

24th November, 2020

Deputy Thomas Gould, TD
Dáil Eireann
Kildare Street
Dublin 2.

Re: PQ 34796/20

To ask the Minister for Health the number of persons on waiting lists for residential addiction treatment services from November 2019 to date, by month in tabular form

PQ 34797/20

To ask the Minister for Health the number of persons on waiting lists for residential medical detox treatment services from November 2019 to date by month in tabular form

Dear Deputy Gould,

The Health Service Executive has been requested to reply directly to your above Parliamentary Questions which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position:

Waiting times for residential addiction treatment and residential medical detoxification treatment (inpatients services) are not collected routinely as part of the HSE's Key Performance Indicator (KPIs) Suite. This data is only collected periodically at a point in time and the most recent data available nationally is from May 2019. The HSEs collects a Substance Misuse KPIs (quarterly in arrears) and these include all HSE provided treatments (brief Intervention, individual counselling, group counselling, group education / awareness programme, medication-free therapy, social and / or occupational reintegration, family therapy, structured after care programme, opioid substitution treatment (OST), detoxification etc.).

Most recent available data from the September 2020 preliminary report indicates that as of June 96% of substance misusers (over 18 years) treatment has commenced within one calendar month following assessment 100% of substance misusers (under 18 years) treatment commenced within one week following assessment. The rounded projected numbers for treatment for 2020 are predicted to be at a similar rate to the outturn in 2019 but down on the target for the year.

For the Deputy's information the figures relating to the waiting times at an inpatient treatment service for cases (episodes) seeking treatment in 2019 and were reported to the National Drug Treatment Reporting System (NDTRS) (see attached Appendix on the NDTRS) are set out in the below table. Inpatient treatments include any service where the client stays overnight, e.g., in-patient detoxification, therapeutic communities, respite and step down. It relates to alcohol, other drugs and other problems. The table shows that the median wait time between referral and treatment is 6 days, with 95% of admissions taking place within 131 days of the referral date.



The figures reflect all cases seeking treatment in 2019. All cases seeking treatment are included (new cases and previously treated cases returning to treatment). Please note that the NDTRS data is case based, which means that there is a possibility that individuals appear more than once in the database, for example where a person receives treatment at more than one centre or at the same centre more than once per year.

The median waiting time is a more appropriate summary statistic than the mean. This is due to the fact that waiting time is affected by outliers (skewed data distribution), meaning that the mean is influenced by a small number of cases who waited for long durations.

In 2020, due to the Covid pandemic, in order to maintain social distancing and adhere to public health advice, we are aware that the capacity of residential services has been affected. The extent of this impact on NDTRS figures will not be known until early next year when the annual data has been validated and reported.

Table: Waiting time between referral and commencement of treatment in an inpatient setting: number of cases assessed, length of wait time, NDTRS 2019

	2019
Number of cases assessed at an inpatient treatment service	4,489
Mean waiting time (days) between referral and treatment	28.7 days
Median waiting time (days) between referral and treatment (5 th and 95 th percentile)	6 days (0-131 days)
Percentage who were referred and treatment on the same day	28%
Percentage who waited one day or more for treatment	72%

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,



Joseph Doyle
National Planning Specialist

Appendix

NDTRS Terms & Conditions

Any of the data published here may be freely used, but remains the property of the NDTRS. To safeguard the integrity and confidentiality of the data, all users must agree to the following conditions:

1. NDTRS data are not to be presented in either written or oral form that could directly or indirectly identify an individual patient.
2. Tables containing NDTRS data should not be published where any individual cells contain less than 5 cases.
3. The responsibility for interpretation of the data lies fully with the data user. Please contact the NDTRS should you have any queries on data interpretation.
4. The data provided below supersedes any previous analysis done as figures may change due to data validation processes.
5. The NDTRS should be clearly acknowledged as the source of the data in any publication or presentation in which the data are used.
6. The NDTRS must be provided with a copy of all documents in which NDTRS data are used.
7. The HRB National Drugs Library should be provided with a copy of any published paper in which NDTRS data are used.

National Drug Treatment Reporting System

Treatment for problem alcohol and drug use in Ireland is provided by statutory and non-statutory services, including residential centres, community-based addiction services, general practices and prison services.

For the purpose of the NDTRS, treatment is broadly defined as 'any activity which aims to ameliorate the psychological, medical or social state of individuals who seek help for their substance misuse problems'. Clients who attend needle-exchange services are not included in this reporting system. From 2004 onwards, clients who report alcohol as their main problem drug have been recorded by the system. These data have been presented in an earlier paper in the HRB Trends Series (Fanagan *et al.* 2008). Drug treatment options include one or more of the following: medication (detoxification, methadone reduction, substitution programmes and psychiatric treatment), brief intervention, counselling, group therapy, family therapy, psychotherapy, complementary therapy, and/or life-skills training.

Compliance with the NDTRS requires that data be collected for each new client coming for first treatment and for each previously treated client returning to treatment for problem drug use in a calendar year.

Staff at the NHIS unit in the HRB process the anonymous, aggregated data, which are analysed and reported at national and EU levels. The main elements of the reporting system are defined as follows:

All cases treated – describes cases who receive treatment for problem drug and/or alcohol use at each treatment centre in a calendar year, and includes:

Cases assessed only - describes cases who were assessed but who did not progress to treatment

Previously treated cases – describes cases who were treated previously for problem drug/alcohol use at any treatment centre and have returned to treatment in the reporting year;

New cases treated – describes cases who have never been treated for problem drug/alcohol use; and

Status unknown – describes cases whose status with respect to previous treatment for problem drug/alcohol use is not known.

Each case refers to an episode of treatment. Therefore ‘previously treated cases’ could appear more than once in the data, in a calendar year, if for example they receive treatment at more than one centre or at the same centre more than once per year.

NDTRS does not publish figures less than five to ensure that an individual cannot be inadvertently identified.