere in the UK, the rate for England 2006-07 ⁴ for problematic drug use (heroin, other opioids and crack cocaine) is estimated at 9.76 per 1,000 population with considerable variation in regional rates. Once validation of the data for Wales has been completed, a prevalence estimate will be available by police force area in Wales, broken down by gender and age group.

5.5.2 Drug related admission rates

Hospital admissions for drug use may include a range of diagnoses including mental and behavioural disorders resulting from named drug use or by poisonings with named illicit drugs. Chart 13 indicates a steady increase in the number of admissions for mental and behavioural disorders due to opioids and to cocaine use over the previous 5 years (2004 – 2008).

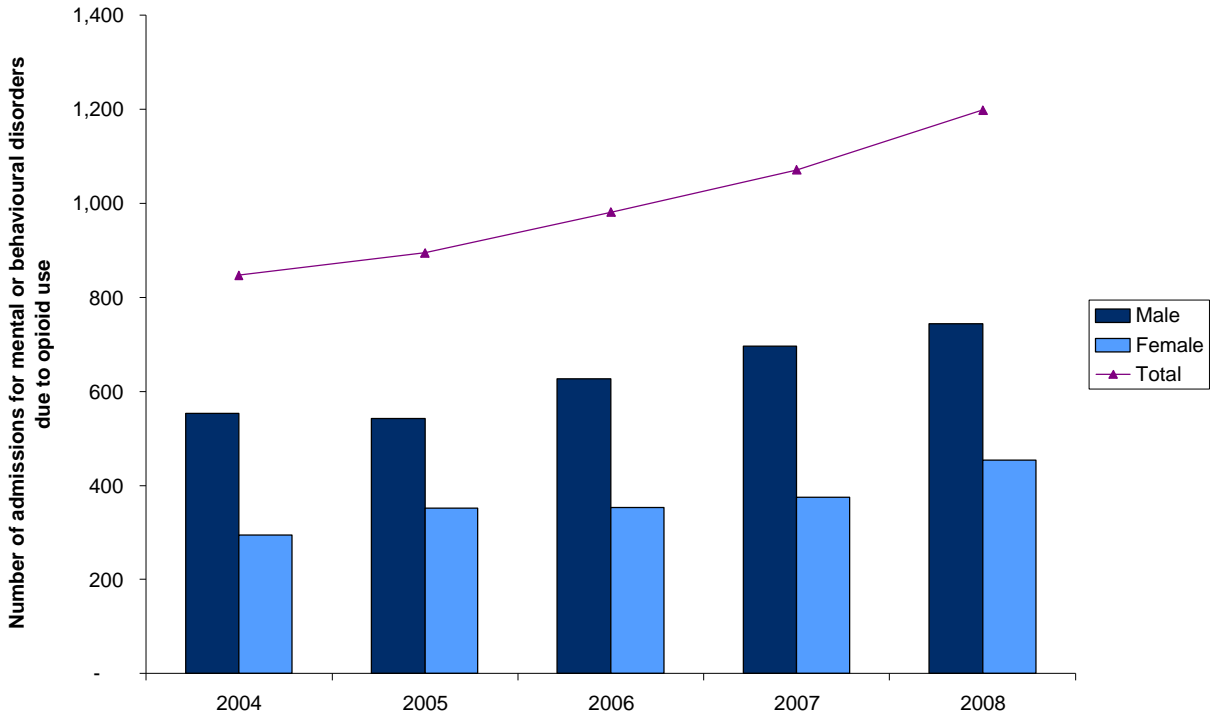
Chart 13: Hospital admissions for mental or behavioural disorders due to named illicit drugs 2004 – 2008 (any mention of)



Source: PEDW – Patient Episode Database for Wales 2004 – 2008

From 2004 – 2008, admissions for mental and behavioural disorders due to opioids have increased overall by 41.4% (34.5% in males and 54.4% in females) as indicated in Chart 14.

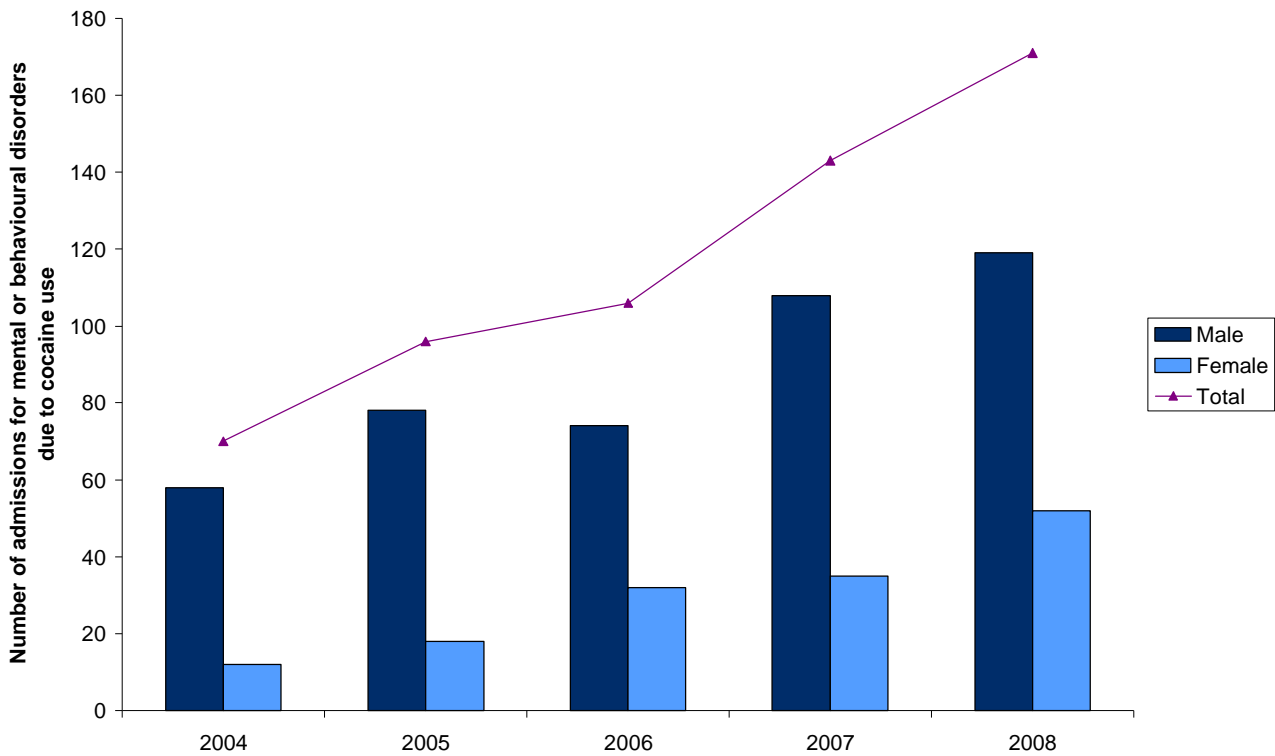
Chart 14: Hospital admissions for mental or behavioural disorders due to opioid use 2004 – 2008 (any mention of)



Source: PEDW – Patient Episode Database for Wales 2004 – 2008

Admissions for mental and behavioural disorders due to cocaine have also increased over the five year period 2004 to 2008. An overall increase of 144% is reported over this period with an increase in admissions for both males and females indicated in Chart 15. Whilst the number of admissions recorded is lower than those seen with opioids, the trend is clear.

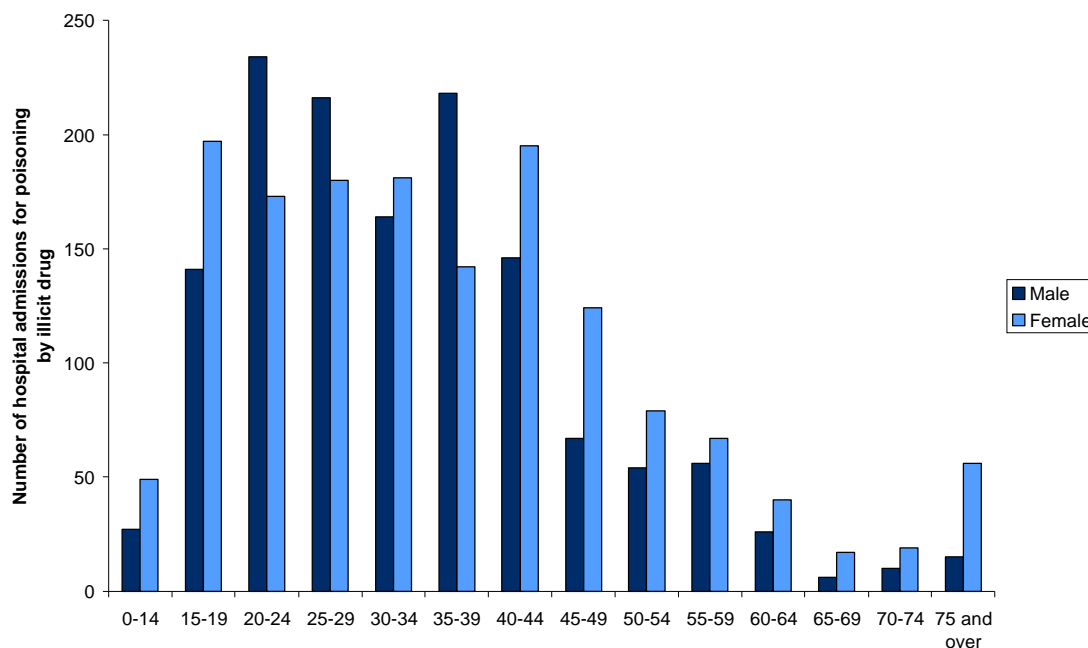
Chart 15: Hospital admissions for mental or behavioural disorders due to cocaine use 2004 – 2008



Source: PEDW – Patient Episode Database for Wales 2004 – 2008

Admissions for poisonings with drugs includes overdose with narcotics (opium, heroin, other opioids, cocaine), psychodysleptics (hallucinogens), antiepileptics, sedative-hypnotics (including benzodiazepines) and psychotropic drugs not elsewhere mentioned. This category excludes diagnoses of mental and behavioural disorders due to drug use (intoxication meaning inebriation) see Annex 1). As indicated in Chart 16, the rates of diagnoses of poisonings are highest in the 20-24 year age group but remain elevated up to the 45-49 year age group.

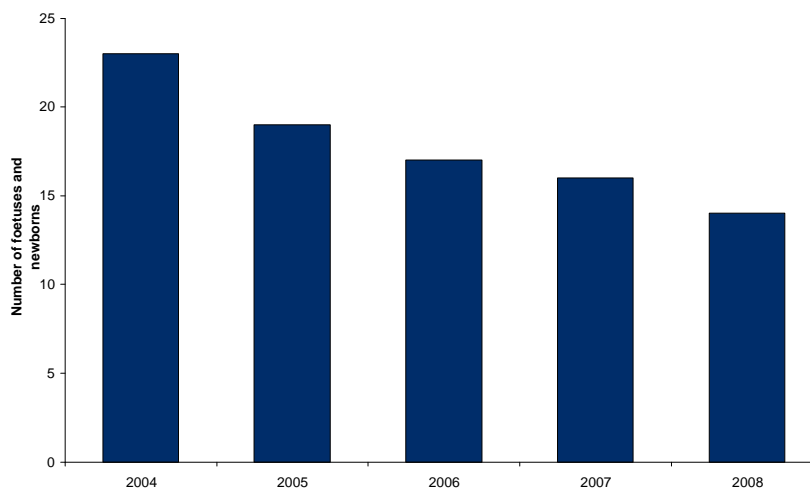
Chart 16: Hospital admissions for poisoning with drugs by age and gender 2008



Source: PEDW – Patient Episode Database for Wales 2008

The number of fetuses and newborns affected by maternal use of drugs of addiction has decreased steadily in Wales over the last five years as indicated in Chart 17.

Chart 17: Number of foetus and newborn affected by maternal use of drugs of addiction in Wales



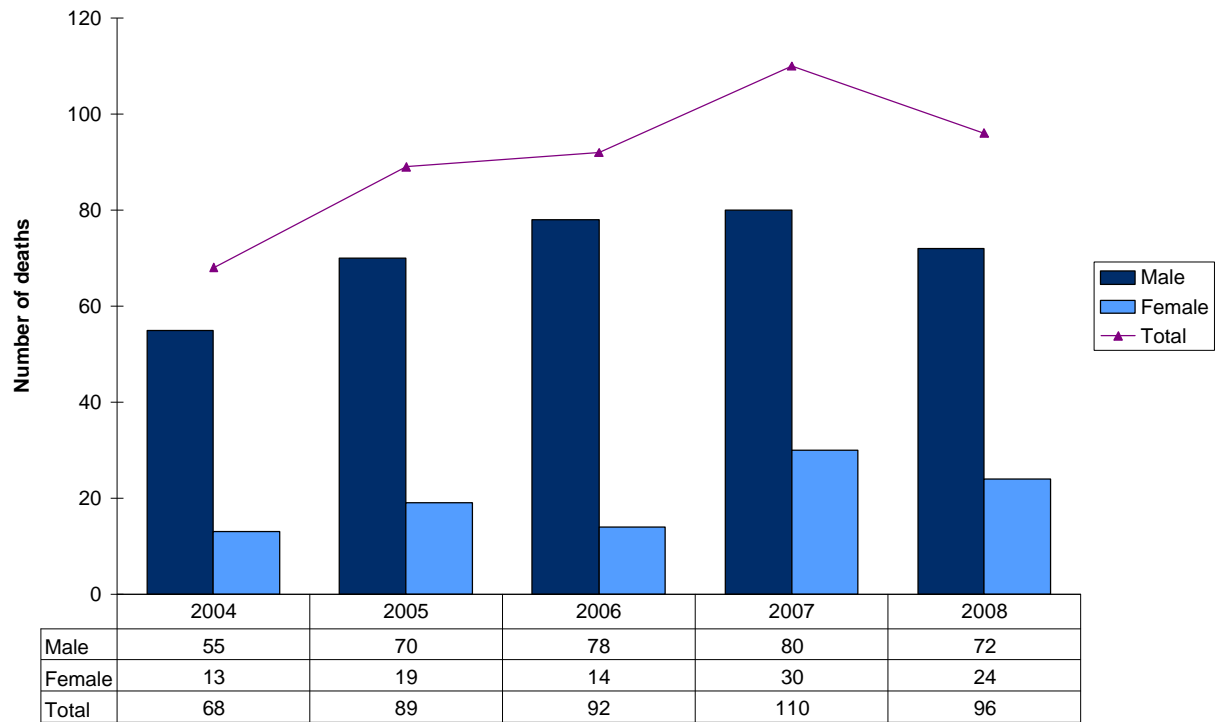
Source: PEDW – Patient Episode Database for Wales 2004 - 2008

5.5.3. Drug related deaths

There were a total of 1,738 deaths related to drug misuse in England and Wales in 2008 (1,364 male and 374 female) representing an increase of 8.4% on the previous year.⁵ In Wales, the number of deaths has decreased overall from a total of 110 in 2007 to 96 in 2008 as indicated in

Chart 18. Over the last 5 years, however, deaths related to drug misuse in Wales have increased in both males and females by over a third.

Chart 18: Deaths related to drug misuse in Wales by gender 2003 – 2008

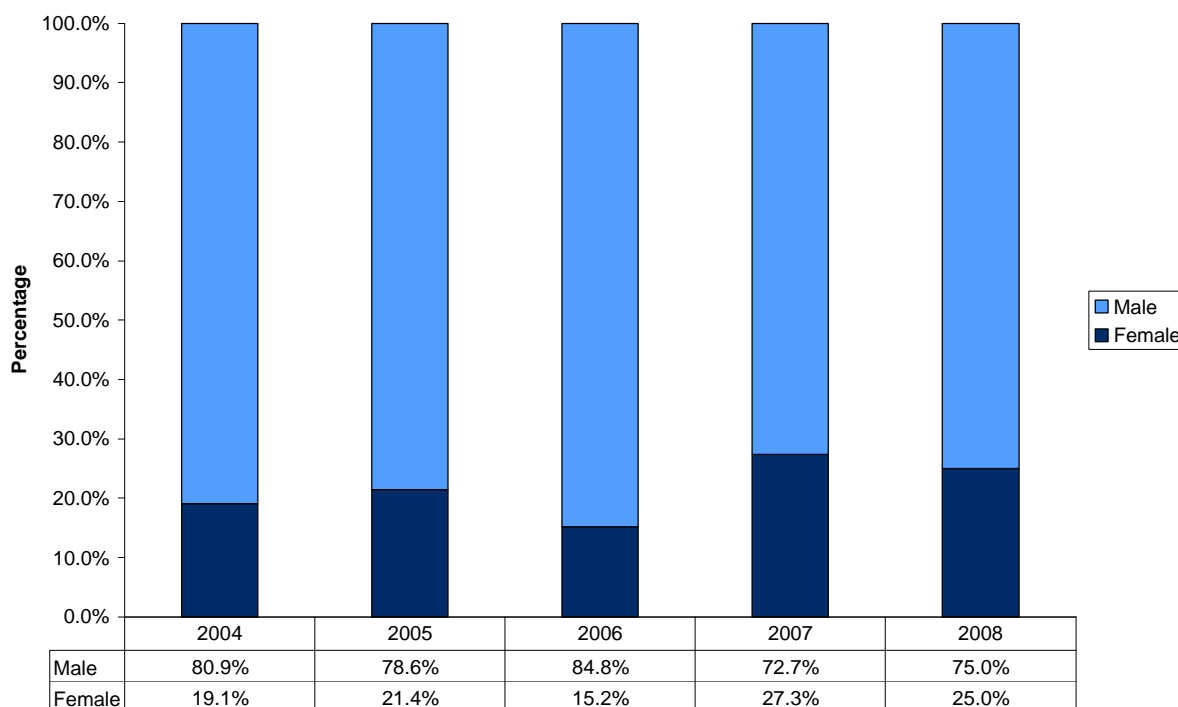


Source: ONS 2009

Note: Figures for deaths registered in 2008 are provisional. Figures relate to Welsh Residents

There have been increases in the proportion of drug misuse related deaths in females in the last two years with female deaths accounting for 27.7% in 2007 and 25% in 2008 as indicated in Chart 19.

Chart 19: The proportion of male to female deaths related to drug misuse 2004 – 2008



Source: ONS 2009

5.5.4 Injecting drug use: Risk behaviour, bacterial infections and blood borne viruses

In relation to the risks associated with injecting drug use, the practice of sharing injecting equipment, both direct (the sharing of needles and syringes) and indirect (the sharing of other injecting related equipment including spoons/cookers, filters, water) have a clear impact on rates of injecting related infections. ⁶ These infections may include bacterial infections as a result of with poor hygiene, poor injecting technique, or contamination of drugs injected and include:

- Staphylococcus aureus infections (including MSSA, MRSA)
- Group A streptococcal infections
- Clostridial infections including wound botulism, tetanus ⁶
- Blood borne viral infections:
 - hepatitis B
 - hepatitis C
 - HIV

Risk behaviour

Direct sharing - According to the Unlinked Anonymous Prevalence Monitoring Programme (UAPMP) 2007 survey,⁶ direct sharing in the previous four weeks was reported by 19% (52 of 275) of current injecting drug user (IDUs) respondents in Wales. This represents a decrease of 3%

from 2006 in which 22% (42 of 195) reported direct sharing in the previous four weeks. The UAPMP also found that direct sharing in the previous four weeks was associated with;

- Injecting crack-cocaine
- Injecting cocaine
- Ever been homeless

Indirect sharing – In 2007, 38% (107 of 281) of current IDU respondents in Wales reported sharing injecting equipment in the previous four weeks, again representing a decrease from levels reported in 2006 (49%, 97 of 197). The most commonly shared items reported were spoons/cookers. ⁶

Risks of injecting site infection

Bacterial infections at injecting sites may result in symptoms including abscesses and sore or open wounds. The UAPMP survey indicates that 34% of respondents reported experiencing symptoms of injecting site infections in the previous year (803 of 2330) in 2007 and reported rates of infection were associated with having been homeless in the previous year. ⁶

Injecting site infections were also associated with site of injection and type of drug injected:

Compared to those that had not injected into the following sites, higher rates of infection were reported in those who had injected in their:

- Hands
- Groin
- Legs
- Feet

Higher infection symptom rates were also reported in those injecting crack-cocaine and cocaine in the previous four weeks, compared to those that had not. ⁶

Blood borne viruses

Hepatitis C

Hepatitis C remains the most important blood borne virus in relation to injecting drug users with around 80% of those becoming infected becoming chronically infected. There are an estimated 14,000 individuals infected with hepatitis C in Wales. ⁷ Laboratory reports indicate a total of 3,769 diagnoses of hepatitis C infection in Wales with 277 cases identified in 2007. ⁶ Over 90% of the infections resulted from injecting drug use. ^{6,7} Whilst these figures represent individuals who have undergone testing, it is estimated that overall 23% of current IDUs in Wales may be infected with hepatitis C, with far higher rates observed in Swansea (42%) and Cardiff (38%). ⁸

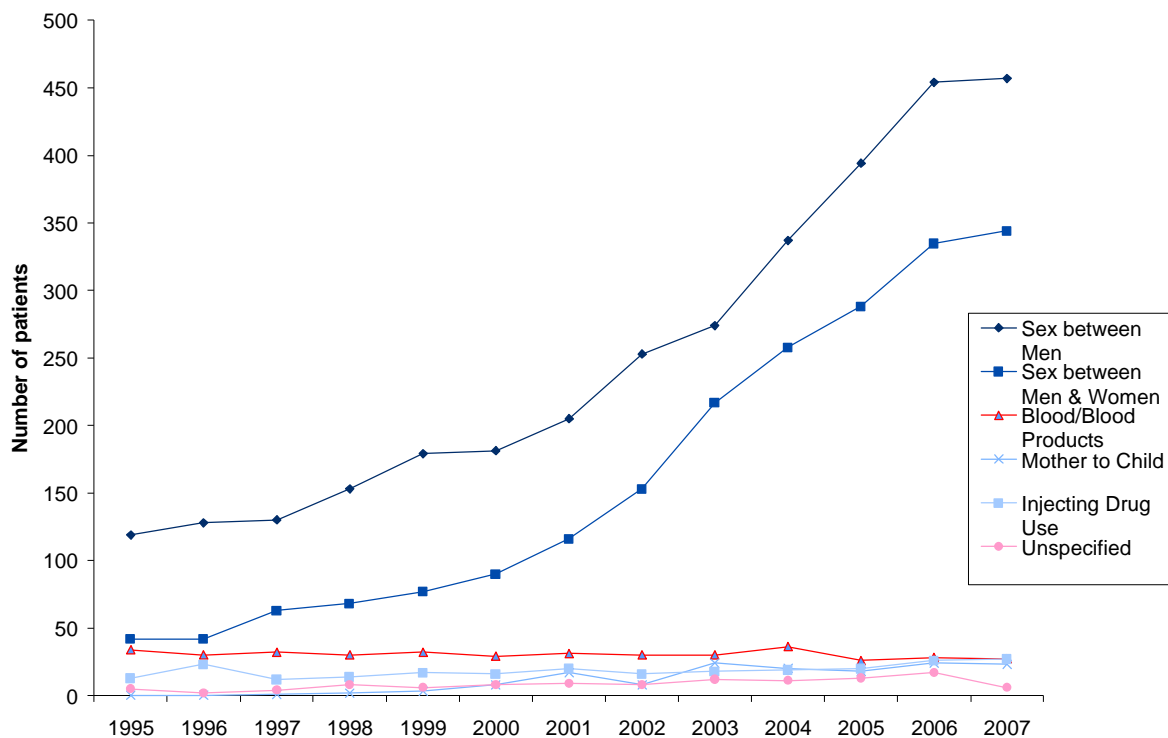
Hepatitis B

Hepatitis B vaccination provides an effective means of preventing transmission of the hepatitis B virus and is particularly important within high-risk groups including prisoners, injecting drug users (IDUs), commercial sex workers and individuals participating in high risk sexual behaviour. According to data from the Unlinked Anonymous Prevalence Monitoring Programme (UAPMP), the self-reported rates of hepatitis B vaccination amongst IDUs in Wales has risen to 57% (287 of 502, combining 2006 and 2007 data). ⁶

HIV

Injecting drug use accounted for 5.2% of all HIV diagnoses in the UK by the end of 2007. ⁵ Rates of HIV infection among injecting drug users in Wales remain low relative to other transmission routes ⁹ as indicated in Chart 20.

Chart 20: HIV Infected Patients attending for treatment in Wales by route of transmission 1995 – 2007



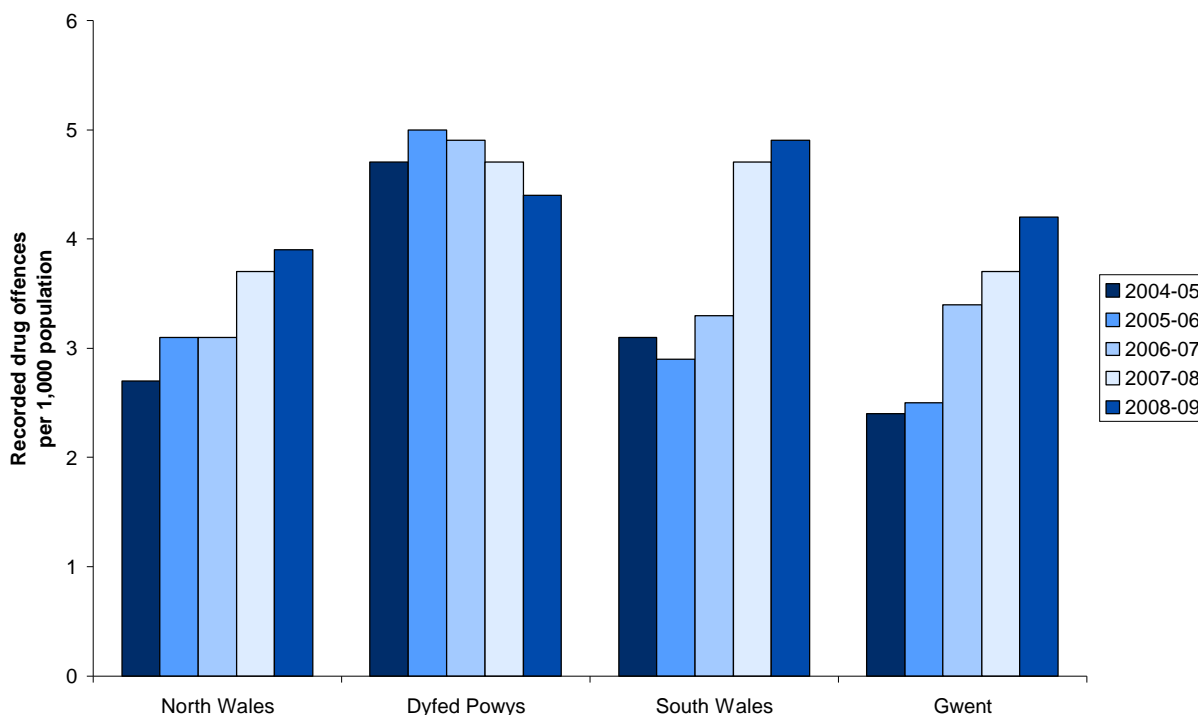
Source: Survey of prevalent HIV Infections Diagnosed (SOPHID), NPHS Wales 2007

5.5.5 Criminal Justice

Recorded drug offences

For 2008-09, a total of 13,326 drugs offences were reported by police forces across Wales, representing a 5% increase from 2007-08. As a proportion of total recorded crime, drug offences have increased by 0.4% over the last year. Chart 21 indicates the number of drugs offences by police force area.

Chart 21: Recorded drug offences by Police Force area per 1,000 population in Wales 2004-05 to 2008-09



Source: Welsh Assembly Social Justice & Community Safety Statistics Division Available from: <http://www.statswales.wales.gov.uk/TableViewer/tableView.aspx>

According to the British Crime Survey (BCS) ¹⁰ in 2008-09, 9.9% of adults (aged 16 – 59) in Wales reported using any drug in the previous year, with 2.7% of these reporting any Class A drug and 4.1% reporting use of stimulant drugs including cocaine powder, crack-cocaine, amphetamine, methamphetamine, ecstasy and amyl nitrate. Self-reported use of cocaine powder has increase by 0.7% since 2007-08.

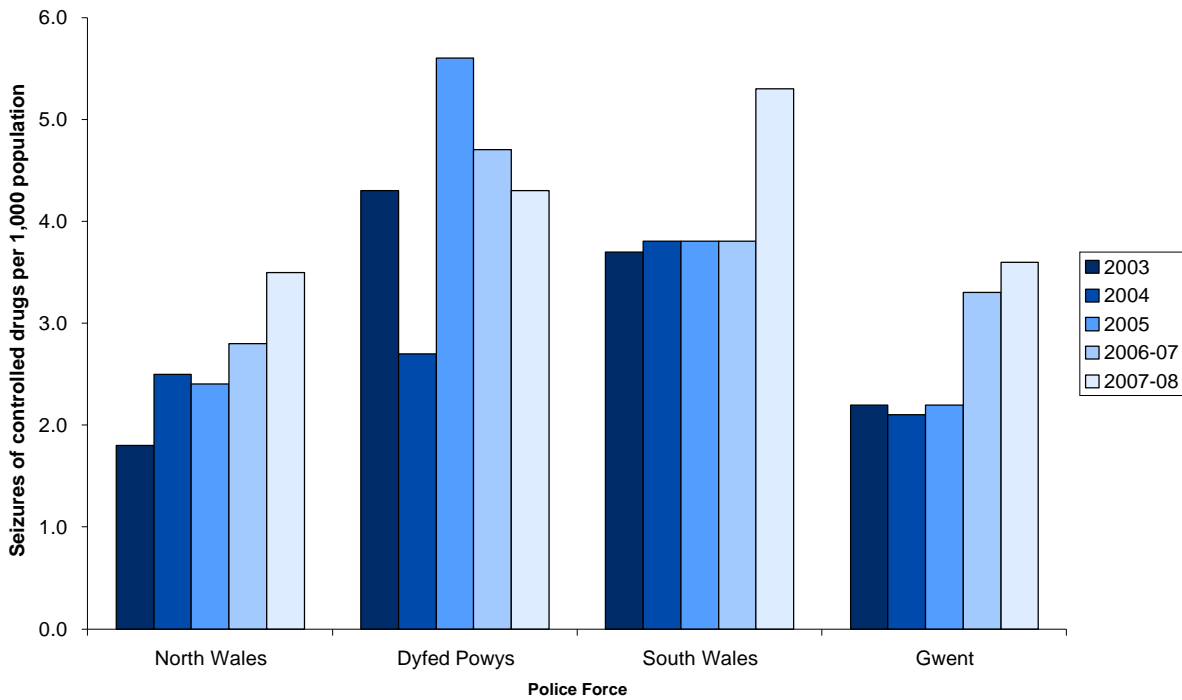
Higher rates were reported in young people (aged 16 – 24) with 21.9% reporting use of any drug in the year 2008-09. Of these, 8.8% reported frequent drug use, 9% reported use of any Class A drug and 12.1% reported use of any stimulant drug. ⁹

The BCS estimate that 168,000 (CI 95% 146,000 – 194,000) adults in Wales used any drug in the previous year, with 47,000 (CI 95% 35,000 – 62,000) using a Class A drug. In 16-24 year age group, there were an estimated 81,000 (CI 95% 65,000 – 100,000) individuals having used any drug in the previous year with 33,000 (CI 95% 23,000 – 46,000). ¹⁰

Seizures of controlled drugs

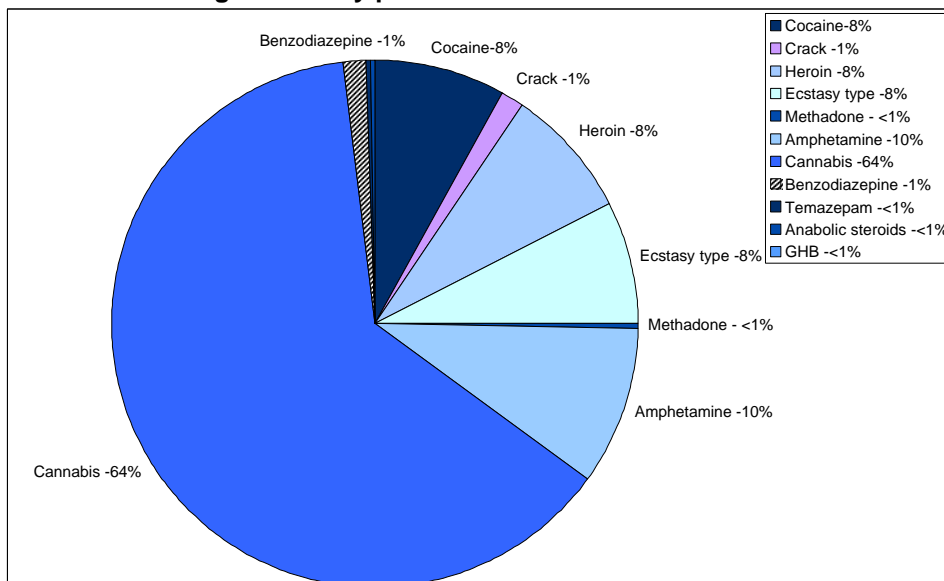
There were 13,128 seizures of controlled drug in Wales in 2007-08 ¹⁰ which represents an increase of 18.5% on the previous year.

Chart 22: Number of seizures of controlled drugs per 1,000 population by Police Force in Wales 2003 to 2007-08



Source: Home Office, 2009

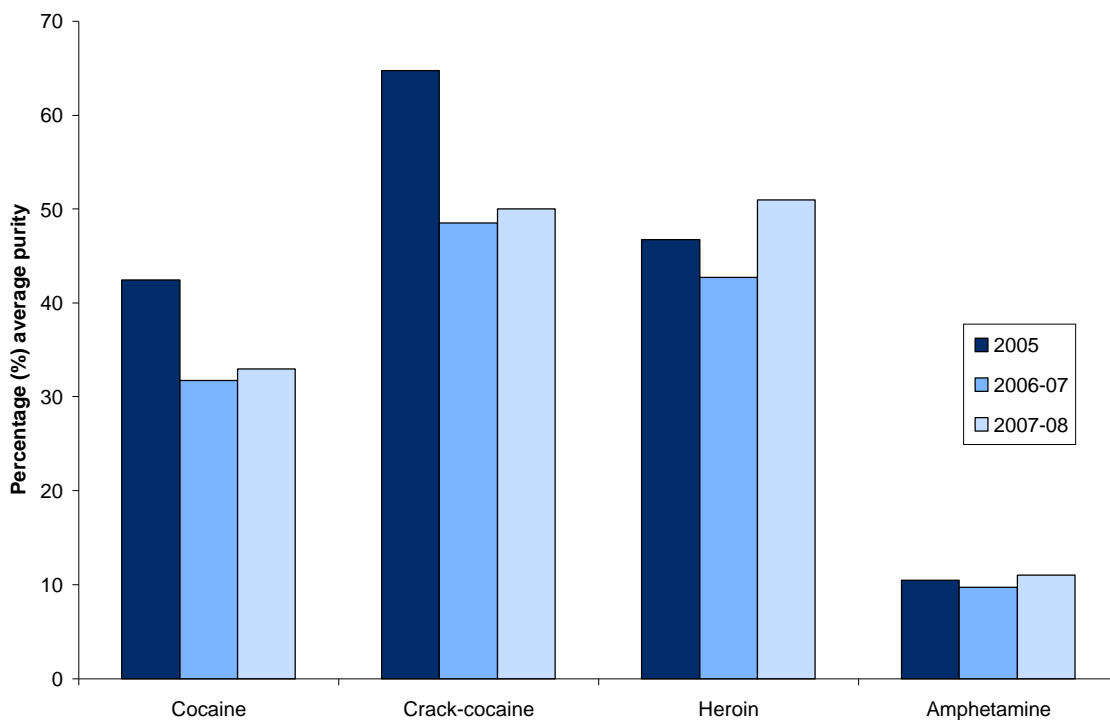
Chart 23: Profile of drugs seized by police forces in Wales 2007-08



Source: Home Office 2009

The purity of a drug describes the degree to which a quantity of the drug has remained free from other substances that may be added to increase the quantity and therefore resale value. The purity of a drug may be affected through the addition of adulterants (drugs that mimic or enhance the effects of a given drug e.g caffeine often found in amphetamine) or dilutants (mainly sugars such as glucose added to bulk the quantity).¹² Decreases in the purity of a drug may lead to increases in the quantity of the drug required to achieve the same effect for the user. The average purity of drugs seized by police forces in Wales from 2005 to 2007-08¹³ is shown in Chart 24.

Chart 24: Average purity of drugs seized by police forces in England and Wales 2005 – 2007-08



Source: Home Office 2009 available from: <http://www.homeoffice.gov.uk/rds/pdfs09/hosb0809summ.xls>

5.6 Drug Intervention Programme

The Drug Intervention Programme (DIP) is a crime reduction initiative, which provides a support structure to encourage offenders out of crime and into treatment. The Home Office funds the initiative however the Welsh Assembly Government implements it in Wales.

The Drug Intervention Programme (DIP) Wales has completed its third year of operational delivery across the four main regions of Wales. Details of the DIP Programme are available from the Wales Annual Report for 2008-09 at:

<http://wales.gov.uk/topics/housingandcommunity/safety/substancemisuse/dip/:jsessionid=vdlvKxtD3xTIDwgxcYcF1ttHrlsHP87Qy6BgmN3nZ2fv7VvYWJ2y!58552806?lang=en>

6. Additional substance misuse reports and data

This section highlights reports and other documents containing relevant substance misuse related data and information which the reader may find useful and which may not otherwise be referenced within this document.

A profile of alcohol and health in Wales.

This report, produced by the National Public Health Service for Wales and the Wales Centre for Health in 2009 provides an interesting and in-depth focus on the statistics relating to:

- alcohol-related and alcohol-attributable morbidity and mortality
- socio-economic patterns of alcohol consumption
- alcohol-related crime

The report provides clear definitions for the terms used in relation to alcohol consumption and draws upon a range of surveys containing alcohol related data including the Health Behaviour in School-aged Children survey (HBSC), the General Household Survey and the Welsh Health Survey. Information is provided at local authority and national level and, in some instances, comparison is also made between Wales and other countries, e.g. alcohol consumption estimates. The report is available in PDF format from:

<http://www.wales.nhs.uk/sites3/Documents/568/Alcohol%20and%20Health%20in%20Wales%5FWebFinal%5FE.pdf>

Guidance on reducing unplanned drop out from, and promoting reengagement with, substance misuse treatment services in Wales

This report represents a summary of the findings from a project designed to identify the range of factors influencing unplanned drop out from, and reengagement with, drug and alcohol treatment services in Wales from both service user and service provider perspectives. The research was undertaken in 2008 by National Public Health Service for Wales and commissioned by Welsh Assembly Government as part of the substance misuse strategy 'Working together to reduce Harm 2008 – 2018'. The key aims of the research included:

- Determining the factors reported by both service users and service providers as influencing, or leading to, unplanned drop-out at various stages in the treatment process and those factors influencing reengagement, or otherwise, with substance misuse treatment services following unplanned drop out
- Identifying the ways in which unplanned drop out from treatment services impacted on service users
- Identifying operational practice that contributes to both retention in, and reducing unplanned drop out from, substance misuse treatment

This report is awaiting publication by the National Public Health Service but enquiries can be made to: Health Protection Team, NPWS Wales. Tel: 029 20402478

The state of the drugs problem in Europe 2008 EMCDDA

The European Centre for Drugs and Drug Addiction (EMCDDA) provide an annual report on drug use across Europe drawing on available data provided by EU member states and candidate countries. Useful information and perspective is provided on a range of issues relating to drug use.

The report is available in PDF format from :

http://www.emcdda.europa.eu/attachements.cfm/att_64227_EN EMCDDA AR08 en.pdf

British Crime Survey 2008/09

This first report for 2008/09 provides statistics on crime and public attitudes to crime in England and Wales including those relating to the influence of alcohol and drug use (see Chapter 3). The BCS draws on crimes reported to the police and self-report questionnaire.

The report is available in PDF format from :

<http://www.homeoffice.gov.uk/rds/pdfs09/hosb1109vol1.pdf>

Health Behaviour in School Aged Children (HBSC)

The HBSC survey provides information on the health and well-being of children, measuring 3 age groups: 11,13 and 15 with currently 43 participating countries. The survey is undertaken every four years with the last being completed in 2005/06. The survey and resultant reports aim to provide information including tobacco, cannabis and alcohol use and sexual health.

The report is available in PDF format from:

http://www.hbsc.org/countries/downloads_countries/Wales/BR2_smoking&%20alcohol.pdf

Welsh Health Survey

The Welsh Health Survey is undertaken on continuous basis and results of the survey from 2003/05 are available and focus on factors impacting on health including smoking and alcohol .

The report is available in PDF format from:

<http://new.wales.gov.uk/statsdocs/health/sdr70-2008e.pdf>

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Annex 1: Definitions

Definitions

The following definitions are used within this report:

Drugs

The term “drugs” includes illegal drugs, misuse of legal prescriptions and over the counter medicines and solvent abuse.

Main substance

The term “main substance” refers to the main substance that led the client to seek help or be referred for help; note that many clients categorized under “alcohol” may also be receiving treatment for drugs and vice versa.

“Other drugs”

This category is referred to in several tables and includes the following:

Sedatives Unspecified, Anti-histamines Unspecified, Hydroxyzine, Cyclizine, Promethazine, Non-barb/benzo Seds, Methaqualone, Chlormethiazole, Meprobamate, Zopiclone, Zolpidem Tartrate, Propranolol, Chloral Derivatives, Glutethimide, Mephensin, Methylpentylol, Methylprylone, Oxyprenolol Hydrochloride, Other Sedatives, Stimulants Unspecified, Drinamyl, Appetite Suppressant, Diethylpropion, Phenmetrazine, Fenfluramine, Maizindol, Phenteramine, Other Stimulants, Methylphenidate, Pemoline, Prolintane, Fencamfamin, Caffeine, Other Psychoactive Drugs Unspecified, Procyclidine Hydrochloride, GHB/GBH, Minor Analgesics, Major Tranquillisers Unspecified, Chlorpromazine, Anti-diar/emetic, Naltrexone, Antabuse, Clonidine, Lofexidine, Acamprosate Calcium, Thiamine, Antipsychotic Unspecified, Depixol, Thioridazine, Trifluoperazine, Anti-inflammatory, Buspirone Hydrochloride, Beta-blockers.

“Other opiates”

This category is referred to in several tables and includes the following:

Opiates Unspecified, Morphine Sulphate, Opium, Dihydrocodeine, Dextromoramide, Dipipanone, Pethidine, Morphine Sulphate Amps, Hydromorphone, Oxymorphone, Hydrocodone, Oxycodone, Levorphanol, Phenazocine, Piritramide, Codeine Tabs, Dextropropoxyphene, Pentazocine, Buprenorphine, Codeine Unspecified, Opiate Comp Analgesics, Nalbuphine, Alphaprodine, Anileridine, Ethoheptazine, Fentanyl, Phenoperidine, Meptazinol, Papaveretum, Tramadol, Hydrochloride, Opiate Cont Mixture, Codeine Linctus, Gee's Linctus, Collis-brown, Phensedyl, Actifed, Kaolin and Morphine, Other Opiates

Clients referred - refers to clients who were referred between April 2008 and March 2009. If more than 6 weeks elapsed between the end of a course of treatment and the start of a new course then the client is counted again.

Prevalence

Prevalence of a particular condition is the total number of cases of the condition in a population at a given time and is usually expressed as a rate per 100,000 population. For example if there are (say) 24,000 drug and/or alcohol users in Wales (which has a population of approximately 3m) then the prevalence rate is about 800 per 100,000. It is difficult to estimate the true prevalence rate because not

all drug and/or alcohol users are known to the authorities. A prevalence rate based on the numbers of individuals on the database will therefore underestimate the true prevalence.

Incidence

The incidence of a particular condition is the number of new cases of the condition occurring within a given time (usually a year). For example, if 15,000 new cases of drug and/or alcohol abuse occur in Wales during 2008-09 then the incidence rate for 2008-09 is 500 per 100,000 population. Again the numbers notified to the database will underestimate the true extent of substance misuse.

The incidence rates in this report are derived from a 2-stage process. First the referrals are reduced by the number of multiple attendees to produce the number of individuals. Second, the individuals with an unspecified main substance are allocated in the ratio 60:40 between alcohol and drugs (Tables 11a and b).

95% Confidence Intervals

When an estimate of a particular characteristic for a population is based on a sample there is a degree of uncertainty about the estimate which depends on both the underlying variability of the characteristics and on the sample size. The 95% confidence interval is a measure of this uncertainty and gives the limits within which the "true" value will lie with a probability of 95%. For example, an estimate of (say) 30% for the prevalence of blue eyes in the population with 95% confidence limits of 25% to 35% means that the "true" prevalence lies between these two figures with a probability of 95%. A more precise estimate can be obtained by increasing the sample size.

European Age-Standardised Rate (EASR)

A European Age-Standardised Rate is one which is corrected for the age structure of the population. It is the rate for a particular area (say a Local Authority area) which would result from applying age-specific rates for that area to an artificial age structure known as the Standard European population. The object of the standardisation is to facilitate comparison between areas with varying age structures.

Rate

Rate per 100,000 population (based on ONS 2007 mid year estimates).

Routinely collected data

Sources

The chapter draws on a number of sources to provide wider evidence available on substance misuse in Wales including:

- PEDW (Patient Episode Data Wales) – hospital data
- Office for National Statistics – vital registration deaths data
- Death registration data from other UK countries
- NPHS: communicable disease notifications
- Police force data.

The following abbreviations are used:

List of abbreviations

DBS	Dried blood spot test
HBV	Hepatitis B
HCV	Hepatitis C
HIV	Human immunodeficiency Virus
IDUs	Injecting drug users
SMHNA	Substance misuse and health needs assessment
UAPMP	Unlinked anonymous prevalence monitoring programme
WNDSM	Welsh national database for substance misuse

Alcohol-related hospital admissions and mortality includes the following ICD-10 codes:

F10*:	Mental and behavioural disorders due to use of alcohol
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
I42.6:	Alcoholic cardiomyopathy
K29.2:	Alcoholic gastritis
K70*:	Alcoholic liver disease
K73*:	Chronic hepatitis nec (not elsewhere classified)
K74*:	Fibrosis and cirrhosis of liver (excluding K74.3 – K74.5 – Billiary Cirrhosis)
K86.0:	Alcohol induced chronic pancreatitis
X45:	Accidental poisoning by and exposure to alcohol
X65:	Intentional self-poisoning by and exposure to alcohol
Y15:	Poisoning by and exposure to alcohol, undetermined intent

ONS definition 2009

*indicates that any fourth-character classification can be added to the first three characters

Drug related hospital admissions and mortality includes the following ICD-10 codes:

F11*:	Mental and behavioural disorders due to use of opioids
F12*	Mental and behavioural disorders due to use of cannabinoids
F13*	Mental and behavioural disorders due to use of sedatives or hypnotics
F14*	Mental and behavioural disorders due to use of cocaine
F15*	Mental and behavioural disorders due to use of other stimulants
F16*	Mental and behavioural disorders due to use of hallucinogens
F18*	Mental and behavioural disorders due to use of volatile solvents
F19*	Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances
T40*	Poisoning by narcotics and psychodysleptics (hallucinogens)
T42*	Poisoning by antiepileptic, sedative-hypnotic and antiparkinsonism drugs
T43*	Poisoning by psychotropic drugs, not elsewhere classified

ONS definition 2009

*indicates that any fourth-character classification can be added to the first three characters

The fourth-character subdivisions for use with categories F10-F19 are:

.0 Acute intoxication

A condition that follows the administration of a psychoactive substance resulting in disturbances in level of consciousness, cognition, perception, affect or behaviour, or other psycho-physiological functions and responses. The disturbances are directly related to the acute pharmacological effects of the substance and resolve with time, with complete recovery, except where tissue damage or other complications have arisen. Complications may include trauma, inhalation of vomitus, delirium, coma, convulsions, and other medical complications. The nature of these complications depends on the pharmacological class of substance and mode of administration.

Acute drunkenness in alcoholism

"Bad trips" (drugs)

Drunkenness NOS

Pathological intoxication

Trance and possession disorders in psychoactive substance intoxication

Excludes: intoxication meaning poisoning

.1 Harmful use

A pattern of psychoactive substance use that is causing damage to health. The damage may be physical (as in cases of hepatitis from the self-administration of injected psychoactive substances) or mental (e.g. episodes of depressive disorder secondary to heavy consumption of alcohol).

Psychoactive substance abuse

.2 Dependence syndrome

A cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.

The dependence syndrome may be present for a specific psychoactive substance (e.g. tobacco, alcohol, or diazepam), for a class of substances (e.g. opioid drugs), or for a wider range of pharmacologically different psychoactive substances.

Chronic alcoholism

Dipsomania

Drug addiction

- .3 Withdrawal state
A group of symptoms of variable clustering and severity occurring on absolute or relative withdrawal of a psychoactive substance after persistent use of that substance. The onset and course of the withdrawal state are time-limited and are related to the type of psychoactive substance and dose being used immediately before cessation or reduction of use. The withdrawal state may be complicated by convulsions.
- .4 Withdrawal state with delirium
A condition where the withdrawal state as defined in the common fourth character .3 is complicated by delirium as defined in F05.-. Convulsions may also occur. When organic factors are also considered to play a role in the etiology, the condition should be classified to F05.8.
Delirium tremens (alcohol-induced)
- .5 Psychotic disorder
A cluster of psychotic phenomena that occur during or following psychoactive substance use but that are not explained on the basis of acute intoxication alone and do not form part of a withdrawal state. The disorder is characterized by hallucinations (typically auditory, but often in more than one sensory modality), perceptual distortions, delusions (often of a paranoid or persecutory nature), psychomotor disturbances (excitement or stupor), and an abnormal affect, which may range from intense fear to ecstasy. The sensorium is usually clear but some degree of clouding of consciousness, though not severe confusion, may be present.
Alcoholic:
· hallucinosis
· jealousy
· paranoia
· psychosis NOS
Excludes: alcohol- or other psychoactive substance-induced residual and late-onset psychotic disorder ([F10-F19](#) with common fourth character .7)
- .6 Amnesic syndrome
A syndrome associated with chronic prominent impairment of recent and remote memory. Immediate recall is usually preserved and recent memory is characteristically more disturbed than remote memory. Disturbances of time sense and ordering of events are usually evident, as are difficulties in learning new material. Confabulation may be marked but is not invariably present. Other cognitive functions are usually relatively well preserved and amnesic defects are out of proportion to other disturbances.
Amnesic disorder, alcohol- or drug-induced
Korsakov's psychosis or syndrome, alcohol- or other psychoactive substance-induced or unspecified
Excludes: nonalcoholic Korsakov's psychosis or syndrome ([F04](#))
- .7 Residual and late-onset psychotic disorder
A disorder in which alcohol- or psychoactive substance-induced changes of cognition, affect, personality, or behaviour persist beyond the period during which a direct psychoactive substance-related effect might reasonably be assumed to be operating. Onset of the disorder should be directly related to the use of the psychoactive substance. Cases in which initial onset of the state occurs later than episode(s) of such substance use should be coded here only where clear and strong evidence is available to attribute the state to the residual effect of the psychoactive substance. Flashbacks may be distinguished from psychotic state partly by their

episodic nature, frequently of very short duration, and by their duplication of previous alcohol- or other psychoactive substance-related experiences.

Alcoholic dementia NOS

Chronic alcoholic brain syndrome

Dementia and other milder forms of persisting impairment of cognitive functions

Flashbacks

Late-onset psychoactive substance-induced psychotic disorder

Posthallucinogen perception disorder

Residual:

- affective disorder
- disorder of personality and behaviour

Excludes: alcohol- or psychoactive substance-induced:

- Korsakov's syndrome ([F10-F19](#) with common fourth character .6)
- psychotic state ([F10-F19](#) with common fourth character .5)

.8 Other mental and behavioural disorders

.9 Unspecified mental and behavioural disorder

Annex 2: Key Quality Issues

Key Quality Issues

Welsh National Database for Substance Misuse

Source

The database contains details of all referrals to drug and alcohol agencies in Wales and is held by Health Solutions Wales. A full list of data items is shown in Annex 3.

Coverage

The data relates only to people presenting to the agencies and may constitute only a proportion of all substance misusers.

Comparisons between Annual Reports

The database is dynamic ie records are subject to amendment as further information is submitted by agencies. This means that figures in this report are not directly comparable with those published in earlier reports.

The nature of the clientele and the variability of the internal structures of service providers has meant that data quality has always been difficult to maintain in the WNDSM. Some providers are still finding it difficult to submit some of the fields and in particular, are failing to close some cases at the appropriate time. This means that the numbers of clients apparently waiting for assessment or treatment are artificially inflated (Tables 19 and 20).

Chart A1 shows the status of all referrals submitted to the database for 2008-09 as at June 2009 when the file was frozen for analytical purposes. This flow chart highlights the main problem areas for data quality. For example, 1,052 referrals (4 per cent) have no main substance specified (Box A) and 1,424 cases have been treated with no record of a prior assessment (Box F). The 6,392 cases (Box N3) which were closed and categorised as "did not attend" before assessment or treatment (and are excluded from the main analyses) are also a measure of the sometimes less than rigorous nature of referral procedures in some agencies.

Data quality

All Service Providers in receipt of Welsh Assembly Government funding, either directly or via the Community Safety Partnerships, to deliver substance misuse services are required to comply fully with the reporting requirements of the database.

The Welsh Assembly Government's Substance Misuse Advisory Regional Teams (SMARTs) have been working with treatment services to improve data quality. However, care needs to be exercised when looking at trends as a number of agencies have not submitted all of the relevant fields by the freeze date of 26 June 2009. For the purpose of this report, the data quality issues that affect this report are:

- Not all agencies are able to submit all the fields and so care needs to be exercised when looking at trends. Data Quality exercises are currently being undertaken.

- Some of the demographic data may be inaccurate since some clients are reluctant or unable to provide accurate responses to some questions. However, this will always be the case with a system that relies largely upon self-reporting.
- There is under-reporting of secondary problem substance which inhibits the identification of emerging trends and patterns in substance misuse.
- Some agencies are failing to close cases where a client is transferred between agencies. This means that individuals could be counted more than once on the database.
- Clients are categorised by 'main substance' which means that many clients categorised under 'Alcohol' may also be receiving treatment for drug misuse.
- The main problem substance is not recorded for some clients accounting for 4% of all referrals in 2008-09.
- Where the local authority of the client is unknown, the local authority of the treatment agency is used for this analysis. The pattern of unknown local authority varies considerably for services in different areas of Wales and will affect the rates presented.
- Where a client is transferred between agencies and the discharge details are not completed on the database, the client may be counted more than once.

Waiting times

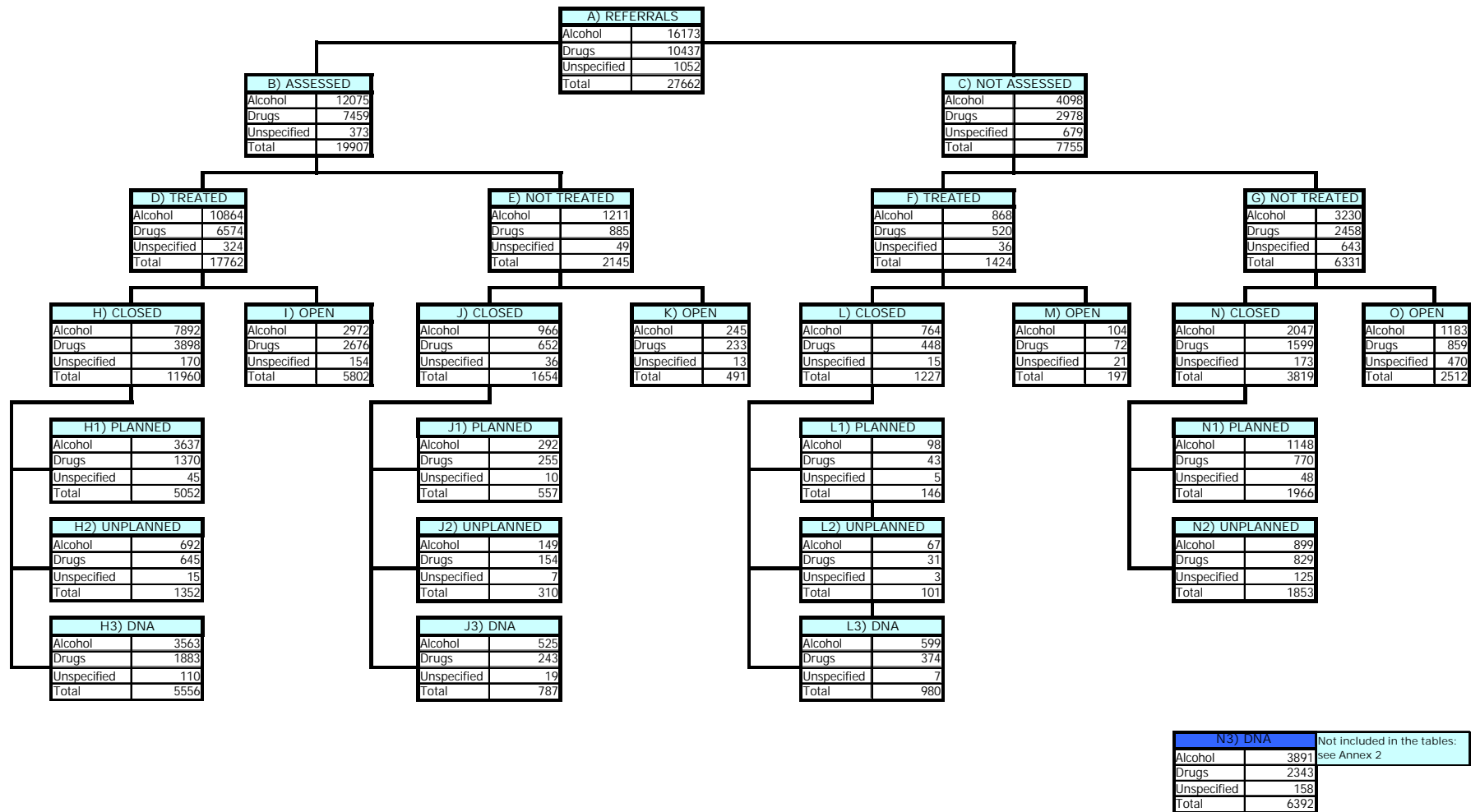
Figures in this report show the waiting time position for the three years 2006-07 to 2008-09. They relate firstly to individuals whose assessment or treatment has started:

- Referral to assessment waiting times during the three years (Table 17)
- Assessment to commencement of treatment for the same years (Table 18)
- Note that for some referrals in each year no assessment date is recorded and these referrals therefore do not appear in Tables 17 or 18.

Secondly Tables 19 and 20 show the number of individuals who have been referred and are still waiting for either assessment or treatment (having been assessed).

Waiting times data could be improved in future years by the complete and timely recording of key assessment and treatment dates on the database and by all clients having a record of main problem substance.

Chart A1: Status of referrals in 2008-09 as at 26th June 2009



Annex 3: Common Dataset

Common Dataset

Extracted from 'Guidance for Community Safety Partnerships and Service Provider Agencies March 2009

Item No.	Data Item	Format/length
Personal Details		
1	Agency Code/Practice Code	an6
2	First Letter of Last name	an1
3	First Letter of First name	an1
4	Date of Birth	d10
5	Gender	an1
6	District Area	an30
7	Town	an30
8	Local Authority	an30
9	Postcode	an6
10	Ethnic Category	an1
11	Agency Client Number	an15
12	1 st Language	an3
13	Number of Children under 18 Living Elsewhere	an2
14	Number of Children under 18 living with Client	an2
15	Number of Vulnerable Adults living with Client	an2
Contact Details		
16	Date of Referral	d10
17	Referral Source	an30
18	Date of Initial Contact	d10
19	Date of Initial Assessment	d10
20	Date of Full Assessment	d10
21	Date Treatment Began	d10
22	Date of Most Recent Contact	d10
23	Date Contact Ended	d10
24	Reason Contact Ended	an40
Current Problem Profile		
25	Primary Substance Used	an40
26	Primary Substance Source	an30
27	Primary Substance Route of Ingestion	an20
28	Primary Substance Frequency of use	an15
29	Primary Substance Age first used	an3
30	Secondary Substance Used	an40
31	Secondary Substance Source	an30
32	Secondary Substance Route of Ingestion	an20
33	Secondary Substance Frequency of use	an15
34	Secondary Substance Age first used	an3
35	Other Substance used	an40
36	Other Substance Source	an30
37	Other Substance Route of Ingestion	an20

Item No.	Data Item	Format/length
38	Other Substance Frequency of use	an15
39	Other Substance Age first used	an3
40	Ever Injected	an1
41	Injected in the Last Month	an1
42	Ever Shared	an1
43	Age first Injected	an3
44	Ever Treated Before	an2
45	Agency Type of first treatment	an30
46	Age at first Treatment	an3
47	Weekly Alcohol Consumption Units	an3
	Health Details	
48	Pregnant	an1
49	Vaccinated Against Hepatitis B	an1
50	Vaccination Provided	an1
51	Immunity Declared	an1
52	Diagnosed Mental Health Issues	an1
53	Diagnosed Mental Health Issues Description	an30
54	Self-Reporting Mental Health Issues	an1
55	Self-Reporting Mental Health Issues Description	an30
56	Physical Health/Illness	an1
57	Physical Health/Illness Description	an30
58	Other Diagnosed Health Issues	an1
59	Other Diagnosed Health Issues Description	an30
	Treatment Details	
60	Prescribed Substitute 1	an40
61	Prescribed Substitute 2	an40
62	Prescribed Detoxification 1	an40
63	Prescribed Detoxification 2	an40
64	Residential Rehabilitation	an1
65	Residential Detoxification	an1
66	Supervised Consumption	an1
67	Formal Shared Care Schemes with GP	an1
68	Structured Counselling	an1
69	Structured Day care Programme	an1
70	Counselling/Support, e.g., crisis intervention	an1
71	Information Only	an30
72	Needle Exchange	an1
73	Referral to Other Organisation Code 1	an6
74	Referral to Other Organisation Date 1	an10
75	Referral to Other Organisation Code 2	an6
76	Referral to Other Organisation Date 2	an10
77	Referral to Other Organisation Code 3	an6
78	Referral to Other Organisation Date 3	an10
79	Referral to Other Organisation Code 4	an6
80	Referral to Other Organisation Date 4	an10
81	Referral to Other Organisation code 5	an6

Item No.	Data Item	Format/length
82	Referral to Other Organisation Date 5	an10
83	Referral to Other Organisation Code 6	an6
84	Referral to Other Organisation Date 6	an10
85	GP details: Initials	an4
86	GP details: Surname	an30
87	GP details: Practice Name	an30
88	GP details: Address Line 1	an30
89	GP details: Address Line 2	an30
90	GP details: Postcode	an8
91	Case Worker	an40