



Llywodraeth Cymru
Welsh Government

Substance Misuse in Wales 2010-11

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SUBSTANCE MISUSE IN WALES 2010-11

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1. Introduction

This report summarises Substance Misuse Statistics for Wales, 2010-11. It has been compiled by Welsh Government in collaboration with NHS Wales Informatics Service (NWIS) and Public Health Wales.

- 1.1. Part 1 includes statistics from the Welsh National Database for Substance Misuse. The profile of referrals during 2010-11 to substance misuse treatment services is described as well as treatment service activity between 2007-08 and 2010-11.
- 1.2. 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. Key points are summarised on page 54.
- 1.3. The database guidance and information about the Welsh Government's Substance Misuse policy and key performance indicators can be obtained at <http://wales.gov.uk/substancemisuse>

Part I. Welsh National Database for Substance Misuse 2010-11

2. Background

- 2.1. The overall management of the system, including advice on enhancements to the database, national performance issues linked to the data and the analysis of other routinely collected data is overseen by the national Management Information Board.
- 2.2. All substance misuse treatment service providers in Wales that are in receipt of Welsh 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 therefore been revised annually. This guidance is available electronically at: <http://wales.gov.uk/substancemisuse>. A copy of the Common Dataset is at Annex 3.
- 2.3. 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://wales.gov.uk/substancemisuse>.
- 2.4. The Treatment Outcomes Profile (TOP) was developed by the National Treatment Agency (NTA) in collaboration with Dr John Marsden and Dr Michael Farrell of the National Addiction Centre, Institute of Psychiatry, Kings College, London. The items that appear in the TOP were psychometrically evaluated utilising a cohort of over 1000 service users, recruited from 63 treatment agencies in England and demonstrated an acceptable level of reliability and validity.
- 2.5. In April 2009 the Welsh Government adopted the NTA's outcome measurement tool. The Treatment Outcome Profile (TOP) has been mandated for all clients aged 16 and over who were in receipt of structured treatment. Whilst the data are predominantly supplied by those agencies who are delivering structured treatment, it is delivered as a package of care and includes less structured treatment interventions. These services are equally important in securing and maintaining positive outcomes for an individual in treatment.
- 2.6. A copy of the TOP form is at Annex D. The TOP provides a systematic method of measuring both qualitative and quantitative progress at an individual level to gauge the impact of substance misuse

treatment. It measures an individual's health and well-being against four key domains that have been established internationally as the areas most affected by substance misusing behaviour;

- Drug and Alcohol Use;
- Physical and Psychological Health;
- Offending and Criminal Involvement; and,
- Social Functioning.

- 2.7 An individual is assessed at the beginning of treatment (joint assessment by the client and the key worker) as part of routine care planning. This TOP at the start of treatment (start TOP) measures the client's care planning. This TOP measures the client's status against the four key domains. Every 3 months a review TOP is undertaken to measure progress against the four domains and a final exit TOP is undertaken on completion of treatment. The routine review of clients is seen as good practice and should be embedded in care management and clinical practice; the use of TOP as a tool assists in the process and helps individuals to participate in reviewing their own progress during treatment.
- 2.8 The initial implementation of TOP was overseen by a National Working Group with membership representing Community Safety Partnerships, Substance Misuse Treatment Services, NHS Wales Informatics Services (formerly Health Solutions Wales) and the Welsh Government. As the TOP implementation has been embedded in practice the monitoring role of this working group has been transferred to the Management Information Board, as detailed in paragraph 1.1.
- 2.9 Section 3.7 of this report summarises emerging findings from the data submitted by treatment agencies in Wales between April 2009 and March 2011. As a new database development the reporting of TOP will continue to evolve over time.
- 2.10 More information on the introduction of TOP is available from:
<http://wales.gov.uk/topics/housingandcommunity/safety/substancemisuse/pmf/top/?lang=en>

3. Executive Summary

3.1 Referrals

- There were 28,720 referrals notified to the database in 2010-11 (Table 1).
- Of these referrals, 15,314 (53 per cent) related to cases where alcohol was the main problem substance (Table 1).
- There were 11,481 (40 per cent) cases where drugs were recorded as the main problem (Table 1).
- Heroin accounted for 47 per cent of all referrals for which drugs were specified as the main problem (Table 4).
- Cannabis (21 per cent) and amphetamines (7 per cent) were the other most commonly reported drugs (Table 4).
- Males accounted for approximately two thirds of all referrals for both alcohol (64 per cent) and drugs (73 per cent) (Tables 2a and 2b).
- The median age on referral for alcohol (39) was substantially higher than that for drugs (30) (Tables 2a and 2b).
- The age profile of cannabis users differed from the profiles for most other drugs: 78 per cent of cannabis referrals were under 30 compared with 42 per cent for all other drugs (Table 5a-5g).

3.2 Geographical distribution of incidence

- The overall incidence rates for Wales were 374 per 100,000 population for alcohol and 278 for drugs (Tables 11a and 11b).
- Estimated incidence rates varied significantly between Community Safety Partnerships across Wales; for alcohol the range was from 222 to 707 per 100,000 and for drugs the range was from 131 to 417 per 100,000 (Tables 11a and 11b).

3.3 Previous history of treatment

- Some clients were referred to agencies on more than one occasion during the year and the 28,720 referrals in 2010-11 relate to 19,610 individuals (Table 6).
- Of the 19,610 individuals referred to agencies, 9,626 (49 per cent) were new to the database i.e. had not previously been referred to agencies in Wales since the database was set up in 2005-06 (Table 6).

3.4 Comparison with earlier years

- The database is dynamic, allowing treatment providers to amend records as and when new information becomes available and as data quality issues are resolved. This means that the figures in this report are based on a snapshot of the database frozen in July 2011 and are not strictly comparable with those contained in earlier reports; for example in this report around 1,000 more referrals were recorded for 2009-10. It is possible, however, to use this frozen file to compare 2010-11 figures with the amended figures for previous years as shown in Table A.

Table A: Comparison of key data 2007-08 to 2010-11

	<u>2007-08</u>	<u>2008-09</u>	<u>2009-10</u>	<u>2010-11</u>
Referrals	30,306	30,306	28,215	28,720
Individuals	19,370	20,140	19,527	19,610
Ratio of referrals to individuals	1.56	1.50	1.44	1.46
New cases	12,563	11,859	10,711	9,626
New cases as per cent of individuals	65%	59%	55%	49%
Incidence rate per 100,000 population:				
Alcohol	376	394	372	374
Drugs	274	279	279	278

3.5 Treatments started

- Tables 17a to 17g display the profiles of clients starting treatment over the period 2007-08 to 2010-11
- Over the 4 year period, the median age for treatment has risen from 37 to 40 for alcohol and from 29 to 32 for heroin (Tables 17a and 17b)
- The percentages aged under 30 has fallen from 31.7 per cent to 25.1 per cent for alcohol and from 51.3 per cent to 38.3 per cent for heroin (Tables 17a and 17b)

3.6 Waiting Times

- The percentage of clients assessed within 10 days of referral has increased to 66.5 per cent (Table 18c)
- The percentage of clients for which treatment started within 10 days of assessment has also increased to 90.2 per cent (Tables 19c)
- Tables 20 and 21 show the length of time which open cases appeared to have been waiting for assessment or treatment at 31 March 2011 and at comparable dates for referrals in 2010, 2009 and 2008. The increase in numbers, in particular for those appearing to wait over 12 months, may be a reflection of the failure of some agencies to record the details of case closures.

3.7 Treatment Outcome Profile (TOPs)

This is the first time that summary information has been published from Treatment Outcomes Profile in Wales. The information presented covers all recorded start, review and exit TOPs recorded on the database since April 2009 when the tool was first adopted in Wales.

- Tables 22 to 26c report on the changes in client characteristics between starting and subsequent TOPs for the two year period since the scheme first became operational. The way in which clients has progressed through the system is illustrated in Chart 5 on page 53. Information from a total of 17,204 start TOPs was recorded of which a first review TOP was available for 6,387, a second review for 3,117, a third review for 1,700 and so on. At various stages cases have been closed and exit TOPs conducted, the number of exits recorded was 6,424. It should be noted however that some cases remain open without further contact and that some cases are closed to a specific agency but transferred to another agency legitimately without an exit TOP and this is likely to introduce biases when making comparisons between client characteristics at start, review and exit TOPs.
- Between starting TOP and exit TOP, the frequency of use of the problem substance was significantly reduced for both alcohol and drugs – by 41 per cent for alcohol use, 45 per cent for opiate use, 34 per cent for amphetamine use (Table 23).
- At the exit TOP, the percentage not having used the problem substance for at least 28 days were 13 per cent for alcohol, 17 per cent for heroin, 17 per cent for cannabis and 26 per cent for amphetamines (Table 23).
- Most of the improvement recorded was within the first three months of treatment but smaller improvements were noted as treatment continued (Table 24).
- Client well-being (self reported) improved significantly for both alcohol and drug clients between starting and exit TOPs (Table 26a, 26b and 26c).

4. Data quality

All Service Providers in receipt of Welsh 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 Government's Substance Misuse Advisory Regional Teams (SMARTs) have worked 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 07 July 2011. For the purpose of this report, the data quality issues that affect this report are listed below:

- Not all agencies are able to report on all the fields and so care needs to be exercised when looking at geographical differences across Wales.
- Some of the demographic data will be inaccurate because some clients are reluctant or unable to provide accurate responses to some questions. This will always be the case with a system that relies largely upon self-reporting.
- There is widespread under-reporting of secondary problem substance; this inhibits the identification of emerging trends and patterns in poly-drug use.
- Some agencies are failing to close cases when a client is transferred between agencies. This means that some individuals will 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 and vice versa.
- The main problem substance is not recorded for some clients. Almost 7 per cent of all referrals in 2010-11 did not contain this information.

- Note that in the 2009-10 report some tables did not include referrals to less structured treatments. For the 2010-11 annual reporting cycle the data includes both structured and less structured treatments. Historic data in this report includes less structured treatments with the exception of around 500 cases in 2009-10 for whom the data was not available.
- Where the local authority of the client is unknown, the local authority of the treatment agency is used for this analysis. The percentage of cases with no known local authority varies considerably across different areas of Wales.
- This is the first time that TOP data has been published. As with any new dataset caution should be exercised in interpretation as the depth of analysis increases. Note that TOP was only mandated for structured treatments and for clients aged 16 or over. Likely biases within the dataset should also be borne in mind.

5. Results

5.1 Structure

- Tables 1 to 11 give details of the 28,720 referred to Welsh agencies during 2010-11. This total excludes the 4,454 cases which were closed for non-attendance before assessment or treatment (see Chart 4).
- Tables 12 to 17 look at trends in activity from 2007-08 to 2010-11 and categorize clients by the year in which the activity took place and not by the year of referral.
- Tables 18 to 21 relate to waiting times over the same four year period.
- Tables 22 to 26 are new and relate to the first two years of operation of the Treatment Outcome Profile (TOP) system.

5.2 Tables

Table 1: Referrals in 2010-11 by main substance

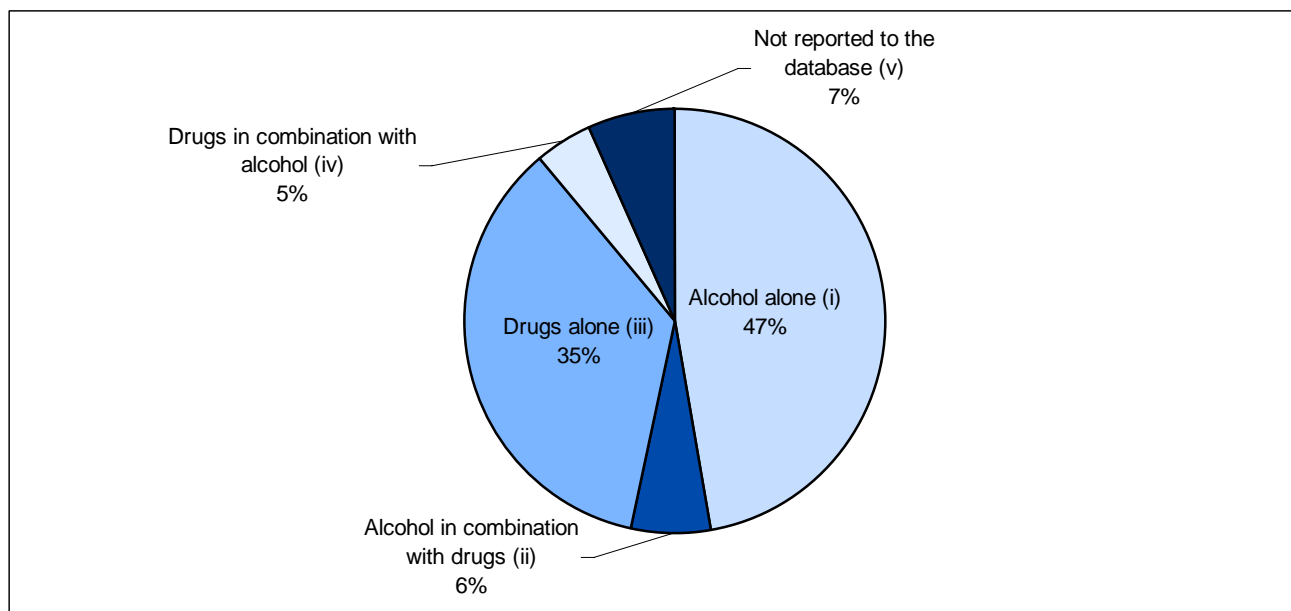
Main Substance	Male		Female		Total	
	Number	Per cent (a)	Number	Per cent (a)	Number	Per cent (b)
Alcohol alone (i)	8,528	62.7	5,066	37.3	13,594	47.3
Alcohol in combination with drugs (ii)	1,257	73.1	463	26.9	1,720	6.0
Drugs alone (iii)	7,398	72.6	2,790	27.4	10,188	35.5
Drugs in combination with alcohol (iv)	927	71.7	366	28.3	1,293	4.5
Not reported to the database (v)	1,344	69.8	581	30.2	1,925	6.7
All Referrals	19,454	67.7	9,266	32.3	28,720	100.0

Source: WNDSM, NHS Wales Informatics Service

(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 2010-11 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: Referrals in 2010-11 by age: main substance alcohol (a)

Age on Referral	Male	Female	Total	
			Number	Rate (b)
Under 15	122	136	258	50
15 – 19	584	376	960	483
20 – 29	1,839	900	2,739	694
30 – 39	2,543	1,206	3,749	1,108
40 – 49	2,605	1,542	4,147	981
50 – 59	1,442	907	2,349	619
60+	645	456	1,101	145
All ages (c)	9,785	5,529	15,314	509
<i>Median (d)</i>	39	41	39	.
<i>Percentage aged under 30</i>	26.0%	25.5%	25.8%	.
<i>Percentage aged 50 or over</i>	21.3%	24.7%	22.5%	.

Source: WNDSM, NHS Wales Informatics Service

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

(b) Rate per 100,000 population.

(c) Includes 11 referrals where age is unreported.

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

. Data item not applicable

Table 2b: Referrals in 2010-11 by age: main substance drugs (a)

Age on Referral	Male	Female	Total	
			Number	Rate (b)
Under 15	159	62	221	43.2
15 – 19	1,017	380	1,397	703.3
20 – 29	2,692	1,317	4,009	1,015.8
30 – 39	2,975	966	3,941	1,164.4
40 – 49	1,235	327	1,562	369.4
50 – 59	204	84	288	75.8
60+	41	20	61	8.0
All ages (c)	8,325	3,156	11,481	381.9
<i>Median (d)</i>	30	28	30	.
<i>Percentage aged under 30</i>	46.5%	55.7%	49.0%	.
<i>Percentage aged 50 or over</i>	2.9%	3.3%	3.0%	.

Source: WNDSM, NHS Wales Informatics Service

(a) Drugs alone and drugs in combination with alcohol.

(b) Rate per 100,000 population.

(c) Includes 2 referrals where age is unreported.

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

. Data item not applicable

Table 3a: Referrals in 2010-11 by source of referral: main substance alcohol (a)

Source of Referral	Male	Female	Total	
			Number	Per cent (b)
Self	3,351	1,885	5,236	34.2%
Family/Friends	307	133	440	2.9%
Non-Statutory Service Provider	1,294	759	2,053	13.4%
Statutory Service Provider	447	246	693	4.5%
GP	1,447	731	2,178	14.2%
CPN/Community Mental Health	215	169	384	2.5%
Psychiatry	68	56	124	0.8%
Midwife	1	18	19	0.1%
NHS A&E	147	86	233	1.5%
NHS Other	365	216	581	3.8%
Needle Exchange	0	0	0	0.0%
Court	64	31	95	0.6%
Drug Intervention Programme (DIP)	186	41	227	1.5%
Police	223	186	409	2.7%
Prison	65	6	71	0.5%
Probation Service / Drug Rehabilitation Requirement (DRR)	394	71	465	3.0%
Youth Offending Team (YOT)	244	114	358	2.3%
Solicitor	2	0	2	0.0%
Social Services	297	307	604	3.9%
Educational Establishment	70	86	156	1.0%
Job Centre	32	9	41	0.3%
Community Care Assessment	10	10	20	0.1%
Support Agencies (d)	386	285	671	4.4%
Other (c)	170	84	254	1.7%
All Sources	9,785	5,529	15,314	100.0%

Source: WNDSM, NHS Wales Informatics Service

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

(b) Percentage of all referrals.

(c) Including 254 cases where source of referral was not specified.

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

Table 3b: Referrals in 2010-11 by source of referral: main substance drugs (a)

Source of Referral	Male	Female	Total	
			Number	Per cent (b)
Self	2,152	866	3,018	26.3%
Family/Friends	182	56	238	2.1%
Non-Statutory Service Provider	820	377	1,197	10.4%
Statutory Service Provider	384	161	545	4.7%
GP	673	283	956	8.3%
CPN/Community Mental Health	121	51	172	1.5%
Psychiatry	44	15	59	0.5%
Midwife		17	17	0.1%
NHS A&E	13	11	24	0.2%
NHS Other	101	66	167	1.5%
Needle Exchange	0	0	0	0.0%
Court	107	20	127	1.1%
Drug Intervention Programme (DIP)	1,415	395	1,810	15.8%
Police	392	97	489	4.3%
Prison	229	78	307	2.7%
Probation Service / Drug Rehabilitation Requirement (DRR)	571	112	683	5.9%
Youth Offending Team (YOT)	329	42	371	3.2%
Solicitor	1	3	4	0.0%
Social Services	175	178	353	3.1%
Educational Establishment	151	78	229	2.0%
Job Centre	54	11	65	0.6%
Community Care Assessment	1	1	2	0.0%
Support Agencies (d)	278	159	437	3.8%
Other (c)	132	79	211	1.8%
All Sources	8,325	3,156	11,481	100.0%

Source: WNDSM, NHS Wales Informatics Service

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

(b) Percentage of all referrals.

(c) Including 211 cases where source of referral was not specified.

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

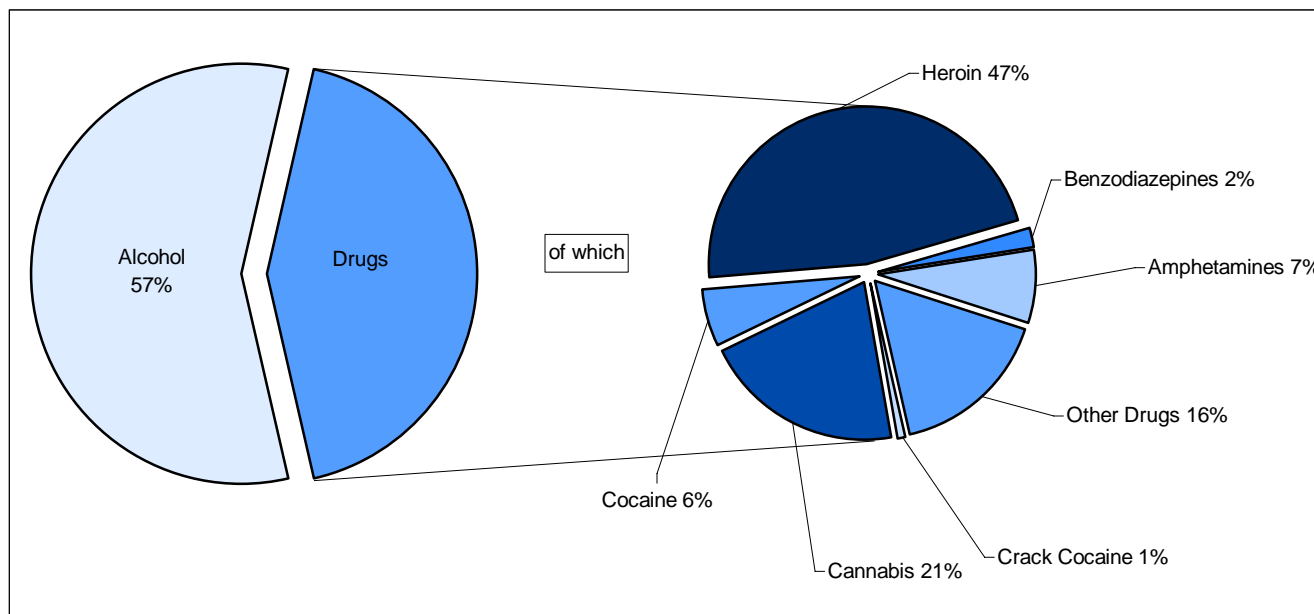
Table 4: Referrals in 2010-11 by individual main substance

Main substance	Male	Female	Total	
			Number	Per cent (a)
Alcohol	9,785	5,529	15,314	57.2%
Amphetamines	515	331	846	3.2%
Anti-depressants	4	1	5	0.0%
Barbiturates		1	1	0.0%
Benzodiazepines	175	67	242	0.9%
Cannabis	1,834	525	2,359	8.8%
Cocaine	575	105	680	2.5%
Crack Cocaine	71	28	99	0.4%
Ecstasy	21	10	31	0.1%
Hallucinogens	35	17	52	0.2%
Heroin	3,870	1,499	5,369	20.0%
Methadone (b)	591	252	843	3.1%
Other opiates (c)	138	51	189	0.7%
Poly use; no details	338	189	527	2.0%
Solvents	115	59	174	0.6%
Steroids	32	21	53	0.2%
Other drugs (d)	11		11	0.0%
Not reported (e)	1,344	581	1,925	.
All referrals	19,454	9,266	28,720	100.0%

Source: WNDSM, NHS Wales Informatics Service

- (a) Percentage of all referrals for which the main substance is reported.
- (b) Note that it is not possible to be clear if methadone recorded as a main substance refers to prescribed or illicit methadone; guidance to data providers will be revised to allow more meaningful analysis in future.
- (c) See Annex 2 for a list of drugs included under "Other opiates".
- (d) See Annex 2 for a list of drugs included under "Other drugs".
- (e) 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 2010-11 by individual substance (a)



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

Table 5a: Profile of referrals in 2010-11: main substance alcohol

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	122	136	258	50.5
15-19	584	376	960	483.3
20-29	1,839	900	2,739	694.0
30-39	2,543	1,206	3,749	1,107.7
40-49	2,605	1,542	4,147	980.9
50-59	1,442	907	2,349	618.5
60+	645	456	1,101	144.7
All ages(b)	9,785	5,529	15,314	509.4
Median age (c)	39	41	39	.
% under 30	26.0%	25.5%	25.8%	.
% 50 or over	21.3%	24.7%	22.5%	.
By Source of Referral				
Self	3,351	1,885	5,236	174.2
GP	1,447	731	2,178	72.4
Criminal Justice System (d)	1,176	449	1,625	54.1
Other (e)	3,811	2,464	6,275	208.7

Source: WNDSM, NHS Wales Informatics Service

(a) Rate per 100,000 population.

(b) Includes 11 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.

(e) Includes unreported source of referral.

. Data item not applicable

Table 5b: Profile of referrals in 2010-11: main substance heroin

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	2	0	2	0.4
15-19	65	79	144	72.5
20-29	1,209	740	1,949	493.8
30-39	1,766	518	2,284	674.8
40-49	714	133	847	200.3
50-59	99	24	123	32.4
60+	14	5	19	2.5
All ages (b)	3,870	1,499	5,369	178.6
Median age (c)	33	28	32	.
% under 30	33.0%	54.6%	39.0%	.
% 50 or over	2.9%	1.9%	2.6%	.
By Source of Referral				
Self	1,157	440	1,597	53.1
GP	232	98	330	11.0
Criminal Justice System (d)	1,553	512	2,065	68.7
Other (e)	928	449	1,377	45.8

Source: WNDSM, NHS Wales Informatics Service

(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.

(e) Includes unreported source of referral.

. Data item not applicable

Table 5c: Profile of referrals in 2010-11: main substance cannabis

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	133	32	165	32.3
15-19	703	190	893	449.6
20-29	612	163	775	196.4
30-39	247	88	335	99.0
40-49	101	38	139	32.9
50-59	34	11	45	11.8
60+	3	3	6	0.8
All ages (b)	1,834	525	2,359	78.5
Median age (c)	20	21	20	.
% under 30	79.0%	73.3%	77.7%	.
% 50 or over	2.0%	2.7%	2.2%	.
By Source of Referral				
Self	395	117	512	17.0
GP	155	39	194	6.5
Criminal Justice System (d)	563	52	615	20.5
Other (e)	721	317	1,038	34.5

Source: WNDSM, NHS Wales Informatics Service

(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.

(e) Includes unreported source of referral.

. Data item not applicable

Table 5d Profile of referrals in 2010-11: main substance amphetamines

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	2	6	8	1.6
15-19	34	27	61	30.7
20-29	168	113	281	71.2
30-39	179	123	302	89.2
40-49	109	56	165	39.0
50-59	20	5	25	6.6
60+	3	1	4	0.5
All ages	515	331	846	28.1
Median age (b)	32	31	31	.
% under 30	39.6%	44.1%	41.4%	.
% 50 or over	4.5%	1.8%	3.4%	.
By Source of Referral				
Self	146	111	257	8.5
GP	61	43	104	3.5
Criminal Justice System (c)	129	22	151	5.0
Other (d)	179	155	334	11.1

Source: WNDSM, NHS Wales Informatics Service

(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.

(d) Includes unreported source of referral.

. Data item not applicable

Table 5e: Profile of referrals in 2010-11: main substance cocaine

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	1	0	1	0.2
15-19	58	18	76	38.3
20-29	306	55	361	91.5
30-39	165	25	190	56.1
40-49	40	6	46	10.9
50-59	4	1	5	1.3
60+	1	0	1	0.1
All ages	575	105	680	22.6
Median age (b)	26	24	26	.
% under 30	63.5%	69.5%	64.4%	.
% 50 or over	0.9%	1.0%	0.9%	.
By Source of Referral				
Self	140	34	174	5.8
GP	51	10	61	2.0
Criminal Justice System (c)	281	22	303	10.1
Other (d)	103	39	142	4.7

Source: WNDSM, NHS Wales Informatics Service

(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.

(d) Includes unreported source of referral.

. Data item not applicable

Table 5f: Profile of referrals in 2010-11: main substance crack cocaine

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	0	0	0	0.0
15-19	6	3	9	4.5
20-29	30	9	39	9.9
30-39	27	11	38	11.2
40-49	8	5	13	3.1
50-59	0	0	0	0.0
60+	0	0	0	0.0
All ages	71	28	99	3.3
Median age (b)	29	31	30	.
% under 30	50.7%	42.9%	48.5%	.
% 50 or over	0.0%	0.0%	0.0%	.
By Source of Referral				
Self	12	12	24	0.8
GP	2		2	0.1
Criminal Justice System (c)	47	11	58	1.9
Other (d)	10	5	15	0.5

Source: WNDSM, NHS Wales Informatics Service

(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.

(d) Includes unreported source of referral.

. Data item not applicable

Table 5g: Profile of referrals in 2010-11: main or secondary substance crack cocaine

Profile of referral	Male	Female	Total	
			Number	Rate (a)
By Age				
Under 15	1	0	1	0.2
15-19	12	14	26	13.1
20-29	153	94	247	62.6
30-39	181	53	234	69.1
40-49	63	13	76	18.0
50-59	8	4	12	3.2
60+	2	0	2	0.3
All ages	420	178	598	19.9
Median age (b)	32	28	30	.
% under 30	39.5%	60.7%	45.8%	.
% 50 or over	2.4%	2.2%	2.3%	.
By Source of Referral				
Self	97	37	134	4.5
GP	11	4	15	0.5
Criminal Justice System (c)	247	104	351	11.7
Other (d)	65	33	98	3.3

Source: WNDSM, NHS Wales Informatics Service

(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.

(d) Includes unreported source of referral.

. Data item not applicable

Table 6: Multiple referrals in 2010-11 by main substance, age, gender 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 2010-11 (C)	With an earlier referral during 2010-11 (D)	Individuals referred in 2010-11 (E) (a)	Ratio of referrals to individuals (F) (b)	New cases as percentage of all individuals (G) (c)
Main Substance							
Alcohol	15,314	5,514	9,800	5,023	10,291	1.49	53.6%
Drugs	11,481	3,246	8,235	3,750	7,731	1.49	42.0%
Not reported (d)	1,925	866	1,059	337	1,588	1.21	54.5%
All substances	28,720	9,626	19,094	9,110	19,610	1.46	49.1%
Gender							
Male	19,454	6,471	398	6,073	13,381	1.45	48.4%
Female	9,266	3,155	118	3,037	6,229	1.49	50.7%
Age							
Under 20	3,032	1,741	1,291	626	2,406	1.26	72.4%
20-29	7,293	2,324	4,969	2,350	4,943	1.48	47.0%
30-39	8,228	2,238	5,990	2,772	5,456	1.51	41.0%
40-49	6,063	1,807	4,256	2,082	3,981	1.52	45.4%
50+	4,071	1,494	2,577	1,279	2,792	1.46	53.5%
All ages (e)	28,720	9,626	19,094	9,110	19,610	1.46	49.1%
% under 30	36.0%	42.2%	32.8%	32.7%	37.5%	.	.
% 50 or over	14.2%	15.5%	13.5%	14.0%	14.2%	.	.
Source of Referral							
Self	8,578	3,081	5,497	2,375	6,203	1.38	49.7%
GP	3,726	1,701	2,025	683	3,043	1.22	55.9%
Criminal Justice System (f)	5,674	1,623	4,051	1,809	3,865	1.47	42.0%
Other (g)	10,742	3,221	7,521	4,243	6,499	1.65	49.6%
All Sources	28,720	9,626	19,094	9,110	19,610	1.46	49.1%

Source: WNDSM, NHS Wales Informatics Service

(a) $E = A - D$

(b) $F = A / E$

(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 33 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 2010-11 by ethnic origin

Ethnic Origin	Male	Female	Total	
			Number	Per cent (a)
British	14,538	6,918	21,456	74.7%
Irish	55	30	85	0.3%
Any other white background	215	64	279	1.0%
White and Black Caribbean	48	22	70	0.2%
White and Black African	14	3	17	0.1%
White and Asian	29	3	32	0.1%
Any other mixed background	29	14	43	0.1%
Indian	36	11	47	0.2%
Pakistani	24	1	25	0.1%
Bangladeshi	12	1	13	0.0%
Any other Asian background	20	10	30	0.1%
Caribbean	37	12	49	0.2%
African	26	2	28	0.1%
Any other black background	19	7	26	0.1%
Chinese	0	0	0	0.0%
Any other ethnic group	21	13	34	0.1%
Not Stated	4,331	2,155	6,486	22.6%
Total	19,454	9,266	28,720	100%

Source: WNDSM, NHS Wales Informatics Service

(a) Percentage of all referrals.

Table 8: Referrals in 2010-11 by Community Safety Partnership

	<i>Number</i>				
Community Safety Partnership	Referrals with main problem alcohol	Referrals with main problem drugs	All Referrals (a)	Percentage of cases with no main problem reported	Ratio of drug to alcohol referrals
Anglesey	557	361	923	0.5%	0.65
Gwynedd	677	490	1,167	0.0%	0.72
Conwy	1,181	547	1,732	0.2%	0.46
Denbighshire	1,162	560	1,722	0.0%	0.48
Flintshire	1,123	518	1,649	0.5%	0.46
Wrexham	1,144	632	1,778	0.1%	0.55
<i>North Wales</i>	<i>5,844</i>	<i>3,108</i>	<i>8,971</i>	<i>0.2%</i>	<i>0.53</i>
Powys	527	518	1,070	2.3%	0.98
Ceredigion	435	185	630	1.6%	0.43
Pembrokeshire	481	327	818	1.2%	0.68
Carmarthenshire	832	935	2,003	11.8%	1.12
<i>Dyfed Powys</i>	<i>2,275</i>	<i>1,965</i>	<i>4,521</i>	<i>6.2%</i>	<i>0.86</i>
Swansea	535	1,112	2,028	18.8%	2.08
Neath Port Talbot	227	241	630	25.7%	1.06
Bridgend	386	292	937	27.6%	0.76
Vale of Glamorgan	536	491	1,043	1.5%	0.92
Cardiff	1,482	1,376	2,896	1.3%	0.93
Rhondda Cynon Taff	1,341	766	2,313	8.9%	0.57
Merthyr Tydfil	452	250	793	11.5%	0.55
<i>South Wales</i>	<i>4,959</i>	<i>4,528</i>	<i>10,640</i>	<i>10.8%</i>	<i>0.91</i>
Caerphilly	685	415	1,376	20.1%	0.61
Blaenau Gwent	251	204	484	6.0%	0.81
Torfaen	332	163	518	4.4%	0.49
Monmouthshire	271	222	524	5.9%	0.82
Newport	557	690	1,328	6.1%	1.24
<i>Gwent</i>	<i>2,096</i>	<i>1,694</i>	<i>4,230</i>	<i>10.4%</i>	<i>0.81</i>
Outside Wales	135	180	325	3.1%	1.33
Total (b)	15,314	11,481	28,720	6.7%	0.75

Source: WNDSM, NHS Wales Informatics Service

(a) Including 1,925 referrals where the main substance is not reported to the database.

(b) Includes 33 referrals of unknown area.

Table 9: Referrals in 2010-11 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	138	38.2%	77	21.3%	22	6.1%	32	8.9%	1	0.3%
Gwynedd	186	38.0%	100	20.4%	45	9.2%	56	11.4%	2	0.4%
Conwy	219	40.0%	94	17.2%	62	11.3%	27	4.9%	5	0.9%
Denbighshire	247	44.1%	130	23.2%	25	4.5%	51	9.1%	5	0.9%
Flintshire	198	38.2%	107	20.7%	55	10.6%	58	11.2%	3	0.6%
Wrexham	282	44.6%	121	19.1%	41	6.5%	63	10.0%	3	0.5%
<i>North Wales</i>	<i>1,270</i>	<i>40.9%</i>	<i>629</i>	<i>20.2%</i>	<i>250</i>	<i>8.0%</i>	<i>287</i>	<i>9.2%</i>	<i>19</i>	<i>0.6%</i>
Powys	187	36.1%	204	39.4%	38	7.3%	19	3.7%	4	0.8%
Ceredigion	40	21.6%	76	41.1%	11	5.9%	3	1.6%	1	0.5%
Pembrokeshire	59	18.0%	125	38.2%	49	15.0%	12	3.7%	0	0.0%
Carmarthenshire	585	62.6%	167	17.9%	36	3.9%	15	1.6%	3	0.3%
<i>Dyfed Powys</i>	<i>871</i>	<i>44.3%</i>	<i>572</i>	<i>29.1%</i>	<i>134</i>	<i>6.8%</i>	<i>49</i>	<i>2.5%</i>	<i>8</i>	<i>0.4%</i>
Swansea	825	74.2%	61	5.5%	37	3.3%	66	5.9%	12	1.1%
Neath Port Talbot	178	73.9%	19	7.9%	16	6.6%	4	1.7%	2	0.8%
Bridgend	161	55.1%	70	24.0%	21	7.2%	7	2.4%	0	0.0%
Vale of Glamorgan	216	44.0%	64	13.0%	50	10.2%	14	2.9%	3	0.6%
Cardiff	593	43.1%	237	17.2%	85	6.2%	134	9.7%	39	2.8%
Rhondda Cynon Taff	308	40.2%	163	21.3%	111	14.5%	30	3.9%	2	0.3%
Merthyr Tydfil	78	31.2%	57	22.8%	22	8.8%	9	3.6%	1	0.4%
<i>South Wales</i>	<i>2,359</i>	<i>52.1%</i>	<i>671</i>	<i>14.8%</i>	<i>342</i>	<i>7.6%</i>	<i>264</i>	<i>5.8%</i>	<i>59</i>	<i>1.3%</i>
Caerphilly	164	39.5%	108	26.0%	47	11.3%	24	5.8%	2	0.5%
Blaenau Gwent	112	54.9%	34	16.7%	13	6.4%	5	2.5%	0	0.0%
Torfaen	55	33.7%	66	40.5%	16	9.8%	6	3.7%	1	0.6%
Monmouthshire	109	49.1%	52	23.4%	10	4.5%	7	3.2%	0	0.0%
Newport	327	47.4%	214	31.0%	22	3.2%	17	2.5%	10	1.4%
<i>Gwent</i>	<i>767</i>	<i>45.3%</i>	<i>474</i>	<i>28.0%</i>	<i>108</i>	<i>6.4%</i>	<i>59</i>	<i>3.5%</i>	<i>13</i>	<i>0.8%</i>
Outside Wales	98	54.4%	12	6.7%	11	6.1%	21	11.7%	0	0.0%
Unknown	4	66.7%	1	16.7%	1	16.7%	0	0.0%	0	0.0%
Total	5,369	46.8%	2,359	20.5%	846	7.4%	680	5.9%	99	0.9%

Source: WNDSM, NHS Wales Informatics Service

(a) Percentage of all drug referrals.

Table 10a: Multiple referrals in 2010-11 by Community Safety Partnership: main substance alcohol

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 2010-11	Individuals referred in 2010-11	Ratio of referrals to individuals	New cases as percentage of all individuals
	(A)	(B)	(C)	(D)	(E) (a)	(F) (b)	(G) (c)
Anglesey	557	195	362	210	347	1.6	56.2%
Gwynedd	677	259	418	246	431	1.6	60.1%
Conwy	1,181	219	962	670	511	2.3	42.9%
Denbighshire	1,162	243	919	639	523	2.2	46.5%
Flintshire	1,123	310	813	565	558	2.0	55.6%
Wrexham	1,144	314	830	540	604	1.9	52.0%
<i>North Wales</i>	<i>5,844</i>	<i>1,540</i>	<i>4,304</i>	<i>2,870</i>	<i>2,974</i>	<i>2.0</i>	<i>51.8%</i>
Powys	527	229	298	111	416	1.3	55.0%
Ceredigion	435	151	284	144	291	1.5	51.9%
Pembrokeshire	481	158	323	133	348	1.4	45.4%
Carmarthenshire	832	325	507	241	591	1.4	55.0%
<i>Dyfed Powys</i>	<i>2,275</i>	<i>863</i>	<i>1,412</i>	<i>629</i>	<i>1,646</i>	<i>1.4</i>	<i>52.4%</i>
Swansea	535	235	300	46	489	1.1	48.1%
Neath Port Talbot	227	129	98	12	215	1.1	60.0%
Bridgend	386	184	202	61	325	1.2	56.6%
Vale of Glamorgan	536	203	333	142	394	1.4	51.5%
Cardiff	1,482	609	873	351	1,131	1.3	53.8%
Rhondda Cynon Taff	1,341	559	782	328	1,013	1.3	55.2%
Merthyr Tydfil	452	178	274	100	352	1.3	50.6%
<i>South Wales</i>	<i>4,959</i>	<i>2,097</i>	<i>2,862</i>	<i>1,040</i>	<i>3,919</i>	<i>1.3</i>	<i>53.5%</i>
Caerphilly	685	241	444	223	462	1.5	52.2%
Blaenau Gwent	251	135	116	35	216	1.2	62.5%
Torfaen	332	180	152	50	282	1.2	63.8%
Monmouthshire	271	131	140	47	224	1.2	58.5%
Newport	557	243	314	96	461	1.2	52.7%
<i>Gwent</i>	<i>2,096</i>	<i>930</i>	<i>1,166</i>	<i>451</i>	<i>1,645</i>	<i>1.3</i>	<i>56.5%</i>
Outside Wales	135	80	55	33	102	1.3	78.4%
Total (d)	15,314	5,514	9,800	5,023	10,291	1.5	53.6%

Source: WNDSM, NHS Wales Informatics Service

(a) $E = A - D$

(b) $F = A / E$

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

(d) Includes 5 referrals of unknown area.

Table 10b: Multiple referrals in 2010-11 by Community Safety Partnership: main substance drugs

Community Safety Partnership	All Referrals (A)	Previous history since the database was established on 1 April 2005			Number	Per cent	
		No previous history (B)	With any earlier referral (C)	With an earlier referral (D)	Individuals referred in 2009-10 (E) (a)	Ratio of referrals to individuals (F) (b)	New cases as percentage (G) (c)
Anglesey	361	97	264	134	227	1.6	42.7%
Gwynedd	490	147	343	172	318	1.5	46.2%
Conwy	547	111	436	266	281	1.9	39.5%
Denbighshire	560	111	449	272	288	1.9	38.5%
Flintshire	518	154	364	228	290	1.8	53.1%
Wrexham	632	137	495	263	369	1.7	37.1%
<i>North Wales</i>	<i>3,108</i>	<i>757</i>	<i>2,351</i>	<i>1,335</i>	<i>1,773</i>	<i>1.8</i>	<i>42.7%</i>
Powys	518	134	384	181	337	1.5	39.8%
Ceredigion	185	70	115	51	134	1.4	52.2%
Pembrokeshire	327	98	229	110	217	1.5	45.2%
Carmarthenshire	935	238	697	404	531	1.8	44.8%
<i>Dyfed Powys</i>	<i>1,965</i>	<i>540</i>	<i>1,425</i>	<i>746</i>	<i>1,219</i>	<i>1.6</i>	<i>44.3%</i>
Swansea	1,112	259	853	281	831	1.3	31.2%
Neath Port Talbot	241	56	185	41	200	1.2	28.0%
Bridgend	292	109	183	50	242	1.2	45.0%
Vale of Glamorgan	491	113	378	144	347	1.4	32.6%
Cardiff	1,376	450	926	350	1,026	1.3	43.9%
Rhondda Cynon Ta	766	264	502	169	597	1.3	44.2%
Merthyr Tydfil	250	68	182	68	182	1.4	37.4%
<i>South Wales</i>	<i>4,528</i>	<i>1,319</i>	<i>3,209</i>	<i>1,103</i>	<i>3,425</i>	<i>1.3</i>	<i>38.5%</i>
Caerphilly	415	139	276	126	289	1.4	48.1%
Blaenau Gwent	204	66	138	57	147	1.4	44.9%
Torfaen	163	60	103	52	111	1.5	54.1%
Monmouthshire	222	70	152	65	157	1.4	44.6%
Newport	690	218	472	212	478	1.4	45.6%
<i>Gwent</i>	<i>1,694</i>	<i>553</i>	<i>1,141</i>	<i>512</i>	<i>1,182</i>	<i>1.4</i>	<i>46.8%</i>
Outside Wales	180	76	104	52	128	1.4	59.4%
Total	11,481	3,246	8,235	3,750	7,731	1.5	42.0%

Source: WNDSM, NHS Wales Informatics Service

(a) E = A - D

(b) F = A / E

(c) G = B / E *100

(d) Includes 6 referrals of unknown area.

Table 10c: Multiple referrals in 2010-11 by Community Safety Partnership: all substances

Community Safety Partnership	All Referrals (A) (a)	Previous history since the database was established on 1 April 2005			Number	Per cent	
		No previous history (B)	With any earlier referral (C)	with an earlier referral during 2010 (D)	Individuals referred in 2010-11 (E) (b)	Ratio of referrals to individuals (F) (c)	New cases as percentage of all individuals (G) (d)
Anglesey	923	292	631	349	574	1.6	50.9%
Gwynedd	1,167	406	761	418	749	1.6	54.2%
Conwy	1,732	330	1,402	937	795	2.2	41.5%
Denbighshire	1,722	354	1,368	911	811	2.1	43.6%
Flintshire	1,649	467	1,182	795	854	1.9	54.7%
Wrexham	1,778	452	1,326	804	974	1.8	46.4%
<i>North Wales</i>	<i>8,971</i>	<i>2,301</i>	<i>6,670</i>	<i>4,214</i>	<i>4,757</i>	<i>1.9</i>	<i>48.4%</i>
Powys	1,070	387	683	292	778	1.4	49.7%
Ceredigion	630	228	402	195	435	1.4	52.4%
Pembrokeshire	818	260	558	244	574	1.4	45.3%
Carmarthenshire	2,003	694	1,309	683	1,320	1.5	52.6%
<i>Dyfed Powys</i>	<i>4,521</i>	<i>1,569</i>	<i>2,952</i>	<i>1,414</i>	<i>3,107</i>	<i>1.5</i>	<i>50.5%</i>
Swansea	2,028	652	1,376	361	1,667	1.2	39.1%
Neath Port Talbot	630	274	356	65	565	1.1	48.5%
Bridgend	937	440	497	150	787	1.2	55.9%
Vale of Glamorgan	1,043	325	718	288	755	1.4	43.0%
Cardiff	2,896	1,079	1,817	710	2,186	1.3	49.4%
Rhondda Cynon Taff	2,313	902	1,411	529	1,784	1.3	50.6%
Merthyr Tydfil	793	284	509	189	604	1.3	47.0%
<i>South Wales</i>	<i>10,640</i>	<i>3,956</i>	<i>6,684</i>	<i>2,292</i>	<i>8,348</i>	<i>1.3</i>	<i>47.4%</i>
Caerphilly	1,376	458	918	441	935	1.5	49.0%
Blaenau Gwent	484	212	272	97	387	1.3	54.8%
Torfaen	518	253	265	105	413	1.3	61.3%
Monmouthshire	524	206	318	123	401	1.3	51.4%
Newport	1,328	493	835	327	1,001	1.3	49.3%
<i>Gwent</i>	<i>4,230</i>	<i>1,622</i>	<i>2,608</i>	<i>1,093</i>	<i>3,137</i>	<i>1.3</i>	<i>51.7%</i>
Outside Wales	325	164	161	86	239	1.4	68.6%
Total	28,720	9,626	19,094	9,110	19,610	1.5	49.1%

Source: WNDISM, NHS Wales Informatics Service

(a) Includes referrals where the main substance is unreported.

(b) $E = A - D$

(c) $F = A / E$

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

(e) Includes 33 referrals of unknown area.

Table 11a: Estimated incidence (a) rates per 100,000 population (b): main substance alcohol

Area	Number of individuals referred			Estimated incidence rate
	Minimum (c)	Preferred Option (d)	Maximum (e)	
Anglesey	347	347	347	506
Gwynedd	431	431	431	362
Conwy	511	513	514	463
Denbighshire	523	523	523	541
Flintshire	558	562	564	375
Wrexham	604	605	605	453
<i>North Wales</i>	<i>2,974</i>	<i>2,980</i>	<i>2,984</i>	<i>439</i>
Powys	416	431	441	328
Ceredigion	291	297	301	386
Pembrokeshire	348	353	357	302
Carmarthenshire	591	710	789	393
<i>Dyfed Powys</i>	<i>1,646</i>	<i>1,791</i>	<i>1,888</i>	<i>354</i>
Swansea	489	697	836	300
Neath Port Talbot	215	305	365	222
Bridgend	325	457	545	340
Vale of Glamorgan	394	402	408	322
Cardiff	1,131	1,148	1,160	337
Rhondda Cynon Taff	1,013	1,117	1,187	477
Merthyr Tydfil	352	394	422	707
<i>South Wales</i>	<i>3,919</i>	<i>4,521</i>	<i>4,923</i>	<i>359</i>
Caerphilly	462	572	646	331
Blaenau Gwent	216	230	240	337
Torfaen	282	294	302	325
Monmouthshire	224	236	244	268
Newport	461	498	523	353
<i>Gwent</i>	<i>1,645</i>	<i>1,831</i>	<i>1,955</i>	<i>326</i>
Outside Wales	102	107	111	.
Total	10,291	11,244	11,879	374

Source: WNDMS, NHS Wales Informatics Service

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

(b) ONS 2010 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.

. Data not applicable

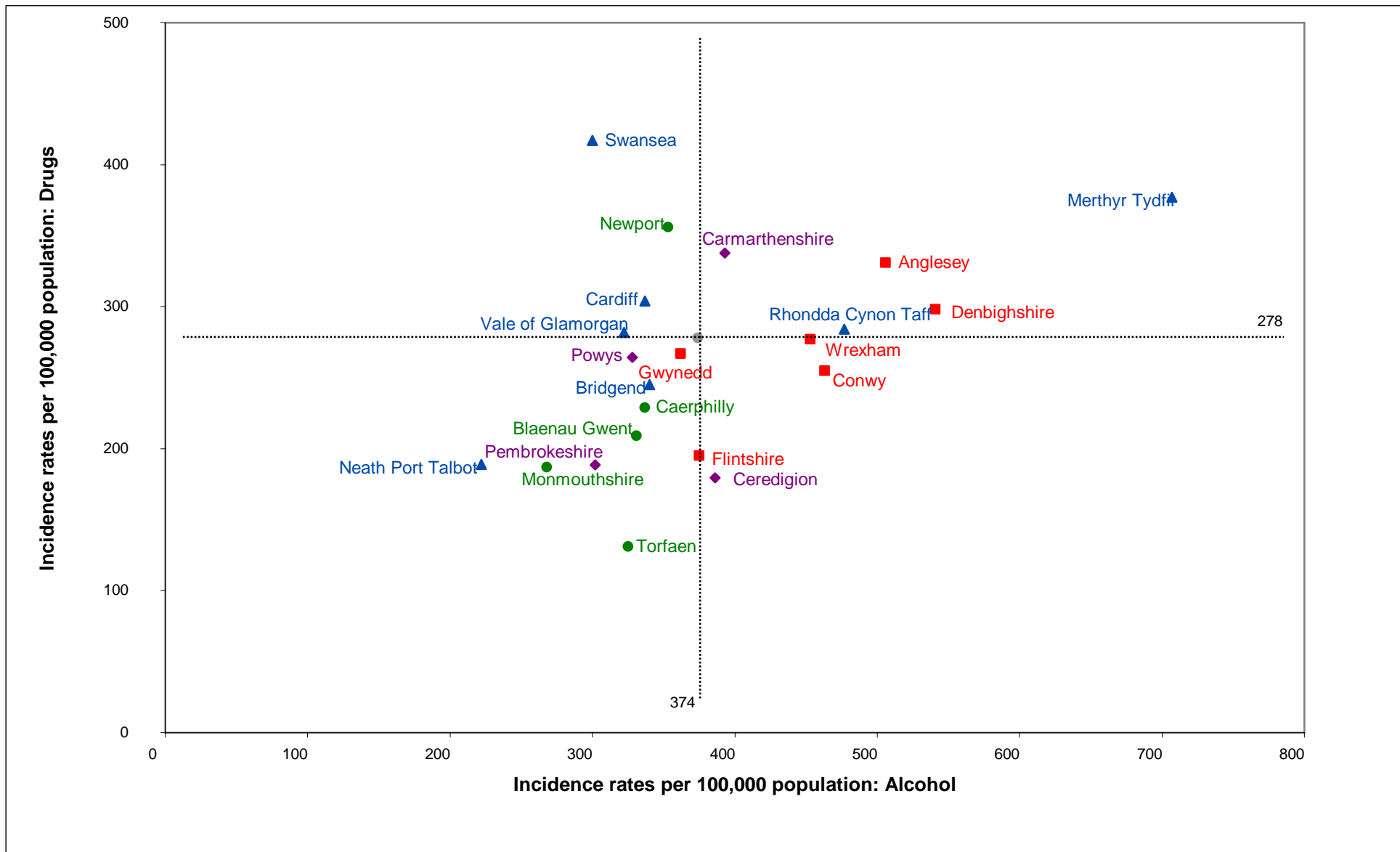
Table 11b: Estimated incidence (a) rates per 100,000 population (b): main substance drugs

Area	Number of individuals referred			Estimated incidence rate
	Minimum (c)	Preferred Option (d)	Maximum (e)	
Anglesey	227	227	227	331
Gwynedd	318	318	318	267
Conwy	281	282	284	255
Denbighshire	288	288	288	298
Flintshire	290	292	296	195
Wrexham	369	369	370	277
<i>North Wales</i>	<i>1,773</i>	<i>1,777</i>	<i>1,783</i>	<i>262</i>
Powys	337	347	362	264
Ceredigion	134	138	144	179
Pembrokeshire	217	221	226	188
Carmarthenshire	531	610	729	338
<i>Dyfed Powys</i>	<i>1,219</i>	<i>1,316</i>	<i>1,461</i>	<i>260</i>
Swansea	831	970	1,178	417
Neath Port Talbot	200	260	350	189
Bridgend	242	330	462	245
Vale of Glamorgan	347	353	361	282
Cardiff	1,026	1,038	1,055	304
Rhondda Cynon Taff	597	667	771	284
Merthyr Tydfil	182	210	252	377
<i>South Wales</i>	<i>3,425</i>	<i>3,827</i>	<i>4,429</i>	<i>304</i>
Caerphilly	289	363	473	209
Blaenau Gwent	147	157	171	229
Torfaen	111	119	131	131
Monmouthshire	157	165	177	187
Newport	478	503	540	356
<i>Gwent</i>	<i>1,182</i>	<i>1,306</i>	<i>1,492</i>	<i>233</i>
Outside Wales	128	132	137	.
Total	7,731	8,366	9,319	278

Source: WNDSM, NHS Wales Informatics Service

- (a) Number of individuals referred in the year per 100,000 population; See Annex 1 for methodology.
 - (b) ONS 2010 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.
- . Data not applicable

Chart 3: Estimated incidence rates by Community Safety Partnership



Areas are coded according to region:
 North Wales (red square), Dyfed Powys (purple diamond), South Wales (blue triangle), Gwent (green circle).
 The dotted line represent the incidence per 100,000 population for Wales as a whole for drugs (278) and alcohol (374).

Table 12: Referrals received: 2007-08 to 2010-11

substance on referral	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	16,745	55.3%	17,110	56.5%	15,321	54.3%	15,314	53.3%
Heroin	7,239	23.9%	6,274	20.7%	5,798	20.5%	5,369	18.7%
Cannabis	1,775	5.9%	2,031	6.7%	2,084	7.4%	2,359	8.2%
Amphetamines	948	3.1%	799	2.6%	743	2.6%	846	2.9%
Cocaine	599	2.0%	682	2.3%	665	2.4%	680	2.4%
Crack Cocaine	141	0.5%	144	0.5%	103	0.4%	99	0.3%
Other Drugs	2,080	6.9%	2,239	7.4%	2,200	7.8%	2,128	7.4%
Not reported (a)	779	2.6%	1,027	3.4%	1,301	4.6%	1,925	6.7%
Total	30,306	100.0%	30,306	100.0%	28,215	100.0%	28,720	100.0%

Source: WNDSM, NHS Wales Informatics Service

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

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

Table 13: Assessments carried out: 2007-08 to 2010-11 (a)

Main substance on referral	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	13,034	56.9%	13,183	57.3%	12,296	57.7%	12,018	55.6%
Heroin	5,536	24.2%	4,998	21.7%	4,409	20.7%	4,586	21.2%
Cannabis	1,303	5.7%	1,525	6.6%	1,618	7.6%	1,824	8.4%
Amphetamines	698	3.0%	572	2.5%	549	2.6%	649	3.0%
Cocaine	392	1.7%	489	2.1%	346	1.6%	484	2.2%
Crack Cocaine	101	0.4%	114	0.5%	66	0.3%	78	0.4%
Other Drugs	1,398	6.1%	1,699	7.4%	1,758	8.3%	1,605	7.4%
Not reported (c)	455	2.0%	413	1.8%	266	1.2%	383	1.8%
Total	22,917	100.0%	22,993	100.0%	21,308	100.0%	21,627	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

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

Table 14: Treatments commenced: 2007-08 to 2010-11 (a)

Main substance on referral	Year of treatment							
	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	12,018	56.3%	11,702	57.1%	8,667	55.4%	8,154	52.1%
Heroin	5,250	24.6%	4,536	22.1%	3,526	22.5%	3,815	24.4%
Cannabis	1,298	6.1%	1,355	6.6%	1,256	8.0%	1,338	8.6%
Amphetamines	679	3.2%	523	2.6%	380	2.4%	457	2.9%
Cocaine	400	1.9%	440	2.1%	268	1.7%	357	2.3%
Crack Cocaine	96	0.4%	109	0.5%	59	0.4%	68	0.4%
Other Drugs	1,319	6.2%	1,517	7.4%	1,325	8.5%	1,278	8.2%
Not reported (c)	288	1.3%	305	1.5%	167	1.1%	172	1.1%
Total	21,348	100.0%	20,487	100.0%	15,648	100.0%	15,639	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

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

Table 15: Case closures: 2007-08 to 2010-11 (a)

Main substance on referral	Year of closure							
	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Alcohol	18,122	61.0%	16,301	56.9%	14,482	57.5%	14,157	56.6%
Heroin	5,897	19.8%	6,186	21.6%	4,872	19.3%	4,633	18.5%
Cannabis	1,789	6.0%	1,813	6.3%	1,898	7.5%	2,116	8.5%
Amphetamines	891	3.0%	799	2.8%	698	2.8%	719	2.9%
Cocaine	545	1.8%	664	2.3%	592	2.3%	577	2.3%
Crack Cocaine	146	0.5%	156	0.5%	88	0.3%	101	0.4%
Other Drugs	1,719	5.8%	1,885	6.6%	1,862	7.4%	1,795	7.2%
Not reported (c)	599	2.0%	844	2.9%	700	2.8%	918	3.7%
Total	29,708	100.0%	28,648	100.0%	25,192	100.0%	25,016	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

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

Table 16a: Reason for closure: 2007-08 to 2010-11: main substance alcohol (a)

Closure reason	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Planned								
Treatment complete	5,254	29.0%	5,725	35.1%	4,534	31.3%	5289	37.4%
Referral to other service	832	4.6%	1,437	8.8%	1,197	8.3%	1164	8.2%
Unplanned								
Treatment withdrawn (c)	1,054	5.8%	1,650	10.1%	1,691	11.7%	1442	10.2%
Moved	277	1.5%	304	1.9%	252	1.7%	235	1.7%
Prison	201	1.1%	255	1.6%	196	1.4%	135	1.0%
Deceased	142	0.8%	150	0.9%	132	0.9%	100	0.7%
Inappropriate Referral	583	3.2%	734	4.5%	1,731	12.0%	2226	15.7%
DNA								
Closed at Centre (c)	4443	24.5%	234	1.4%	10	0.1%	4	0.0%
Did not attend or respond to follow up contact before treatment	605	3.3%	979	6.0%	1626	11.2%	1421	10.0%
Did not attend or respond to follow up contact during treatment	4,089	22.6%	4,264	26.2%	2,684	18.5%	1733	12.2%
No information supplied	642	3.5%	569	3.5%	429	3.0%	408	2.9%
Total	18,122	100.0%	16,301	100.0%	14,482	100.0%	14157	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(c) Some referrals included for 2007-08 in the 2009-10 publication as "treatment withdrawn" have subsequently been re-coded by two large agencies to "closed at centre". A large group of agencies also re-coded their DNAs to "inappropriate referral".

Table 16b: Reason for closure: 2007-08 to 2010-11: main substance drugs (a)

Closure reason	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Planned								
Treatment complete	3,151	28.7%	3,059	26.6%	2,327	23.2%	2929	29.5%
Referral to other service	1,103	10.0%	1,344	11.7%	725	7.2%	827	8.3%
Unplanned								
Treatment withdrawn (c)	584	5.3%	1,022	8.9%	918	9.2%	818	8.2%
Moved	475	4.3%	421	3.7%	396	4.0%	369	3.7%
Prison	677	6.2%	824	7.2%	857	8.6%	901	9.1%
Deceased	42	0.4%	55	0.5%	52	0.5%	37	0.4%
Inappropriate Referral	573	5.2%	751	6.5%	1,654	16.5%	1351	13.6%
DNA								
Closed at Centre (c)	623	5.7%	112	1.0%	9	0.1%	5	0.1%
Did not attend or respond to follow up contact before treatment	319	2.9%	470	4.1%	781	7.8%	780	7.8%
Did not attend or respond to follow up contact during treatment	2,954	26.9%	3,089	26.9%	2,005	20.0%	1641	16.5%
No information supplied	486	4.4%	356	3.1%	286	2.9%	283	2.8%
Total	10,987	100.0%	11,503	100.0%	10,010	100.0%	9941	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(c) Some referrals included for 2007-08 in the 2009-10 publication as "treatment withdrawn" have subsequently been re-coded by two large agencies to "closed at centre". A large group of agencies also re-coded their DNAs to "inappropriate referral".

Table 16c: Reason for closure: 2007-08 to 2010-11: all Substances (a)

Closure reason	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Planned								
Treatment complete	8,470	28.5%	8,912	31.1%	6,963	27.6%	8343	33.4%
Referral to other service	1,988	6.7%	3,096	10.8%	2,116	8.4%	2282	9.1%
Unplanned								
Treatment withdrawn (c)	1,667	5.6%	2,686	9.4%	2,619	10.4%	2278	9.1%
Moved	765	2.6%	743	2.6%	676	2.7%	630	2.5%
Prison	885	3.0%	1,097	3.8%	1,063	4.2%	1075	4.3%
Deceased	184	0.6%	209	0.7%	190	0.8%	143	0.6%
Inappropriate Referral	1,294	4.4%	1,604	5.6%	3,630	14.4%	3917	15.7%
DNA								
Closed at Centre (c)	5075	17.1%	346	1.2%	20	0.1%	9	0.0%
Did not attend or respond to follow up contact before treatment	940	3.2%	1465	5.1%	2426	9.6%	2212	8.8%
Did not attend or respond to follow up contact during treatment	7,116	24.0%	7,460	26.0%	4,736	18.8%	3422	13.7%
No information supplied	1,324	4.5%	1,030	3.6%	753	3.0%	705	2.8%
Total	29,708	100.0%	28,648	100.0%	25,192	100.0%	25016	100.0%

Source: WNDMS, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(c) Some referrals included for 2007-08 in the 2009-10 publication as "treatment withdrawn" have subsequently been re-coded by two large agencies to "closed at centre". A large group of agencies also re-coded their DNAs to "inappropriate referral".

Table 17a: Profile of Treatments started: alcohol (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	235	193	152	158
15 - 19	1,217	944	656	529
20 - 29	2,359	2,200	1,450	1,356
30 - 39	2,996	2,922	2,168	2,026
40 - 49	2,969	3,121	2,374	2,262
50 - 59	1,583	1,637	1,256	1,287
60+	635	674	611	535
All Ages (b)	12,018	11,702	8,667	8,154
Median Age (c)	37	38	39	40
% Under 30	31.7%	28.5%	26.1%	25.1%
% Over 50	18.5%	19.7%	21.5%	22.3%
By Source of Referral				
Self	4,038	4047	3,085	3,311
GP	1,197	1191	1,011	936
Criminal Justice System (d)	2,213	1886	921	665
Other (e)	4,570	4578	3,650	3,242

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) Includes a small number of referrals with unknown age in each year.

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

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

(e) Includes unreported source of referral.

Table 17b: Profile of Treatments started: heroin (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	10	4	1	1
15 - 19	303	239	126	93
20 - 29	2,378	1,902	1,333	1,366
30 - 39	1,884	1,792	1,477	1,662
40 - 49	585	518	529	593
50 - 59	73	69	53	89
60+	16	11	6	10
All Ages (b)	5,250	4,536	3,526	3,815
Median Age (c)	29	30	31	32
% Under 30	51.3%	47.3%	41.4%	38.3%
% Over 50	1.7%	1.8%	1.7%	2.6%
By Source of Referral				
Self	1,854	1539	1,063	1,101
GP	462	342	259	228
Criminal Justice System (d)	1,407	1301	1,335	1,485
Other (e)	1,527	1354	869	1,001

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) Includes a small number of referrals with unknown age in each year.

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

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

(e) Includes unreported source of referral.

Table 17c: Profile of Treatments started: cannabis (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	120	135	104	104
15 - 19	518	534	528	535
20 - 29	388	398	369	415
30 - 39	189	183	173	180
40 - 49	43	70	63	77
50 - 59	34	27	16	24
60+	3	7	2	3
All Ages (b)	1,298	1,355	1,256	1,338
Median Age (c)	20	20	20	20
% Under 30	79.0%	78.7%	79.7%	78.8%
% Over 50	2.9%	2.5%	1.4%	2.0%
By Source of Referral				
Self	291	279	261	306
GP	66	62	68	79
Criminal Justice System (d)	428	479	400	383
Other (e)	513	535	527	570

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) Includes a small number of referrals with unknown age in each year.

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

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

(e) Includes unreported source of referral.

Table 17d: Profile of Treatments started: amphetamines (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	6	2	3	4
15 - 19	75	55	27	35
20 - 29	232	156	115	145
30 - 39	246	199	134	170
40 - 49	106	94	83	87
50 - 59	11	13	18	14
60+	3	4	0	2
All Ages	679	523	380	457
Median Age (b)	31	32	32	32
% Under 30	46.1%	40.7%	38.2%	40.3%
% Over 50	2.1%	3.3%	4.7%	3.5%
By Source of Referral				
Self	201	136	138	145
GP	61	39	35	43
Criminal Justice System (c)	183	164	76	91
Other (d)	234	184	131	178

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

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

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

(d) Includes unreported source of referral.

Table 17e: Profile of Treatments started: cocaine (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	2	2	1	0
15 - 19	75	70	29	37
20 - 29	165	246	143	190
30 - 39	121	81	66	105
40 - 49	30	34	27	21
50 - 59	2	2	1	2
60+	4	4	1	2
All Ages (b)	400	440	268	357
Median Age (c)	26	26	26	26
% Under 30	60.5%	72.3%	64.6%	63.6%
% Over 50	1.5%	1.4%	0.7%	1.1%
By Source of Referral				
Self	112	164	94	93
GP	38	24	13	18
Criminal Justice System (d)	107	130	85	180
Other (e)	143	122	76	66

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) Includes a small number of referrals with unknown age in each year.

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

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

(e) Includes unreported source of referral.

Table 17f: Profile of Treatments started: crack cocaine (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	1	0	0	0
15 - 19	5	6	5	7
20 - 29	49	45	24	27
30 - 39	28	37	25	26
40 - 49	11	17	4	8
50 - 59	1	1	1	0
60+	1	3	0	0
All Ages	96	109	59	68
Median Age (b)	28	30	30	29
% Under 30	57.3%	46.8%	49.2%	50.0%
% Over 50	2.1%	3.7%	1.7%	0.0%
By Source of Referral				
Self	28	28	15	17
GP	7	5	3	2
Criminal Justice System (c)	32	55	28	42
Other (d)	29	21	13	7

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

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

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

(d) Includes unreported source of referral.

Table 17g: Profile of Treatments started: crack cocaine (main or secondary) (a)

	Year of Treatment			
	2007-08	2008-09	2009-10	2010-11
By Age				
Under 15	2	0	0	0
15 - 19	53	36	17	20
20 - 29	278	230	170	189
30 - 39	209	242	194	182
40 - 49	67	72	52	61
50 - 59	6	6	3	9
60+	2	3	0	2
All Ages	617	589	437	463
Median Age (c)	29	30	31	31
% Under 30	54.0%	45.2%	42.8%	45.1%
% Over 50	1.3%	1.5%	0.7%	2.4%
By Source of Referral				
Self	199	184	122	107
GP	45	33	12	14
Criminal Justice System (d)	211	229	232	268
Other (e)	162	143	71	74

Source: WNDSM, NHS Wales Informatics Service

(a) For all referrals since April 2005.

(b) Includes a small number of referrals with unknown age in each year.

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

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

(e) Includes unreported source of referral.

Table 18a: Time between referral and assessment: alcohol

Waiting times	2007-08		2008-09		2009-10 (a)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	7,060	54.2%	7,529	57.1%	7,621	62.0%	7,542	62.8%
2-4 weeks	2,241	17.2%	2,489	18.9%	1,957	15.9%	2,225	18.5%
5-12 weeks	2,192	16.8%	2,146	16.3%	1,961	15.9%	1,636	13.6%
3-6 months	677	5.2%	643	4.9%	463	3.8%	410	3.4%
6-9 months	186	1.4%	145	1.1%	168	1.4%	113	0.9%
9-12 months	114	0.9%	63	0.5%	63	0.5%	27	0.2%
>12 months	260	2.0%	74	0.6%	32	0.3%	37	0.3%
Total (b)	13,034	100.0%	13,183	100.0%	12,296	100.0%	12,018	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 18b: Time between referral and assessment: drugs

Waiting times	2007-08		2008-09		2009-10 (a)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	5,298	56.2%	6,068	64.6%	6,182	70.7%	6,709	72.7%
2-4 weeks	1,184	12.6%	1,302	13.9%	1,025	11.7%	1,050	11.4%
5-12 weeks	1,229	13.0%	1,253	13.3%	927	10.6%	871	9.4%
3-6 months	567	6.0%	401	4.3%	268	3.1%	270	2.9%
6-9 months	360	3.8%	133	1.4%	126	1.4%	91	1.0%
9-12 months	164	1.7%	90	1.0%	77	0.9%	53	0.6%
>12 months	420	4.5%	110	1.2%	109	1.2%	153	1.7%
Total (b)	9,428	100.0%	9,397	100.0%	8,746	100.0%	9,226	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 18c: Time between referral and assessment: all substances (a)

Waiting times	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	12,562	54.8%	13,822	60.1%	13,944	65.4%	14,391	66.5%
2-4 weeks	3,456	15.1%	3,828	16.6%	3,008	14.1%	3,369	15.6%
5-12 weeks	3,470	15.1%	3,478	15.1%	2,929	13.7%	2,568	11.9%
3-6 months	1,270	5.5%	1,076	4.7%	747	3.5%	705	3.3%
6-9 months	573	2.5%	281	1.2%	298	1.4%	212	1.0%
9-12 months	291	1.3%	157	0.7%	149	0.7%	82	0.4%
>12 months	737	3.2%	195	0.8%	149	0.7%	232	1.1%
Total (b)	22,917	100.0%	22,993	100.0%	21,308	100.0%	21,627	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 19a: Time between assessment and treatment: alcohol

Waiting times	2007-08		2008-09		2009-10 (a)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	10,097	84.0%	10,055	85.9%	7,424	85.7%	7,152	87.7%
2-4 weeks	361	3.0%	456	3.9%	592	6.8%	513	6.3%
5-12 weeks	215	1.8%	357	3.1%	437	5.0%	390	4.8%
3-6 months	80	0.7%	144	1.2%	137	1.6%	76	0.9%
6-9 months	31	0.3%	40	0.3%	32	0.4%	12	0.1%
9-12 months	7	0.1%	10	0.1%	15	0.2%	4	0.0%
> 12 months	26	0.2%	30	0.3%	26	0.3%	7	0.1%
Total (b)	12,018	100.0%	11,702	100.0%	8,667	100.0%	8154	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 19b: Time between assessment and treatment: drugs

Waiting times	2007-08		2008-09		2009-10 (a)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	7,136	78.9%	7,267	85.7%	6,009	88.2%	6,782	92.7%
2-4 weeks	425	4.7%	323	3.8%	321	4.7%	243	3.3%
5-12 weeks	172	1.9%	286	3.4%	299	4.4%	176	2.4%
3-6 months	91	1.0%	105	1.2%	93	1.4%	69	0.9%
6-9 months	29	0.3%	27	0.3%	32	0.5%	11	0.2%
9-12 months	9	0.1%	14	0.2%	9	0.1%	13	0.2%
> 12 months	23	0.2%	36	0.3%	45	0.7%	19	0.3%
Total (b)	9,042	100.0%	8,480	100.0%	6,814	100.0%	7,313	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 19c: Time between assessment and treatment: all substances (a)

Waiting times	2007-08		2008-09		2009-10 (b)		2010-11	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
< 10 working days	17,449	81.7%	17,561	85.7%	13,579	86.8%	14,099	90.2%
2-4 weeks	813	3.8%	799	3.9%	922	5.9%	758	4.8%
5-12 weeks	390	1.8%	655	3.2%	739	4.7%	568	3.6%
3-6 months	174	0.8%	258	1.3%	234	1.5%	146	0.9%
6-9 months	60	0.3%	71	0.3%	66	0.4%	23	0.1%
9-12 months	16	0.1%	24	0.1%	26	0.2%	19	0.1%
> 12 months	49	0.2%	66	0.3%	72	0.5%	26	0.2%
Total (b)	21,348	100.0%	20,487	100.0%	15,648	100.0%	15,639	100.0%

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

(b) Includes a small number of referrals the assessment date was inconsistent, that is, it was prior to the referral date.

Table 20a: Clients referred and still awaiting assessment: alcohol

<u>Waiting Times</u>	<u>Waiting as at 31.3.08</u>	<u>Waiting as at 31.3.09</u>	<u>Waiting as at 31.3.10 (a)</u>	<u>Waiting as at 31.3.11</u>
< 10 working days	285	399	379	383
2-4 weeks	248	212	208	202
5-12 weeks	513	396	305	324
3-6 months	189	157	151	261
6-9 months	69	116	96	226
9-12 months	27	48	64	147
> 12 months	106	82	232	392
Total	1,437	1,410	1,435	1,935

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates and are therefore not included above.

Table 20b: Clients referred and still awaiting assessment: drugs

<u>Waiting Times</u>	<u>Waiting as at 31.3.08</u>	<u>Waiting as at 31.3.09</u>	<u>Waiting as at 31.3.10 (a)</u>	<u>Waiting as at 31.3.11</u>
< 10 working days	221	227	173	160
2-4 weeks	178	124	104	129
5-12 weeks	384	241	283	265
3-6 months	266	162	145	283
6-9 months	132	95	141	202
9-12 months	121	124	61	121
> 12 months	266	401	540	820
Total	1,568	1,374	1,447	1,980

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates and are therefore not included above.

Table 20c: Clients referred and still awaiting assessment: all substances (a)

Waiting Times	Waiting as at 31.3.08	Waiting as at 31.3.09	Waiting as at 31.3.10 (b)	Waiting as at 31.3.11
< 10 working days	513	679	590	610
2-4 weeks	450	377	355	381
5-12 weeks	931	713	684	747
3-6 months	490	377	426	772
6-9 months	249	249	349	630
9-12 months	196	191	229	413
>12 months	540	613	1,015	1,686
Total	3,369	3,199	3,648	5,239

Source: WNDSM, NHS Wales Informatics Service

(a) Includes referrals where main substance is unreported

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates and are therefore not included above.

Table 21a: Clients assessed and still awaiting treatment: alcohol

Waiting Times	Waiting as at 31.3.08	Waiting as at 31.3.09	Waiting as at 31.3.10 (a)	Waiting as at 31.3.11
< 10 working days	63	128	139	122
2-4 weeks	241	81	112	91
5-12 weeks	169	239	231	219
3-6 months	152	122	125	156
6-9 months	46	58	101	127
9-12 months	30	39	48	109
>12 months	62	171	158	359
Total	763	838	914	1,183

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

Table 21b: Clients assessed and still awaiting treatment: drugs

Waiting Times	Waiting as at 31.3.08	Waiting as at 31.3.09	Waiting as at 31.3.10 (a)	Waiting as at 31.3.11
< 10 working days	64	126	124	64
2-4 weeks	219	62	112	26
5-12 weeks	165	187	260	145
3-6 months	130	95	141	122
6-9 months	47	60	97	127
9-12 months	38	37	59	140
> 12 months	95	214	222	478
Total	758	781	1,015	1,102

Source: WNDSM, NHS Wales Informatics Service

(a) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

Table 21c: Clients assessed and still awaiting treatment: all substances (a)

Waiting Times	Waiting as at 31.3.08	Waiting as at 31.3.09	Waiting as at 31.3.10 (b)	Waiting as at 31.3.11
< 10 working days	131	265	268	196
2-4 weeks	498	147	225	148
5-12 weeks	350	443	500	426
3-6 months	297	239	284	341
6-9 months	102	140	207	266
9-12 months	84	106	121	253
>12 months	306	604	689	1,202
Total	1,768	1,944	2,294	2,832

Source: WNDSM, NHS Wales Informatics Service

(a) Includes referrals where a main substance is unreported.

(b) In the 2009-10 publication less structured referrals were excluded for 2009-10; in this publication they are included for all years but note that around 500 referrals in 2009-10 had referral but no assessment, treatment start or contact end dates.

Chart 4: Status of referrals in 2010-11 as at 7th July 2011

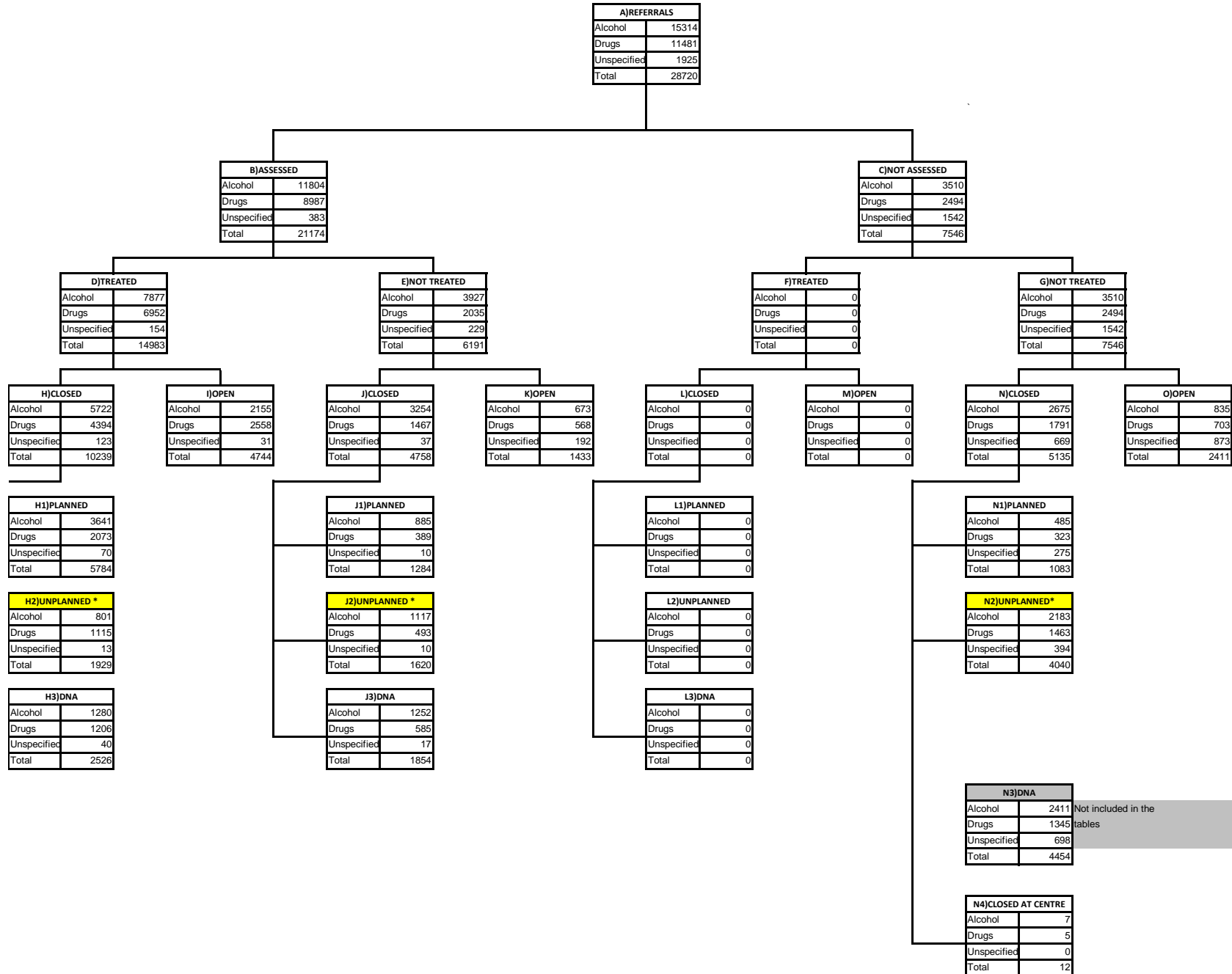


Table 22: Initial frequency (a) of use of alcohol & drugs as reported at starting TOP

Frequency of use of:	Main Substance			
	Alcohol		Drugs	
	Number of TOPs (b)	Frequency (a) in use at start TOP (days)	Number of TOPs (b)	Frequency (a) in use at start TOP (days)
Alcohol	8,479	21.1	2,786	12.9
Opiates	230	16.4	3,649	21.7
Cannabis	937	17.6	2,570	18.2
Amphetamines	266	10.3	847	12.1
Crack	59	7.8	616	7.3
Cocaine	184	7.2	518	7.5
Other Substance	279	16.7	1,570	16.6

Source: WNDSM, NHS Wales Informatics Service

(a) Days used in 28 days before the start TOP.

(b) More than one substance may be recorded on a single TOP; in total 10,043 start TOPs with main substance alcohol were recorded and 6,965 for drugs.

Table 23: Changes in frequency of use of alcohol or drugs between starting TOP & exit TOP

	Number of TOPs (a)	Frequency of use at starting TOP (days) (b)	Change in frequency by exit TOP (days) (c)	% change	% not using substance at exit TOP (c)
Main Substance Alcohol					
Alcohol use	3,619	20.1	-8.19*	-40.7	13.2
Main Substance Drugs					
Opiate use	589	19.3	-8.66*	-44.9	17.0
Cannabis use	706	18.0	-6.16*	-34.2	16.6
Amphetamine use	251	9.7	-3.34*	-34.4	26.3
Main Substance Heroin					
Opiate use	417	22.5	-11.53	-51.2	16.3

Source: WNDSM, NHS Wales Informatics Service

(a) Only records with both start and exit TOPs are included in this table.

(b) In the 28 days before the starting TOP.

(c) In the 28 days before the exit TOP.

Table 24: Frequency of alcohol and drug use within overall episode of treatment

	Number of TOPs	Frequency at start of period (days)	Change over period (days)	% change
Main Substance Alcohol				
Alcohol use				
1st period (a) of treatment	5,336	20.63	-7.03*	-34.1
2nd period (b) of treatment	2,034	13.74	-2.35*	-17.1
3rd period (c) of treatment	915	11.77	-0.64	<i>n.s</i>
4th period (d) of treatment	424	12.61	-1.41	<i>n.s</i>
Main Substance Drugs				
Opiate use				
1st period (a) of treatment	2,091	19.89	-9.41*	-47.3
2nd period (b) of treatment	1,196	9.99	-2.91*	-29.1
3rd period (c) of treatment	739	6.85	-1.26*	-18.5
4th period (d) of treatment	507	5.76	-0.75	<i>n.s</i>
Cannabis use				
1st period (a) of treatment	1,623	15.54	-2.94*	-18.9
2nd period (b) of treatment	851	11.13	-0.78	<i>n.s</i>
3rd period (c) of treatment	504	9.82	-0.07	<i>n.s</i>
4th period (d) of treatment	340	9.40	-0.49	<i>n.s</i>
Amphetamines use				
1st period (a) of treatment	517	9.46	-2.31*	-24.4
2nd period (b) of treatment	249	5.64	-1.13*	-20.0
3rd period (c) of treatment	155	4.20	+0.19	<i>n.s</i>
4th period (d) of treatment	105	4.72	-0.70	<i>n.s</i>

Source: WNDSM, NHS Wales Informatics Service

(a) From start TOP direct to exit TOP or to 1st review TOP.

(b) From 1st review TOP direct to exit TOP or to 2nd review TOP.

(c) From 2nd review TOP direct to exit TOP or 3rd review TOP.

(d) From 3rd review TOP direct to exit TOP or to 4th review TOP.

* A statistically significant improvement ($p < 0.05$)*n.s* Not a statistically significant change

Table 25: Initial client well-being as reported at starting TOP(a)

Characteristics	All TOPs	Main Substance Alcohol	Main Substance Drug	Male	Female	Age 16-19	Age 20-49	Age 50+
Physical Health	10.99	10.58	11.56	11.16	10.64	12.99	11.04	9.89
Psychological Health	9.52	9.21	9.97	9.8	8.96	11.10	9.42	9.44
Quality of Life	10.08	9.85	10.4	10.28	9.69	11.76	9.98	9.94

Source: WNDSM, NHS Wales Informatics Service

(a) As reported by client on a scale 0-20; for background on TOP physical, psychological and quality of life scores see Annex 2 Key Quality Issues.

Table 26a: Changes in Physical Health between starting TOP & exit TOP

	Number of TOPs	Mean starting TOP	Mean Change	% change
Main substance alcohol	3,860	11.2	+1.97*	+17.7
Main substance drugs	1,498	12.3	+1.33*	+10.8
Male	3,563	11.5	+1.75*	+15.2
Female	1,858	11.0	+2.19*	+20.0
Age 16-19	362	13.7	+1.14*	+8.4
Age 20-49	4,035	11.4	+1.90*	+16.7
Age 50+	1,024	10.4	+2.21*	+21.2
Inpatient Detoxification	228	8.6	+4.21*	+49.1
Community Detoxification	361	9.2	+3.73*	+40.6
Residential Rehabilitation	50	8.6	+4.46*	+52.0
Substitute Opioid Prescribing (Methadone)	99	12.2	+0.20	<i>n.s</i>
Substitute Opioid Prescribing(Buprenorphine)	50	13.9	+0.48	<i>n.s</i>
Psychosocial Interventions	4,150	11.3	+1.98*	+17.5
All Clients	5,417	11.4	+1.90*	+16.7

Source: WNDSM, NHS Wales Informatics Service

* A statistically significant improvement ($p < 0.05$)*n.s* Not a statistically significant change

Table 26b: Change in Psychological Health between starting TOP and exit TOP

	Number of TOPs	Mean starting TOP	Mean Change	% change
Main substance alcohol	3,819	9.8	+2.90*	+29.6
Main substance drugs	1,493	10.4	+2.26*	+21.8
Male	3,566	10.0	+2.69*	+26.9
Female	1,853	9.3	+3.26*	+35.0
Age 16-19	362	11.7	+2.17*	+18.6
Age 20-49	4,035	9.6	+2.89*	+30.2
Age 50+	1,022	9.9	+3.13*	+31.7
Inpatient Detoxification	196	8.1	+4.71*	+58.0
Community Detoxification	361	8.5	+4.57*	+53.7
Residential Rehabilitation	50	7.4	+6.16*	+83.0
Substitute Opioid Prescribing (Methadone)	99	9.4	+2.30*	+24.6
Substitute Opioid Prescribing(Buprenorphine)	50	10.3	+3.36*	+32.7
Psychosocial Interventions	4,150	9.7	+2.98*	+30.6
All Clients	5,419	9.8	+2.88*	+29.6

Source: WNDSM, NHS Wales Informatics Service

* A statistically significant improvement ($p < 0.05$)

n.s Not a statistically significant change

Table 26c: Changes in Quality of Life between starting TOP & exit TOP

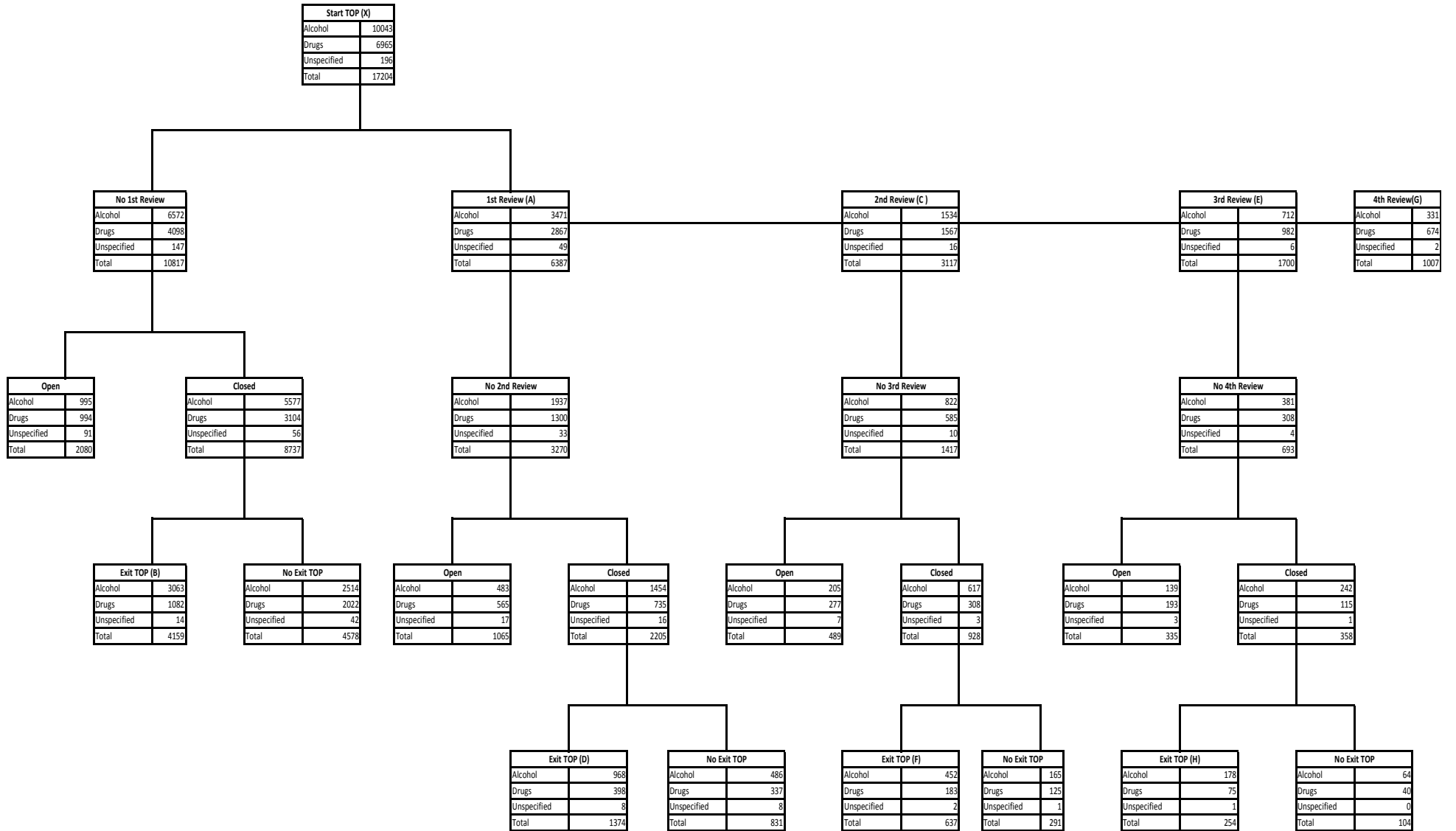
	Number of TOPs	Mean starting TOP	Mean Change	% change
Main substance alcohol	3,809	10.6	+2.74*	+25.9
Main substance drugs	1,500	10.8	+2.24*	+20.7
Male	3,566	10.5	+2.64*	+25.1
Female	1,861	10.2	+3.00*	+29.4
Age 16-19	363	12.4	+2.05*	+16.5
Age 20-49	4,039	10.2	+2.74*	+26.7
Age 50+	1,025	10.3	+3.12*	+30.2
Inpatient Detoxification	196	8.9	+4.19*	+47.0
Community Detoxification	361	9.0	+4.81*	+53.5
Residential Rehabilitation	49	7.3	+6.00*	+82.6
Substitute Opioid Prescribing (Methadone)	101	10.1	+1.57*	+15.6
Substitute Opioid Prescribing(Buprenorphine)	50	11.3	+2.54*	+22.5
Psychosocial Interventions	4,153	10.4	+2.89*	+27.8
All Clients	5,278	10.7	+2.56*	+23.9

Source: WNDSM, NHS Wales Informatics Service

* A statistically significant improvement ($p < 0.05$)

n.s Not a statistically significant change

Chart 5: Status of recorded TOPs 2009-10 to 2010-11



Part II. Additional evidence

6. Routinely collected data

6.1 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. Numbered references in the text are listed on page 62.

6.2 Executive Summary

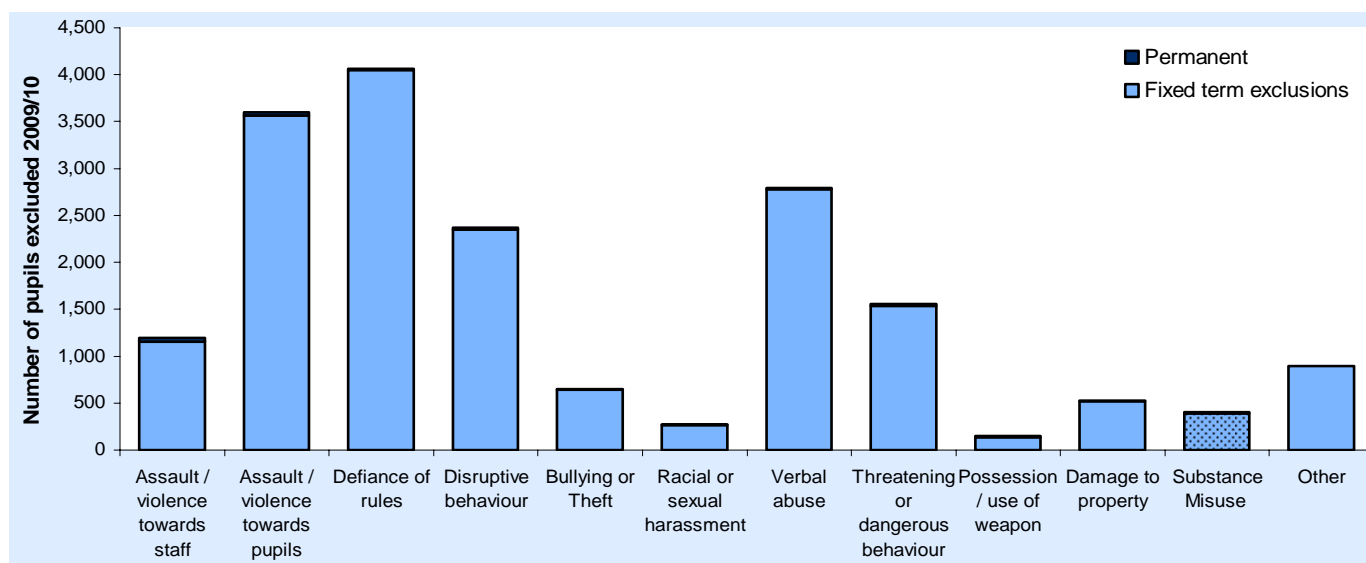
- The number of exclusions from schools in Wales (both permanent and fixed term) resulting from substance misuse decreased by 16.9 per cent from 2008-09 to 2009-10.
- There were a total of 494 alcohol related deaths in Wales in 2010 according to ONS, representing an 0.2 per cent increase from 2009.
- Over the five years 2006 to 2010 there has been an increase in alcohol related deaths of 14 per cent in males and 16.4 per cent in females in Wales.
- The number of hospital admissions with alcohol specific primary diagnosis decreased by 19.4 per cent from 2006 to 2010.
- The number of hospital admissions with alcohol specific primary diagnosis decreased by 19.4 per cent from 2006 to 2010.
- There were 152 drug misuse related deaths in Wales in 2010. This represents an increase of 15.29 per cent (from 132 to 152 deaths) from the previous year. Comparing the number of deaths in 2006 to 2010, the total number of drug related deaths have increased by 70.8 per cent.
- Of the total number of drug misuse related deaths in Wales 2010, 79 per cent occurred in Males.
- From 2006 to 2010, admissions for mental and behavioural disorders due to opioids have increased by 53.2 per cent (44.4 per cent in males and 68.1 per cent in females).
- Admissions for mental and behavioural disorders due to cocaine increased by 62 per cent from 2006 to 2008, but this trend was reversed in 2009 and maintained in 2010 with numbers of admissions in 2010 at 13.3 per cent higher than those recorded in 2006.
- For the period 2010-11, a total of 13,497 drugs offences were reported by police forces across Wales, representing a 0.1 per cent decrease from 2009-10.
- There were 13,423 seizures of controlled drugs in Wales in 2009-10 which represents a decrease of 2.7 per cent on the previous year.

6.3 Education

In 2009-10, there were a total of 185 permanent exclusions, 16,736 fixed term exclusion of five days or less and 1,542 exclusions of 6 or more days in school children aged up to 16 years. ¹Substance misuse accounted for:

- 8.6 per cent (n=16) of the permanent exclusions, a decrease on 2008-09 (n=30) ²
- 1.9 per cent (n=318) of the fixed term 5 days or less, a decrease on 2008-09 (n=384)
- 4.4 per cent (n=68) of the fixed term exclusions of 6 or more days, a decrease from 2008-09 (n=70)
- The number of exclusions from schools in Wales (both permanent and fixed term) specifically relating to substance misuse has decreased by 16.9 per cent from 2008-09 (n=484) to 2009-10 (n=402).

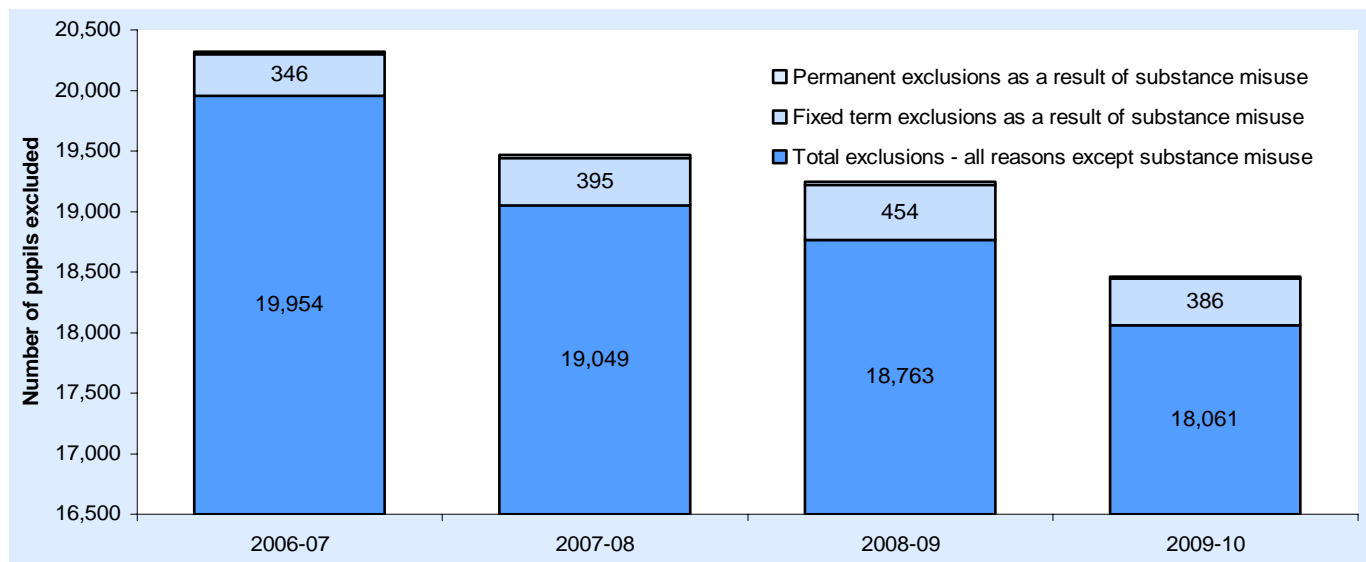
Chart 6: Number of Pupils (aged up to 16) excluded (permanently or fixed term) from schools in Wales by reason for exclusion 2009-10



Source: Exclusions from Schools in Wales 2009-10 KAS, Welsh Government

From 2008-09 to 2009-10, the total number of permanent exclusions (all reasons) decreased by 13.1 per cent.^{1,2} The proportion permanently excluded due to substance misuse decreased from 14.1 per cent in 2008-09 to 8.6 per cent in 2009-10. Similarly, the total number of fixed term exclusions (all reasons) decreased by 3.9 per cent and the proportion of fixed term exclusions due to substance misuse decreased from 2.4 per cent in 2008-09 to 2.1 per cent in 2009/10^{1,2} as illustrated in Chart 7.

Chart 7: Number of Pupils (aged up to 16) excluded (permanently or fixed term) due to substance misuse from schools in Wales 2006-07 to 2009-10



Source: Exclusions from Schools in Wales 2006-07, 2007-08, 2008-09 AND 2009-10 KAS, Welsh Government

6.4 Alcohol

6.4.1 Alcohol specific disease rates

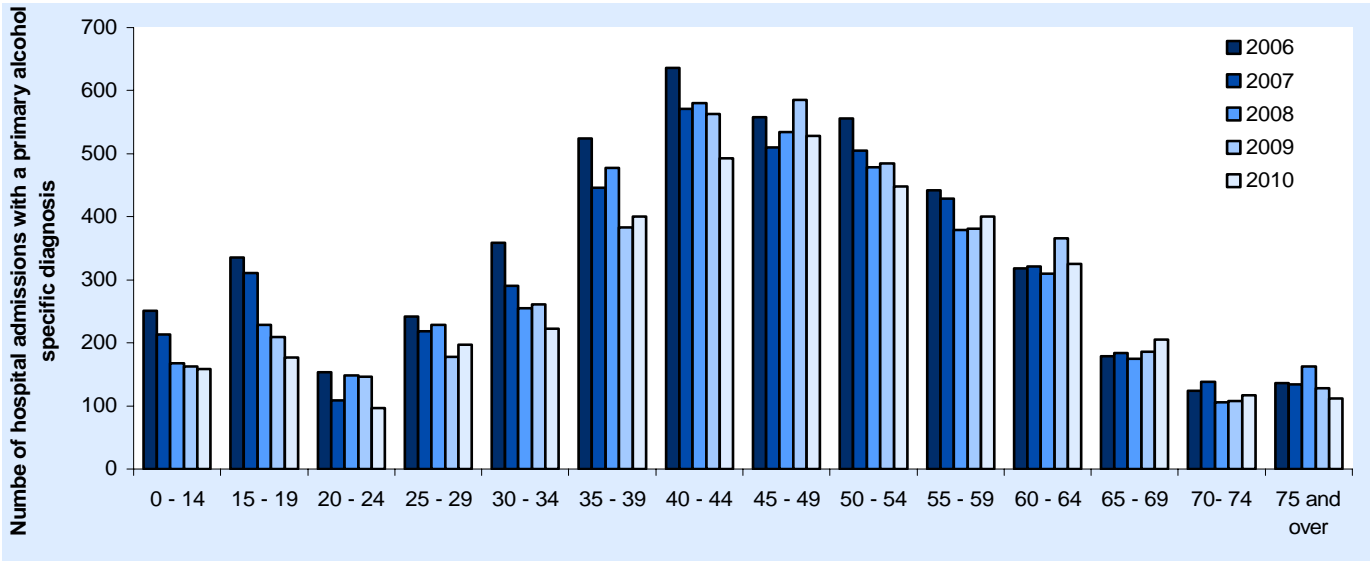
There are a number of specific acute and chronic health problems associated with alcohol misuse*. These include damage to the digestive system, mental and behavioural disorders, and liver damage including hepatitis and alcoholic cirrhosis of the liver. The patient episode database Wales (PEDW) provides information on hospital episodes within the general population in Wales. Following admission, a diagnosis

of the condition to be treated is made which can be either 'primary' or 'any mention of'. When the alcohol specific diagnosis is the main condition to be treated this is considered 'primary' and where the alcohol specific diagnosis is one of the related conditions it is considered 'any mention of'.

Chart 8 indicates the total number of admissions to hospital with an alcohol specific primary diagnosis by age over the period 2006 to 2010. There has been a slight decrease in the number of admissions with primary alcohol specific diagnosis for both males and females in the 0 to 14 years and in the 15-19 years age groups, however, increases are observed in the 25-29 years and 35-39 years (both male and female). Overall the total number of primary alcohol specific diagnoses decreased by 6.3 per cent from 2009 to 2010 (4.6 per cent in females and 7.3 per cent in males).

* Please see page 83 for definition of 'alcohol specific conditions'

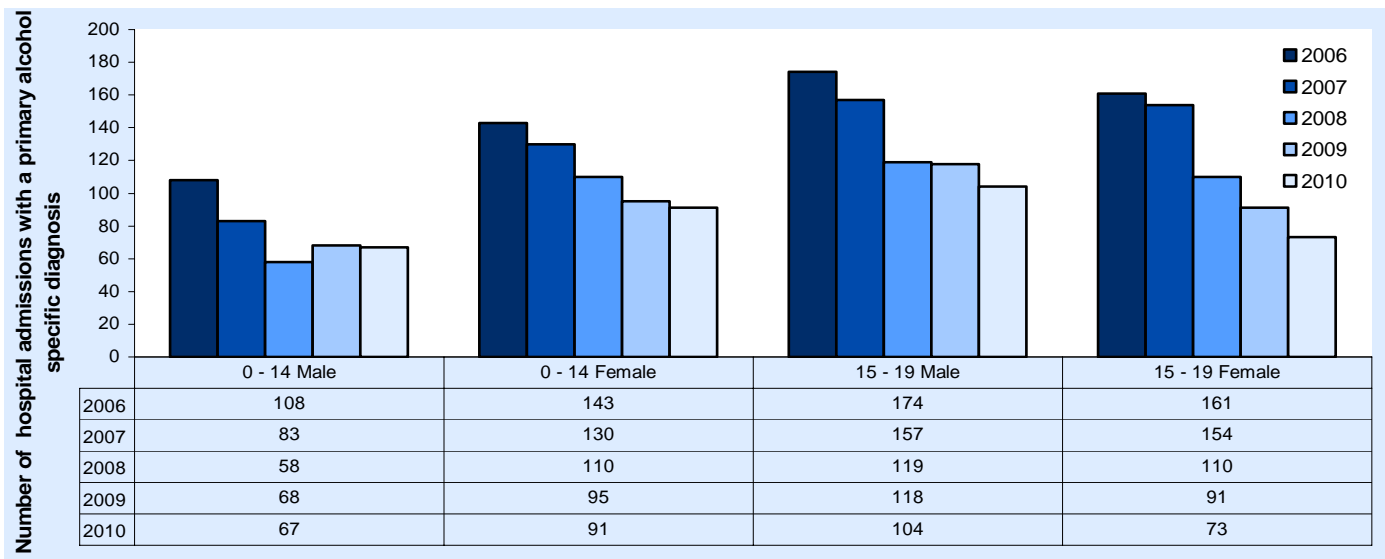
Chart 8: Hospital admissions with a primary alcohol specific diagnosis by age, 2006 to 2010



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

Year on year consistently higher rates of alcohol specific hospital admissions are reported for females aged under 15 compared to the male cohort, as indicated in Chart 9, however, rates of primary alcohol specific admissions for all these groups have fallen in 2010.

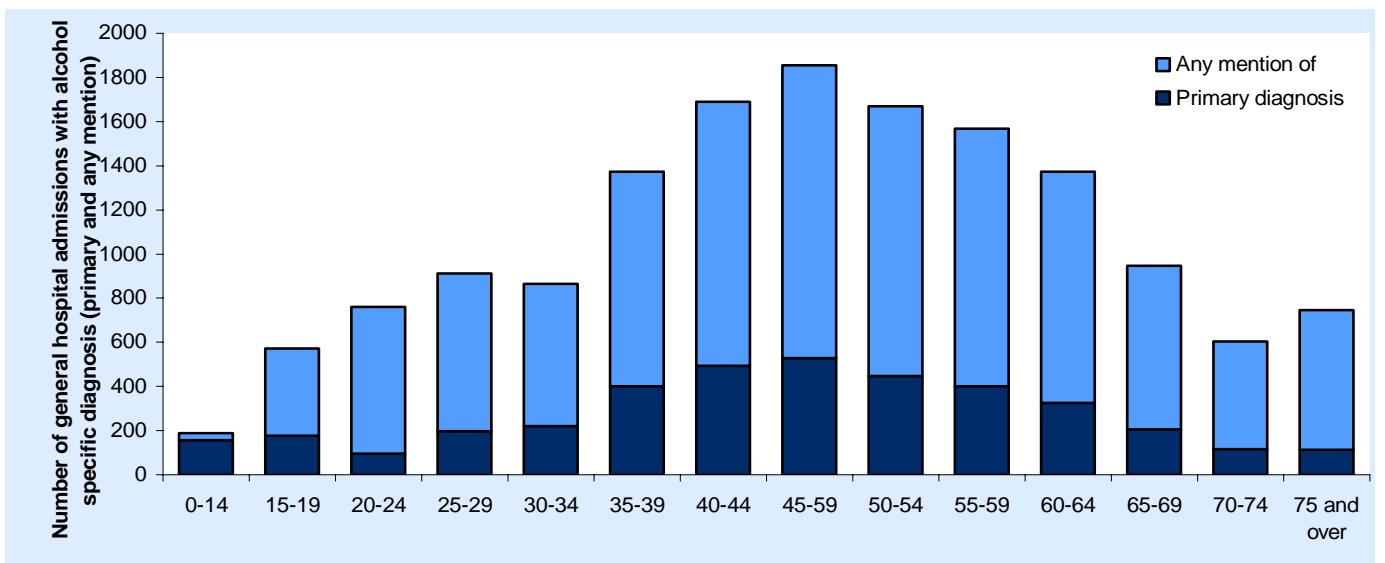
Chart 9: Hospital admissions with an alcohol specific primary diagnosis in males and females aged under 15 and 15-19 years 2006 to 2010



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

The number of primary alcohol specific admissions represents a small proportion of the overall alcohol specific admissions as indicated in Chart 10.

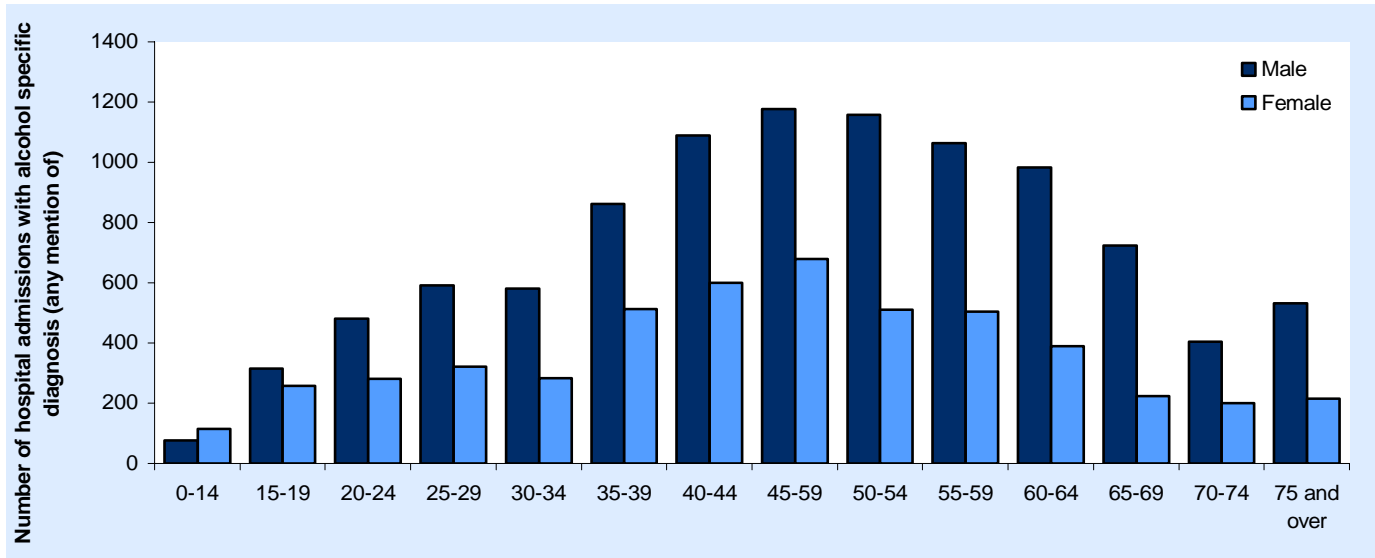
Chart 10: Hospital admissions with an alcohol specific diagnosis (primary and any mention of) by age in 2010



Source: PEDW – Patient Episode Database for Wales 2010

With the exception of those aged under 15 years, higher rates of admissions are seen in males. Chart 11 indicates the age and gender profile of alcohol specific admissions for 2010. The proportion of male to female admissions has remained relatively steady over the previous five years with around half the number of female admissions (n=5089) to male admissions (n=10030) .

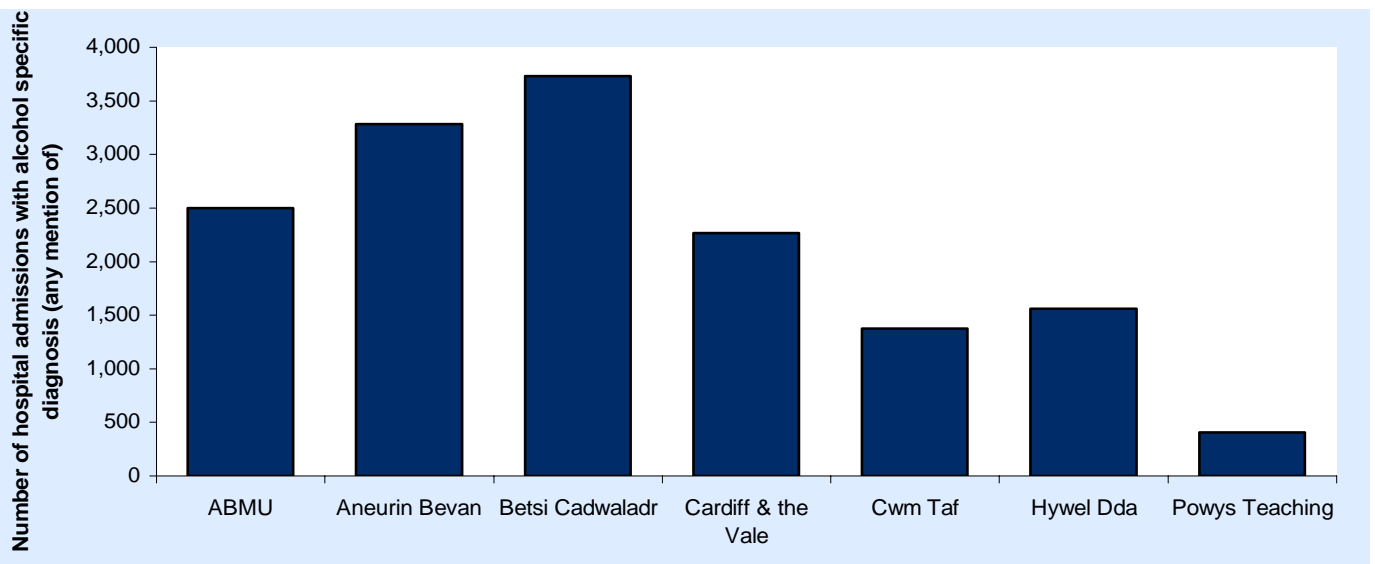
Chart 11: Hospital admissions with an alcohol specific diagnosis (any mention of) by age and gender 2010



Source: PEDW – Patient Episode Database for Wales 2010

Regional variation is apparent in the number of hospital admissions for alcohol specific diagnosis as indicated in Chart 12.

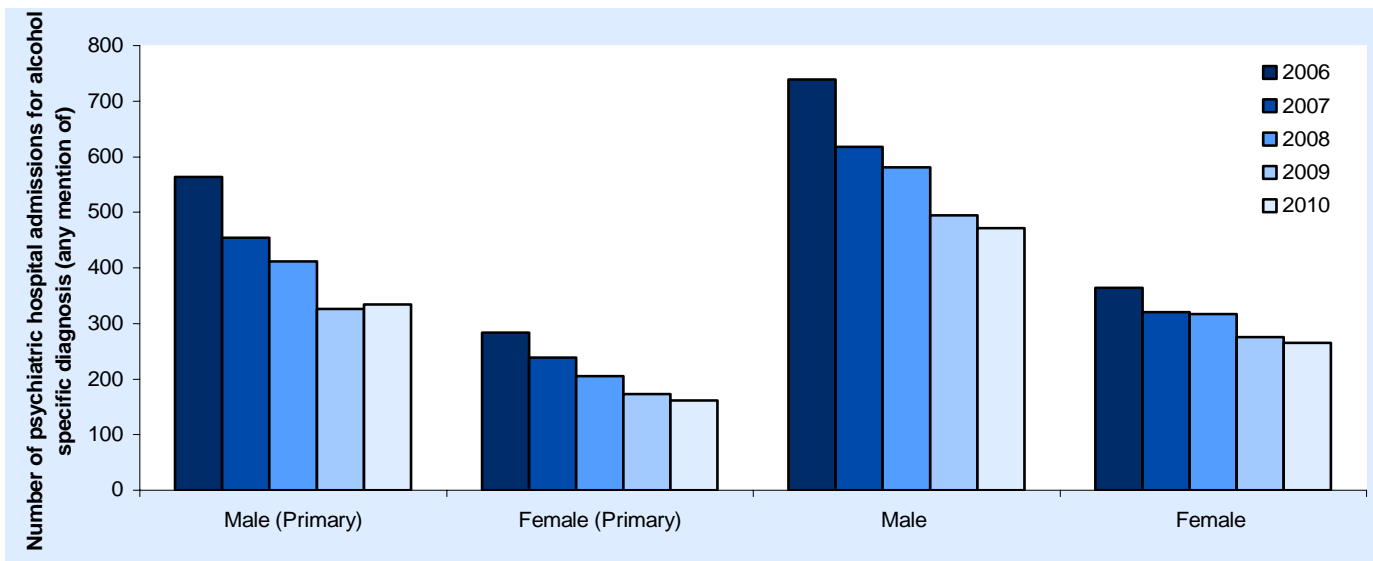
Chart 12: Hospital admissions with an alcohol specific diagnosis by Health Board 2010



Source: PEDW – Patient Episode Database for Wales 2010

Admissions to psychiatric hospitals for patients with an alcohol specific diagnosis have dropped year on year over the previous 5 years (2006 to 2010) as shown in Chart 13.

Chart 13: Psychiatric hospital admissions with an alcohol related diagnosis (any mention of) by gender 2006 to 2010

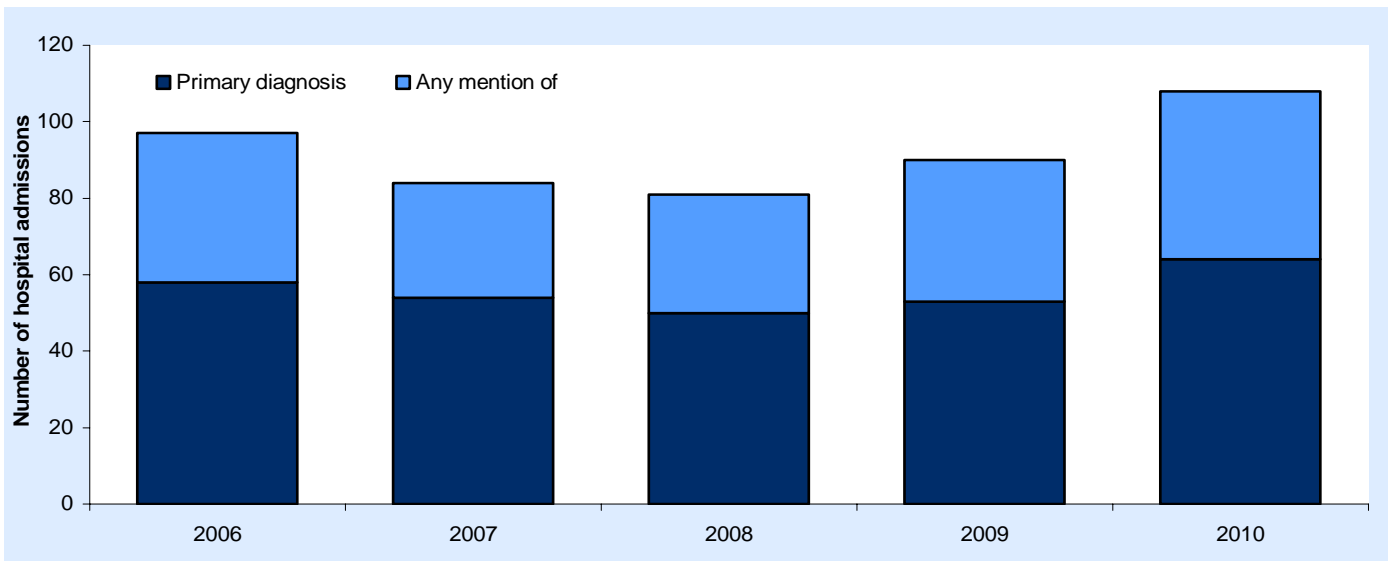


Source: PEDW – Patient Episode Database for Wales 2006 to 2010

6.4.2 Conditions originating in the perinatal period including foetal alcohol syndrome

The number of hospital admissions for babies born with conditions relating to maternal substance use including foetal alcohol syndrome in Wales increased by 20 per cent (n=18) in 2010. There were a total of 108 admissions in 2010, representing the highest number observed in the previous 5 years as indicated in Chart 14.

Chart 14: Hospital admissions for conditions originating in the perinatal period (P961 & Q86) (primary diagnoses and any mention of) for 2006 to 2010

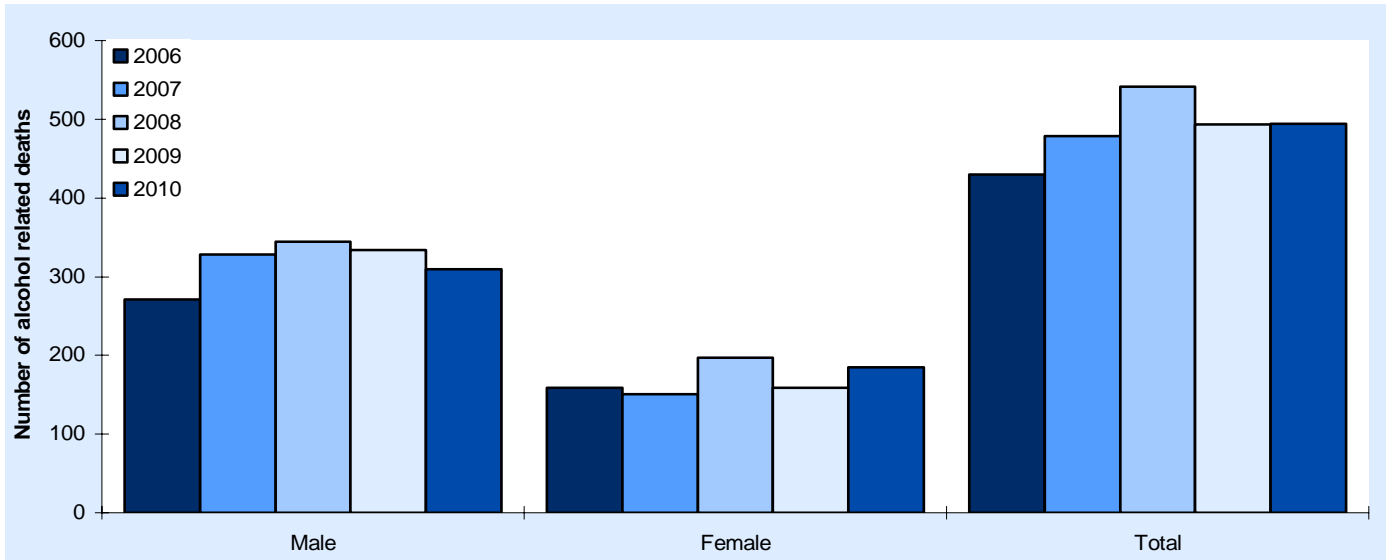


Source: PEDW – Patient Episode Database for Wales 2006 to 2010

6.4.3 Alcohol related deaths

In 2010, within Wales there was an overall increase of 0.2 per cent in the number of alcohol related deaths in the last year (from 493 deaths in 2009 to 494 deaths in 2010). Comparing the number of deaths in 2006 to those recorded in 2010, there has been an increase in alcohol related deaths of 14 per cent in males and 16.4 per cent in females in Wales according to ONS data as indicated in Chart 15.

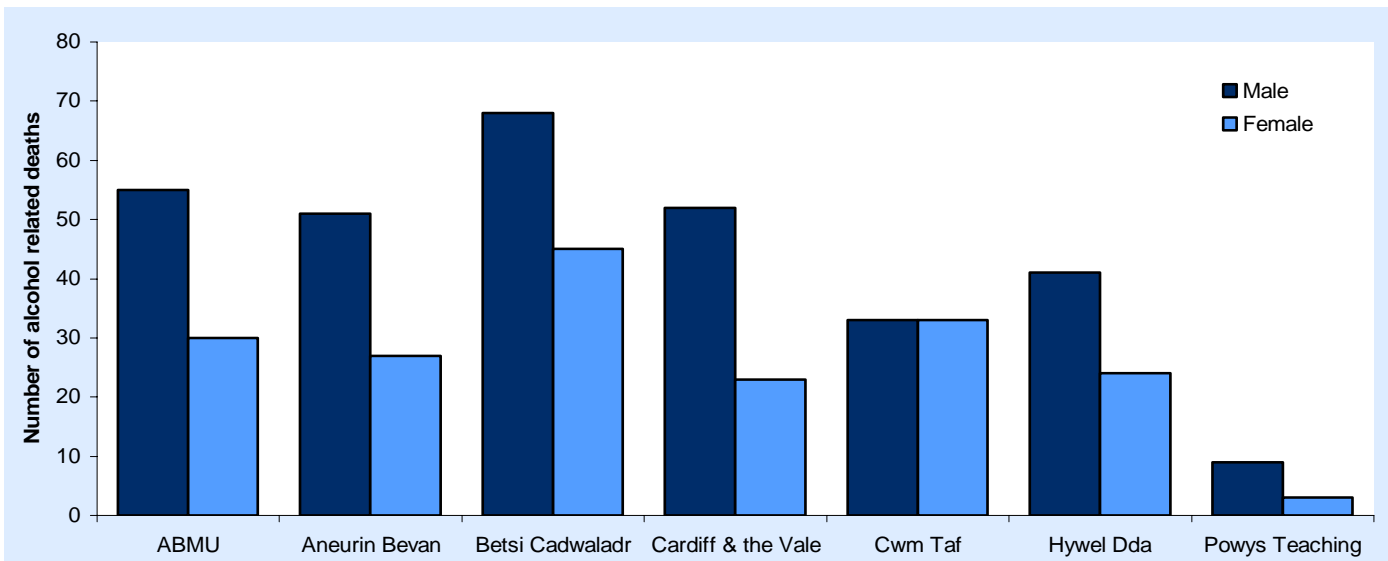
Chart 15: Alcohol related deaths in Wales by gender 2006 to 2010



Source: ONS, 2011

Across Wales, there is regional variation in relation to the proportion of overall alcohol related deaths recorded in 2010 with 22.9 per cent of alcohol related deaths recorded within Betsi Cadwaladr Health Board residents as indicated in Chart 16.

Chart 16: Alcohol related deaths in Wales by gender and Health Board in Wales 2006 to 2010



Source: ONS, 2011

Table 27 provides the number of alcohol related deaths and rate per 100,000 population by Health Board of residence. The highest rates per 100,000 population are seen in the Cardiff & the Vale area for males and the Cwm Taf area for females.

Table 27: Alcohol related deaths by gender and area of residence 2010

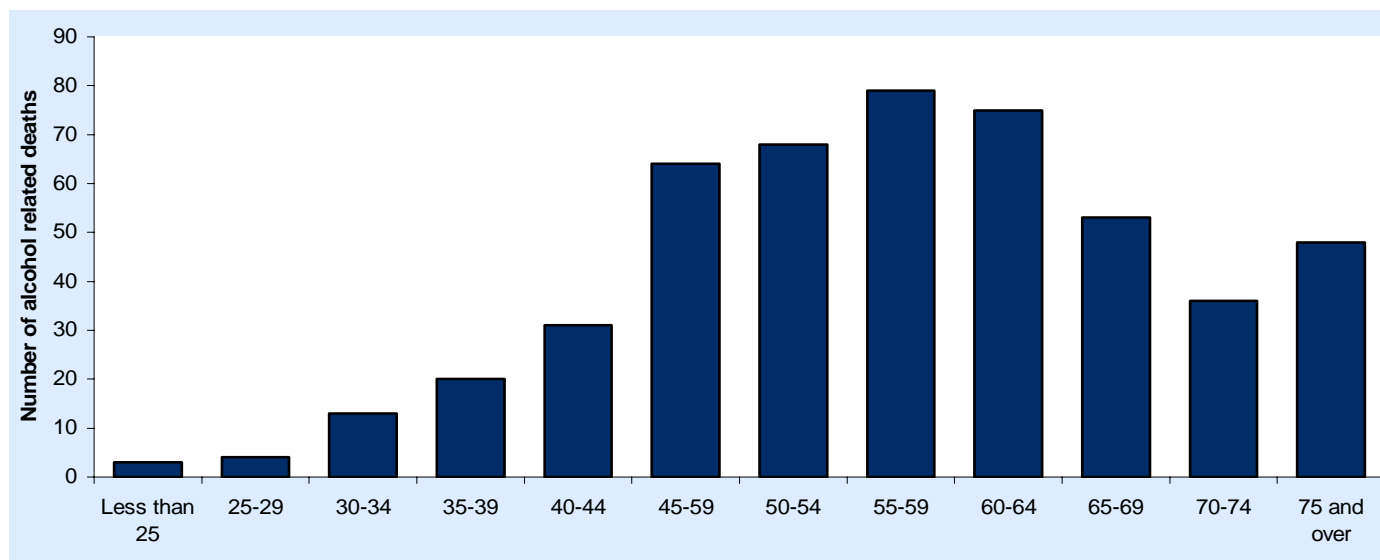
Health Board of residence	Number		Male		Female	
	Male	Female	Rate (a)	Rate (b)	Rate (a)	Rate (b)
Abertawe Bro Morgannwg University	55	30	20.44	-12.06	9.17	-0.89
Aneurin Bevan	51	27	16.21	-7.11	7.88	-2.99
Betsi Cadwaladr	68	45	17.29	-0.72	11.26	3.01
Cardiff & Vale University	52	23	24.08	2.42	8.56	2.69
Cwm Taf	33	33	22.07	1.5	19.83	7.76
Hywel Dda	41	24	19.54	10.98	10.56	6.11
Powys Teaching	9	3	10.62	2.48	3.25	-1.04

Source: ONS, 2010

(a) European Standardised rate per 100,000 population. Based on rounded mid year population estimates 2010.
Rate increase or decrease (-) per 100,000 population from 2009 death rates

The age group with the largest proportion of alcohol related deaths in Wales (16 per cent) was ages 55-59 years. Alcohol related deaths were recorded in the under 25 year age groups for both males and females. There is some variation within age groups as indicated in chart 17.

Chart 17: Alcohol related deaths in Wales by age group 2010



Source: ONS, 2011

6.5 Drugs and injecting drug use

6.5.1 Prevalence estimate of problematic drug use in Wales 2009-10

Public Health Wales (PHW) has undertaken a capture-recapture study designed to provide an estimate of the prevalence of problematic drug use in Wales. Capture-recapture is a technique that is used with epidemiological studies of hard to reach populations e.g. problematic drug users. By comparing data from several independent overlapping samples, it is possible to adjust for missing cases (or individuals who are not represented on the existing datasets) and to generate estimates of prevalence.³

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 Wales (including DIP referrals). The prevalence estimates are based on the 15 – 64 year old population of Wales.

The information outlined in the table below refers to the period 2009-10. It should be noted that an estimate of injecting drug use could not be provided as this information is not routinely recorded within the datasets used.

Table 28: Estimate of problem drug use 2009-10

Estimate of problem drug use 2009/10	Observed	Assumed	Total	population	Rate per 1000	Profile of primary drug type – rate per 1000 population		
						Stimulant	Opioid	Both
BCU Trust								
Males 15 - 29	498	953	1451 (1163-1862)	61771	23.5 (18.8-30.1)	11.6(9.3-14.9)	10.1(8.1-13.0)	1.7(1.4-2.2)
Males 30-64	765	545	1310 (1080-1304)	150982	8.7 (7.2 – 10.2)	1.1(0.9-1.3)	6.8(5.6-8.0)	0.8(0.6-0.9)
Females 15-29	134	196	330 (215-610)	57239	5.8 (3.8 – 10.7)	1.2(0.8-2.1)	4.2(2.7-7.8)	0.4(0.3-0.7)
Females 30-64	198	110	308 (249-436)	157495	2.0 (1.6 – 2.8)	0.1(0.1-0.2)	1.7(1.4-2.4)	0.1(0.1-0.2)
BCU Trust Total	1595	1804	3399 (2707-4212)	427487	8.0 (6.3 – 10.4)	1.9(1.5-2.5)	5.4(4.3-7.1)	0.6(0.5-0.8)
POWYS								
Males 15 - 29	58	59	117 (73-234)	10202	11.5 (7.2 – 22.9)	5.9(3.7-11.9)	4.9(3.1-9.9)	0.6(0.4-1.2)
Males 30-64	75	27	102 (79-242)	29979	3.4 (2.6 – 8.1)	0.4(0.3-1.0)	2.7(2.1-6.4)	0.3(0.2-0.8)
Females 15-29	22	5	27 (23-50)	9023	3.0 (2.5 – 5.5)	0.5(0.5-1.0)	2.2(1.9-4.0)	0.3(0.2-0.5)
Females 30-64	12	10	31 (14-243)	30876	1.0 (0.5 – 7.9)	0.1(0.0-0.7)	0.8(0.4-6.6)	0.1(0.0-0.7)
Powys Totals	167	110	277 (189-769)	80080	3.5 (2.4 – 9.6)	0.9(0.6-2.5)	2.3(1.6-6.3)	0.3(0.2-0.7)
HYWEL DDA								
Males 15 - 29	278	277	555 (469-617)	34770	16.0 (13.5 – 17.7)	6.1(5.2-6.8)	8.3(7.0-9.2)	1.6(1.3-1.7)
Males 30-64	290	200	490 (419-599)	80068	6.1 (5.2 – 7.5)	1.4(1.2-1.7)	4.4(3.8-5.4)	0.3(0.3-0.4)
Females 15-29	83	63	146 (106-242)	33175	4.4 (3.2 – 7.3)	0.5(0.4-0.9)	3.6(2.6-6.0)	0.3(0.2-0.4)
Females 30-64	77	84	161 (115-249)	86216	1.9 (1.3 – 2.9)	0.3(0.2-0.4)	1.5(1.1-2.4)	0.1(0.1-0.1)
Hwyel Dda Totals	728	624	1352 (1109-1707)	234229	5.8 (4.7 – 7.3)	1.5(1.3-1.9)	3.8(3.1-4.8)	0.4(0.3-0.5)
ABMU Trust								
Males 15 - 29	705	998	1703 (1379-2183)	52717	32.3(26.2 – 41.4)	7.1(5.7-9.0)	23.5(19.0-30.1)	1.8(1.4-2.3)
Males 30-64	874	708	1582 (1369-1885)	110974	14.3(12.3 – 17.0)	1.5(1.3-1.8)	12.1(10.5-14.4)	0.6(0.5-0.7)
Females 15-29	298	246	544 (425-774)	48445	11.2(3.7 – 11.8)	0.7(0.5-1.0)	10.1(7.9-14.3)	0.5(0.4-0.7)
Females 30-64	225	627	852 (426-1359)	115004	7.4(3.7 – 11.8)	0.3(0.1-0.5)	6.9(3.5-11.1)	0.2(0.1-0.3)
ABMU Total	2102	2579	4681 (3599-6201)	327140	14.3 (11.0 – 19.0)	1.9(1.4-2.5)	11.8(9.1-15.6)	0.6(0.5-0.9)
Cwm Taf								
Males 15 - 29	256	257	513 (416-669)	29736	17.3 (14.0 – 22.5)	5.7(4.6-7.4)	11.0(8.9-14.3)	0.6(0.5-0.8)
Males 30-64	343	401	744 (549-1122)	63817	11.7 (8.6 – 17.6)	1.0(0.7-1.4)	10.2(7.5-15.3)	0.5(0.4-0.8)
Females 15-29	120	78	198 (162-266)	28592	6.9 (5.7 – 9.3)	0.4(0.3-0.5)	6.3(5.1-8.5)	0.2(0.2-0.3)
Females 30-64	113	141	254 (177-423)	66978	3.8 (2.6 – 6.3)	0.1(0.1-0.2)	3.6(2.5-6.0)	0.0 (0.0-0.1)
Cwm Taf Total	832	877	1709 (1304-2480)	189123	9.0 (6.9 – 13.1)	1.3(1.0-1.9)	7.4(5.6-10.7)	0.3(0.2-0.5)

Table 28 (continued): Estimate of problem drug use 2009-10

Estimate of problem drug use 2009/10	Observed	Assumed	Total	population	Rate per 1000	Profile of primary drug type – rate per 1000 population		
						Stimulant	Opioid	Both
Cardiff and the Vale								
Males 15 - 29	612	1020	1632 (1349-2024)	60973	26.8 (22.1 – 33.2)	9.7(8.0-12.0)	14.7(12.1-18.2)	2.4(2.0-2.9)
Males 30-64	677	369	1046 (967-1145)	96814	10.8 (10.0 – 11.8)	1.6(1.5-1.7)	8.2(7.6-8.9)	1.0(1.0-1.1)
Females 15-29	179	149	328 (251-489)	61428	5.3 (4.1 – 8.0)	0.6(0.5-0.9)	4.1(3.2-6.1)	0.6(0.5-0.9)
Females 30-64	175	78	253 (221-307)	99546	2.5 (2.2 – 3.1)	0.3(0.3-0.4)	2.0(1.7-2.4)	0.3(0.2-0.3)
Cardiff and the Vale Total	1643	1616	3259 (2788-3965)	318761	10.2 (8.7 – 12.4)	2.3(1.9-2.7)	7.0(6.0-8.5)	1.0(0.8-1.2)
Aneurin Bevan								
Males 15 - 29	450	1083	1533 (1067-2351)	53739	28.5 (19.9 – 43.7)	13.0(9.0-19.9)	12.4(8.6-19.0)	3.2(2.2-4.9)
Males 30-64	458	445	903 (723-1207)	124565	7.2 (5.8 – 9.7)	0.9(0.7-1.2)	5.6(4.5-7.5)	0.7(0.6-1.0)
Females 15-29	130	132	262 (196-393)	51489	5.1 (3.8 – 7.6)	0.9(0.6-1.3)	3.8(2.9-5.8)	0.4(0.3-0.6)
Females 30-64	112	102	214 (168-295)	130450	1.6 (1.3 – 2.3)	0.1(0.1-0.2)	1.3(1.0-1.8)	0.2(0.1-0.3)
Aneurin Bevan Total	1150	1762	2912 (2154-4246)	360243	8.1 (6.0 – 11.8)	2.1(1.5-3.0)	5.2(3.8-7.5)	0.8(0.6-1.2)

Notes: Authors: Josie Smith, Simon Cottrell and Dr Mark Temple

Notes:

1. It was not possible to report a separate estimate of injecting drug use as this item was not routinely recorded within the datasets.
2. Some of the underlying assumptions of the model may have been violated and led to biased results – e.g. different case definitions between the data sources, lack of independence between datasets
3. The lack of independence between data sets for particular areas in Wales impacted on the application of best fitting models to assess the estimate of the unobserved population of problematic drug users (those not represented on the databases from police, probation or treatment services). As indicated in the table above, the models were particularly poor fitting for males and females 15 – 29 years in the BCU Health Board area, males 15 – 29 years in ABMU area and Powys all ages

5.5.1.2 Prevalence of injecting drug use – Findings from the Harm Reduction Database

The harm reduction database (HRD) is a national data collection system for the recording of all needle and syringe programme (NSP) activity across Wales including the provision of sterile, and return of used, injecting equipment; substances used and injecting behaviour; and, referral and signposting to relevant health and substance misuse services. The harm reduction database was established in 2010 and went live in all statutory and voluntary sector needle syringe programme (NSP) sites on September 1st 2010. Roll-out of the HRD in all other NSP services i.e. community pharmacy based services is shortly to be implemented.

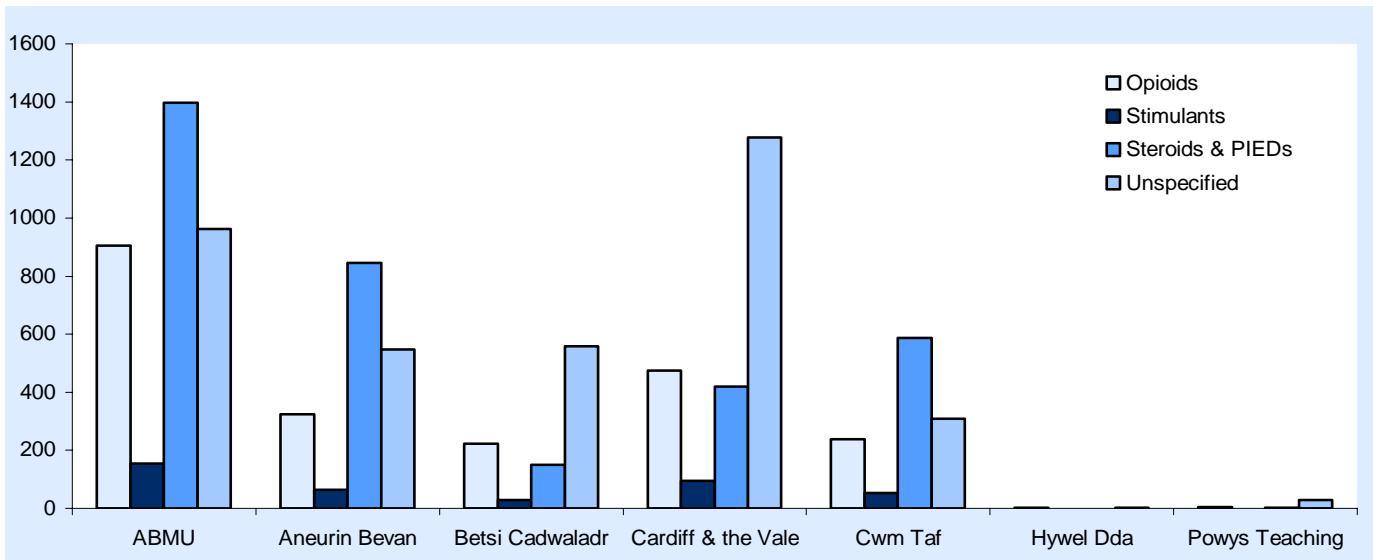
The harm reduction database is currently operational in 46 statutory and voluntary sites across the seven area health boards of Wales, as indicated in Table 29:

Table 29. Profile of NSP services by Health Board as at September 2011

Betsi Cadwaladr	Powys Teaching	Hywel Dda	ABMU	Cardiff & Vale	Cwm Taf	Aneurin Bevan
Statutory NSP = 10 plus 3 mobiles	Statutory NSP = 0	Statutory NSP = 0	Statutory NSP = 0	Statutory NSP = 2	Statutory NSP = 1	Statutory NSP = 1
Voluntary NSP = 0	Voluntary NSP = 5	Voluntary NSP = 1	Voluntary NSP = 4	Voluntary NSP = 2	Voluntary NSP = 3	Voluntary NSP = 3
Pharmacy NSP = 71	Pharmacy NSP = 13	Pharmacy NSP = 31	Pharmacy NSP = 31	Pharmacy NSP = 12	Pharmacy NSP = 21	Pharmacy NSP = 18

The following report section is a summary of the data collected for the year September 1st 2010 to August 31st 2011. The data does not include any activity within Community Pharmacy NSP services and as such information for the Hywel Dda and Powys areas is extremely limited. Chart 18 indicates the primary drug profile by Health Board / Substance Misuse Area Planning Board area. The primary drug profile represents activity over the full year and therefore does not reflect the more seasonal use of steroids and performance and image enhancing drugs (PIEDs).

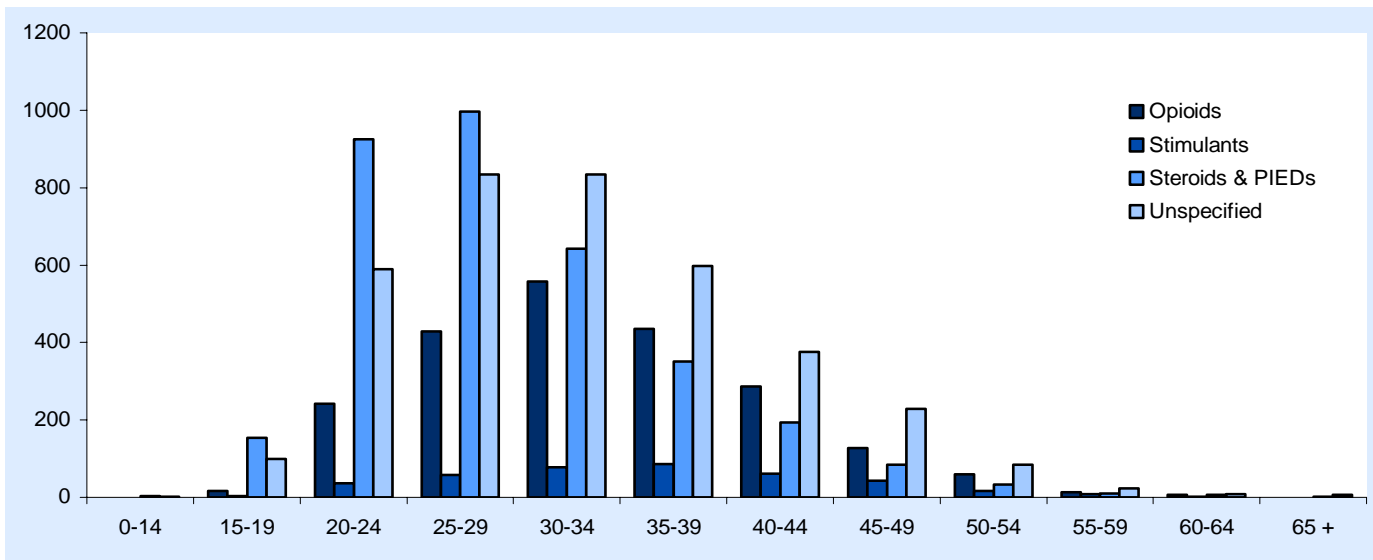
Chart 18: Profile of primary drug group by Health Board area



Public Health Wales, 2011

The age profile of those accessing statutory and voluntary NSP services across Wales is indicated in Chart 19 by primary substance type.

Chart 19: Number of individuals accessing NSP services across Wales by age group and primary substance type

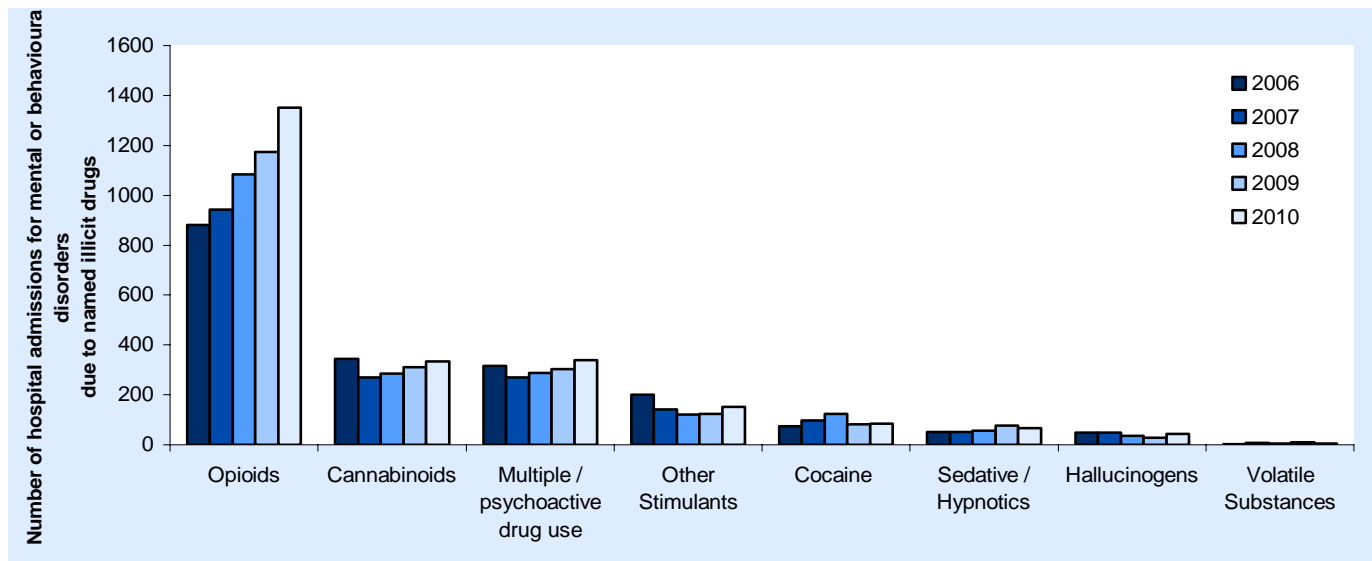


Public Health Wales, 2011

6.5.2 Drug related admission rates

Hospital admissions for illicit 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 20 indicates a steady increase in the number of admissions for mental and behavioural disorders due to opioids year on year. A more recent rise in admissions due to cannabinoids, multiple/psychoactive substances, other stimulants and hallucinogenics is also observed over the period 2008-2010.

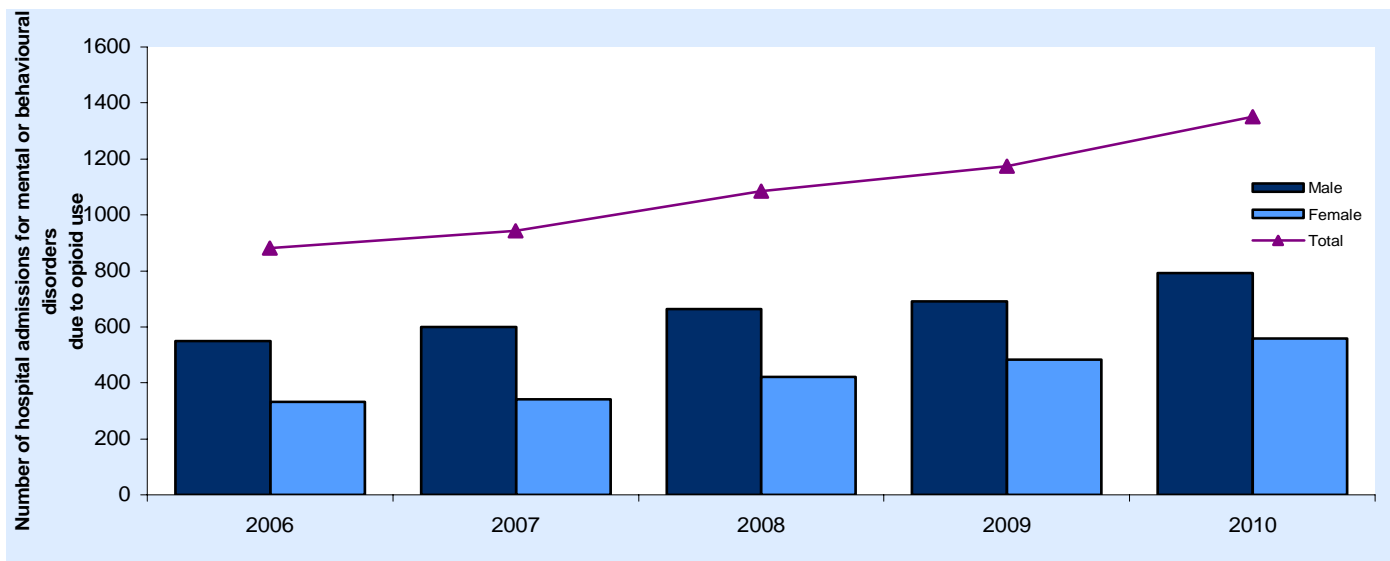
Chart 20: Hospital admissions for mental or behavioural disorders due to named illicit drugs 2006 to 2010 (any mention of)



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

Over the period 2006 to 2010, admissions for mental and behavioural disorders due to opioids have increased overall by 53.2 per cent (44.4 per cent in males and 68.1 per cent in females) as indicated in Chart 21.

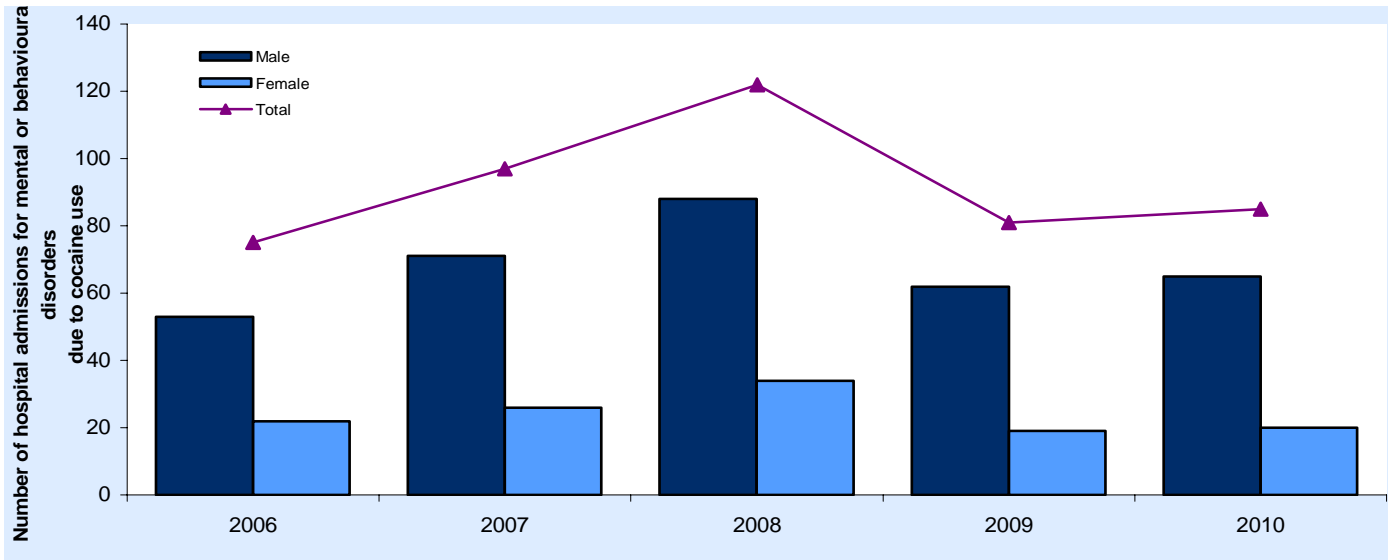
Chart 21: Hospital admissions for mental or behavioural disorders due to opioid use 2006 to 2010 (any mention of)



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

Admissions for mental and behavioural disorders due to cocaine increased by 62.7 per cent over the period 2006 to 2008, but a decrease was seen in 2009 (from 122 in 2008 to 81 in 2009). Admissions during 2010 increase by less than 5 per cent across from the previous year as indicated in Chart 22.

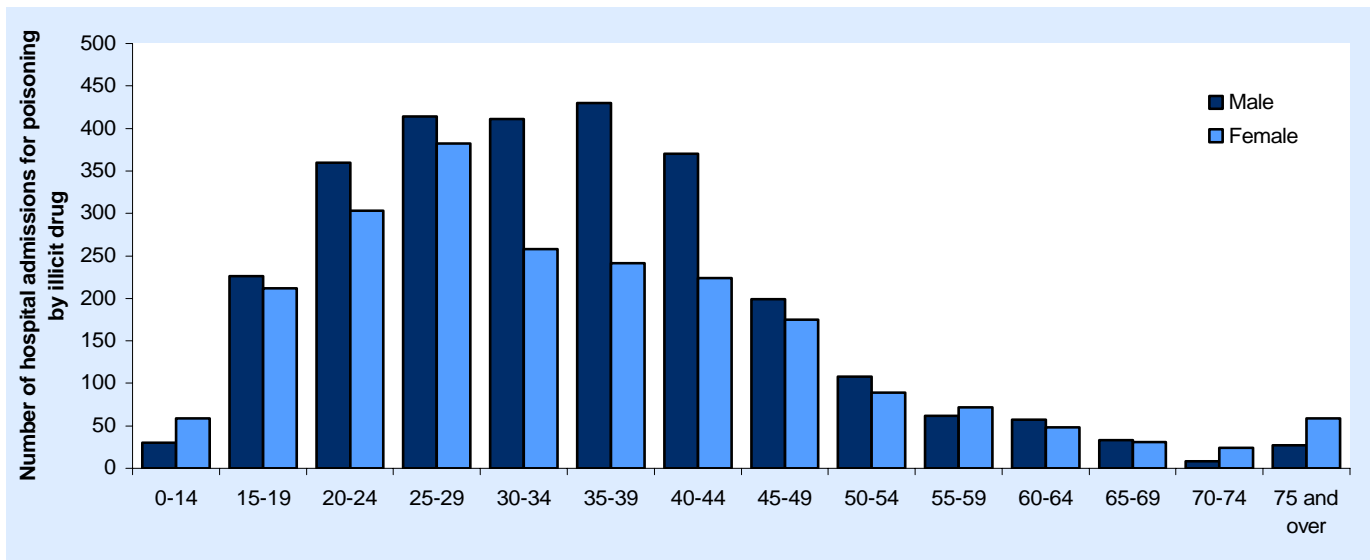
Chart 22: Hospital admissions for mental or behavioural disorders due to cocaine use 2006 to 2010



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

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. There were a total of 4912 hospital admissions for poisonings with drugs in 2010. As indicated in Chart 23, overall the highest number of admissions during 2010 were seen in the 25-29 age group but admissions remain elevated in the 20-24, 30-34 and 35-39 age groups.

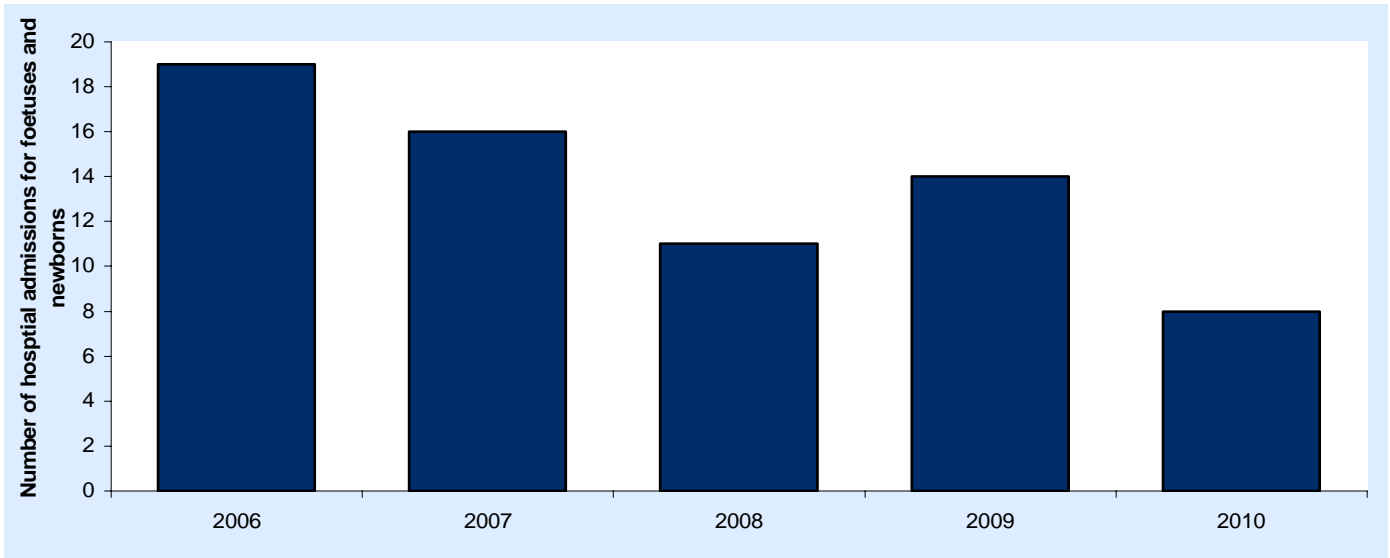
Chart 23: Hospital admissions for poisoning with drugs by age and gender 2010



Source: PEDW – Patient Episode Database for Wales 2006 to 2010

The number of fetuses and newborns affected by maternal use of drugs of addiction decreased over the period 2005 to 2008, however, there was a slight increase in the number of cases in 2009 as indicated in Chart 24. The number of cases decreased in 2010 to the lowest number observed over the five year period.

Chart 24: Foetus and newborn affected by maternal use of drugs of addiction in Wales 2006 to 2010

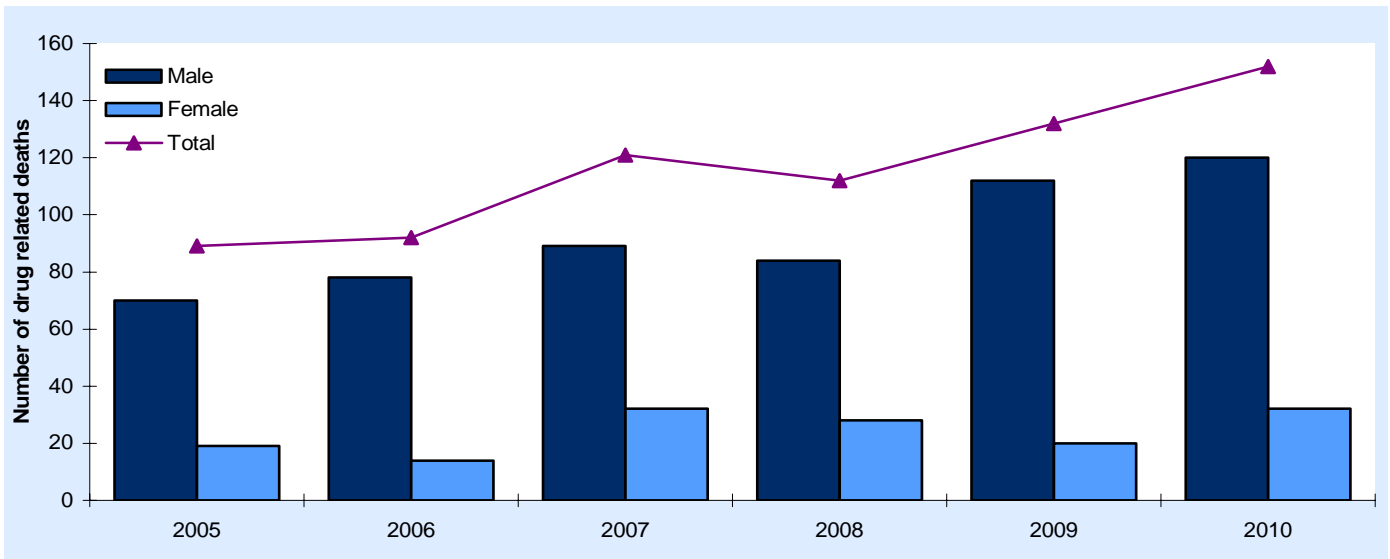


Source: PEDW – Patient Episode Database for Wales 2006 to 2010

6.5.3. Drug misuse related deaths

There were a total of 1,784 deaths related to drug misuse in England and Wales in 2010 (1,382 male and 402 female) representing a decrease of 4.9 per cent on the previous year.⁴ In Wales, the number of deaths has increased overall from a total of 132 in 2009 to 152 in 2010, an increase of 15.2 per cent, as indicated in Chart 25. Over the last 5 years deaths related to drug misuse in Wales have increased in males with the exception of a slight decrease in 2008. The picture for deaths in females is more complex with figures showing a decrease over the period 2007-2009 and an increase in 2010.

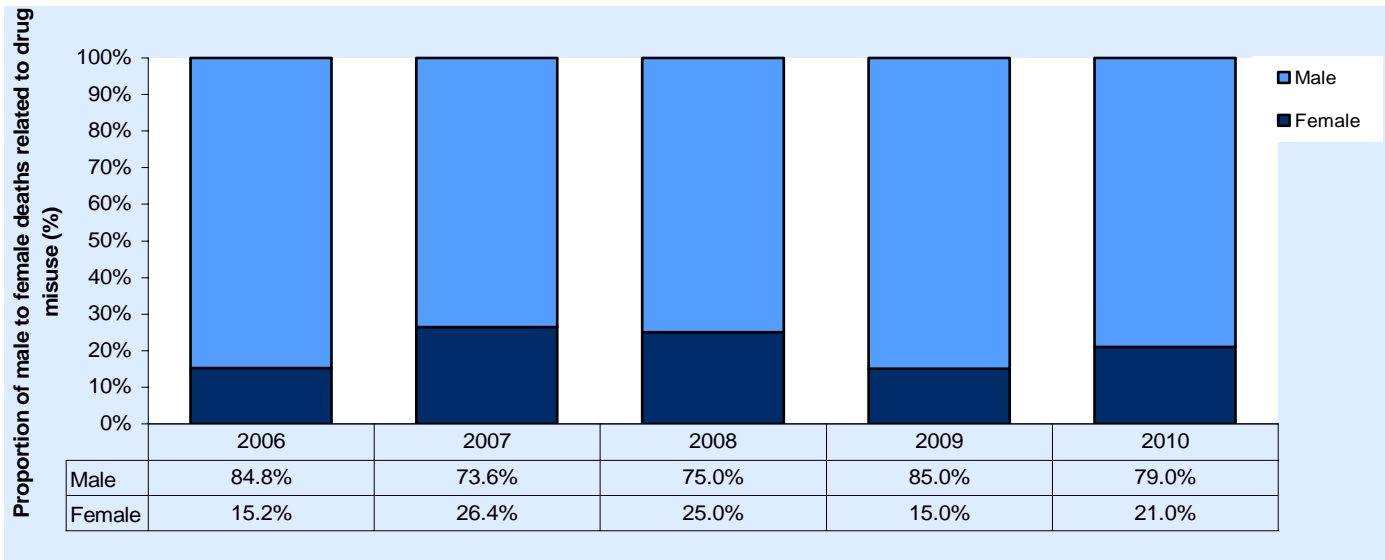
Chart 25: Deaths related to drug misuse in Wales by gender 2006 to 2010



Source: ONS, 2011

There have been increases in the proportion of drug misuse related deaths in females relative to males in the last year with female deaths accounting for 15 per cent in 2009 and 21 per cent in 2010 as indicated in Chart 26.

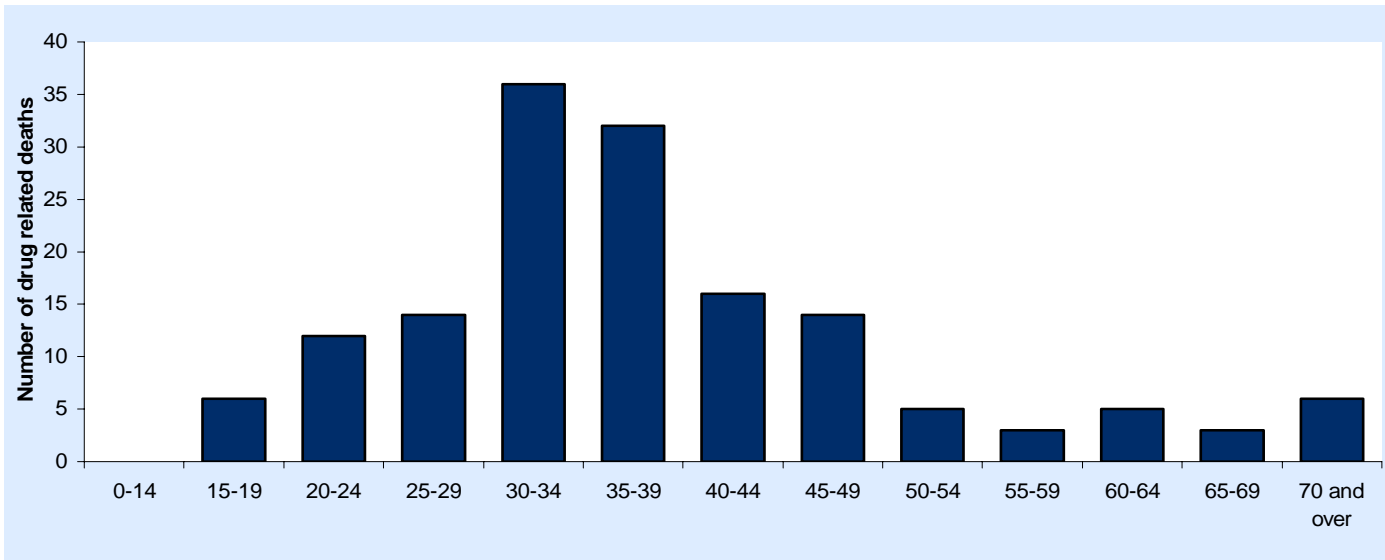
Chart 26: Proportion of male to female deaths related to drug misuse 2006 to 2010



Source: ONS 2011

The largest age group for drug misuse related deaths in Wales in 2010 occurred in the 30-34 year age group as indicated in chart 27.

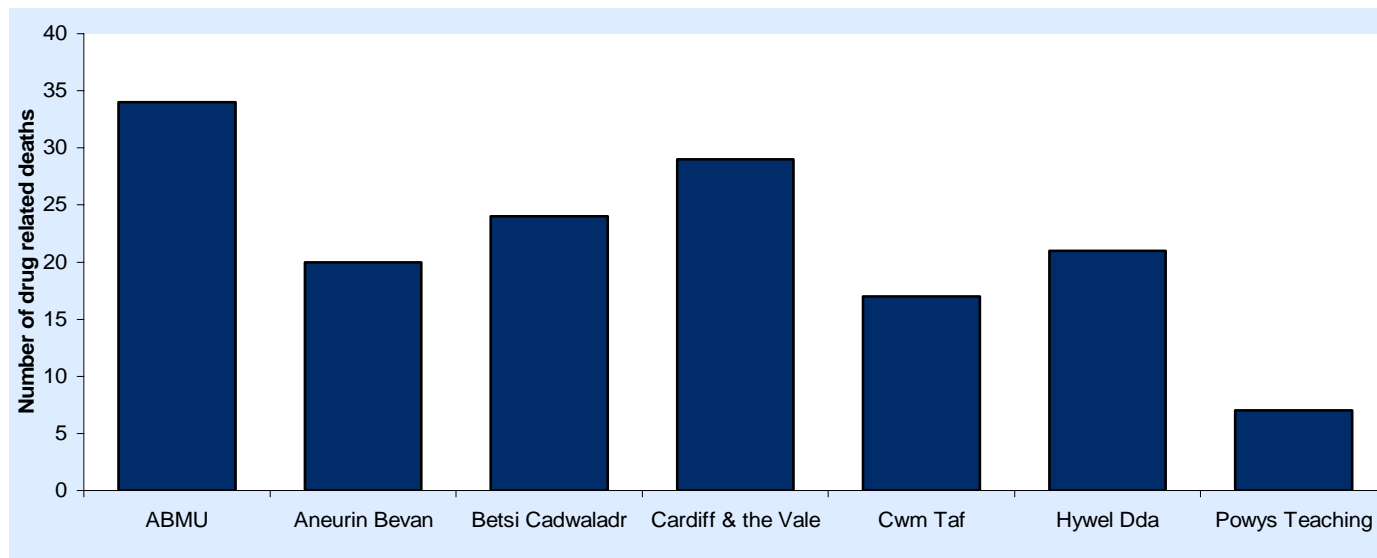
Chart 27: Drug misuse related deaths in Wales by age 2010



Source: ONS 2011

Within the overall drug misuse related death data for 2010, there is marked regional variation with 22.4 per cent of all deaths recorded within the Abertawe Bro Morgannwg University Health Board area as indicated in Chart 28.

Chart 28: Drug misuse related deaths in Wales by Health Board 2010



Source: ONS 2011

Table 30 provides the number of drug related deaths and rate per 100,000 population by Health Board of residence. The highest rates per 100,000 population in 2010 are seen within Abertawe Bro Morgannwg University Health Board area and the lowest within Aneurin Bevan.

Table 30: Drug related deaths by gender and area of residence 2010

Health Board of residence	Number	Rates (a)		Rate Increase or Decrease 2009 to 2010 (b)
		2010	2009	
Abertawe Bro Morgannwg University	34	7.48	8.54	-1.06
Aneurin Bevan	20	4.13	3.22	0.91
Betsi Cadwaladr	24	3.98	3.98	0
Cardiff & Vale University	29	6.23	4.49	1.74
Cwm Taf	17	6.28	5.68	0.6
Hywel Dda	21	6.54	5.09	1.45
Powys Teaching	7	5.84	2.76	3.08

Source: ONS, 2011

(a) European Standardised Rate per 100,000 population. Based on rounded mid year population estimates 2010.

(b) Rate increase or decrease (-) per 100,000 population from 2009 death rates

6.5.4 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.⁴ 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
- Blood borne viral infections:
 - hepatitis B
 - hepatitis C

- HIV

Risk behaviour

Direct sharing (the sharing of used needles and syringes) - According to the Unlinked Anonymous Monitoring (UAM) survey of injecting drug users (IDUs) 2010,⁵ direct sharing (of used needles and syringes) in the previous four weeks was reported by 20 per cent (48 of 241) of current IDU respondents in Wales, an increase of 3 per cent from the previous year. However, self-reported rates of direct sharing have decreased from 38% in 2000. Higher rates of direct sharing are reported in those aged under 25 years.

Reported direct sharing in the previous four weeks was associated with;

- Injecting crack-cocaine
- Injecting cocaine
- Injecting amphetamine
- Having been homeless in the previous year ⁶

Indirect sharing (sharing injecting related equipment e.g. cookers, filters, water) - In 2010, substantial levels of indirect sharing were reported with 41% per cent of current IDU respondents in Wales reported sharing injecting equipment in the previous four weeks. ⁵

Risks of injecting site infection

Bacterial infections at injecting sites may result in symptoms including abscesses and sore or open wounds. The UAM 2010 survey indicates that 24 per cent of IDU respondents, who had injected in the previous year, reported experiencing symptoms of injecting site infections in the previous year. These include having had an abscess, sore, or open wound at injection site. ⁵ Previous UAM surveys ⁶ indicated that 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, legs and/or 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 per cent of those infected becoming chronically infected. There are an estimated 14,000 individuals infected with hepatitis C in Wales. ⁷ Where individuals have been diagnosed and indicated a risk factor, over 93 per cent of the infections resulted from injecting drug use ⁸ as indicated in Table 25. UK wide data indicates that 47% of current IDUs tested were hepatitis C antibody positive. ⁵ In 2006/07 in Wales, it was estimated that overall 26 per cent of current IDUs in Wales may be infected with hepatitis C, with far higher rates observed in Swansea (42 per cent) and Cardiff (38 per cent). ⁹ However, much hepatitis C infection remains undiagnosed.

Table 31: Self reported risk factor information in laboratory reports of hepatitis C infection in Wales 1996 to 2009.⁸ (Risk factor was not reported in the majority of confirmed infections)

<u>Risk factor (where reported)</u>	<u>Number of reports</u>	<u>Percentage %</u>
Injecting drug use	965	93.6
Transfusion	14	1.4
Blood product recipient	19	1.8
Sexual exposure	10	1
Renal failure	2	0.2
Vertical (mother to baby) or Household	6	0.6
Occupational	0	0
Other	15	1.5
Total	1031	100

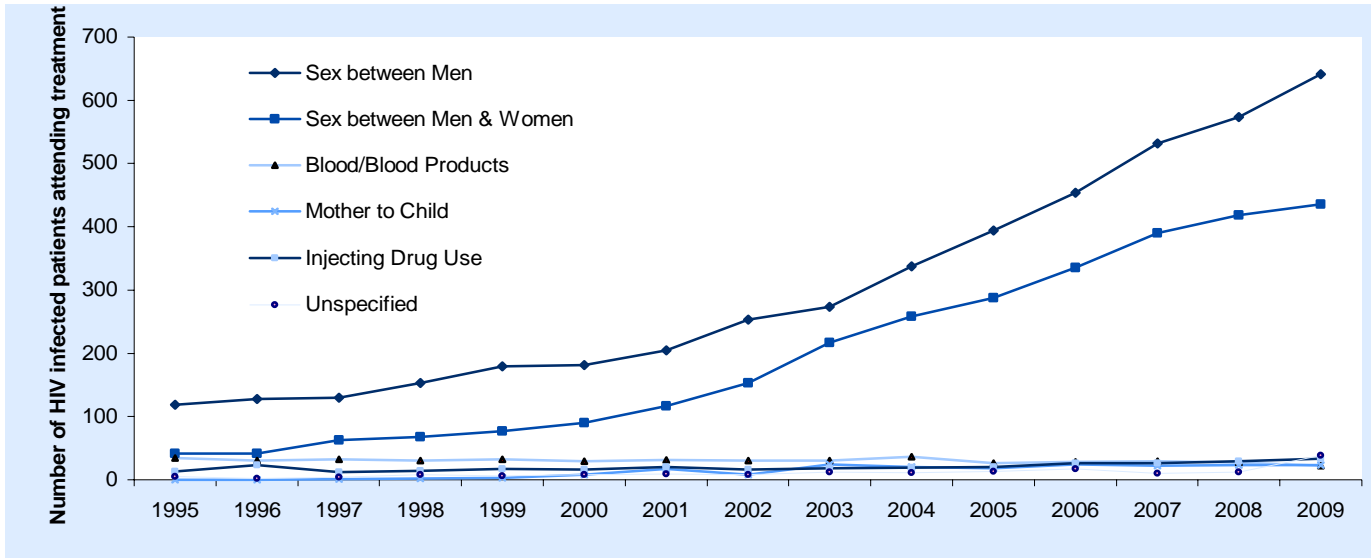
Hepatitis B

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 UAM 2010 survey data, the prevalence of Hepatitis B (previous or current hepatitis B infection) was 5.4 per cent amongst current and former injectors in Wales. The self-reported rates of hepatitis B vaccination amongst IDUs in Wales was 64% (at least one dose of vaccine).⁵

HIV

In Wales, in 2010 there were a total of 1321 HIV infected individuals accessing treatment. Of these, 2.3 per cent (n=30) reported injecting drug use as their route of transmission.¹⁰ Rates of HIV infection among injecting drug users in Wales and in the UK remain low relative to other transmission routes as indicated in Chart 29. In 2010, there were a total of 161 new HIV diagnoses in Wales.¹¹ Where route of transmission was indicated, injecting drug use accounted for 0.6 per cent.

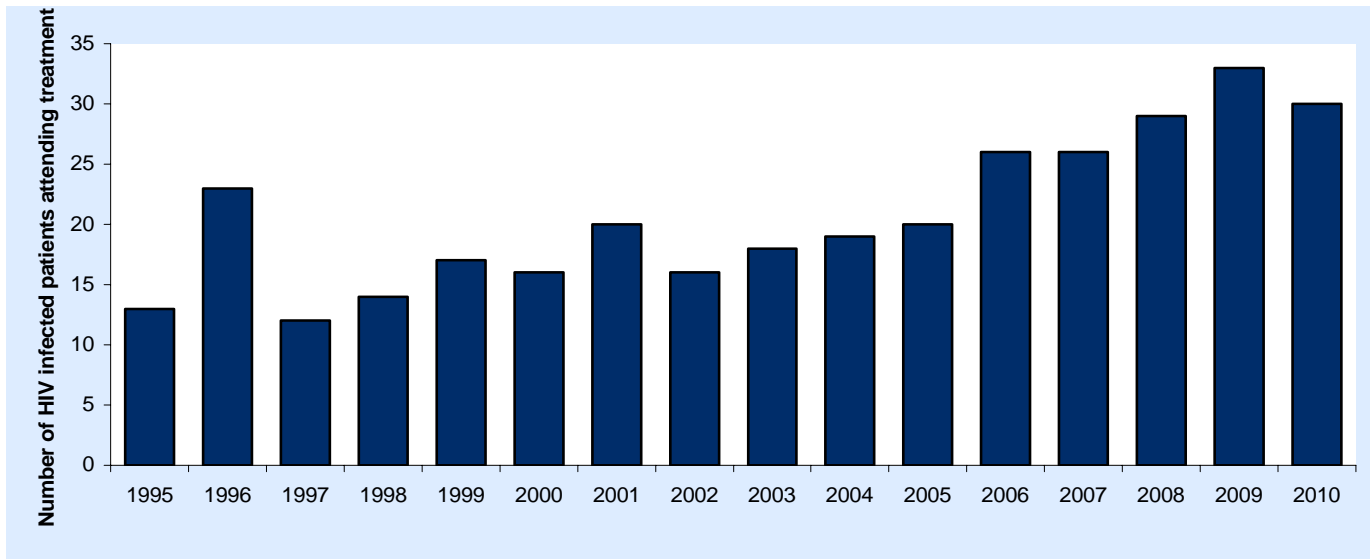
Chart 29: HIV infected patients attending for treatment in Wales by route of transmission 1995 to 2010



Source: Survey of prevalent HIV Infections Diagnosed (SOPHID), Public Health Wales 2011

However, the number of patients attending for HIV treatment in Wales where injecting drug use is reported as the route of transmission has increased over the past decade, from 16 patients in 2000 to 30 patients in 2010, as indicated in Chart 30.

Chart 30: HIV infected patients attending for treatment in Wales with injecting drug use indicated as route of transmission 1995 to 2010



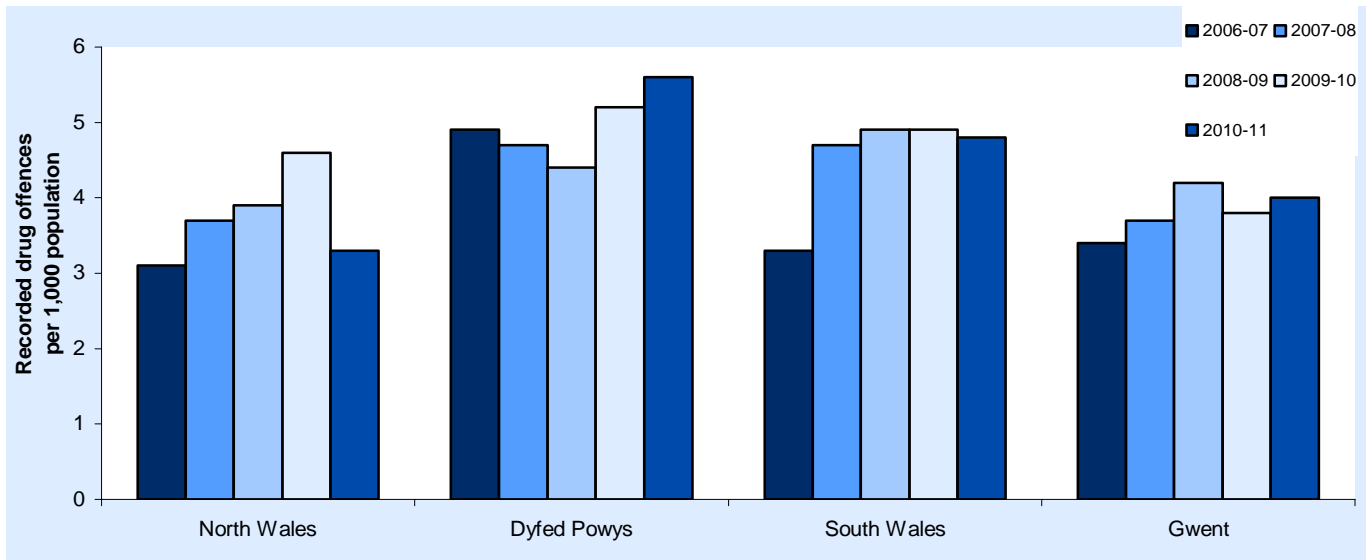
Source: Survey of prevalent HIV Infections Diagnosed (SOPHID), Public Health Wales 2011

6.5.5 Criminal Justice

Recorded drug offences

For 2010-11, a total of 13,497 drugs offences were reported by police forces across Wales, representing a 0.1 per cent decrease from 2009-10.¹² As a proportion of total recorded crime in Wales, drug offences have increased from 6.1 per cent in 2009-10 to 6.6 per cent in 2010-11. Chart 31 indicates the rate of drugs offences per 1,000 population by police force area in Wales.

Chart 31: Recorded drug offences by Police Force area per 1,000 population in Wales 2006-07 to 2010-11

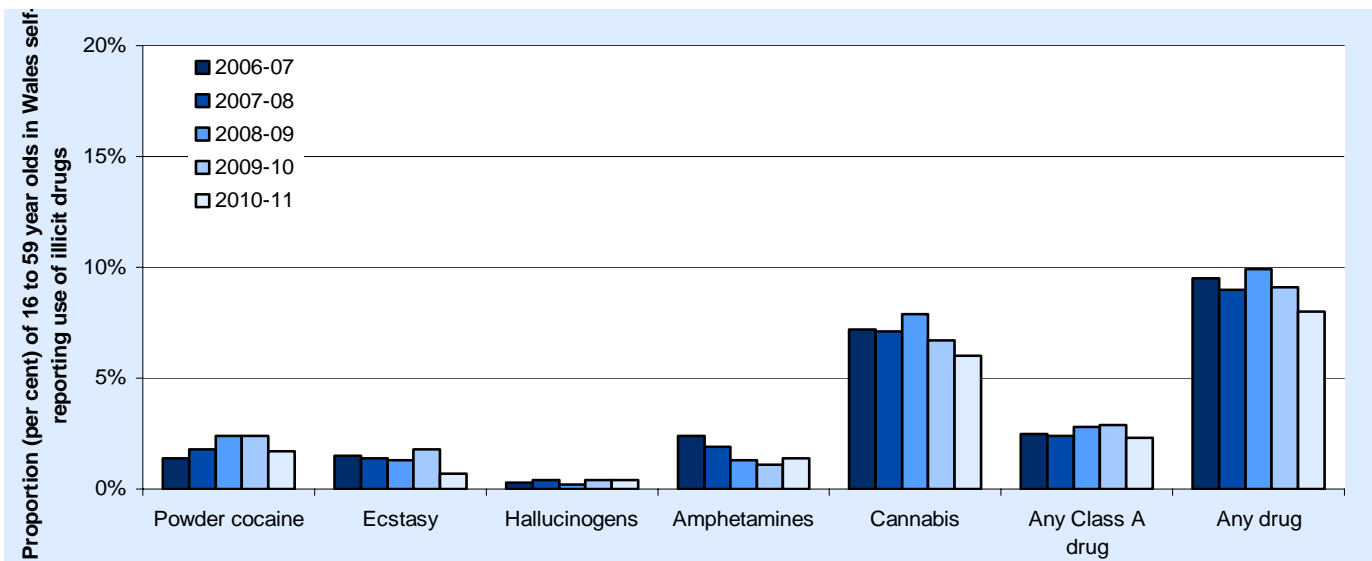


Source: Crime in England and Wales 2010/11 available from: <http://www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/crime-research/hosb1011/>

According to the British Crime Survey (BCS)¹³ in 2010/11, 8.0 per cent of adults (aged 16 - 59) in Wales self-reported using any drug in the previous year, with 2.3 per cent reporting any Class A drug (includes powder cocaine, crack cocaine, ecstasy, LSD, magic mushrooms, heroin, methadone, and methamphetamine). Extrapolating this data out to the 16-59 year population of Wales (based on 2010 mid year population estimates) this represents around 39,000 individuals. 1.7 per cent self-reported powder cocaine use in the previous year, a decrease of 0.7 per cent on the previous year.

Over the previous 5 years, self-reported use of any illicit drug by adults in Wales has decreased by 1.2 per cent. From 2006/07 to 2010/11, self-reported use of cannabis has decreased from 7.2 per cent to 6.0 per cent, as has reported amphetamine use (from 2.4 per cent to 1.4 per cent). However, self-reported use of hallucinogens has increased by 0.1 per cent over this period (0.3 per cent to 0.4 per cent).¹³

Chart 32 - Proportion (per cent) of 16 to 59 year olds in Wales self-reporting use of illicit drugs 2005 to 2009-10 (British Crime Survey) by named drug

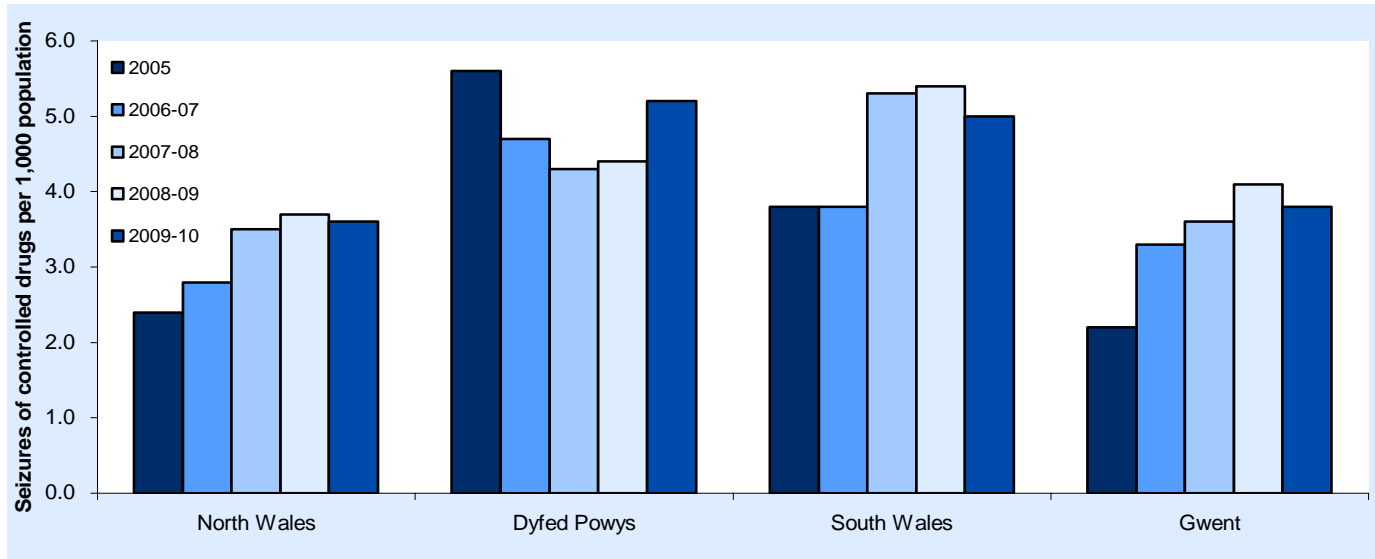


Source: British Crime Survey (BCS) 2009-10

Seizures of controlled drugs

There were 13,423 seizures of controlled drug in Wales in 2009-10¹⁴ which represents a decrease of 2.7 per cent on the previous year. Chart 33 indicates the number of seizures of controlled drugs per 1,000 population by Police Force in Wales.

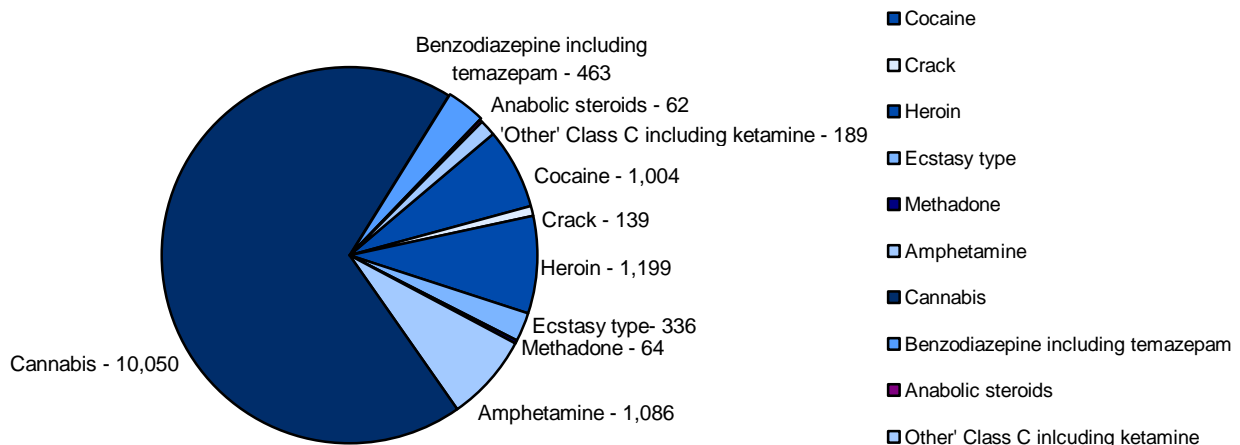
Chart 33: Seizures of controlled drugs per 1,000 population by Police Force in Wales 2005 to 2009-10



Source: Home Office, 2011

The profile of controlled drugs seized in 2009-10 by Welsh Police Forces is shown in Chart 34 highlighting that Cannabis remains the highest proportion of seizures.

Chart 34: Profile of drugs seized by police forces in Wales 2009-10

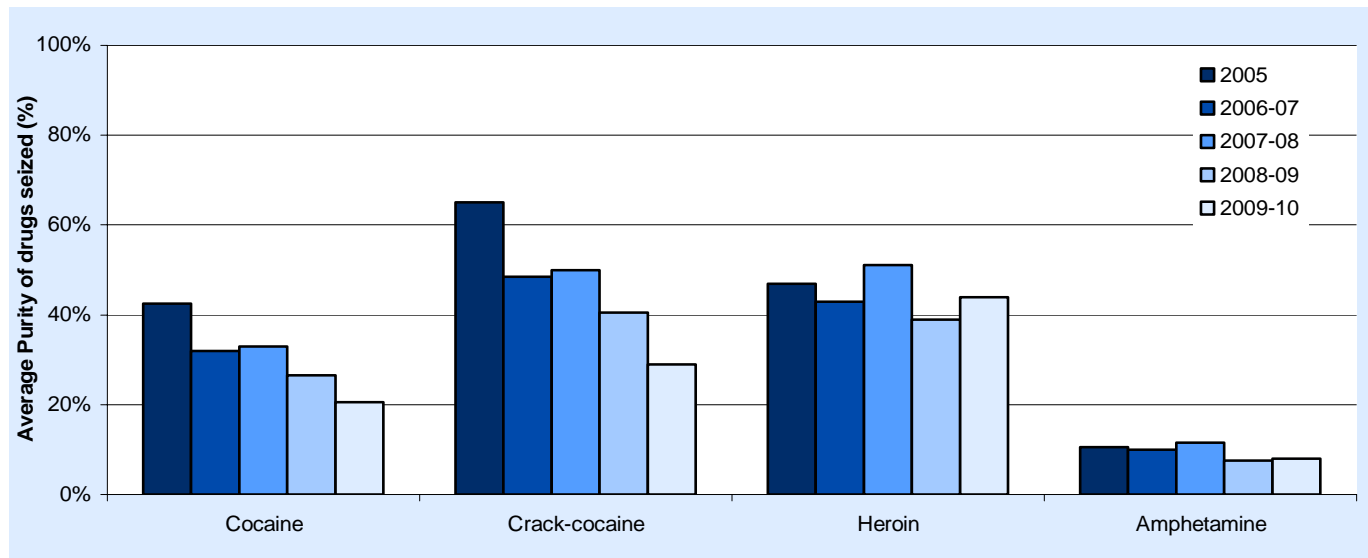


Source: Home Office, 2010

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).¹⁵ 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 2006 to 2009-10¹⁴ is shown in Chart 35.

Chart 35: Average purity of drugs seized by police forces in England and Wales 2005 to 2009-10



Source: Home Office 2010 available from: <http://rds.homeoffice.gov.uk/rds/pdfs09/hosb1609.pdf>

6.6 Drug Intervention Programme

The Drug Interventions Programme (DIP) is a crime reduction initiative, which provides a support structure to encourage offenders out of crime and into treatment. It aims to break the cycle of drug misuse, offending behaviour and custody by intervening at every stage of the criminal justice system to engage offenders in treatment and provide aftercare support.

Summary statistics for 2010-11 for the programme are provided below:

Cases referred and assessed: a total of 2,937 referrals were made to the programme the majority of which (54 per cent) were in the South Wales police authority area. Of these referrals 2,881 were taken on to the caseload of the programme following assessment including transfers from prison and from other authorities. 78 per cent of these were male and nearly half were aged under 30 (42 per cent). The age and gender split for all those on the caseload in each of the police authority areas in Wales is shown in Table 25 below.

Table 32: Drug Interventions Programme key caseload data by police force area 2010-11

		Percentage					Number on caseload
		North Wales	Dyfed Powys	Gwent	South Wales	Total	
Gender	Male	85	72	82	75	78	2,242
	Female	15	28	18	25	22	639
	Total	100	100	100	100	100	2,881
Age group	18-24	20	29	14	17	22	557
	25-29	18	24	24	25	15	673
	30-34	21	20	27	26	13	688
	35 or over	42	26	35	31	51	963
	Total	100	100	100	100	100	2,881

Source: Drug Interventions Programme

Drug tests: in April 2009, five areas within Wales (Cardiff, Swansea, Newport, Carmarthenshire and Wrexham) took part in "Tough Choices"; a policy that gives Police the authority to "drug test on arrest". During April 2010 to March 2011 11,433 tests were carried out following arrest. Table 27 below shows that of these 3,420 (30 per cent) tested positive; of these 30 per cent tested positive for cocaine, 56 per cent for opiates and 15 per cent for both.

Table 33: Drug Interventions Programme drug tests, 2010-11

	Number	Percentage
Positive	3,420	30
Negative	7,944	69
Total (a)	11,433	100
Of positive tests:		
Cocaine	1,023	30
Opiates	1,901	56
Both	499	15

Source: Drug Interventions Programme

(a) Includes a small number where testing was not completed.

The full DIP annual report for 2010-11 will be available at:

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

7. 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.

The state of the drugs problem in Europe 2010 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.

http://www.emcdda.europa.eu/attachements.cfm/att_120104_EN EMCDDA_AR2010_EN.pdf

and a special report on injecting drug use is available at: <http://www.emcdda.europa.eu/publications/selected-issues/injecting>

Shooting up – Infections among injecting drug users in the United Kingdom

This annual report uses data drawn from the Unlinked Anonymous Monitoring (UAM) survey which provides evidence for current prevalence of blood borne viruses amongst injecting drug use and information of rates of bacterial infection, risk behaviour and variables associated with elevated risk amongst this population. Current and previous reports are available at:

[HPA - Shooting Up - Infections among injecting drug users in the United Kingdom 2009. An update: November 2010](#)

Profiles of Lifestyles and Health in Wales

This report presents information on behaviours relating to health, as well as their impact on health in Wales through outcome measures. It provides a snapshot of local patterns in Wales displayed in traffic light tables, and also contains some comparisons to other countries. The topics covered are diet, physical activity and obesity; smoking; alcohol; illicit drugs; sexual health and dental health. The report breaks down the profiles by Health Board and is available at:

[Public Health Wales Observatory | Profiles of Lifestyle and Health 2010](#)

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>

Influencing factors and implications of unplanned drop out from substance misuse 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 key aims of the research included:

- Determining the factors reported by both service users and service providers as influencing 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

The report is available at:

[http://www2.nphs.wales.nhs.uk:8080/BloodBorneVirusesDocs.nsf/3dc04669c9e1eaa880257062003b246b/be22a0587b6a00d802576f0003ccd13/\\$FILE/Influences%20and%20implications%20of%20unplanned%20drop%20out.pdf](http://www2.nphs.wales.nhs.uk:8080/BloodBorneVirusesDocs.nsf/3dc04669c9e1eaa880257062003b246b/be22a0587b6a00d802576f0003ccd13/$FILE/Influences%20and%20implications%20of%20unplanned%20drop%20out.pdf)

Drug Misuse Declared 2010-11

The annual statistical bulletin focuses on prevalence and trends in illicit drug use in the 16-59 year old population in England and Wales. The data is drawn from self-report questionnaire completed by a representative sample of the general population. The report is available at:

[Drug Misuse Declared: Findings from the 2010/11 British Crime Survey England and Wales | Home Office](#)

British Crime Survey 2010-11

The BCS draws on crimes reported to the police and self-report questionnaire.

The report is available in PDF format at:

[British Crime Survey | Home Office](#)

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 2009-10. 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://wales.gov.uk/docs/caecd/research/110328healthbehaviouren.pdf>

Welsh Health Survey

The Welsh Health Survey is undertaken on a continuous basis and factors impacting on health including smoking, obesity and alcohol. The report is available in PDF format at:

<http://wales.gov.uk/topics/statistics/headlines/health2011/1105191/?lang=en>

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Definitions

The following definitions are used within this report:

Alcohol specific conditions

The term 'alcohol specific' conditions or diagnoses refers to conditions that are wholly related to alcohol (e.g. alcoholic liver disease or alcohol overdose). In previous years this annual report has used the measure of 'alcohol related' conditions in relation to hospital admissions. The change in methodology was implemented to ensure that rates of alcohol related health harms could be more readily assessed with other areas across the UK. The ICD-10 codes used for alcohol specific conditions are specified below. **(ICD-10 codes)**. Deaths are defined as alcohol related deaths – see page 86 for definitions.

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 Tranquilisers Unspecified, Chlorpromazine, Anti-diar/emetic, Naltrexone, Antabuse, Clonidine, Lofexidine, Acamprosate Calcium, Thiamine, Antipsychotic Unspecified, Depixol, Thioridazine, Trifluoperazine, Anti-inflammatory, Bupirone 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, Oxycodone, 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 2010 and March 2011. 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.

European age standardised rates

Direct standardisation removes effects due to differences in population structure and allows two areas with different demographic characteristics to be compared directly with each other. The age-standardised rate for an area is the number of events (per 100,000) that would occur in that area if the standard population lived there, and the age-specific rates of the area applied.

Structured treatments

Includes inpatient detoxification, community detoxification, residential rehabilitation, substitute opioid prescribing and psychosocial interventions

Less structured treatments

Includes counselling/support e.g. crisis intervention and information only. (From 2010-11 this has been revised to include practical/social support, complementary/alternative therapies and diversionary activities, brief interventions and harm reduction.

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 misuse occur in Wales during 2010-11 then the incidence rate for 2010-11 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 (95% CI)

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 per cent. For example, an estimate of (say) 30 per cent for the prevalence of blue eyes in the population with 95% confidence limits of 25 per cent to 35 per cent means that the "true" prevalence lies between these two figures with a probability of 95 per cent. A more precise estimate can be obtained by increasing the sample size.

Rate

Rate per 100,000 population (based on ONS 2010 mid year estimates).

Treatment Outcome Profiles (TOPs)

These profiles measure the changes in client characteristics at regular intervals during treatment and at closure. Summary statistics on treatment outcomes are included for the first time in this report utilising information gathered at the start of treatment ("Start TOPs") and at subsequent reviews done generally every three months ("Review TOPs"), usually as part of a care plan review and at discharge ("Exit TOPs"). More information on the introduction of TOPs is available from:

<http://wales.gov.uk/topics/housingandcommunity/safety/substancemisuse/pmf/top/?lang=en>

Routinely collected data

Methodology, definitions and ICD-10 codes

The following acronyms and definitions are used in Section 2 of this report.

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

ICD-10 Codes

Drug related deaths (ONS 2010)

ICD-10 code	Cause
F11-F16, F18-F19	Mental and behavioural disorders due to drug use (excluding alcohol and tobacco).
X40-X44	Accidental poisoning by drugs, medicaments and biological substances.
X60-X64	Intentional self-poisoning by drugs, medicaments and biological substances.
Y10-Y14	Poisoning by drugs, medicaments and biological substances, undetermined intent
X85	Assault by drugs, medicaments and biological substances.

Alcohol related deaths

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, not elsewhere classified
K74 (Excluding K74.3-K74.5)	Fibrosis and cirrhosis of liver
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

All Hospital admissions data is based on Calendar Episode End Year

Alcohol specific hospital admissions uses the following ICD-10 codes:

E24.4	Alcohol-induced pseudo Cushings syndrome
F10*	Mental and behavioural disorders due to use of alcohol
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
G72.1	Alcoholic myopathy
I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis
K70*	Alcoholic liver disease

K86.0	Alcohol induced chronic pancreatitis
T51.0	Ethanol poisoning
T51.1	Methanol poisoning
T51.9	Toxic effect of alcohol, unspecified
X45*	Accidental poisoning by and exposure to alcohol

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

Drug related hospital admissions use 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 2010

*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

Key Quality Issues**Welsh National Database for Substance Misuse**

The database contains details of all referrals to drug and alcohol agencies in Wales and is held by NHS Wales Informatics Service (NWIS) (formerly 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.

Data processing cycle

All Service Providers in receipt of Welsh 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 data in this annual report is derived from a “frozen” version of the database at 7th July 2011. NWIS process the data and prepare tables following this freeze date.

Comparisons between Annual Reports

The database is dynamic i.e. 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 WNDMS. 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 20 and 21).

Chart 4 shows the status of all referrals submitted to the database for 2010-11 as at July 2011 when the file was frozen for analytical purposes. This flow chart highlights the main problem areas for data quality. For example, 1,925 referrals (7 per cent) have no main substance specified (Box A). The 4,454 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.

Treatment Outcome Profiles (TOPs): A recent development is the recording of Treatment Outcome Profiles (TOPs) for all clients aged 16 or over undergoing structured treatment from April 2009. These profiles measure the changes in client characteristics at regular intervals during treatment and at closure. More information is provided in the text and below.

Data quality

All Service Providers in receipt of Welsh 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 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 07 June 2011. 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 and vice versa.
- The main problem substance is not recorded for some clients accounting for 7 per cent of all referrals in 2010-11.
- Where the local authority of the client is unknown, the local authority of the treatment agency is used for this analysis. The percentage of cases with no known local authority varies considerably across different areas of Wales.
- 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.
- Note that in the 2009-10 report some tables did not include referrals to less structured treatments. For the 2010-11 annual reporting cycle the data includes both structured and less structured treatments. Historic data in this report includes less structured treatments with the exception of around 500 cases in 2009-10 for whom the data was not available.
- This is the first time that TOPs data has been published. As with any new dataset caution should be exercised in interpretation as the depth of analysis increases. Note that TOPs only relate to structured treatments and to clients aged 16 or over. Likely biases within the dataset should also be borne in mind.

Waiting times

Figures in this report show the waiting time position for the four years 2007-08 to 2010-11. They relate firstly to individuals whose assessment and or treatment has started:

- Referral to assessment waiting times during the four years (Tables 18a to 18c)
- Assessment to commencement of treatment for the same years (Tables 19a to 19c)
- Note that for some referrals in each year no assessment date is recorded and these referrals therefore do not appear in Tables 18 or 19.

Secondly Tables 20 and 21 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 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.

Treatment Outcome Profiles

The Treatment Outcomes Profile (TOP) was developed by the National Treatment Agency (NTA) in collaboration with Dr John Marsden and Dr Michael Farrell of the National Addiction Centre, Institute of Psychiatry, Kings College, London.

The items that appear in the TOP were psychometrically evaluated and demonstrated an acceptable level of reliability and validity. This evaluation is available in the peer review journal *Addiction*. The abstract, and reference to the full article together with background information about the Treatment Outcome Profile are available from: <http://www.nta.nhs.uk/who-healthcare-top.aspx>

This is the first time that summary information has been published from Treatment Outcomes Profiles in Wales. The information presented covers all recorded start, review and exit TOPs recorded on the database since April 2009 when the tool was first adopted in Wales.

The way in which clients has progressed through the system is illustrated in Chart 5. Information from a total of 17,204 Start TOPs was recorded of which a first review TOP was available for 6,387, a second review for 3,117, a third review for 1,700 and so on. At various stages cases have been closed and Exit TOPs conducted. It should be noted however that some cases remain open without further contact and this is likely to introduce biases when making comparisons between client characteristics at Start, Review and Exit TOPs.

Disclosure and confidentiality

The risk of disclosing information about an individual has been considered for this WNSMD dataset and with the current level of aggregation is considered to be very low. In accordance with ONS's guidelines on statistical disclosure control, some age/gender groups for the ONS deaths data have been combined where the total counts were less than 3 individual deaths.

Users and Uses

We believe the key users of these statistics are:

- Ministers and their advisors;
- Assembly members and Members Research Service in the National Assembly for Wales;
- Substance Misuse Treatment service providers;
- Substance Misuse Advisory Regional Teams (SMARTs);
- Communities and Local Government;
- Local government unitary authorities (elected members and officials);
- Students, academics and universities;
- Other areas of the Welsh Government;
- Other government departments; and
- Individual citizens and private companies.

The statistics are used in a variety of ways. Some examples of these include:

- Advice to Ministers;
- To assess treatment services performance against targets;
- To inform service improvement projects for areas of focus and opportunities for quality improvement

Common Dataset

Extracted from 'Guidance for Community Safety Partnerships and Service Provider Agencies March 2011

Item No.	Data Item	Format/length
	Personal Details	
1	Agency Code/Practice Code	An6
2	First Letter of Last name	A1
3	First Letter of First name	A1
4	Date of Birth	D10
5	Gender	A1
8	Local Authority	n3
9	Postcode	An6
10	Ethnic Category	A1
10a	Ex-Service Personnel	A1
11	Agency Client Number	An15
12	1 st Language	n3
13	Number of Children under 18 Living Elsewhere	n2
14	Number of Children under 18 living with Client	n2
15	Number of Vulnerable Adults living with Client	n2
	Contact Details	
16	Date of Referral	D10
17	Referral Source	n2
18	Peer Mentoring Scheme	A1
19	Case Management	A1
20	Date Assessment Completed	D10
21	Date Structured Treatment Began	D10
23	Date Contact Ended	D10
24	Reason Contact Ended	n2
	Current Problem Profile	
25	Primary Substance Used	N4
26	Primary Substance Source	n2
27	Primary Substance Route of Ingestion	n1
28	Primary Substance Frequency of use	n2
29	Primary Substance Age first used	n3
30	Secondary Substance Used	n4
31	Secondary Substance Source	n2
32	Secondary Substance Route of Ingestion	n1
33	Secondary Substance Frequency of use	n2
35	Other Substance used	n4
36	Other Substance Source	n2
37	Other Substance Route of Ingestion	n1
38	Other Substance Frequency of use	n2
40	Ever Injected	A1
41	Injected in the Last Month	A1
42	Ever Shared	A1
43	Age first Injected	n3
46	Age at first Treatment	n3
47	Weekly Alcohol Consumption Units	n3
	Health Details	
48	Pregnant	A1

Item No.	Data Item	Format/length
49	Vaccinated Against Hepatitis B	A1
50	Vaccination Provided	A1
52	Diagnosed Mental Health Issues	A1
	Structured Treatment Modalities	
60	Inpatient Detoxification	A1
61	Community Detoxification	A1
62	Residential Rehabilitation	A1
63	Substitute Opioid (Methadone) and related Psychosocial Interventions	A1
64	Substitute Opioid (Buprenorphine) and related Psychosocial Interventions	A1
65	Psychosocial Interventions	A1
	Less Structured Interventions	
66	Practical / Social Support	A1
67	Complementary / alternative therapies and diversionary activities	A1
68	Brief Interventions	A1
69	Harm Reduction	A1
92	Record ID	A1
	Treatment Outcome Profile	
93	TOP Number	An6
94	TOP Interview Date	D10
95	Treatment Stage	A2
96	Average Alcohol	An3
97	Number of days Alcohol used	An3
98	Average Opiates	An3
99	Number of days Opiates used	An3
100	Average Crack	An3
101	Number of days Crack used	An3
102	Average Cocaine	An3
103	Number of days Cocaine used	An3
104	Average Amphetamines	An3
105	Number of days Amphetamines used	An3
106	Average Cannabis	An3
107	Number of days Cannabis used	An3
108	Other Problem Substance Used	An4
109	Average Other Problem Substance	An3
110	Number of days Other Problem Substance used	An3
111	Injected Total	An3
112	Inject with Needle or Syringe used by someone else? Inject using a spoon, water or filter used by someone else?	An3
113	Shoplifting	An3
114	Drug Selling	An3
115	Theft from or of a vehicle, Other Property Theft or Burglary, Fraud, Forgery and Handling Stolen Goods	An3
116	Committing assault or violence	An3
117	Psychological Health	An3
118	Days paid work	An3
119	Days attended College or School	An3
120	Physical Health	An3
121	Acute Housing Problem	An3
122	Risk of Eviction	An3
123	Quality of life	An3

Item No.	Data Item	Format/length
	Modalities Start and End Date	
124	Inpatient Detoxification Start Date	D10
125	Inpatient Detoxification End Date	D10
126	Community Detoxification Start Date	D10
127	Community Detoxification End Date	D10
128	Residential Rehabilitation Start Date	D10
129	Residential Rehabilitation End Date	D10
130	Substitute Opioid Prescribing (Methadone) Psychosocial Interventions Start Date	D10
131	Substitute Opioid Prescribing (Methadone) Psychosocial Interventions End Date	D10
132	Substitute Opioid Prescribing (Buprenorphine) and Psychosocial Interventions Start Date	D10
133	Substitute Opioid Prescribing (Buprenorphine) and Psychosocial Interventions End Date	D10
134	Psychosocial Interventions Start Date	D10
135	Psychosocial Interventions End Date	D10
136	Practical / Social Support Intervention Start Date	D10
137	Practical / Social Support Intervention End Date	D10
138	Complementary / alternative therapies and diversionary activities Intervention Start Date	D10
139	Complementary / alternative therapies and diversionary activities Intervention End Date	D10
140	Brief Interventions Start Date	D10
141	Brief Interventions End Date	D10
142	Harm Reduction Intervention Start Date	D10
143	Harm Reduction Intervention End Date	D10

Treatment Outcomes Profile

/ /

Client ID D.O.B. (dd/mm/yyyy) Name of keyworker

/ / Gender: M F Treatment stage: Treatment start Review

TOP interview date (dd/mm/yyyy) Treatment exit Post-treatment exit

Section 1: Substance use (Please use NA only if information is not disclosed or not answered.)

Record the average amount on a using day and number of days substances used in each of past four weeks

	Average	Week 4	Week 3	Week 2	Week 1	Total
a Alcohol	<input type="text"/> units/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
b Opiates	<input type="text"/> g/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
c Crack	<input type="text"/> g/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
d Cocaine	<input type="text"/> g/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
e Amphetamines	<input type="text"/> g/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
f Cannabis	<input type="text"/> spliff/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
g Other problem substance?	<input type="text"/> g/day	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28

Name.....

Section 2: Injecting risk behaviour (Please use NA only if information is not disclosed or not answered.)

Record number of days client injected non-prescribed drugs in past four weeks (if no, enter zero and 'N', and go to section 3)

	Week 4	Week 3	Week 2	Week 1	Total
a Injected	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
b Inject with needle or syringe used by someone else?	Yes <input type="checkbox"/> No <input type="checkbox"/>				<input type="text"/> Enter 'Y' if any yes, otherwise 'N'
c Inject using a spoon, water or filter used by someone else?	Yes <input type="checkbox"/> No <input type="checkbox"/>				

Section 3: Crime (Please use NA only if information is not disclosed or not answered.)

Record days of shoplifting, drug selling and other categories committed in past four weeks

	Week 4	Week 3	Week 2	Week 1	Total
a Shoplifting	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
b Drug selling	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
c Theft from or of a vehicle	Yes <input type="checkbox"/> No <input type="checkbox"/>				<input type="text"/> Enter 'Y' if any yes, otherwise 'N'
d Other property theft or burglary	Yes <input type="checkbox"/> No <input type="checkbox"/>				
e Fraud, forgery and handling stolen goods	Yes <input type="checkbox"/> No <input type="checkbox"/>				
f Committing assault or violence	Yes <input type="checkbox"/> No <input type="checkbox"/>				<input type="text"/> Enter 'Y' or 'N'

Section 4: Health and social functioning (Please use NA only if information is not disclosed or not answered.)

a Client's rating of psychological health status (anxiety, depression and problem emotions and feelings)

Poor 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 **Good** 0-20

Record days worked and at college or school for the past four weeks

	Week 4	Week 3	Week 2	Week 1	Total
b Days paid work	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28
c Days attended college or school	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-7	<input type="text"/> 0-28

d Client's rating of physical health status (extent of physical symptoms and bothered by illness)

Poor 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 **Good** 0-20

Record accommodation items for the past four weeks

e Acute housing problem	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/> Enter 'Y' or 'N'
f At risk of eviction	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/> Enter 'Y' or 'N'

g Client's rating of overall quality of life (e.g. able to enjoy life, gets on well with family and partner)

Poor 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 **Good** 0-20

