



Llywodraeth Cymru Welsh Government

# Treatment Data - Substance Misuse in Wales 2021-22

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# Welsh National Database for Substance Misuse in Wales 2021-22

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# Welsh National Database for Substance Misuse in Wales 2021-22

## 1 Introduction

**1.1** This report has been compiled by Digital Health & Care Wales (DHCW) in collaboration with the Welsh Government and Public Health Wales, and contains statistics from the Welsh National Database for Substance Misuse (WNDSM) for the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022.

**1.2** The report should be read in conjunction with the document entitled 'The Annual Profile of Substance Misuse in Wales 2021-22'. This document will provide additional substance misuse related information currently available from routinely published sources in Wales to support and add to the information gained through the WNDSM.

#### 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 Welsh Government Data Information and Analysis Board (DIAB).

**2.2** All substance misuse treatment service providers in Wales, in receipt of Welsh Government funding via the Area Planning Boards (APBs), are required to comply with the reporting requirements of the database. Comprehensive guidance which includes the common dataset and definitional guidance was first issued on 1<sup>st</sup> March 2006 and has been revised regularly.

**2.3** Information from the database is the official source of validated data for treatment service providers and APBs to monitor and report performance against the national Key Performance Indicators (KPI) in respect to waiting times and engagement rates. These KPIs have been in existence since 2006, but were refreshed in November 2017 for immediate implementation.

**2.4** In April 2009 the Welsh Government adopted the Treatment Outcome Profile (TOP) tool. Further information on the tool can be found in <u>Annex A</u>.

**2.5** In 2013-14 a review of the current dataset comprising the WNDSM was undertaken. The purpose of the review and redevelopment of a Substance Misuse Data Set was to ensure that the data submitted to the national database was an accurate reflection of the delivery of Substance Misuse Services. One of the significant requirements of the new Substance Misuse Data Set was to capture multiple events which occur during a Client Journey, this includes a Referral, an Assessment, multiple Treatment Modalities, multiple Treatment Outcome Profiles (TOPS) and a Discharge to enable better analysis of the data in the future.

# 3 Data Quality

**3.1** The Welsh Government's Substance Misuse Advisory Regional Team (SMARTs) have worked with APBs and treatment service providers to improve data quality. However, care needs to be exercised when looking at trends as a number of treatment service providers had not submitted all data for the relevant fields by the freeze date of 26<sup>th</sup> July 2022.

**3.2** The data quality issues that affect this report are listed below:

- Some of the demographic data will be inaccurate because some clients are reluctant or unable to provide accurate responses to questions. This will always be the case with a system that relies largely upon self-reporting.
- Some treatment service providers are failing to close cases when a client is transferred between treatment service providers. This means that some individuals will be counted more than once on the

database. However, some clients may legitimately be receiving treatment from more than one treatment service provider.

- Clients are categorised by 'main problematic substance' which means that many clients categorised under 'alcohol' may also be receiving treatment for drug misuse and vice versa.
- The main problematic substance was not recorded for some clients, including 7,754 referrals where no assessment date had been recorded as at the database freeze date of 26<sup>th</sup> July 2022. This is higher than earlier years because in 2014-15, for the first time, the problematic substance data field was based around the assessment event as opposed to the referral event. Therefore, even if a primary substance was entered locally by the treatment service provider at the time of referral, the information would not have been reported to the national database until the time of their assessment. In Section 6, these 7,754 referrals are broken down by age/sex, ethnicity, APBs and source of referral for information purposes, but for the subsequent analysis of referrals in that section, for which primary substance is a key element, these referrals have been excluded.

**3.3** The number of treatment service providers submitting to the database has been declining during the last 5 years because of a number of treatment service providers merging. Whilst there has been a reduction in the number of treatment service providers submitting data, 44 treatment service providers submitted in 2017-18, 42 in 2018-19, 47 in 2019-20, 49 in 2020-21 and 47 in 2021-22, this has not resulted in a reduction in the reported data.

• There was widespread under-reporting of secondary problem substance; this inhibits the identification of emerging trends and patterns in poly-drug use.

**3.4** The database is dynamic i.e. records are subject to amendment as further information is submitted by treatment service providers. This means that figures in this report are not directly comparable with those published in earlier reports.

**3.5** A number of agencies were in the process of transitioning across to the new Welsh Community Care Information System (WCCIS) when the freeze of the data took place on the 26<sup>th</sup> July 2022. As a result, the activity reported for Western Bay and Bridgend for 2021-22 is likely to be lower than expected.

**3.6** A summary of key factors relating to this report can be found in <u>Annex A</u>.

# **4 Results Summary**

# 4.1 Area Comparison

Direct comparison between Area Planning Board (APB) for referral, assessment, treatment and closure activity can be found in <u>Section 5</u>.

# 4.2 Referrals

The following provides a summary of all activity within 2021-22. Therefore, this summary captures all referral activity within the year and any assessment, treatment or closure information which has occurred in year by relating to pre 1<sup>st</sup> April 2021 referrals.

- There were 25,172 referrals to the database in 2021-22, and a further 2,075 who did not attend (DNA) prior to assessment.
- This represented an increase in referrals compared to last year, with an increase of 9.9% on 2020-21 (23,852). See <u>Chart 4.1</u> for a time series.
- Some clients were referred more than once during 2021-22 with the 25,172 referrals relating to 18,131 individuals, of whom 13,611 were new to the database.
- In 2021-22, a large number of referrals (7,754) did not have an associated main problematic substance on account of there not having been an assessment (see "Referral exclusions for primary substance analysis" for further details), and therefore for subsequent breakdown of referrals by main substance, these referrals are excluded.
- Of the 25,172 referrals, 7,754 did not have an associated main problematic substance. Of the remaining 17,418 referrals:
  - 49.0% of these referrals were described as having alcohol as the main problematic substance and 43.5% had drugs as the main problematic substance; 0.5% of cases had an assessment date but the main problematic substance was not recorded.
  - Males accounted for 52.7% of alcohol referrals and 48.0% of drug referrals.
  - Median age for alcohol remains unchanged from 2020-21 at 42, whilst the median age for drugs has remained at 34.
  - 21.5% of alcohol referrals (where age was reported) were for clients aged under 30 the comparable figure for drug referrals was 32.7%.
- Heroin referrals accounted for 17.4% (2,806), Cannabis referrals accounted for 10.4% (1,680) and Cocaine accounted for 9.0% (975) of all referrals.
- Detailed results for Referrals are shown in <u>Section 6</u>.

# 4.3 Assessments

- The total number of clients assessed in 2021-22 was 17,396 a slight decrease of 5.7% from 2020-21 (18,447). See <u>Chart 4.1</u> for Time Series.
- In 2021-22 the number of drug clients assessed was 7,584 compared with 8,529 alcohol clients.
- Males accounted for 52.7% of alcohol assessments and 48.1% of drug assessments.
- Heroin assessments accounted for 16.1% (2,808), Cannabis assessments accounted for 9.6% (1,663) and Cocaine accounted for 5.6% (970) of all assessments, where the main problematic substance is known.
- Detailed results for Assessments are shown in <u>Section 7</u>.

# 4.4 Treatments

- 5 The total number of clients starting treatment in 2021-22 was 14,462, down by 8.4% on 2020-21 (15,786). See Chart 4.1 for Time Series.
- 6 In 2021-22 the number of drug clients starting treatment was 6,682 compared with 6,987 alcohol Clients.
- 7 Detailed results for Treatments are shown in <u>Section 8</u>.

# 4.5 Waiting Times

- Of the 14,448 clients who started treatment (and had valid waiting times), the percentage that started within 20 working days was 90.6% in 2021-22, a slight decrease from 2020-21 (92.6%), and includes alcohol, drug and not reported main problematic substance. Please note that comparisons cannot be made with figures reported in earlier reports. See paragraph 3.5 of the data quality section for further details.
- 89.8% (6,268) of clients with alcohol as the main problematic substance were treated within 20 working days, whilst 92.3% (6,166) of clients with drugs as the main problematic substance were treated within 20 working days. This was a slight decrease in the percentage of clients treated from 92.6% (7,094) for alcohol and 92.8% (7,380) for drugs in 2021-22.
- Detailed results for Waiting Times are shown in <u>Section 9</u>.

# 4.6 Treatment Outcome Profiles

- Table 10.1a-10.1f show the overall reductions in the frequency of alcohol and drug consumption between a starting TOP and an exit TOP.
- Table 10.1g-10.1i show the overall change in physical health, psychological health and quality of life between a starting TOP and an exit TOP.
- Detailed results for Treatment Outcome Profiles are shown in <u>Section 10</u>.

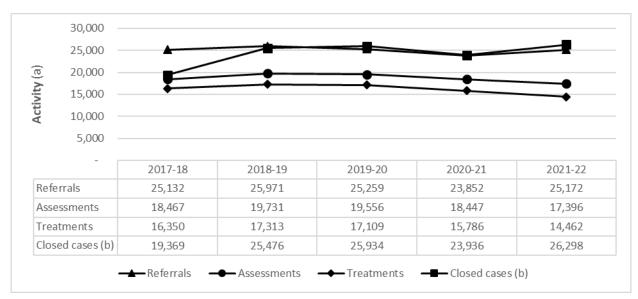
# 4.7 Reasons for Closure

- The percentage of cases ending with a planned closure has increased from 41.7% in 2017-18 to 55.6% in 2021-22.
- The percentage of cases where clients did not attend has decreased from 21.3% in 2017-18 to 14.3% in 2021-22.
- Detailed results for Case Closures are shown in <u>Section 11</u>.

# 4.8 Key Performance Indicators

- Table 12.1 to 12.5 show the Five Key Performance Indicators for the APBs.
- The percentage of cases ending in a DNA post assessment showed a decrease from 15.0% in 2017-18 to 9.4% in 2021-22.
- The percentage of clients starting treatment within 20 working days has reduced slightly from 92.6% in 2017-18 to 90.6% in 2021-22.
- The percentage of cases reporting a reduction, no change or abstinence in problematic substance misuse has increased from 85.6% in 2017-18 to 86.2% in 2021-22.
- The percentage of cases reporting an increase in quality of life has increased from 82.1% in 2017-18 to 84.9% in 2021-22.

- The percentage of cases closed with a positive treatment closure has been increasing year on year, with 85.3% in 2021-22 compared with 74.8% in 2017-18.
- April 2019 saw the introduction of a blood borne virus KPI, which reports on the number and percentage of clients who are tested for BBV. Unfortunately, this KPI was on hold during 2020-21 as testing was put on hold due to laboratory services already at capacity due to the COVID-19 pandemic. The testing restarted in December 2020, and the 2021-22 figures can be found in <u>Section 12</u>.
- Detailed results for Key Performance Indicators are shown in <u>Section 12</u>.



## Chart 4.1: Total activity time series (a)

Source: WNDSM, Digital Health & Care Wales

a) Includes unknown substances

b) Includes records where the client did not attend prior to assessment.

#### 5 Area comparisons

Table 5.1 shows the number of referrals, assessments, treatments and case closures in 2021-22 by Area Planning Board (APB).

Area Planning Board	Referrals	Assessments	Treatments Started	Closed Cases
North Wales	4,806	2,079	1,912	4,485
Powys	766	616	613	807
Hywel Dda	3,215	2,348	2,251	3,355
Western Bay (a)	3,182	2,102	1,488	3,469
Cardiff & Vale	3,653	2,571	987	3,824
Cwm Taf Morgannwg	3,909	3,032	2,709	4,317
Gwent	4,281	3,390	3,263	4,587
Outside Wales	1,221	1,162	1,157	1,342
Unknown	139	96	82	112
Total	25,172	17,396	14,462	26,298

Table 5.1: Activity by area of residence in 2021-22 by area of residence

Source: WNDSM, Digital Health & Care Wales

(a) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 5.2 shows the number of records that would have been open as at 31<sup>st</sup> March of each year i.e. had no closure date or the closure date was after the 31<sup>st</sup> March, by APB and main problematic substance of alcohol or drugs.

# Table 5.2: Open records by area of residence time series

		2017-18			2018-19			2019-20			2020-21			2021-22	
Alcohol		Open with sessment	Open with treatment			Open with treatment		Open with sessment	Open with treatment	Open	Open with assessment		Open	Open with assessment	•
North Wales	731	731	723	865	865	855	1,010	1,010	993	996	996	982	955	955	913
Powys	113	113	110	176	176	176	213	213	212	236	236	235	271	271	270
Hywel Dda	376	376	357	482	482	474	463	463	438	463	463	435	459	459	442
Western Bay (a)	378	378	375	535	535	519	655	655	599	719	719	552	418	418	299
Cardiff & Vale	283	283	211	415	415	255	446	446	329	583	583	413	578	578	367
Cwm Taf Morgannwg (b)	637	637	625	832	832	811	1,025	1,025	985	1,121	1,121	1,039	1,020	1,020	954
Gwent	704	704	673	802	802	784	814	814	808	853	853	844	910	910	869
Outside Wales	62	62	62	94	94	94	113	113	113	137	137	137	124	124	124
Unknown	14	14	13	23	23	22	16	16	15	23	23	22	43	43	43
Total	3,298	3,298	3,149	4,224	4,224	3,990	4,755	4,755	4,492	5,131	5,131	4,659	4,778	4,778	4,282
Drugs															
North Wales	669	669	666	949	949	941	1,111	1,111	1,103	1,161	1,161	1,147	1,163	1,163	1,132
Powys	143	143	141	176	176	176	219	219	219	252	252	252	271	271	271
Hywel Dda	306	306	293	455	455	444	518	518	510	578	578	557	599	599	582
Western Bay (a)	494	494	479	770	770	721	1,086	1,086	945	1,195	1,195	936	898	898	647
Cardiff & Vale	394	394	308	579	579	448	648	648	533	741	741	582	689	689	511
Cwm Taf Morgannwg (b)	645	645	622	1,018	1,018	979	1,202	1,202	1,142	1,388	1,388	1,272	1,316	1,316	1,213
Gwent	761	761	746	858	858	846	1,045	1,045	1,036	1,154	1,154	1,144	1,246	1,246	1,218
Outside Wales	306	306	305	353	353	348	405	405	400	517	517	514	423	423	419
Unknown	39	39	38	52	52	51	27	27	24	30	30	29	42	42	41
Total	3,757	3,757	3,598	5,210	5,210	4,954	6,261	6,261	5,912	7,016	7,016	6,433	6,647	6,647	6,034

Source: WNDSM, Digital Health & Care Wales

(a) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

(b) In April 2019, Bridgend moved from Western Bay APB to Cwm Taf Morgannwg APB

Table 5.3a shows the history of referrals in 2021-22. Of the 25,172 referrals in 2021-22, these related to 18,189 individuals. 13,637 (75.0%) of the individuals referred in 2021-22 were new cases, meaning that they were referred to a treatment service provider for the first time. The percentage of new cases varied across APB areas, ranging from 64.9% in Cardiff & Vale to 91.4% in Powys. A similar range is seen in table 5.3b for alcohol and 5.3c for drugs, with Cardiff & Vale reporting the lowest percentage of new cases and Powys reporting the highest across the APB areas.

Area Planning Board	All	Individuals	Average	New	Percentage
	Referrals	referred in	referrals	Cases	of New
		2021-22	per		Cases
			individual		
	(a)	(b)	(c)	(d)	(e)
North Wales	4,806	3,588	1.3	2,516	70.1
Powys	766	698	1.1	638	91.4
Hywel Dda	3,215	2,465	1.3	1,782	72.3
Western Bay (f)	3,182	1,910	1.7	1,315	68.8
Cardiff & Vale	3,653	1,995	1.9	1,294	64.9
Cwm Taf Morgannwg	3,909	2,802	1.4	1,929	68.8
Gwent	4,281	3,626	1.2	3,163	87.2
Outside Wales	1,221	977	1.2	899	92.0
Unknown	139	128	1.1	101	78.9
Total	25,172	18,189	1.4	13,637	75.0

# Table 5.3a: Previous history of referrals by APB in 2021-22: All Substances

Source: WNDSM, Digital Health & Care Wales

(a) All referrals 2021-22

(b) All referrals minus multiple referrals in 2021-22

(c) All referrals divided by individuals referred in 2021-22

(d) Number of individuals who had not been previously referred since April 2005 (commencement of the database)

(e) New cases divided by individuals referred in 2021-22

(f) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Area Planning Board	All	Individuals	Average	New	Percentage
	Referrals	referred in	referrals	Cases	of New
		2021-22	per		Cases
			individual		
	(a)	(b)	(c)	(d)	(e
North Wales	1,162	1,046	1.1	739	70.7
Powys	329	308	1.0	288	93.5
Hywel Dda	1,350	1,160	1.2	871	75.1
Western Bay (f)	522	437	1.2	353	80.8
Cardiff & Vale	1,530	877	1.7	579	66.
Cwm Taf Morgannwg	1,476	1,171	1.3	807	68.9
Gwent	1,759	1,596	1.1	1,405	88.0
Outside Wales	359	332	1.1	311	93.7
Unknown	49	48	1.0	37	77.
Total	8,536	6,975	1.2	5,390	77.

Source: WNDSM, Digital Health & Care Wales

(a) All referrals 2021-22

(b) All referrals minus multiple referrals in 2021-22

(c) All referrals divided by individuals referred in 2021-22

(d) Number of individuals who had not been previously referred since April 2005 (commencement of the database)

(e) New cases divided by individuals referred in 2021-22

(f) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

# Table 5.3c: Previous history of referrals by APB in 2021-22: Drugs

Area Planning Board	All	Individuals	Average	New	Percentag
	Referrals	referred in	referrals	Cases	of Nev
		2021-22	per		Case
			individual		
	(a)	(b)	(c)	(d)	(e
North Wales	878	802	1.1	515	64.
Powys	287	268	1.1	251	93.
Hywel Dda	1,003	829	1.2	561	67.
Western Bay (f)	699	567	1.2	428	75.
Cardiff & Vale	1,014	700	1.4	475	67.
Cwm Taf Morgannwg	1,202	1,045	1.2	724	69.
Gwent	1,654	1,447	1.1	1,278	88.
Outside Wales	800	610	1.3	557	91.
Unknown	45	44	1.0	37	84
Total	7,582	6,312	1.2	4,826	76

Source: WNDSM, Digital Health & Care Wales

(a) All referrals 2021-22

(b) All referrals minus multiple referrals in 2021-22

(c) All referrals divided by individuals referred in 2021-22

(d) Number of individuals who had not been previously referred since April 2005 (commencement of the database)

(e) New cases divided by individuals referred in 2021-22

(f) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

# 6 Referrals

The total number of referrals in 2021-22 was 25,172.

Figure 6.1 shows the status along the treatment pathway for the 25,172 referrals in 2021-22. Of these, 2,075 had a DNA prior to assessment (shown along the red branch of the diagram) and for all further analysis of referrals, these have been excluded.

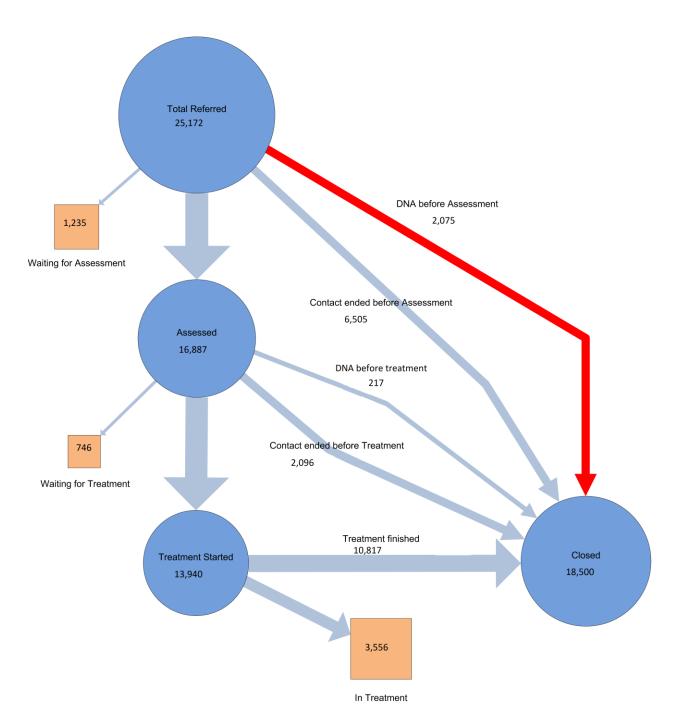
Of the remaining 23,097 referrals (excluding the DNAs before assessment) in 2021-22, 18,500 (80.0%) had already been closed by the 26<sup>th</sup> July 2022 freeze date, and of those, 13,940 (60.3%) had commenced any form of treatment before being discharged.

Of the 25,172 referrals in 2021-22, 6,505 were closed to services before an assessment took place. The majority of these records were closed as a result of a third party referral being received but when the client was contacted, they were unaware that a referral was made, or following an initial assessment, the client had chosen not to commence a recommended treatment intervention, or they were not ready to engage in treatment or there was no substance misuse treatment needed.

There were 2,313 referrals where the client was closed to services before a treatment had commenced. Of these, 217 had dropped out of contact and were closed as DNA, whilst the remaining 2,096 were closed for a number of different reasons e.g. treatment withdrawn, moved, deceased etc.

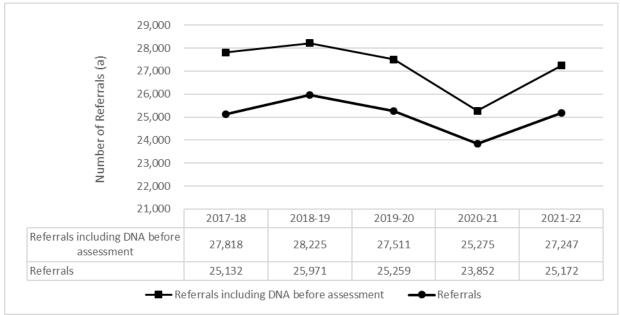
Note that the numbers in figure 6.1 only relate to activity associated with 2021-22 referrals and therefore they exclude activity relating to pre-1<sup>st</sup> April 2021 referrals.

Figure 6.1: Current status along treatment pathway for those referred in 2021-22 (as at 26<sup>th</sup> July 2022 freeze date)



Source: WNDSM, Digital Health & Care Wales





Source: WNDSM, Digital Health & Care Wales

(a) Includes unknown substances

#### Referrals by Gender, Age, Main Problematic Substance and Ethnic Origin

#### Table 6.1: Referrals in 2021-22 by age and gender: All Referrals (a)

Referral age band	Referral	Male Referral Rate (b)	Referral	Female Referral Rate (b)	Referral	Total Referral Rate (b)
10-14	131	138	152	169	283	153
15-19	625	695	517	616	1,142	657
20-29	2,378	1,104	2,130	1,069	4,508	1,087
30-39	3,915	2,057	3,415	1,776	7,330	1,916
40-49	3,465	1,933	2,852	1,532	6,317	1,729
50-59	2,161	1,012	1,648	730	3,809	867
60+	975	241	779	169	1,754	203
All ages (c)	13,664	874	11,508	717	25,172	794
Median age (d)	39		38		39	

(a) Includes referrals where the main problematic substance is not reported
(b) Rate per 100,000 population; Source: ONS 2020 mid-year estimate
(c) Includes 23 referrals where the age is less than 10 and 6 referrals where the age is unknown, .

(d) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

			R	eferral a	ge band	ł			
Area Planning Board	10-14	15-19	20-29	30-39	40-49	50-59	60+	All Ages (a)	EASR (b)
Male									
North Wales	0	36	524	838	745	518	200	2862	905.8
Powys	11	46	98	74	46	33	33	341	598.2
Hywel Dda	28	103	388	456	414	279	178	1846	1,090.2
Western Bay (c)	19	100	240	511	513	309	111	1803	972.4
Cardiff & Vale	7	40	301	625	599	381	160	2114	882.6
Cwm Taf Morgannwg	24	148	409	725	596	323	126	2363	1,103.8
Gwent	39	128	353	531	424	263	143	1881	668.4
Outside Wales	1	9	52	138	104	42	15	361	
Unknown	2	15	13	17	24	13	9	93	
Total	131	625	2,378	3,915	3,465	2,161	975	13,664	925.6
Female									
North Wales	0	35	327	554	516	344	166	1,944	610.8
Powys	21	40	88	97	73	77	29	425	764.4
Hywel Dda	24	97	296	336	276	191	149	1,369	779.6
Western Bay (c)	34	69	222	467	352	175	60	1,379	744.8
Cardiff & Vale	0	30	274	445	430	254	106	1,539	628.2
Cwm Taf Morgannwg	20	83	307	422	390	194	117	1,546	702.7
Gwent	50	146	463	740	550	314	137	2,400	828.7
Outside Wales	1	8	145	349	257	91	9	860	
Unknown	2	9	8	5	8	8	6	46	
Total	152	517	2,130	3,415	2,852	1,648	779	11,508	768.3

# Table 6.2: Referrals by area of residence in 2021-22 by age and gender

Source: WNDSM, Digital Health & Care Wales

(a) Includes a total of 11 referrals for males and 12 females where the age is less than 10 and a total of 6 referrals where the age us unknown.

 (b) <u>European Age Standardised Rate</u>
 (c) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

. Data item not applicable

# Table 6:3 Referral activity by Ethnic Origin

					Referral	Year				
	2017	<b>'-18</b>	20	018-19		2019-20	)	2020-2	1 20	)21-22
Ethnic Origin	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
White	22,014	87.6	22,381	86.2	21,017	83.1	19,310	81.0	21,131	83.9
White and Black Caribbean	60	0.2	55	0.2	46	0.2	65	0.3	53	0.2
White and Black African	19	0.1	10	0.0	30	0.1	13	0.1	16	0.1
White and Asian	43	0.2	28	0.1	26	0.1	29	0.1	18	0.1
Any Other Mixed Background	85	0.3	105	0.4	92	0.4	92	0.4	124	0.5
Indian	27	0.1	17	0.1	30	0.1	23	0.1	22	0.1
Pakistani	33	0.1	33	0.1	21	0.1	22	0.1	15	0.1
Bangladeshi	29	0.1	23	0.1	10	0.0	16	0.1	22	0.1
Any Other Asian Background	79	0.3	71	0.3	74	0.3	71	0.3	94	0.4
Caribbean	29	0.1	26	0.1	46	0.2	32	0.1	28	0.1
African	36	0.1	35	0.1	39	0.2	26	0.1	34	0.1
Any Other Black Background	69	0.3	76	0.3	90	0.4	78	0.3	60	0.2
Other ethnic group (a)	41	0.2	38	0.1	28	0.1	37	0.2	56	0.2
Client not stated (b)	2,568	10.2	3,073	11.8	3,733	14.8	4,038	16.9	3,499	13.9
Unknown (c)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Total	25,132	100	25,971	100	25,282	100	23,852	100	25,172	100

(a) Includes Chinese and Any other ethnic group(b) Client declined to state their ethnic origin(c) The ethnic origin of the client was not recorded

Ethnic Origin							
White British	Ethnic Minority Groups	Not Stated	Total				
4,302	21	483	4,806				
760	3	3	766				
2,912	16	287	3,215				
2,429	41	712	3,182				
2,411	134	1,108	3,653				
3,419	18	472	3,909				
3,916	63	302	4,281				
1,179	35	7	1,221				
14	0	125	139				
21,342	331	3,499	25,172				
	British 4,302 760 2,912 2,429 2,411 3,419 3,916 1,179 14	BritishGroups4,3022176032,912162,429412,4111343,419183,916631,1793514021,342331	BritishGroups4,30221483760332,912162872,429417122,4111341,1083,419184723,916633021,179357140125				

#### Table 6.4: Referrals by area of residence in 2021-22 by ethnic origin

(a) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

# Sources of Referral

Table 6.5 and chart 6.2 show the number of referrals by each of the referral source groups, by main problematic substance category (alcohol or drugs). Self referrals accounted for 40.0% of the referrals (45.7% for all alcohol referrals and 31.9% for all drug referrals), and the Criminal Justice System accounted for 18.1% of referrals (11.4% for all alcohol referrals and 36.6.7% for drug referrals).

#### Table 6.5: Source of referrals in 2021-22 by main problematic substance: All Referrals

Referral Source (a)	Alcohol	Drugs	Not Reported	Total
Self	3,900	2,417	3,721	10,038
Criminal Justice System	971	2,772	821	4,564
Single Point of Engagement (SPOE)	752	493	629	1,874
GP	418	164	821	1,403
Support Agencies	873	581	783	2,237
NHS	723	218	1,038	1,979
Non-Statutory Treatment Service Providers	370	361	476	1,207
Statutory Treatment Service Providers	170	148	315	633
Other (b)	359	428	450	1,237
Total	8,536	7,582	9,054	25,172
		Source: WI	NDSM, Digital Health &	& Care Wales

(a) See <u>Annex B</u> for breakdown of referral source

(b) Includes 57 referrals where referral source is unknown. See <u>Annex B</u> for full list of referral sources included under Other.

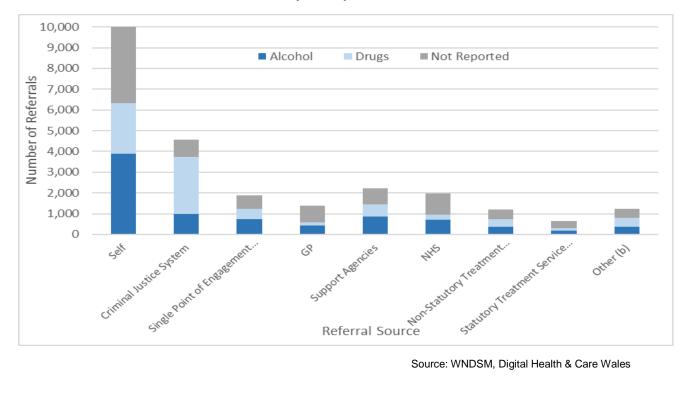


Chart 6.2: Source of referrals in 2021-22 by main problematic substance

Source: WNDSM, Digital Health & Care Wales

#### Individuals referred in 2021-22

Table 6.6 shows that the 25,172 referrals made in 2021-22 (excluding those clients that DNA before assessment) related to 18,131 individual clients with an average of 1.4 referrals per client during the financial year. Of these, 18,131 clients, 13,611 (75.1%) were new cases, meaning that they were referred to a treatment service provider for the first time in 2021-22, or at least for the first time since the database began on the 1<sup>st</sup> April 2005.

	All	Individuals	Average	New	Percentage
	Referrals	referred in	referrals	Cases	of Nev
		2021-22	per		Case
			individual		
	(a)	(b)	(c)	(d)	(e
Gender					
Male	13,664	9,767	1.4	6,625	67.
Female	11,508	8,364	1.4	6,986	83.
Age					
10-14	283	265	1.1	265	100.
15-19	1,142	1,002	1.1	1,001	99.
20-29	4,508	3,301	1.4	2,860	86.
30-39	7,330	5,204	1.4	3,782	72.
40-49	6,317	4,420	1.4	2,937	66.
50-59	3,809	2,655	1.4	1,812	68.
60+	1,754	1,255	1.4	925	73.
All Ages (f)	25,172	18,131	1.4	13,611	75.
Median age (g)	39	39		37	
			Source: WNDSM	, Digital Health & C	Care Wales

#### Table 6.6: Previous history of referrals in 2021-22: All Referrals

(a) All referrals 2021-22

(b) All referrals minus multiple referrals in 2021-22

(c) All referrals divided by individuals referred in 2021-22

(d) Number of individuals who had not been previously referred since April 2005 (commencement of the database)

(e) New cases divided by individuals referred in 2021-22

(f) Includes 29 referrals where the age is less than 10.

(g) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

Table 6.7: New cases	s (a) by age time series
----------------------	--------------------------

					Referral	Year					
	2017-	18	2018-	19	2019-	20	2020-	2020-21		2021-22	
		Per		Per		Per		Per		Per	
Age	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	
10-14	279	88.6	300	89.0	307	94.2	159	90.9	265	93.	
15-19	1,114	81.1	1,225	83.6	1,067	84.7	855	81.7	1,001	87	
20-29	2,424	49.5	2,614	53.2	2,605	55.1	2,672	58.0	2,860	63	
30-39	2,858	38.4	3,095	39.7	3,242	42.0	3,277	44.2	3,782	51	
40-49	2,227	36.6	2,404	37.9	2,322	38.4	2,410	41.0	2,937	46	
50-59	1,325	37.0	1,449	40.6	1,432	39.9	1,414	43.5	1,812	47	
60+	690	48.5	774	50.8	799	51.7	710	49.6	925	52	
All Ages (c)	10,922	43.5	11,882	45.8	11,810	46.8	11,534	48.4	13,611	54	

Source: WNDSM, Digital Health & Care Wales

(a) Number of individuals who had not been previously referred since April 2005 (commencement of the database)

(b) Percentage of all referrals by age category

(c) Includes 5 new cases in 2017-18, 21 in 2018-19, 36 in 2019-20, 37 in 2020-21 and 29 in 2021-22 where the age is less than 10.

#### Referral exclusions for main problematic substance analysis

As explained in the data quality section (Section 3), there were 7,754 referrals for which the main problematic substance was unknown due to there being no assessment date recorded for that client as at the freeze date of 26<sup>th</sup> July 2022. For information, the breakdown of these excluded referrals (by gender, age, ethnicity, APBs and source of referral) is shown in Table 6.8. To provide a comparison, the profile of these excluded cases is shown alongside the included referrals, and it can be seen that there appears to be no disproportionate exclusion of referrals on account of age or gender. For ethnicity, the main difference between the excluded and included cases is around the category of "Not Stated", which is much more prevalent in the excluded cases.

In relation to the APBs, there were high numbers of exclusions (relatively) for North Wales, although comparatively few for Powys. For source of referral, there were more exclusions (relatively) where the referrals were from Self and NHS and fewer exclusions for statutory drug service and non-statutory drug service.

It should be noted however that we would expect that the vast majority of these unknown main problematic substances would be populated subsequently, following an assessment.

# Table 6.8: Referrals excluded for main problematic substance

Gender	Excluded	Included
Male	4,697 (60.6%)	13,664 (54.3%)
Female	3,057 (39.4%)	11,508 (45.7%)
Total	7,754 (100.0%)	25,172 (100.0%)
Age	Excluded	Included
< 10	6 (0.1%)	23 (0.1%)
10-14	67 (0.9%)	283 (1.1%)
15-19	337 (4.3%)	1,142 (4.5%)
20-29	1,408 (18.2%)	4,508 (17.9%)
30-39	2,119 (27.3%)	7,330 (29.1%)
40-49	1,863 (24.0%)	6,317 (25.1%)
50-59	1,269 (16.4%)	3,809 (15.1%)
60+	684 (8.8%)	1,754 (7.0%)
Unknown	1 (0.0%)	6 (0.0%)
Total	7,754 (100.0%)	25,172 (100.0%)
Ethnicity	Excluded	Included
White	6,278 (81.0%)	21,131 (83.9%)
Black	25 (0.3%)	122 (0.5%)
Asian	32 (0.4%)	153 (0.6%)
Mixed	40 (0.5%)	211 (0.8%)
Other	18 (0.2%)	56 (0.2%)
Not Stated	1,356 (17.5%)	3,499 (13.9%)
Total	7,754 (100.0%)	25,172 (100.0%)
АРВ	Excluded	Included
North Wales	2,717 (35.0%)	4,806 (19.1%)
Powys	150 (1.9%)	766 (3.0%)
Hywel Dda	859 (11.1%)	3,215 (12.8%)
Western Bay	1,120 (14.4%)	3,182 (12.6%)
Cardiff & Vale	1,059 (13.7%)	3,653 (14.5%)
Cwm Taf Morgannwg	887 (11.4%)	3,909 (15.5%)
Gwent	863 (11.1%)	4,281 (17.0%)
Other – Outside Wales	62 (0.8%)	1,221 (4.9%)
Unknown	37 (0.5%)	139 (0.6%)
Total	7,754 (100.0%)	25,172 (100.0%)

Excluded	Included
2,971 (38.3%)	10,038 (39.9%)
753 (9.7%)	1,403 (5.6%)
778 (10.0%)	4,564 (18.1%)
329 (4.2%)	1,207 (4.8%)
1,002 (12.9%)	1,979 (7.9%)
553 (7.1%)	1,874 (7.4%)
243 (3.1%)	633 (2.5%)
402 (5.2%)	1,237 (4.9%)
723 (9.3%)	2,237 (8.9%)
7,754 (100.0%)	25,172 (100.0%)
	2,971 (38.3%) 753 (9.7%) 778 (10.0%) 329 (4.2%) 1,002 (12.9%) 553 (7.1%) 243 (3.1%) 402 (5.2%) 723 (9.3%)

Source: WNDSM, Digital Health & Care Wales

#### Referrals by main problematic substance

Table 6.9 shows that of the 25,172 referrals in 2021-22 (excluding DNAs before assessment), alcohol was the main problematic substance reported in 8,536 of the cases, of which 1,652 referrals were for alcohol in combination with drugs. There were 7,582 referrals with drugs as the main problematic substance reported, of which 1,024 were in combination with alcohol. For 1,300 of the referrals (7.5%), no valid main problematic substance was reported at time of referral. For the remaining 7,754 these are clients who have not reached the assessment stage, the main problematic substance should be completed once the assessment has taken place.

#### Table 6.9: Referrals in 2021-22 by main problematic substance

				Total	
Main problema	atic substance	Male	Female	Number	Per Cent
Alcohol	Alcohol alone (a)	3,604	3,280	6,884	39.5
	Alcohol in combination with Drugs (b)	896	756	1,652	9.5
	- Alcohol Total	4,500	4,036	8,536	49.0
Drugs	Drugs alone (c)	3,145	3,413	6,558	37.7
	Drugs in combination with Alcohol (d)	493	531	1,024	5.9
	- Drugs Total	3,638	3,944	7,582	43.5
Unknown	Unknown (e)	829	471	1,300	7.5
All Referrals		8,967	8,451	17,418	100

Source: WNDSM, Digital Health & Care Wales

(a) Alcohol recorded as the main problematic substance with no other substance reported.

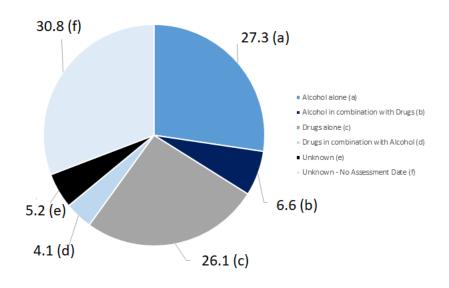
(b) Alcohol recorded as the main problematic substance but with misuse of drugs also being reported.

(c) Drugs recorded as the main problematic substance with no alcohol reported.

(d) Drugs recorded as the main problematic substance but with alcohol also being reported.

(e) No problematic substance reported to the database at stage of referral, the vast majority of these unknowns will be populated following assessment of the client.

#### Chart 6.3: Referrals in 2021-22 by main problematic substance



Source: WNDSM, Digital Health & Care Wales

(a) Alcohol recorded as the main problematic substance with no other substance reported.

- (b) Alcohol recorded as the main problematic substance but with misuse of drugs also being reported.
- (c) Drugs recorded as the main problematic substance with no alcohol reported.
- (d) Drugs recorded as the main problematic substance but with alcohol also being reported.
- (e) No problematic substance reported to the database at stage of referral, the vast majority of these unknowns will be populated following assessment of the client.

(f) No problematic substance reported to the database as the client has not reached the assessment stage.

Table 6.10 shows the breakdown of main problematic substances in more detail. Heroin is the most frequently reported drug accounting for 2,806 (17.4%) of referrals, followed by Cannabis with 1,680 (10.4%).

The list of drugs included under the groups "Other Opiates", "Other Drugs" and "Other Stimulant" are shown in Annex C.

Males accounted for 50.5% of all referrals, where the main problematic substance is known, although patterns vary according to substance, with males accounting for 52.7% of referrals with alcohol as the main problematic substances, 48.0% for drugs, and as high as 100.0% for Performance and Image Enhancing Drugs and Other Stimulants, and 66.7% for Ecstasy.

The median age of clients referred in 2021-22 where alcohol was the main problematic substance was 42, compared with 34 for clients referred where the main problematic substance was drugs.

			7	Fotal
Main problematic substance	Male	Female	Number	Per Cent (a)
Alcohol	4,500	4,036	8,536	53.0
Heroin	1,200	1,606	2,806	17.4
Cannabis (b)	851	829	1,680	10.4
Cocaine	519	456	975	6.0
Amphetamines	133	135	268	1.7
Methadone (c)	161	117	278	1.7
Crack Cocaine	142	209	351	2.2
Benzodiazepines	158	131	289	1.8
Hallucinogens	65	38	103	0.6
Ecstasy	2	1	3	0.0
Solvents	9	7	16	0.1
Performance and Image Enhancing Drugs	4	7	11	0.1
Other Opiates (d)	283	282	565	3.5
Other Drugs (e)	109	126	235	1.5
Other Stimulants (f)	2	0	2	0.0
All Referrals	8,138	7,980	16,118	100

# Table 6.10: Referrals in 2021-22 by main problematic substance (where known)

Source: WNDSM, Digital Health & Care Wales

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

(b) There may be instances where cannabinoids may have been reported as cannabis.

(c) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone
 (d) See <u>Annex C</u> for a list of drugs included under *Other Opiates* (e) See <u>Annex C</u> for a list of drugs included under *Other Drugs*

(f) See Annex C for a list of drugs included under Other Stimulants

					Referral	Year				
	2017-	18	2018-	19	2019-	20	2020-	21	2021-2	22
Main Problematic Substance	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Alcohol	9,404	49.7	9,882	50.1	9,435	48.6	9,269	50.5	8,536	53.0
Heroin	3,492	18.5	3,457	17.5	3,872	20.0	3,675	20.0	2,806	17.4
Cannabis (a)	1,969	10.4	1,945	9.9	1,982	10.2	1,922	10.5	1,680	10.4
Cocaine	943	5.0	1,171	5.9	1,246	6.4	1,033	5.6	975	6.0
Methadone (b)	897	4.7	937	4.7	726	3.7	385	2.1	278	1.7
Amphetamines	542	2.9	486	2.5	410	2.1	342	1.9	268	1.7
Crack Cocaine	252	1.3	362	1.8	333	1.7	317	1.7	351	2.2
Benzodiazepines	192	1.0	176	0.9	191	1.0	317	1.7	289	1.8
Ecstasy	35	0.2	64	0.3	32	0.2	23	0.1	3	0.0
Hallucinogens	44	0.2	48	0.2	55	0.3	101	0.5	103	0.6
Solvents	18	0.1	32	0.2	18	0.1	25	0.1	16	0.1
Performance and Image Enhancing Drugs	5	0.0	7	0.0	3	0.0	8	0.0	11	0.1
Other Opiates (c)	694	3.7	762	3.9	659	3.4	667	3.6	565	3.5
Other Drugs (d)	423	2.2	398	2.0	432	2.2	284	1.5	235	1.5
Other Stimulants (e)	6	0.0	4	0.0	1	0.0	3	0.0	2	0.0
All Referrals	18,916	100	19,731	100	19,395	100	18,371	100	16,118	100
						Source: V	VNDSM, Digita	al Health a	& Care Wales	

#### Table 6.11: Referrals by main problematic substance (where known) time series

(a) There may be instances where cannabinoids may have been reported as cannabis.

(b) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

(c) See <u>Annex C</u> for a list of drugs included under Other Opiates
 (d) See <u>Annex C</u> for a list of drugs included under Other Drugs
 (e) See <u>Annex C</u> for a list of drugs included under Other Stimulants

#### Table 6.12a: Referrals in 2021-22 by age and gender: main problematic substance: Alcohol

	Ma	le	Ferr	nale	То	tal
Referral age band	Referral	Referral Rate (a)	Referral	Referral Rate (a)	Referral	Referral Rate (a)
10-14	21	22	28	31	49	27
15-19	91	101	115	137	206	119
20-29	603	280	560	281	1,163	280
30-39	1,172	616	1,047	545	2,219	580
40-49	1,206	673	1,046	562	2,252	616
50-59	921	431	828	367	1,749	398
60+	482	119	406	88	888	103
All Ages (b)	4,500	288	4,036	251	8,536	269
Median age (c)	42		42		42	

(a) Rate per 100,000 population; Source: ONS 2021 mid-year estimate

Includes 7 referrals where the age is less than 10 and 3 referrals where the age is unknown. (b)

The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median (C) point as there are above it.

. Data item not applicable

	Ma	le	Fema	ale	Tota	al
Referral age band	Referral	Referral Rate (a)	Referral	Referral Rate (a)	Referral	Referral Rate (a)
10-14	76	80	84	94	160	87
15-19	316	351	219	261	535	308
20-29	817	379	956	480	1,773	428
30-39	1,175	617	1,418	738	2,593	678
40-49	867	484	975	524	1,842	504
50-59	317	148	261	116	578	132
60+	64	16	26	6	90	10
All Ages (b)	3,638	233	3,944	246	7,582	239
Median age (c)	34		34		34	
	01	· ·			I, Digital Health &	Care Wal

# Table 6.12b: Referrals in 2021-22 by age and gender: main problematic substance: Drugs

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) Includes 9 referrals where the age is less than 10, and 2 referrals where the age is unknown.(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

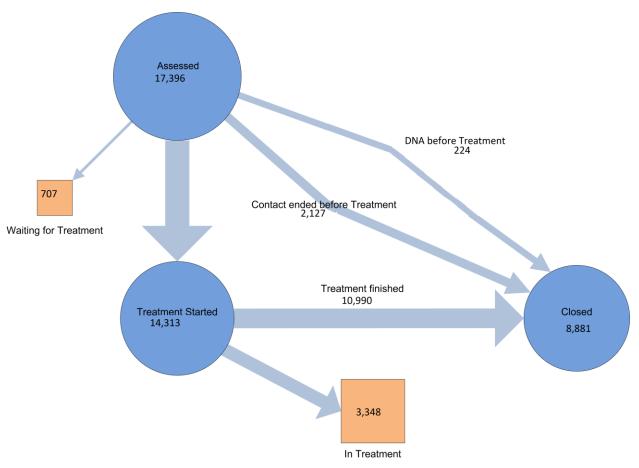
# 7 Assessments

Figure 7.1 shows the status along the treatment pathway of all clients assessed in 2021-22.

Of the 17,396 clients assessed, 10,990 cases had already been closed by the 26<sup>th</sup> July 2022 freeze date, 2,127 (12.2%) of which had been closed without commencement of any form of treatment.

Note that the numbers in figure 7.1 only relate to activity associated with those clients who were assessed in 2021-22, as compared with figure 6.1 which was based on clients referred in 2021-22. As a comparison, the number of assessments shown in figure 6.1 (16,887) related to clients who were both referred in 2021-22 *and* assessed on or before 31<sup>st</sup> March 2022, whereas the 17,396 figure below indicates all clients assessed in 2021-22, including those whose referral date was prior to 1<sup>st</sup> April 2021. Similarly, figures relating to "treatments started" and "case closures", which appear later on in this report, are not comparable with the figures shown below (13,940 and 11,082 respectively).

*Figure 7.1: Current status along treatment pathway for those assessed in 2021-22 (as at 26<sup>th</sup> July 2022 freeze date)* 



Source: WNDSM, Digital Health & Care Wales

# Assessments by Age, Gender, Substance and Ethnic Origin

Area Planning Board	Alcohol	Assessment Rate (a)	Drugs	Assessment Rate (a)	Not Reported	Assessment Rate (a)	Total	Assessment Rate (a)
North Wales	1,157	164	874	124	48	7	2,079	296
Powys	328	247	288	216	0	0	616	463
Hywel Dda	1,339	344	1,006	258	3	1	2,348	602
Western Bay (b)	546	140	723	185	833	213	2,102	538
Cardiff & Vale	1,516	300	1,006	199	49	10	2,571	510
Cwm Taf Morgannwg	1,483	330	1,210	269	339	75	3,032	674
Gwent	1,753	293	1,632	273	5	1	3,390	567
Outside Wales	363		799		0		1,162	
Unknown	44		46		6		96	
Total	8,529	269	7,584	239	1,283	40	17,396	549
					S	ource: WNDSM, D	Digital Health	& Care Wales

# Table 7.1: Assessments by area of residence in 2021-22 by main problematic substance

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

.Data item not applicable

The substances listed in table 7.2 are based on the most prevalent substances reported to the national database.

		Main problematic substance									
Area Planning Board	Heroin	Cannabis	Cocaine	Crack	Benzodiazepines Meth	nadone (a)					
Assessments											
North Wales	330	86	142	24	24	123					
Powys	57	110	63	12	10	C					
Hywel Dda	355	292	83	26	35	10					
Western Bay (b)	316	139	80	35	27	13					
Cardiff & Vale	359	213	124	72	41	53					
Cwm Taf Morgannwg	368	316	152	60	69	31					
Gwent	503	468	265	63	63	20					
Outside Wales	505	25	60	58	19	33					
Unknown	15	14	1	0	1	C					
Total	2,808	1,663	970	350	289	283					
Rate per 100,000 populatio	n (c)										
North Wales	47	12	20	3	3	17					
Powys	43	83	47	9	8	0					
Hywel Dda	91	75	21	7	9	3					
Western Bay (b)	81	36	20	9	7	3					
Cardiff & Vale	71	42	25	14	8	11					
Cwm Taf Morgannwg	82	70	34	13	15	7					
Gwent	84	78	44	11	11	3					
Outside Wales											
Unknown											
Total	89	52	31	11	9	9					

#### Table 7.2: Assessments by area of residence in 2021-22 by individual substance

Source: WNDSM, Digital Health & Care Wales

(a) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone

(b) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

(c) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

Data item not applicable

Assessment age band	Ma	le	Ferr	ale	Total		
	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)	
10-14	94	99	108	120	202	110	
15-19	440	489	374	446	814	468	
20-29	1,495	694	1,570	788	3,065	739	
30-39	2,608	1,370	2,632	1,369	5,240	1,370	
40-49	2,340	1,305	2,114	1,136	4,454	1,219	
50-59	1,373	643	1,151	510	2,524	575	
60+	602	149	473	103	1,075	124	
All Ages (c)	8,961	573	8,435	525	17,396	549	
Median age (d)	39		38		38		

#### Table 7.3: Assessments in 2021-22 by age and gender: All assessments (a)

(a) Includes assessments where the main problematic substance is not reported

(b) Rate per 100,000 population; Source: ONS 2021 mid-year estimate

(c) Includes 18 assessments where the age is less than 10, and 4 assessments where age is unknown.

(d) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

#### Table 7.4: Assessments activity by Ethnic Origin

					Assessme	nt Year				
	2017-	18	2018-19		2019-20		2020-21		2021-22	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
White	16,680	90.3	17,478	88.6	16,669	85.2	15,354	83.2	14,829	85.2
White and Black Caribbean	46	0.2	45	0.2	41	0.2	51	0.3	45	0.3
White and Black African	15	0.1	8	0.0	23	0.1	11	0.1	12	0.1
White and Asian	34	0.2	22	0.1	20	0.1	24	0.1	12	0.1
Any Other Mixed Background	66	0.4	83	0.4	75	0.4	78	0.4	102	0.6
Indian	18	0.1	15	0.1	26	0.1	20	0.1	13	0.1
Pakistani	24	0.1	28	0.1	17	0.1	20	0.1	13	0.1
Bangladeshi	26	0.1	19	0.1	10	0.1	14	0.1	17	0.1
Any Other Asian Background	61	0.3	59	0.3	60	0.3	57	0.3	78	0.4
Caribbean	23	0.1	19	0.1	22	0.1	28	0.2	23	0.1
African	25	0.1	28	0.1	27	0.1	19	0.1	21	0.1
Any Other Black Background	54	0.3	65	0.3	71	0.4	61	0.3	52	0.3
Any other ethnic group (a)	24	0.1	27	0.1	21	0.1	22	0.1	33	0.2
Client not stated (b)	1,371	7.4	1,835	9.3	2,474	12.7	2,688	14.6	2,146	12.3
Total	18,467	100	19,731	100	19,556	100	18,447	100	17,396	100

(a) Includes Chinese and Any other ethnic group

(b) Client has declined to state their origin

Source: WNDSM, Digital Health & Care Wales

### Assessments by source of referral

Table 7.5 shows the number of assessments by each of the referral source groups by main problematic substance category (alcohol or drugs). Self-referrals accounted for 40.5% of the referrals (45.7% of all alcohol referrals and 31.8% of all drug referrals) and the Criminal Justice System accounted for 21.8% of referrals (11.4% of all alcohol referrals and 36.7% of all drug referrals).

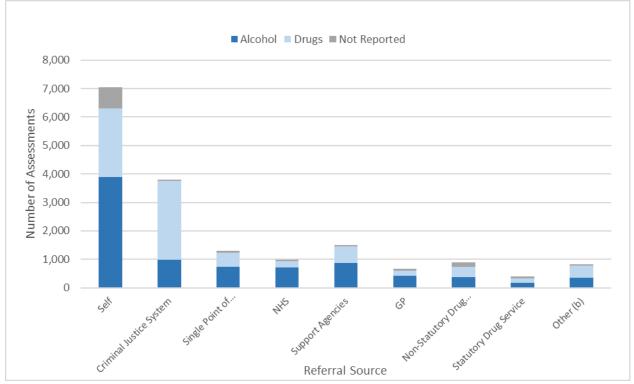
Referral Source (a)	Alcohol	Drugs	Not Reported	Total
Self	3,895	2,410	743	7,048
Criminal Justice System	973	2,783	44	3,800
Single Point of Engagement	736	487	76	1,299
NHS	721	223	34	978
Support Agencies	876	578	58	1,512
GP	429	162	66	657
Non-Statutory Drug Service	373	365	146	884
Statutory Drug Service	173	148	70	391
Other (b)	353	428	46	827
Total	8,529	7,584	1,283	17,396

Source: WNDSM, Digital Health & Care Wales

(a) See <u>Annex B</u> for breakdown of referral sources

(b) See <u>Annex B</u> for definition of other sources. This includes 41 assessments where the referral source is unknown.





Source: WNDSM, Digital Health & Care Wales

#### Assessments by main problematic substance

Table 7.6a-b shows the breakdown of main problematic substances in more details, Heroin is the most frequently reported drug accounting for 2,808 (16.1%) of all assessments, followed by Cannabis with 1663 (9.6%).

The list of drugs included under the groups "Other Opiates", "Other Drugs" and "Other Stimulant" are shown in <u>Annex C</u>.

The age and gender breakdown of clients assessed to the database by each of the main problematic substance groups are shown in Table 7.7a to 7.7f.

Males account for 51.5% of all assessments and 50.5% of all assessments where the main problematic substance is known. Patterns vary according to substance, with males accounting for 52.7% of assessments with alcohol as the main problematic substance, 48.1% for drugs, 53.5% for Cocaine, and as high as 100% for Other Stimulants.

The median age of clients assessed in 2021-22 was 26 for Cannabis, 31 for Cocaine, and 39 for Heroin.

#### Table 7.6a: Assessments in 2021-22 by main problematic substance

			٦	Fotal
Main problematic substance	Male	Female	Number	Per Cent (a)
Alcohol	4,498	4,031	8,529	49.0
Heroin	1,198	1,610	2,808	16.1
Cannabis (b)	848	815	1,663	9.6
Cocaine	519	451	970	5.6
Crack Cocaine	142	208	350	2.0
Benzodiazepines	161	128	289	1.7
Methadone (c)	163	120	283	1.6
Amphetamines	133	141	274	1.6
Ecstasy	2	2	4	0.0
Hallucinogens	67	40	107	0.6
Solvents	9	8	17	0.1
Performance and Image Enhancing Drugs	4	7	11	0.1
Other Opiates (d)	288	280	568	3.3
Other Drugs (e)	109	129	238	1.4
Other Stimulants (f)	2	0	2	0.0
Not reported (g)	818	465	1,283	7.4
All assessments	8,961	8,435	17,396	100
		0 14/110.01		<b>.</b>

(a) Percentage of all assessments.

Source: WNDSM, Digital Health & Care Wales

(b) There may be instances where cannabinoids may have been reported as cannabis.

(c) It is not possible to be clear if methadone recorded as main substance refers to prescribed or illicit methadone.

(d) See Annex C for a list of drugs included under Other Opiates

(e) See <u>Annex C</u> for a list of drugs included under Other Drugs

(f) See <u>Annex C</u> for a list of drugs included under Other Stimulants

(g) Includes poly drug. No problematic substance reported to the database at time of assessment.

Table 7.6b: Assessments by main problematic substance time series

		As	sessment Yea	r	
Assessments	2017-18	2018-19	2019-20	2020-21	2021-22
Alcohol	9,136	9,831	9,492	9,236	8,529
Drugs	9,278	9,838	9,980	9,116	7,584
- Heroin	3,390	3,464	3,848	3,743	2,808
- Cannabis (a)	1,906	1,927	2,022	1,899	1,663
- Cocaine	928	1,161	1,258	1,022	970
- Crack Cocaine	250	364	331	311	350
- Methadone	888	941	727	378	283
- Benzodiazepines	186	176	187	320	289
- Amphetamines	529	494	404	341	274
- Hallucinogens	42	50	54	98	107
- Solvents	18	30	18	26	17
- Performance and Image Enhancing Drugs	5	7	3	8	11
- Ecstasy	34	63	32	24	4
- Other Opiates (c)	676	766	662	660	568
- Other Drugs (d)	420	391	433	283	238
- Other Stimulants (e)	6	4	1	3	2
Not Reported	53	62	84	95	1,283
All Assessments	18,467	19,731	19,556	18,447	17,396
		Sou	irce: WNDSM, Dig	ital Health & Care	Wales

(a) There may be instances where cannabinoids may have been reported as cannabis.

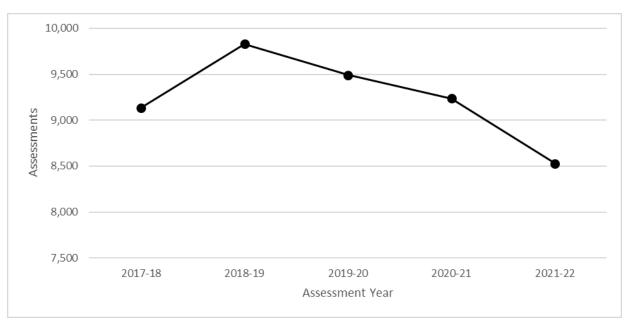
(b) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

(c) See <u>Annex C</u> for a list of drugs included under Other Opiates

(d) See <u>Annex C</u> for a list of drugs included under Other Drugs

(e) See <u>Annex C</u> for a list of drugs included under Other Stimulants

# Chart 7.6a: Assessments by main problematic substance: Alcohol



Source: WNDSM, Digital Health & Care Wales

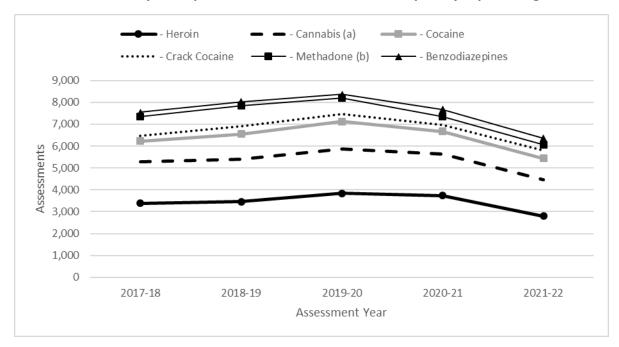


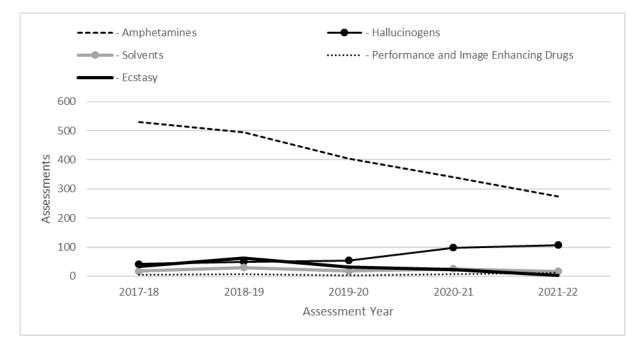
Chart 7.6b: Assessments by main problematic substance: Most frequently report drugs

Source: WNDSM, Digital Health & Care Wales

(a) There may be instances where cannabinoids may have been reported as cannabis

(b) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

Chart 7.6c: Assessments by main problematic substance: Remaining Drugs



Source: WNDSM, Digital Health & Care Wales

The drugs selected in tables 7.7a to 7.7f have been selected as these drugs are the most prevalent drugs reported to the WNDSM.

Assessment age	Ма	le	Ferr	nale	To	tal
band	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)
10-14	0	0	0	0	0	0
15-19	8	9	3	4	11	6
20-29	161	75	208	104	369	89
30-39	437	230	653	340	1,090	285
40-49	422	235	583	313	1,005	275
50-59	140	66	154	68	294	67
60+	30	7	7	2	37	4
All ages (b)	1,198	77	1,610	100	2,808	89
Median age (c)	39		38		39	

#### Table 7.7a: Assessments in 2021-22 by age and gender - main problematic substance: Heroin

Source: WNDSM, Digital Health & Care Wales

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) Includes 1 assessment where the age is less than 10 and 1 assessment where the age is unknown.

(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable.

Assessment age	Ma	le	Fem	ale	Tot	tal
band	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)
10-14	60	63	56	62	116	63
15-19	234	260	155	185	389	224
20-29	246	114	315	158	561	135
30-39	191	100	200	104	391	102
40-49	72	40	59	32	131	36
50-59	37	17	22	10	59	13
60+	4	1	5	1	9	1
All ages (c)	848	54	815	51	1,663	52
Median age (d)	26		26		26	

#### Table 7.7b: Assessments in 2021-22 by age and gender – main problematic substance: Cannabis (a)

(a) Cannabinoids may have been reported under cannabis.

(b) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(c) Includes 7 assessments where the age is less than 10.

(d) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

Assessment age	Ма	le	Ferr	nale	Tot	tal
band	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)
10-14	0	0	1	1	1	1
15-19	30	33	31	37	61	35
20-29	187	87	175	88	362	87
30-39	207	109	173	90	380	99
40-49	77	43	61	33	138	38
50-59	14	7	8	4	22	5
60+	3	1	1	0	4	0
All ages (b)	519	33	451	28	970	31
Median age (c)	31		30		31	
				Source: WN	NDSM, Digital Health	& Care Wales

#### Table 7.7c: Assessments in 2021-22 by age and gender – main problematic substance: Cocaine

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) Includes 2 assessment where the age is less than 10

(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable.

#### Table 7.7d: Assessments in 2021-22 by age and gender – main problematic substance: Crack Cocaine

Assessment age	Ma	ale	Ferr	nale	To	tal
band	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)
10-14	0	0	0	0	0	0
15-19	4	4	3	4	7	4
20-29	31	14	36	18	67	16
30-39	59	31	97	50	156	41
40-49	34	19	55	30	89	24
50-59	13	6	16	7	29	7
60+	1	0	1	0	2	0
All ages	142	9	208	13	350	11
Median age (b)	35		36		36	
				Source: WNI	DSM, Digital Health	& Care Wales

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

# Table 7.7e: Assessments in 2021-22 by age and gender – main problematic substance: Benzodiazepines

Assessment age	Ma	ale	Fem	nale	Tot	al
band	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)	Assessments	Assessment Rate (a)
10-14	0	0	1	1	1	1
15-19	14	16	11	13	25	14
20-29	51	24	40	20	91	22
30-39	48	25	33	17	81	21
40-49	31	17	33	18	64	18
50-59	16	7	6	3	22	5
60+	1	0	4	1	5	1
All ages	161	10	128	8	289	11
Median age (b)	33		34		33	

Source: WNDSM, Digital Health & Care Wales

(a) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable.

#### Table 7.7f: Assessments in 2021-22 by age and gender – main problematic substance: Methadone (a)

Assessment age	Ma	ale	Fem	ale	To	tal
band	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)	Assessments	Assessment Rate (b)
10-14	0	0	0	0	0	0
15-19	0	0	0	0	0	0
20-29	6	3	15	8	21	1
30-39	44	23	56	29	100	12
40-49	83	46	35	19	118	23
50-59	26	12	13	6	39	6
60+	4	1	1	0	5	0
All ages	163	10	120	7	283	5
Median age (c)	43		38		41	

Source: WNDSM, Digital Health & Care Wales

(a) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

(b) Rate per 100,000 population; Source: ONS 2020 mid-year estimate

(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

Table 7.8 shows the number of assessments where the client has reported that they are currently receiving or have been assessed as needing care from Mental Health Services. The percentage of clients reporting that they are currently receiving or have been assessed as needing care from Mental Health Services has been increasing over the last 5 years from 45.0% in 2017-18 to 47.3% in 2021-22.

		Ass	essment Y	ear						
	2017-	18	2018-	19	2019-	20	2020-	21	2021-	22
Area Planning Board	Number	Per Cent (a)	Number	Per Cent (a)	Number	Per Cent (a)	Number	Per Cent (a)	Number	Per Cent (a)
North Wales	723	19.3	677	18.8	716	21.4	540	19.3	471	22.7
Powys	485	92.2	610	91.7	519	86.8	474	89.8	528	85.7
Hywel Dda	1,802	81.5	2,081	82.5	2,134	81.2	1,832	82.0	2,029	86.4
Western Bay (b)	826	33.0	860	32.1	718	29.8	606	23.8	338	16.1
Cardiff & Vale	790	31.4	999	33.5	899	30.7	763	27.0	672	26.1
Cwm Taf Morgannwg (c)	892	37.2	984	38.0	1,150	40.7	1,164	39.6	1,190	39.2
Gwent	2,083	62.8	2,096	61.7	2,283	65.0	1,908	60.2	2,321	68.5
Outside Wales	685	56.9	785	62.1	786	63.5	762	57.1	653	56.2
Unknown	16	11.4	40	26.8	31	38.8	21	27.3	21	21.9
Total	8,302	45.0	9,132	46.3	9,236	47.2	8,070	43.7	8,223	47.3

Source: WNDSM, Digital Health & Care Wales

#### Table 7.8: Assessments by co-occurring mental health issue time series

(a) Percentage of all assessments reported by Area Planning Board

(b) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

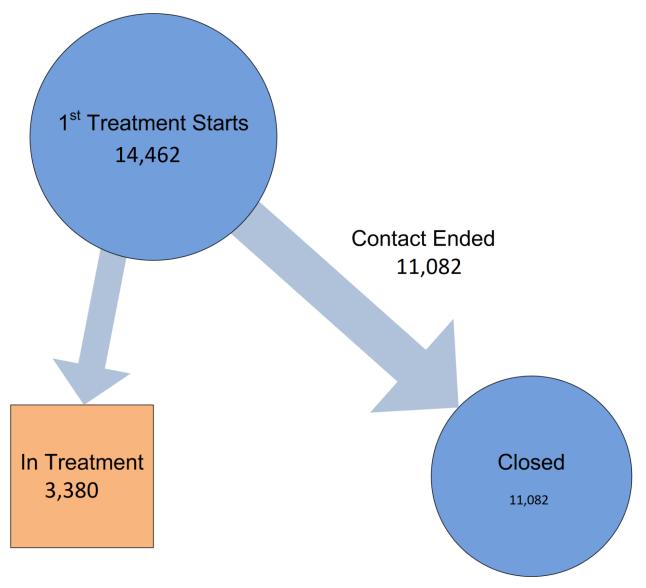
### 8 Treatments

Figure 8.1 shows the status of those clients who started treatment in 2021-22.

Of the 14,462 clients who started treatment, 11,802 (81.6%) had already been closed by the 26<sup>th</sup> July 2022 freeze date.

Note that the numbers in figure 8.1 only relate to clients who started treatment in 2021-22, as compared to figures 6.1 and 7.1, which are based on referrals and assessments in 2021-22 respectively, and therefore the figures of 14,462 (for treatment starts) and 11,082 (for closed cases) below are not comparable with the treatment start and closed cases figures shown in the previous diagrams. It should also be noted that whereas these figures are based on the date of first treatment only, <u>table 8.5</u> goes on to report on any treatments, regardless as to whether they are the first treatment or not.

*Figure 8.1: Current status along with treatment pathway for those treated in 2021-22 (as at 26<sup>th</sup> July 2022 freeze date)* 



Source: WNDSM, Digital Health & Care Wales

#### Clients commencing treatment by Age, Gender and Ethnic Origin

					Treatm	ent Year				
	2017	-18	2018	-19	2019	-20	2020	-21	2021	-22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Male	9,744	59.6	10,413	60.1	10,135	59.2	8,754	55.5	7,120	49.2
Female	6,606	40.4	6,900	39.9	6,974	40.8	7,032	44.5	7,342	50.8
Total	16,350	100	17,313	100	17,109	100	15,786	100	14,462	100
Age										
10-14	240	1.5	256	1.5	256	1.5	105	0.7	175	1.2
15-19	934	5.7	1,030	5.9	905	5.3	644	4.1	706	4.9
20-29	3,100	19.0	3,226	18.6	3,228	18.9	3,055	19.4	2,611	18.1
30-39	4,995	30.6	5 <i>,</i> 358	30.9	5,366	31.4	5,100	32.3	4,397	30.4
40-49	4,023	24.6	4,212	24.3	4,138	24.2	4,019	25.5	3,707	25.6
50-59	2,220	13.6	2,313	13.4	2,298	13.4	2,037	12.9	2,021	14.0
60+	837	5.1	910	5.3	906	5.3	793	5.0	838	5.8
All ages (b)	16,350	100.0	17,313	100.0	17,109	100.0	15,786	100.0	14,462	100.0
Median age (c)	38		38	•	38		38		38	

#### Table 8.1: Profile of clients commencing treatment – All (a)

Source: WNDSM, Digital Health & Care Wales

(a) Includes treatments where the main problematic substance is not reported.

(b) Includes 1 treatment in 2017-18, 7 treatment in 2018-19, 10 treatments in 2019-20, 30 treatment in 2020-21 and 4 treatments in 2021-22 where the age is less than 10, and 1 treatment in 2017-18, 2 treatments in 2018-19, 2 treatments in 2019-20, 3 treatments in 2020-21 and 3 treatments in 2021-22 where age is unknown.

(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

## Table 8.2: Treatment activity by Ethnic Origin

					Treatment	t Year				
	2017-	18	2018-	19	2019-	20	2020-2	21	2021-	-22
Ethnic Origin	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
White	15,141	92.6	15,950	92.1	15,339	89.7	13,751	87.1	12,825	88.7
White and Black Caribbean	43	0.3	41	0.2	35	0.2	39	0.2	36	0.2
White and Black African	13	0.1	8	0.0	21	0.1	9	0.1	10	0.1
White and Asian	25	0.2	16	0.1	19	0.1	22	0.1	11	0.1
Any Other Mixed	50	0.3	66	0.4	62	0.4	60	0.4	79	0.5
Indian	12	0.1	14	0.1	20	0.1	15	0.1	8	0.1
Pakistani	20	0.1	22	0.1	17	0.1	17	0.1	12	0.1
Bangladeshi	22	0.1	18	0.1	10	0.1	13	0.1	12	0.1
Any Other Asian	53	0.3	44	0.3	48	0.3	43	0.3	56	0.4
Caribbean	20	0.1	16	0.1	19	0.1	28	0.2	20	0.1
African	20	0.1	20	0.1	21	0.1	15	0.1	13	0.1
Any Other Black	47	0.3	44	0.3	57	0.3	39	0.2	40	0.3
Any other ethnic group (a)	16	0.1	18	0.1	13	0.1	15	0.1	13	0.1
Client not stated (b)	868	5.3	1,036	6.0	1,428	8.3	1,720	10.9	1,327	9.2
Total	16,350	100	17,313	100	17,109	100	15,786	100	14,462	100

(a) Includes Chinese and Any other ethnic group (b) Client has declined to state their ethnic origin

#### Clients commencing treatment by Age, Gender and main problematic substance

#### Treatment Year 2017-18 2018-19 2019-20 2020-21 2021-22 Median Median Median Median Median Substance Gender Number Number Number Number Number Age (a) Age (a) Age (a) Age (a) Age (a) Alcohol Male 4,764 5,043 4,775 4,376 3,582 Female 3,067 3,405 3,305 3,225 3,301 Total 8,000 7,831 8,348 7,677 6,987 Heroin Male 1,720 1,825 1,865 1,606 1,020 Female 1,328 1,333 1,614 1,758 1,545 Total 3,048 3,158 3,479 3,364 2,565 Cannabis (b) Male 1.095 1.120 1.204 Female Total 1,678 1,699 1,800 1,603 1,392 Cocaine Male Female Total 1,005 1,112 Methadone (c) Male Female Total Male Amphetamines Female Total **Crack Cocaine** Male Female Total Male All Other Female Substances Total 1,257 1,227 1,073 1,243 1,329 Not Reported Male Female Total Total 16,350 17,313 17,109 15,786 14.462

#### Table 8.3: Treatments commenced by individual substance

Source: WNDSM, Digital Health & Care Wales

(a) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

(b) There may be instances where cannabinoids may have been reported as cannabis.

(c) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

### Table 8.4: Treatments by main problematic substance time series

		Т	reatment Yea	ır	
Treatments	2017-18	2018-19	2019-20	2020-21	2021-22
Alcohol	7,831	8,348	8,000	7,677	6,987
Drugs	8,297	8,844	8,969	7,962	6,682
- Heroin	3,048	3,158	3,479	3,364	2,565
- Cannabis (a)	1,678	1,699	1,800	1,603	1,392
- Cocaine	784	1,005	1,112	873	847
- Crack Cocaine	219	303	285	275	311
- Benzodiazepines	164	155	169	272	250
- Methadone (b)	861	903	680	328	249
- Amphetamines	464	447	356	292	245
- Ecstasy	30	53	29	20	3
- Hallucinogens	40	46	44	88	94
- Solvents	14	26	14	20	15
- Performance and Image Enhancing Drugs	5	7	3	8	10
- Other Opiates (c)	602	675	601	575	493
- Other Drugs (d)	384	364	396	241	206
- Other Stimulants (e)	4	3	1	3	2
Not Reported	222	121	140	147	793
All Treatment	16,350	17,313	17,109	15,786	14,462

(a) There may be instances where cannabinoids may have been reported as cannabis.

(b) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.

(c) See <u>Annex C</u> for a list of drugs included under Other Opiates

(d) See <u>Annex C</u> for a list of drugs included under *Other Drugs* 

(e) See <u>Annex C</u> for a list of drugs included under Other Stimulants

					Treatment	Year				
	2017-1	8	2018-1	9	2019-2	20	2020-	21	2021-2	22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Males	4,764	60.8	5,043	60.4	4,775	59.7	4,376	57.0	3,582	51.3
Females	3,067	39.2	3 <i>,</i> 305	39.6	3,225	40.3	3,301	43.0	3,405	48.7
Total	7,831	100	8,348	100	8,000	100	7,677	100	6,987	100
Age										
10-14	40	0.5	64	0.8	52	0.7	24	0.3	43	0.6
15-19	175	2.2	216	2.6	184	2.3	151	2.0	178	2.5
20-29	984	12.6	1,089	13.0	979	12.2	1,140	14.8	972	13.9
30-39	1,919	24.5	2,074	24.8	2,106	26.3	2,093	27.3	1,829	26.2
40-49	2,192	28.0	2,242	26.9	2,126	26.6	2,040	26.6	1,857	26.6
50-59	1,745	22.3	1,826	21.9	1,734	21.7	1,500	19.5	1,399	20.0
60+	776	9.9	829	9.9	810	10.1	715	9.3	706	10.1
All Ages (a)	7,831	100	8,348	100	8,000	100	7,677	100	6,987	100
Median age (b)	43	•	42	•	42	•	42	•	42	•

Table 8.5a: Profile of clients commencing treatment by main problematic substance: Alcohol

(a) Includes 7 treatments in 2018-19, 9 treatments in 2019-20, and 12 treatments in 2020-21 where the age is less than 10, and 2 treatments in 2017-18, 1 treatment in 2018-19, 2 treatments in 2020-21 and 3 treatments in 2021-22 where age is unknown.

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

					Treatmen	nt Year				
	2017-	18	2018-	19	2019-	20	2020-	21	2021-	22
Gender	Number	Per Cent	Number	Per	Number	Per	Number	Per	Number	Per
				Cent		Cent		Cent		Cent
Males	4,863	58.6	5,297	59.9	5,274	58.8	4,285	53.8	3,053	45.7
Females	3,434	41.4	3,547	40.1	3,695	41.2	3,677	46.2	3,629	54.3
Total	8,297	100	8,844	100	8,969	100	7,962	100	6,682	100
Age										
10-14	199	2.4	192	2.2	202	2.3	80	1.0	128	1.9
15-19	749	9.0	806	9.1	720	8.0	485	6.1	484	7.2
20-29	2,091	25.2	2,114	23.9	2,226	24.8	1,892	23.8	1,524	22.8
30-39	3,011	36.3	3,253	36.8	3,213	35.8	2,959	37.2	2,340	35.0
40-49	1,765	21.3	1,944	22.0	1,971	22.0	1,937	24.3	1,648	24.7
50-59	435	5.2	465	5.3	548	6.1	518	6.5	481	7.2
60+	46	0.6	70	0.8	86	1.0	72	0.9	73	1.1
All Ages (a)	8,297	100	8,844	100	8,969	100	7,962	100	6,682	100
Median age (b)	33	•	33	•	33	•	34	•	34	

#### Table 8.5b: Profile of clients commencing treatment by main problematic substance: Drugs

Source: WNDSM, Digital Health & Care Wales

(a) Includes 1 treatment in 2017-18, 1 treatment in 2019-20, 18 treatments in 2020-21, and 4 treatments in 2021-22 where the age is less than 10, and 2 treatments in 2019-20 and 1 treatment in 2020-21 where the age is unknown.

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

The drugs reported in Tables 8.5c-8.5h are based on the most prevalent drugs reported to the WNDSM.

#### Table 8.5c: Profile of clients commencing treatment by main problematic substance: Heroin

					Treatmer	nt Year					
	2017-	2017-18		2018-19		2019-20		2020-21		2021-22	
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	
Male	1,720	56.4	1,825	57.8	1,865	53.6	1,606	47.7	1,020	39.8	
Female	1,328	43.6	1,333	42.2	1,614	46.4	1,758	52.3	1,545	60.2	
Total	3,048	100	3,158	100	3,479	100	3,364	100	2,565	100	
Age											
10-14	0	0.0	0	0.0	2	0.1	0	0.0	0	0.0	
15-19	20	0.7	13	0.4	15	0.4	9	0.3	9	0.4	
20-29	552	18.1	510	16.1	516	14.8	447	13.3	348	13.6	
30-39	1,357	44.5	1,408	44.6	1,485	42.7	1,446	43.0	1,003	39.1	
40-49	891	29.2	973	30.8	1,124	32.3	1,124	33.4	918	35.8	
50-59	217	7.1	234	7.4	309	8.9	306	9.1	260	10.1	
60+	11	0.4	20	0.6	27	0.8	29	0.9	27	1.1	
All Ages (a)	3,048	100	3,158	100	3,479	100	3,364	100	2,565	100	
Median age (b)	37		37		38		38		39		

Source: WNDSM, Digital Health & Care Wales

(a) Includes 3 treatments in 2020-21 where the age is less than 10 and 1 treatments in 2019-20 where the age is unknown.

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

					Treatment	Year				
	2017-1	18	2018-	2018-19		2019-20		2020-21		22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Male	1,095	65.3	1,120	65.9	1,204	66.9	982	61.3	696	50.0
Female	583	34.7	579	34.1	596	33.1	621	38.7	696	50.0
Total	1,678	100	1,699	100	1,800	100	1,603	100	1,392	100
Age										
10-14	153	9.1	146	8.6	154	8.6	66	4.1	101	7.3
15-19	544	32.4	586	34.5	519	28.8	348	21.7	349	25.1
20-29	555	33.1	544	32.0	652	36.2	642	40.0	457	32.8
30-39	251	15.0	253	14.9	285	15.8	349	21.8	322	23.1
40-49	126	7.5	112	6.6	129	7.2	140	8.7	106	7.6
50-59	40	2.4	47	2.8	48	2.7	41	2.6	45	3.2
60+	8	0.5	11	0.6	13	0.7	6	0.4	8	0.6
All Ages (b)	1,678	100	1,699	100	1,800	100	1,603	100	1,392	100
Median age (c)	24		24		24		26		26	

Table 8.5d: Profile of clients commencing treatment by main problematic substance: Cannabis (a)

(a) There may be instances where cannabinoids may have been reported as cannabis.

(b) Includes 1 treatment in 2017-18, 11 treatments in 2020-21 and 4 treatments in 2021-22 where the age is less than 10.

(c) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

					Treatmen	t Year				
	2017-1	18	2018-	·19	2019-	20	2020-	21	2021-	22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cen
Male	582	74.2	742	73.8	830	74.6	584	66.9	430	50.8
Female	202	25.8	263	26.2	282	25.4	289	33.1	417	49.2
Total	784	100	1,005	100	1,112	100	873	100	847	100
Age										
10-14	2	0.3	2	0.2	5	0.4	1	0.1	1	0.1
15-19	66	8.4	65	6.5	101	9.1	38	4.4	51	6.0
20-29	374	47.7	466	46.4	504	45.3	350	40.1	321	37.9
30-39	256	32.7	362	36.0	372	33.5	335	38.4	333	39.3
40-49	75	9.6	97	9.7	112	10.1	125	14.3	121	14.3
50-59	10	1.3	12	1.2	16	1.4	23	2.6	17	2.0
60+	1	0.1	1	0.1	2	0.2	0	0.0	3	0.4
All Ages (a)	784	100	1,005	100	1,112	100	873	100	847	100
Median age (b)	29	•	29		29		31		31	

#### Table 8.5e: Profile of clients commencing treatment by main problematic substance: Cocaine

(a) Includes 1 treatment in 2020-21 where the age is less than 10.

(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

					Treatment	t Year				
	2017-	18	2018-	·19	2019-	·20	2020-	21	2021	-22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Male	110	50.2	165	54.5	152	53.3	117	42.5	112	36.0
Female	109	49.8	138	45.5	133	46.7	158	57.5	199	64.0
Total	219	100	303	100	285	100	275	100	311	100
Age										
10-14	0	0.0	0	0.0	2	0.7	0	0.0	0	0.0
15-19	3	1.4	7	2.3	3	1.1	4	1.5	6	1.9
20-29	70	32.0	74	24.4	80	28.1	66	24.0	60	19.3
30-39	90	41.1	139	45.9	127	44.6	113	41.1	137	44.1
40-49	41	18.7	66	21.8	56	19.6	74	26.9	79	25.4
50-59	12	5.5	15	5.0	17	6.0	15	5.5	27	8.7
60+	3	1.4	2	0.7	0	0.0	3	1.1	2	0.6
All Ages	219	100	303	100	285	100	275	100	311	100
Median age (a	) 34		34		34		35		36	

Table 8.5f: Profile of clients commencing treatment by main problematic substance: Crack

(a) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

. Data item not applicable

#### Table 8.5g: Profile of clients commencing treatment by main problematic substance: Benzodiazepines

					Treatmen	l i cai				
	2017-1	18	2018-	·19	2019-	20	2020-	21	2021-	22
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Male	109	66.5	107	69.0	117	69.2	157	57.7	137	54.8
Female	55	33.5	48	31.0	52	30.8	115	42.3	113	45.2
Total	164	100	155	100	169	100	272	100	250	100
Age										
10-14	6	3.7	2	1.3	0	0.0	0	0.0	1	0.4
15-19	22	13.4	16	10.3	13	7.7	28	10.3	21	8.4
20-29	48	29.3	49	31.6	58	34.3	86	31.6	83	33.2
30-39	48	29.3	47	30.3	51	30.2	92	33.8	66	26.4
40-49	27	16.5	28	18.1	27	16.0	50	18.4	59	23.6
50-59	12	7.3	10	6.5	14	8.3	12	4.4	18	7.2
60+	1	0.6	3	1.9	6	3.6	4	1.5	2	0.8
All Ages	164	100	155	100	169	100	272	100	250	100
Median age (a)	31		32		33		32		33	

Source: WNDSM, Digital Health & Care Wales

(a) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it.

					Treatment	t Year				
	2017-2	18	2018-	19	2019-20		2020-21		2021-22	
Gender	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Male	415	48.2	439	48.6	314	46.2	169	51.5	140	56.2
Female	446	51.8	464	51.4	366	53.8	159	48.5	109	43.8
Total	861	100	903	100	680	100	328	100	249	100
Age										
10-14	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15-19	2	0.2	1	0.1	0	0.0	0	0.0	0	0.0
20-29	147	17.1	118	13.1	96	14.1	33	10.1	17	6.8
30-39	387	44.9	445	49.3	339	49.9	138	42.1	91	36.5
40-49	264	30.7	278	30.8	185	27.2	123	37.5	105	42.2
50-59	55	6.4	53	5.9	54	7.9	29	8.8	31	12.4
60+	6	0.7	8	0.9	6	0.9	5	1.5	5	2.0
All Ages	861	100	903	100	680	100	328	100	249	100
Median age (b)	37	•	37	•	37	•	39	•	41 Health & Care	•

Table 8.5h: Profile of clients commencing treatment by main problematic substance: Methadone (a)

(a) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone.(b) The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median

point as there are above it.

. Data item not applicable

Table 8.6 reports on individual treatment modalities which started in 2021-22, and these figures are higher than those shown in previous tables in <u>Section 7</u>, with the previous figures being based on the first treatment modality and not subsequent treatment modalities, which may also have started in 2021-22. The treatment pathway usually involves the client receiving a combination of both structured and less-structured interventions. In fact, a third of clients, 33.3% started only one treatment modality within the year, with 20.1% starting two treatment modalities.

	N	lain Probl	ematic Substance	e
Treatment Modality (a)	Alcohol	Drugs	Not Reported	Tota
Structured Interventions				
Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions	12	634	10	656
Inpatient Treatments	406	160	7	573
Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions	4	368	4	376
Substitute Opioid Prescribing (Injectable Buprenorphine)	6	302	8	316
Structured Day Programmes	174	177	42	393
Community Detoxification	61	80	0	14:
Residential Rehabilitation	29	13	4	46
Less-structured Interventions				
Brief Interventions	5,651	5,037	611	11,299
Psychosocial Interventions	3,606	3,950	362	7,918
Harm Reduction	4,620	4,062	204	8,886
Health and Recovery Support Interventions	928	794	4,896	6,618
Total	15,497	15,577	6,148	37,222
	Source: V	VNDSM, Dig	gital Health & Care W	ales

(a) A Client may be receiving more than one treatment. See <u>Annex C</u> for more information on treatment modalities.

#### **9** Waiting Times

Table 9.1a shows the times from referral to treatment for clients by treatment year. The figures only relate to those who have already started treatment, and thus exclude those still waiting to commence treatment. In 2021-22, 90.6% of treatments started within the target 20 working days of referral. As the database in dynamic, this figure is not comparable with figures published in earlier reports. See paragraph 3.5 of the <u>data quality</u> section for more information.

					Treatmer	nt Year				
	2017-	2017-18		2018-19		2019-20		2020-21		22
Waiting times (b)	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Within 20 working days	15,105	92.6	15,822	91.5	15,627	91.5	14,590	92.6	13,084	90.6
4–12 weeks	1,066	6.5	1,254	7.3	1,190	7.0	847	5.4	1,166	8.1
3-6 months	125	0.8	183	1.1	200	1.2	184	1.2	145	1.0
6-9 months	8	0.0	23	0.1	33	0.2	60	0.4	17	0.1
9-12 months	2	0.0	6	0.0	9	0.1	28	0.2	14	0.1
12-18 months	0	0.0	6	0.0	17	0.1	24	0.2	5	0.0
18-24 months	0	0.0	0	0.0	3	0.0	10	0.1	10	0.1
> 24 months	0	0.0	0	0.0	3	0.0	12	0.1	7	0.0
Total (c)	16,306	100	17,294	100	17,082	100	15,755	100	14,448	100

(a) Includes blank and unknown substances

(b) Bank holidays are included within the time frames

(c) Excludes invalid waiting times

Source: WNDSM, Digital Health & Care Wales

# Table 9.1b: Percentage within 20 working days (a) for time between referral and treatment: main problematic substance (b)

					Treatment	Year				
	2017	2017-18		2018-19		2019-20		2020-21		1-22
Main problematic substance	Number within 20 working days	Per Cent within 20 working days	Number within 20 working days	Per Cent within 20 working days	Number within 20 working days	Per Cent within 20 working days	Number within 20 working days	Per Cent within 20 working days	Number within 20 working days	Per Cent within 20 working days
Alcohol	7,174	91.8	7,552	90.5	7,241	90.6	7,094	92.6	6,268	89.8
Drugs	7,757	93.6	8,182	92.6	8,276	92.3	7,380	92.8	6,166	92.3
Heroin	2,864	94.2	2,917	92.4	3,184	91.5	3,084	91.8	2,429	94.7
Cannabis (c)	1,505	89.7	1,514	89.2	1,610	89.5	1,471	91.8	1,231	88.6
Cocaine	737	94.1	950	94.6	1,051	94.6	832	95.3	791	93.4
Amphetamines	431	92.9	419	93.7	331	93.0	270	92.5	215	87.8
Methadone (d)	843	98.0	870	96.3	653	96.2	310	94.5	228	91.9
Benzodiazepines	148	90.2	137	88.4	159	94.1	262	96.3	229	91.6
All other drugs (e)	1,229	94.9	1,375	93.2	1,288	93.9	1,151	93.6	1,043	92.0
Not Reported	174	83.3	88	76.5	110	84.0	116	84.7	650	82.6

Source: WNDSM, Digital Health & Care Wales

(a) Bank holidays are included within the time frames.

(b) Includes records where the main problematic substance is not reported

(c) There may be instances where cannabinoids may have been reported as cannabis.

(d) It is not possible to be clear if methadone recorded as main problematic substance refers to prescribed or illicit methadone

(e) See <u>Annex C</u> for list of drugs included under Other Drugs

### **10 Treatment Outcome Profile (TOPs)**

#### Guide to TOPs and the analysis used in Tables 10.1a-10.1i

Treatment Outcome Profile (TOPs) were introduced for clients referred from the 1<sup>st</sup> April 2009, and therefore the TOPs analysis tables relate to referrals on or after this date only. These analyses only refer to those clients who have started their treatment and therefore might not be representative of all clients.

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.

An individual is assessed against these four domains at the beginning of treatment (joint assessments by the client and the key worker) as part of routine care planning, every 3 months as part of the review to measure progress and a final exit TOP in undertaken on completion of treatment.

Treatment service providers indicate on the TOP form as to whether that TOP is a starting, review or exit TOP and comparisons are made between the various measure recorded on the start TOP and exit TOP. However, within the WNDSM, there are instances of referral which have had more than one associated start TOP or more than one exit TOP. For the purposes of analysis, where a referral has had more than one recorded starting TOP, the one with the earliest interview data has been selected for the purposes of comparison, and where a referral has had more than one exit TOP recorded, the one with the latest interview date has been selected.

With regards to the changes in frequency of substances (shown in tables 10.1a-10.1f), these are based on the number of days out of the previous 28 that a client had used the substance in question. For example, in the case of tables 10.1a and 10.1b, it is the frequency of alcohol consumption that recorded, split by those who main problematic substance group is alcohol (Table 10.1a), and for those whose main problematic substance group is alcohol (Table 10.1a), and for those whose main problematic substance group is drugs (Table 10.1b). For the former group, clients consumed alcohol for an average of 20.5 days out of the previous 28 at the time of the start TOP, and an average of 10.6 days out of the previous 28 days by the time of the exit TOP.

Note that for a particular referral, a comparison is only made between starting and exit TOP where the client's starting TOP frequency is greater than zero **and** their exit TOP is greater or equal to zero.

The "Percentage Change" shown (-48.5% in Table 10.1a) represents the percentage change in the average frequency of days of use between starting and exit TOPs. The "Percentage Not Using" figure (37.8% in Table 10.1a) is the percentage of referrals where the frequency of use was zero at the time of the exit TOP, having been more than zero at the time of the starting TOP.

For the measurement of changes in physical health, psychological health and quality of life (Table 10.1g-10.1i), a system of scoring is used based on a 0 to 20 scale, 0 being worst and 20 best.

For both frequency of use and score measures, referrals in which either the start or the exit TOP values are blank have been excluded from these analyses.

#### Results

Table 10.1a shows the average change in frequency in the use of alcohol between start and exit TOPs, for those with a main problematic substance of alcohol. For those clients with alcohol as their main problematic substance, the average number of days of alcohol use fell from 20.5 to 10.6 (-48.5%), and 37.8% had not used alcohol at all in the 28 days prior to the exit TOP.

Table 10.1a: Changes in Frequency of use of Alcohol (a) between start TOP and exit TOP: April 2009 to
March 2022

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Alcohol						
Gender	Male	7,977	20.8	10.9	-47.6	37.2
	Female	4,450	20.0	10.0	-50.0	38.9
Age	16-19	326	12.3	6.9	-43.8	31.0
	20-29	1,735	17.0	10.7	-36.8	33.8
	30-49	6,894	21.1	10.8	-48.9	37.9
	50+	3,472	22.1	10.5	-52.6	40.3
	Total	12,427	20.5	10.6	-48.5	37.8

Source: WNDSM, Digital Health & Care Wales

(a) For those clients reporting alcohol use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No alcohol use recorded in the 28 days before the exit TOP.

Table 10.1b shows the average change in frequency in the use of alcohol between start and exit TOPs, for those with a main problematic substance of drugs. For those with drugs as their main problematic substance, the frequency of alcohol used fell from 15.8 to 7.9 (-50.0%), with 45.4% not having used alcohol at all in the 28 days prior to the exit TOP.

Table 10.1b: Changes in Frequency of use of Alcohol (a) between start TOP and exit TOP: April 2009 to
March 2022

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Drugs						
Gender	Male	2,882	15.4	7.6	-50.6	46.7
	Female	1,276	16.4	8.7	-47.0	42.4
Age	16-19	342	8.0	6.8	-15.0	31.3
	20-29	972	12.9	7.5	-41.9	43.3
	30-49	2,211	16.5	8.2	-50.3	45.8
	50+	633	21.8	8.2	-62.4	54.8
	Total	4,158	15.8	7.9	-50.0	45.4

Source: WNDSM, Digital Health & Care Wales

(a) For those clients reporting alcohol use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No alcohol use recorded in the 28 days before the exit TOP.

Table 10.1c shows the average change in frequency in the use of Opiates between start and exit TOPs, for those with a main problematic substance of Heroin. The frequency of Opiate use fell from 22.3 to 5.8 (-74.0%), with 70.1% not having used Opiates at all in the 28 days prior to the exit TOP.

Table 10.1c: Changes in Frequency of use of Opiates (a) between start TOP and exit TOP: April 2009 to	
March 2022	

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Heroin						
Gender	Male	2,077	22.2	5.7	-74.3	70.3
	Female	903	22.5	5.9	-73.8	69.5
Age	16-19	38	21.1	3.9	-81.5	81.6
	20-29	673	23.5	6.5	-72.3	67.0
	30-49	2,102	21.8	5.7	-73.9	70.0
	50+	167	23.3	4.3	-81.5	80.2
	Total	2,980	22.3	5.8	-74.0	70.1
				Source: WNDS	SM, Digital Health	& Care Wales

(a) For those clients reporting opiate use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No opiate use recorded in the 28 days before the exit TOP.

Table 10.1d shows the average change in frequency in the use of Cannabis between start and exit TOPs, for those with a main problematic substance of Cannabis. The frequency of Cannabis use fell from 22.4 to 10.5 (-53.1%), with 46.5% not having used Cannabis at all in the 28 days prior to the exit TOP.

# Table 10.1d: Changes in Frequency of use of Cannabis (a) between start TOP and exit TOP: April 2009 to March 2022

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Cannabis (g)						
Gender	Male	1,113	21.8	10.2	-53.2	46.3
	Female	437	24.0	11.3	-52.9	46.9
Age	16-19	447	21.9	11.0	-49.8	38.5
	20-29	620	23.1	10.6	-54.1	49.2
	30-49	448	21.8	10.1	-53.7	48.9
	50+	35	24.7	8.2	-66.8	68.6
	Total	1,550	22.4	10.5	-53.1	46.5

Source: WNDSM, Digital Health & Care Wales

(a) For those clients reporting cannabis use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No cannabis use recorded in the 28 days before the exit TOP.

(g) There may be instances where cannabinoids may have been reported as cannabis.

Table 10.1e shows the average change in frequency in the use of Amphetamines between start and exit TOPs, for those with a main problematic substance of Amphetamines. The average number of days of Amphetamines use fell from 17.8 to 5.6 (-68.5%), with 64.4% not having used Amphetamines at all in the 28 days prior to the exit TOP.

Table 10.1e: Changes in Frequency of use of Amphetamines (a) between start TOP and exit TOP: April
2009 to March 2022

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Amphetamines						
Gender	Male	619	17.1	6.3	-63.2	58.8
	Female	359	18.8	4.5	-76.1	74.1
Age	16-19	42	19.9	1.5	-92.5	88.1
	20-29	278	17.0	5.5	-67.6	65.8
	30-49	618	17.8	6.0	-66.3	61.5
	50+	40	20.5	5.7	-72.2	75.0
	Total	978	17.8	5.6	-68.5	64.4
				Source: WNDS	SM, Digital Health	& Care Wales

(a) For those clients reporting amphetamine use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No amphetamine use recorded in the 28 days before the exit TOP.

Table 10.1f shows the average change in frequency in the use of Cocaine between start and exit TOPs, for those with a main problematic substance of Cocaine. The average number of days of Cocaine use fell from 10.4 to 1.6 (-84.6%), with 82.7% not having used Cocaine at all in the 28 days prior to the exit TOP.

# Table 10.1f: Changes in Frequency of use of Cocaine (a) between start TOP and exit TOP: April 2009 to March 2022

		Number of comparisons	Frequency at starting TOP (days)	Frequency at exit TOP (days)	Percentage Change	Percentage not using
Main Problematic Substance	Substance	(b)	(c)	(d)	(e)	(f)
Cocaine						
Gender	Male	419	10.0	1.8	-82.0	82.3
	Female	55	12.8	0.5	-96.1	85.5
Age	16-19	40	16.6	0.5	-97.0	90.0
	20-29	265	9.7	1.1	-88.7	84.5
	30-49	158	10.1	2.8	-72.3	77.2
	50+	11	8.6	0.8	-90.7	90.9
	Total	474	10.4	1.6	-84.6	82.7
				Source: WNDS	SM, Digital Health	& Care Wales

(a) For those clients reporting cocaine use in the 28 days before the start TOP

(b) Excludes invalid or blank gender

(c) The average number of days a substance is used at start TOP. If a referral has multiple start TOPs then the earliest start TOP is used.

(d) The average number of days a substance is used at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(e) The relative change between the start TOP and the exit TOP.

(f) No cocaine use recorded in the 28 days before the exit TOP.

Table 10.1g shows the average change in Physical Health between start and exit TOP by main problematic substance category, gender, age and treatment modality. Overall, the average Physical Health score increased from 11.2 to 12.8 (14.3%). The treatment modality for the vast majority of clients was "Psychosocial Interventions", although clients will usually receive more than one treatment intervention during the treatment pathway.

	Number of comparisons (a)	Score at start TOP (b)	Score at exit TOP (c)	Percentage Change (d)
Main Problematic Substance				
Alcohol	15,866	11.0	12.7	15.5
Drugs	8,230	11.7	12.8	9.4
Gender				
Male	15,662	11.3	12.8	13.3
Female	8,434	11.1	12.8	15.3
Age				
16-19	1,089	13.4	14.1	5.2
20-29	4,840	12.4	13.2	6.5
30-49	13,230	10.9	12.6	15.6
50+	4,937	10.4	12.6	21.2
Treatment Modalities				
Inpatient Treatments	631	9.4	12.2	29.8
Community Detoxification	999	10.1	13.5	33.7
Residential Rehabilitation	76	9.5	13.5	42.1
Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions	820	11.8	13.0	10.2
Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions	360	11.5	12.9	12.2
Substitute Opioid Prescribing (Injectable Buprenorphine) (e)	3	15.0	10.0	-33.3
Psychosocial Interventions	113	10.7	12.2	14.0
Structured Day Programme	11,956	11.4	13.1	14.9
Brief Interventions	3,689	11.2	12.3	9.8
Harm Reduction	462	11.2	13.5	20.5
Health & Recovery Support Interventions	3,511	11.3	12.3	8.8
Blank	1,476	11.2	12.6	12.5
Total				
Total	24,096	11.2	12.8	14.3

Table 10.1g: Changes in Physical Health between start TOP and exit TOP: April 2009 to March 2022

Source: WNDSM, Digital Health & Care Wales

(a) Excludes invalid or blank gender.

(b) The average score at start TOP. If a referral has multiple start TOPs than the earliest start TOP is used.

(c) The average score at exit TOP. If a referral has multiple exit TOPs then the latest exit TOP is used.

(d) The relative change between the start TOP and the exit TOP.

(e) Substitute Opioid Prescribing (Injectable Buprenorphine) was only introduced in November 2020.

Table 10.1h shows the average change in Psychological Health between start and exit TOP by main problematic substance category, gender, age and treatment modality. Overall, the average Psychological Health score increased from 9.7 to 12.1 (24.3%). In terms of comparison between the treatment modalities, the patterns of improvement were similar to those reported for Physical Health above.

# Table 10.1h: Changes in Psychological Health between start TOP and exit TOP: April 2009 to March2022

	Number of comparisons	Score at start TOP	Score at exit TOP	Percentage Change
	(a)	(b)	(c)	(d)
Main Problematic Substance				
Alcohol	15,702	9.6	12.1	26.0
Drugs	8,169	9.9	12.1	22.2
Gender				
Male	15,548	10.0	12.1	21.0
Female	8,323	9.2	12.1	31.5
Age				
16-19	1,087	11.3	13.0	15.0
20-29	4,802	10.0	12.2	22.0
30-49	13,097	9.5	11.9	25.3
50+	4,885	9.8	12.2	24.
Treatment Modalities				
Inpatient Treatments	632	8.9	12.2	37.1
Community Detoxification	980	9.2	13.4	45.7
Residential Rehabilitation	76	8.3	13.1	57.8
Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions	814	10.2	12.1	18.6
Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions	358	10.2	12.4	21.0
Substitute Opioid Prescribing (Injectable Buprenorphine) (e)	3	10.0	10.0	0.0
Psychosocial Interventions	11,844	9.9	12.4	25.3
Structured Day Programme	102	9.8	12.3	25.
Brief Interventions	3,650	9.6	11.4	18.8
Health & Recovery Support Interventions	457	9.2	12.9	40.2
Harm Reduction	3,477	9.6	11.3	17.
Blank	1,478	9.7	11.9	22.7
Total				
Total	23,871	9.7	12.1	24.7

(a) Excludes invalid or blank gender.

(b) The average score at start TOP. If a referral has multiple start TOP than the earliest start TOP is used.

(c) The average score at exit TOP. If a referral has multiple exit TOP then the latest exit TOP is used.

(d) The relative change between the start TOP and the exit TOP.

(e) Substitute Opioid Prescribing (Injectable Buprenorphine) was only introduced in November 2020.

Table 10.1i shows the average change in Quality of Life between start and exit TOP. Overall, the average Quality of Life score increased from 10.3 to 12.6 (22.3%). In terms of comparison between the treatment modalities, the patterns of improvement were similar to those reported for Physical Health (and Psychological Health) above.

#### Table 10.1i: Changes in Quality of Life between start TOP and exit TOP: April 2009 to March 2022

	Number of	Score at	Score at	Percentage
	comparisons	start TOP	exit TOP	Change
	(a)	(b)	(c)	(d)
Main Problematic Substance				
Alcohol	15,654	10.2	12.6	23.5
Drugs	8,156	10.5	12.5	19.0
Gender				
Male	15,471	10.5	12.5	19.0
Female	8,339	10.1	12.7	25.7
Age				
16-19	1,081	12.3	13.5	9.8
20-29	4,800	10.8	12.7	17.6
30-49	13,087	10.1	12.4	22.8
50+	4,842	10.3	12.7	23.3
Treatment Modalities				
Inpatient Treatments	622	9.2	12.4	34.8
Community Detoxification	970	9.8	13.9	41.8
Residential Rehabilitation	74	8.6	13.3	54.7
Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions	817	10.9	12.6	15.6
Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions	348	10.9	12.6	15.6
Substitute Opioid Prescribing (Injectable Buprenorphine) (e)	3	10.0	3.0	-70.0
Structured Day Programme	105	9.8	11.6	18.4
Psychosocial Interventions	11,832	10.5	13.0	23.8
Brief Interventions	3,650	10.3	11.8	14.6
Health & Recovery Support Interventions	452	10.1	11.8	16.8
Harm Reduction	3,465	10.1	11.8	16.8
Blank	1,472	10.2	12.4	21.6
Total				
Total	23,810	10.3	12.6	22.3
	Sour	ce: WNDSM, Dig	gital Health & C	are Wales

(a) Excludes invalid or blank gender.

(b) The average score at start TOP. If a referral has multiple start TOP than the earliest start TOP is used.

(c) The average score at exit TOP. If a referral has multiple exit TOP then the latest exit TOP is used.

(d) The relative change between the start TOP and the exit TOP.

(e) Substitute Opioid Prescribing (Injectable Buprenorphine) was only introduced in November 2020.

#### 11 Case Closures

Table 11.1a shows the number of case closures by the year of closure and also by closure reason. Although excluded from the referrals analysis in <u>Section 6</u>, the cases closed with DNA prior to assessment are shown in this table. Of the 26,298 cases closed in 2021-22, 55.6% were closed for planned reasons; this has been increasing steadily from 41.7% in 2017-18. The DNA rate has been declining from 21.3% in 2017-18 to 14.3% in 2021-22.

					Discharg	e Year				
	2017-	18	2018-	19	2019-	20	2020-	21	2021-	22
Closure Reason	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
DNA										
DNA before assessment	2,409	12.4	2,293	9.0	2,172	8.4	1,496	6.3	2,097	8.0
DNA before treatment	142	0.7	261	1.0	279	1.1	187	0.8	293	1.1
DNA during treatment	1,568	8.1	1,941	7.6	1,761	6.8	1,539	6.4	1,367	5.2
Total	4,119	21.3	4,495	17.6	4,212	16.2	3,222	13.5	3,757	14.3
Inappropriate Referral										
Inappropriate Referral (a)	3 <i>,</i> 905	20.2	3,705	14.5	3,716	14.3	3,434	14.3	3,455	13.1
Total	3,905	20.2	3,705	14.5	3,716	14.3	3,434	14.3	3,455	13.1
No information supplied										
No information supplied	22	0.1	38	0.1	30	0.1	41	0.2	35	0.1
Total	22	0.1	38	0.1	30	0.1	41	0.2	35	0.1
Planned										
Referred to another service	2,025	10.5	2,564	10.1	3,246	12.5	3,750	15.7	3,527	13.4
Moved to GP Led Prescribing	17	0.1	29	0.1	69	0.3	88	0.4	78	0.3
Treatment completed	3,892	20.1	6,818	26.8	6,963	26.8	5,747	24.0	6,935	26.4
Treatment completed – substance free	2,148	11.1	3,298	12.9	3,201	12.3	3,587	15.0	4,092	15.6
Total	8,082	41.7	12,709	49.9	13,479	52.0	13,172	55.0	14,632	55.6
Unplanned	-				-		-		-	
Client unaware of referral	23	0.1	16	0.1	20	0.1	27	0.1	25	0.1
Client declined treatment (b)	1,625	8.4	2,267	8.9	2,258	8.7	1,799	7.5	2,319	8.8
Deceased	127	0.7	179	0.7	229	0.9	256	1.1	243	0.9
Moved	288	1.5	385	1.5	383	1.5	374	1.6	372	1.4
Prison	936	4.8	1,380	5.4	1,387	5.3	1,375	5.7	1,318	5.0
Treatment withdrawn (c)	242	1.2	302	1.2	220	0.8	236	1.0	142	0.5
Total	3,241	16.7	4,529	17.8	4,497	17.3	4,067	17.0	4,419	16.8
Total	19,369	100	25,476	100	25,934	100	23,936	100	26,298	100

#### Table 11.1a: Reason for closure by main problematic substance: All Substances

(a) Client has been contacted following a third party referral and states that they are not ready to engage in treatment or when assessed there is no substance misuse treatment need for the client.

(b) Client declined treatment includes clients that declined the assessment.

(c) The treatment service provider has withdrawn treatment provision from the client usually as a result of a breach of contract.

Table 11.1b and 11.1c show closures for cases with a main substance of alcohol and drugs respectively.

For alcohol (Table 11.1b), 81.0% of closures were planned and the overall DNA rate was 8.2%.

For drugs (Table 11.1c), planned closures have been increasing each year, accounting for 65.9% of all closures in 2021-22, compared with 55.6% in 207-18, whilst DNAs have been gradually reducing from 16.9% in 2017-18 to 10.7% in 2021-22.

					Discharge	e Year				
	2017-	18	2018-	19	2019-2	20	2020-2	21	2021-	22
Closure Reason	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
DNA										
DNA before assessment	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DNA before treatment	76	1.3	146	1.6	153	1.7	101	1.1	150	1.7
DNA during treatment	660	11.3	848	9.5	781	8.7	719	8.1	580	6.5
Total	736	12.6	994	11.2	934	10.4	820	9.3	730	8.2
Inappropriate Referral										
Inappropriate Referral (a)	327	5.6	253	2.8	267	3.0	270	3.0	169	1.9
Total	327	5.6	253	2.8	267	3.0	270	3.0	169	1.9
No information supplied										
No information supplied	3	0.1	8	0.1	12	0.1	11	0.1	10	0.1
Total	3	0.1	8	0.1	12	0.1	11	0.1	10	0.1
Planned										
Referred to another service	879	15.1	1,139	12.8	1,384	15.4	1,694	19.1	1,314	14.8
Moved to GP Led Prescribing	6	0.1	5	0.1	18	0.2	8	0.1	12	0.1
Treatment completed	2,039	34.9	3,708	41.6	3,663	40.9	3,143	35.5	3,817	43.0
Treatment completed – substance free	1,276	21.9	1,898	21.3	1,814	20.2	2,018	22.8	2,054	23.1
Total	4,200	71.9	6,750	75.8	6,879	76.8	6,863	77.5	7,197	81.0
Unplanned										
Client unaware of referral	3	0.1	1	0.0	2	0.0	1	0.0	1	0.0
Client declined treatment (b)	265	4.5	436	4.9	462	5.2	396	4.5	366	4.1
Deceased	58	1.0	100	1.1	92	1.0	120	1.4	98	1.1
Moved	60	1.0	81	0.9	77	0.9	76	0.9	78	0.9
Prison	102	1.7	168	1.9	160	1.8	198	2.2	199	2.2
Treatment withdrawn (c)	85	1.5	114	1.3	76	0.8	106	1.2	33	0.4
Total	573	9.8	900	10.1	869	9.7	897	10.1	775	8.7
Total	5,839	100	8,905	100	8,961	100	8,861	100	8,881	100

Source: WNDSM, Digital Health & Care Wales

(a) Client has been contacted following a third party referral and states that they are not ready to engage in treatment or when assessed there is no substance misuse treatment need for the client.

(b) Client declined treatment includes clients that declined the assessment.

(c) The treatment service provider has withdrawn treatment provision from the client usually as a result of a breach of contract.

### Table 11.1c: Reason for closure by main problematic substance: Drugs

					Discharge	Year				
-	2017-	18	2018	-19	2019-	20	2020-	-21	2021-	22
Closure Reason	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
DNA										
DNA before assessment	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DNA before treatment	62	1.1	108	1.3	121	1.4	80	1.0	114	1.4
DNA during treatment	870	15.7	1,082	12.9	963	10.8	792	9.5	736	9.3
Total	932	16.9	1,190	14.2	1,084	12.1	872	10.4	850	10.7
Inappropriate Referral										
Inappropriate Referral (a)	318	5.8	274	3.3	291	3.3	257	3.1	151	1.9
Total	318	5.8	274	3.3	291	3.3	257	3.1	151	1.9
No information supplied										
No information supplied	7	0.1	12	0.1	9	0.1	13	0.2	15	0.2
Total	7	0.1	12	0.1	9	0.1	13	0.2	15	0.2
Planned										
Referred to another service	722	13.1	980	11.7	1,259	14.1	1,438	17.2	1,121	14.1
Moved to GP Led Prescribing	8	0.1	18	0.2	45	0.5	72	0.9	49	0.6
Treatment completed	1,538	27.8	2,817	33.6	3,036	34.0	2,373	28.4	2,589	32.6
Treatment completed – substance free	802	14.5	1,292	15.4	1,310	14.7	1,474	17.6	1,486	18.7
Total	3,070	55.6	5,107	60.9	5,650	63.3	5,357	64.1	5,245	65.9
Unplanned										
Client unaware of referral	1	0.0	0	0.0	1	0.0	3	0.0	1	0.0
Client declined treatment (b)	167	3.0	271	3.2	314	3.5	329	3.9	305	3.8
Deceased	31	0.6	43	0.5	94	1.1	95	1.1	96	1.2
Moved	142	2.6	200	2.4	220	2.5	235	2.8	209	2.6
Prison	733	13.3	1,130	13.5	1,144	12.8	1,099	13.1	1,023	12.9
Treatment withdrawn (c)	124	2.2	155	1.8	122	1.4	100	1.2	58	0.7
Total	1,198	21.7	1,799	21.5	1,895	21.2	1,861	22.3	1,692	21.3
Total	5,525	100	8,382	100	8,929	100	8,360	100	7,953	100

Source: WNDSM, Digital Health & Care Wales

(a) Client has been contacted following a third party referral and states that they are not ready to engage in treatment or when assessed there is no substance misuse treatment need for the client.

(b) Client declined treatment includes clients that declined the assessment.

(c) The treatment service provider has withdrawn treatment provision from the client usually as a result of a breach of contract.

#### **12 Performance Summary**

Tables 12.1 to 12.5 report on the five key performance indicators (KPI) which report performance across the Area Planning Boards (APBs), based on the client's area of residence. See <u>Annex C</u> for background information on the KPIs. Due to the dynamic nature of the database, the figures reported in this section will change over time, as further information may be submitted by treatment service providers.

Table 12.1 reports on clients that Did Not Attend (DNA) or do not respond to follow up contact post the assessment stage.

					Discharg	e Year				
	2017-	18	2018-	19	2019-	20	2020-	21	2021-	22
DNA Post Assessment		Per		Per		Per		Per		Per
	Number	Cent	Number	Cent	Number	Cent	Number	Cent	Number	Cent
		(a)		(a)		(a)		(a)		(a)
North Wales	199	8.5	215	6.8	137	4.5	135	4.9	89	4.2
Powys	50	18.5	89	15.6	88	17	64	13.6	98	17.4
Hywel Dda	95	6.2	117	5.2	159	6.2	119	5.5	136	5.8
Western Bay (b)	585	46.7	611	30.1	405	20.5	301	12.6	276	11.2
Cardiff & Vale	209	11.2	316	11.8	309	10.9	235	9.1	264	10.1
Cwm Taf Morgannwg (c)	156	11.1	231	10.9	311	12.8	363	13.7	237	7.8
Gwent	258	13.9	460	14.4	456	13.8	387	12.8	409	12.6
Outside Wales	145	17.4	144	12.2	144	12.3	111	9.3	140	11.1
Unknown	13	14.9	19	15.8	31	27.7	11	16.4	11	17.7
Total	1,710	15.0	2,202	12.7	2,040	11.4	1,726	10.0	1,660	9.4
						Source:	WNDSM, Dig	ital Healtl	n & Care Wal	es

#### Table 12.1: KPI 1 - DNA Post Assessment: by APB

(a) Percentage of all closures with an assessment date

(b) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 12.2 reports on KPI 2 which measures the waiting times for the service between referral and treatment. The target is for treatment service providers to achieve a waiting time of less than 20 working days between referral and treatment.

					Treatme	ent Yea	r			
	2017-	18	2018-	19	2019-	20	2020-	21	2021-	22
< 20 working days (a)		Per		Per		Per		Per		Per
	Number	Cent	Number	Cent	Number	Cent	Number	Cent	Number	Cent
		(b)		(b)		(b)		(b)		(b)
North Wales	3,091	90.8	3,172	92.1	3,104	95.7	2,600	96.7	1,747	91.6
Powys	508	97.7	593	89.8	523	88.0	469	89.5	544	88.7
Hywel Dda	1,904	92.7	2,249	93.6	2,259	91.6	1,964	93.8	2,069	91.9
Western Bay (c)	2,234	95.8	2,327	93.5	1,901	87.2	1,775	85.4	1,250	84.5
Cardiff & Vale	989	80.5	887	75.6	966	77.0	1,013	84.6	793	80.3
Cwm Taf Morgannwg (d)	2,138	94.1	2,214	89.9	2,405	91.7	2,438	90.6	2,426	89.6
Gwent	2,977	93.2	3,076	93.2	3,232	93.9	2,970	95.7	3,038	93.1
Outside Wales	1,170	98.7	1,220	98.9	1,198	97.9	1,313	99.0	1,145	99.0
Unknown	94	81.0	84	66.7	39	69.6	48	92.3	72	87.8
Total	15,105	92.6	15,822	91.5	15,627	91.5	14,590	92.6	13,084	90.6
						Source:	WNDSM, Dig	ital Healt	h & Care Wale	S

#### Table 12.2: KPI 2 – Referral to Treatment Waiting Times: by APB

(a) Bank holidays are included in the waiting times.

(b) Percentage of all clients treated.

(c) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 12.3 reports on KPI 3 which measures whether the substance misuse is reduced, abstinent or unchanged for any of the problematic substances listed on the TOP form. The substance misuse is reduced or unchanged if the number of days a substance has been used within the 28 days prior to the start TOP is higher than or the same as the equivalent number of days a substance has been used within the 28 days prior to the most recent review or exit TOP, for each substance reported on the TOP form. The substance misuse is categorised as abstinent if the number of days a substance has been used within the 28 days prior to the start TOP and the number of days a substance has been used within the 28 days prior to the start TOP and the number of days a substance has been used within the 28 days prior to the most recent review or exit TOP is zero, for each substance reported on the TOP form.

					Interview	Year				
TOP Reviews/Exits in period	2017-	18	2018-	2018-19		20	2020-	21	2021-	22
where problematic substance		Per		Per		Per		Per		Per
use is reduced, abstinent or	Number	Cent	Number	Cent	Number	Cent	Number	Cent	Number	Cent
unchanged (a)		(b)		(b)		(b)		(b)		(b)
North Wales	9,285	87.5	9,083	87.4	8,972	87.6	7,261	88.1	5,432	88.4
Powys	839	83.8	880	86.2	891	85.8	1,041	85.7	1,047	85.4
Hywel Dda	3,623	89.1	3,534	89.1	3,477	88.2	3,617	87.9	3,162	88.5
Western Bay (c)	1,905	81.1	2,191	82.1	1,378	82.7	1,033	81.5	1,624	81.5
Cardiff & Vale	4,817	83.4	5,396	85.4	4,598	86.7	4,188	86.8	4,155	88.7
Cwm Taf Morgannwg (d)	10,626	87.0	11,323	87.1	5,235	86.6	5,802	86.0	5,380	87.5
Gwent	7,648	83.2	7,165	83.9	6,640	84.6	6,744	84.1	6,454	83.4
Outside Wales	825	81.3	680	79.2	636	78.7	1,137	81.4	1,171	80.2
Unknown	174	85.7	139	84.2	135	81.3	89	80.2	103	84.4
Total	39,742	85.6	40,391	85.6	31,962	86.2	30,912	86.2	28,528	86.2

Source: WNDSM, Digital Health & Care Wales

(a) The number of days the client has misused substances has reduced, remained the same or abstinent in the 28 days prior to the latest Review TOP/Exit TOP when compared with the number of days the client has misused the substance in the 28 days prior to the start TOP.(b) Percentage of all clients where substance use is reported in the 28 days prior to start TOP.

(c) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 12.4 reports on KPI 4 Quality of life where Quality of life is improved or unchanged between the start TOP and the most recent review or exit TOP, for all clients aged 16 or over and within structured treatment. The quality of life score reported in the start TOP is compared with the corresponding quality of life score reported in the most recent review or exit TOP, and is reported as an improvement if the score within the most recent review or exit TOP, and is reported in the start TOP.

					Interview	/Year				
TOD Deviewe/Evite in period	2017-	18	2018-	19	2019-20		2020-21		2021-	22
TOP Reviews/Exits in period where quality of life is		Per		Per		Per		Per		Per
improved or unchanged (a)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)
North Wales	2,207	85.5	2,154	87.0	2,091	85.8	1,664	84.9	1,590	85.4
Powys	108	77.7	136	77.7	106	76.3	129	79.1	183	80.3
Hywel Dda	934	85.9	873	86.0	934	87.0	990	85.0	967	84.3
Western Bay (c)	535	83.5	664	81.5	417	79.6	412	81.4	537	77.3
Cardiff & Vale	533	80.6	731	79.3	664	82.1	577	83.6	845	82.1
Cwm Taf Morgannwg (d)	1,709	88.0	2,180	85.5	1,555	88.1	1,696	85.5	1,637	84.2
Gwent	1,166	79.8	1,003	81.1	963	82.0	880	81.0	1,191	82.1
Outside Wales	189	76.2	148	74.7	113	79.0	184	73.6	232	73.0
Unknown	58	89.2	49	96.1	50	90.9	27	84.4	25	75.8
Total	7,439	82.1	7,938	82.1	6,893	84.9	6,559	84.9	7,207	84.9

#### Table 12.4: KPI 4 – Quality of Life Improved: by APB

Source: WNDSM, Digital Health & Care Wales

(a) The Quality of Life score reported in the latest Review TOP/Exit TOP is higher than or the same as the Quality of Life score reported in the start TOP.

(b) Percentage of all clients where Quality of Life is reported in the start TOP

(c) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 12.5 reports on clients who have completed treatment as either problematic substance free or where the client has reached their treatment goal(s) as agreed at the commencement of treatment, therefore only records that have a treatment date completed are included within this table. Clients who closed with a neutral outcome i.e. referred to another service; moved from area; prison/retained in custody; and moved to GP led prescribing are excluded from this table, along with inappropriate referrals as they are unlikely to have a treatment date.

				Γ	Discharge	Year				
	2017-18		2018-	19	2019	-20	2020-21		2021-	-22
Treatment complete		Per		Per		Per		Per		Per
	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)	Number	Cent (b)
North Wales	1,173	78.1	2,050	84.1	2,038	87.7	1,712	86.6	1,365	90.4
Powys	170	76.2	351	78.9	293	74.9	288	80.9	324	75.7
Hywel Dda	1,188	92.8	1,826	93.5	2,070	92.9	1,756	93.4	1,900	93.3
Western Bay (c)	294	33.1	795	55.9	677	62.0	712	69.3	737	77.1
Cardiff & Vale	220	55.3	378	68.5	483	74.7	440	71.1	521	75.1
Cwm Taf Morgannwg (d)	946	86.1	1,529	86.3	1,309	80.8	1,339	78.2	1,949	90.4
Gwent	958	76.8	1,880	79.2	2,052	80.0	1,866	79.8	2,014	80.9
Outside Wales	370	71.2	512	76.1	485	76.0	500	79.9	535	77.8
Unknown	51	86.4	65	80.2	50	71.4	20	76.9	35	81.4
Total	5,370	74.8	9,386	80.1	9,457	81.7	8,633	81.7	9,380	85.3

#### Table 12.5: KPI 5 – Positive Treatment Closures (a): by APB

Source: WNDSM, Digital Health & Care Wales

(a) Excludes neutral closures: Referred to another service; Moved to GP Led Prescribing; Moved; and Prison

(b) Clients who complete treatment as percentage of all closures with a treatment date (minus neutral closures i.e. referred to another service, moved from area, prison/retained in custody and moved to GP led prescribing)

(c) Submissions are based on individual rather than referral and care must be taken when comparing activity. The treatment service providers within this area moved to a central reporting system. This resulted in records merging and a high number of closures where clients were transferred from individual treatment service providers into the central service.

Table 12.6 reports on clients who have been test for Blood borne viruses. This is only the second year that table 12.6 has been produced. It must be noted that BBV testing was suspended, whilst testing for COVID-19 took priority, and was only re-started in December 2020.

#### Table 12.6: KPI 6 – Blood Borne Virus: by APB

				Tes	sting Year						
				2	2021-22						
	No. of clients currently showing on WNDSM	No. of new client referred to WNDSM	No. requiring HCV test	No. offered HCV test	%age offered HCV test	No. HCV tested	%ag e HCV tested	No. requiring no further HCV test	%age requiring no further HCV test	No. declining HCV test	%age declining HCV test
	(a)	(b)	(C)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
North Wales	3,017	117	3,126	321	10.3%	317	10.19	%	8 0.3	%	4 1.2%
Powys	552	10	557	165	29.6%	133	23.99	%	5 0.9	% :	32 19.4%
Hywel Dda	1,125	6	1,120	117	10.4%	112	10.09	% ·	1.0	%	5 4.3%
Western Bay	1,773	327	2,069	286	13.8%	238	11.59	% 3	31 1.5	%	48 16.8%
Cardiff & Vale	2,335	173	2,488	649	26.1%	536	21.59	% 2	20 0.8	% 1 <sup>·</sup>	13 17.4%
Cwm Taf	2,518	145	2,657	289	10.9%	155	5.89	%	6 0.2	% 13	34 46.4%
Gwent	2,392	30	2,411	506	21.0%	463	19.29	% <i>`</i>	11 0.5	%	43 8.5%
Total	13,712	808	14,428	2,333	16.2%	1,954	13.5%	% 9	92 0.6	% 37	79 16.2%

(a) Number of clients in treatment on the WNDSM as at  $1^{\mbox{\scriptsize st}}$  April 2021

(b) Number of clients assessed on the WNDSM but not yet commenced treatment as at 1<sup>st</sup> April 2021.

(c) No. of clients currently showing on WNDSM plus No. of new clients referred to WNDSM minus No. requiring no further HCV test

(d) Number of clients showing on the harm reduction database with a last test date or last declined test date between April 2021 and March 2022

(e) No. offered HCV test divided by No. requiring HCV test \* 100

(f) Number of clients showing on the harm reduction database where the last test date any result is between April 2021 and March 2022

(g) No. HCV tested divided by No. requiring HCV test \* 100

(h) Number of clients showing on the harm reduction database where the further testing required field is blank

(i) No. requiring no further HCV test divided by No. requiring HCV test \* 100  $\,$ 

(j) Number of clients showing on the harm reduction database where the last declined test date is between April 2021 and March 2022

(k) No. declining HCV test divided by No. offered HCV test \* 100

#### **Annex A: Summary of Key Factors**

### Welsh National Database for Substance Misuse (WNDSM)

The database contains details of all referrals to Drug and Alcohol treatment service providers in Wales and is held by Digital Health & Care Wales (DHCW).

#### Coverage

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

#### **Data Quality**

The data quality issues that affect this report can be found in <u>Section 3</u>.

#### Data processing cycle

All Treatment Service Providers in receipt of Welsh Government funding, 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 26<sup>th</sup> July 2022. Digital Health & Care Wales 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 treatment service providers. This means that figures in this report are not directly comparable with those published in earlier reports.

#### **Treatment Outcomes Profile**

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 the background information about the Treatment Outcome Profile are available from: TOP\_form\_community\_print\_version.pdf (publishing.service.gov.uk)

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.

#### **Disclosure and confidentiality**

The risk of disclosing information about an individual has been considered for this WNDSM dataset and with the current level of aggregation is considered to be very low.

#### **Users and Uses**

We believe the key users of these statistics are:

- Ministers and their advisors;
- Members of the Senedd and the Members Research Service in The Senedd;
- Substance Misuse Treatment service providers;
- Area Planning Boards (APBs);

- Community Safety Partnerships (CSPs);
- Regional Partnership Boards (RPBs);
- Public Services Board (PSBs);
- 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.

## Annex B: List of Referral Source Groups

Referral Source Group	Referral Source							
	Court							
	Integrated Offender Interventions Service/Drug Interventions							
	Programme/Arrest Referral Scheme							
Criminal Justice	Police							
System	Prison/Counselling Assessment Referral Advice and Through care,							
System	Transitional Support Scheme							
	Probation Service to include Drug Rehabilitation Requirements							
	Solicitor							
	Youth Offending Team							
NHS	NHS Accident & Emergency							
	NHS Other							
	Armed Forces							
	Community Care Assessment							
	Community Psychiatric Nurse/Community Mental Health Team							
	Domestic Abuse Support							
	Educational Establishment							
	Employment Service							
Other	Family/Friends							
Other	Job Centre							
	Midwife							
	Needle/Syringe Exchange Scheme							
	Peer Mentoring Scheme							
	Psychiatry							
	Social Services							
	Support Agencies							

Source: WNDSM, Digital Health & Care Wales

#### **Annex C: Definitions**

The following definitions are used within this report:

#### Area Planning Boards (APBs)

Area planning Boards are responsible for the regional, (local health board footprint) commissioning of substance misuse services. Further information can be found at:-

https://gov.wales/commissioning-substance-misuse-services-revised-guidance

#### Drugs

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

#### Main problematic substance

The term "main problematic substance" refers to the main substance that led the client to seek help or be referred for help; note that many clients categorised 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:

Methylphenidate, Methadrone, Methylone, Minor Analgesics, Zoplicione, Major Tranquilisers Unspecified, Areca Nut, Antabuse, Acamprosate Calcium (Campral), GHB/GBH, Other Psychoactive Drugs Unspecified, Antidepressant, NPS Predominantly Cannabis, NPS Predominantly Sedative, NPS Predominantly Stimulant, Other Sedatives, Phenteramine, Naltrexone, Zolpidem Tartrate, Antipsychotic Unspecified, Appetite Suppressant, Sedatives Unspecified, Barbiturates Unspecified, Nicotine, Khat, Drug Not Otherwise Specified, Ecstasy and Prescribed Drugs.

#### "Other Opiates"

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

Buprenorphine, Opiates Unspecified, Codeine Unspecified, Dihydrocodeine, Tramadol Hydrochloride, Codeine Tablets, Morphine Sulphate, Opiate Comp Analgesics, Other Opiates, Oxycodone, Opium, and Fentanyl.

#### "Other Stimulants"

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

Mephedrone, Stimulants Unspecified and Other Stimulants.

#### **Clients referred**

Refers to clients who were referred between April 2005 and March 2022. If more than 8 weeks elapsed between the end of a course of treatment and the start of a new course, then the client is counted again.

#### 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 2011-12 this was revised to include practical/social support, complimentary/alternative therapies and diversionary activities, brief interventions and harm reduction.

#### Rate

Rate per 100,000 population based on ONS 2020 mid-year estimates published on 25 June 2021.

#### Median Age

The median is the middle number in a sorted list of numbers, i.e. the value where there are the same number of values below the median point as there are above it. For example, with a list of nine people with different ages, to find the median point you would follow the calculation  $(9+1) \div 2 = 5$ . So the median age of the group would be the age of the fifth person in the sorted list – where there are 4 people younger and 4 people older.

#### **European Age-Standardised Rates (EASR)**

The most comprehensive way of comparing the disease experience of two populations is to present and compare their age-specific rates. However, when the number of populations being compared increases, the volume of data that needs to be considered quickly becomes unmanageable. What is needed is a single, easily interpreted, summary figure for each population that is adjusted to take into account its age structure. Such summary figures are calculated using age standardisation methods.

One method of calculating a summary figure is 'direct standardisation'. The age-specific rates of the subject population are applied to the age structure of the standard population. This gives the overall rate that would have occurred in the subject population if it had the standard age-profile.

The European Standard Population (ESP) is often used for direct standardisation. This is a hypothetical population structure which does not change and is the same for both genders. This report uses the 2013 ESP, published by Eurostat. Detailed information and guidance on the 2013 ESP has been published by the UK's Office for National Statistics and can be found here: <u>http://www.ons.gov.uk/ons/guide-method/user-guidance/health-and-life-events/revised-european-standard-population-2013--2013-esp-/index.html</u>.

#### **Treatment Outcome Profiles (TOPs)**

These profiles measure the changes in client characteristics at regular intervals during treatment and at closure. The summary statistics on treatment outcomes included in this report utilise information gathered at the start of treatment (Start TOPs) and at subsequent review which are 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 in available from: <u>Substance Misuse Documentation - Digital Health and Care Wales (nhs.wales)</u>

#### **Treatment Modalities**

A description of the treatment modalities can be found in Appendix 1 of the latest Business Definitions Guidance, found at: <u>Substance Misuse Documentation - Digital Health and Care Wales (nhs.wales)</u>

#### **Key Performance Indicators**

The revised suite of indicators became operational from July 2012. Since implementation, the Welsh Government has been monitoring these performance indicators and has refreshed guidance in view of operational experience.

Further information can be found at: <u>Substance Misuse Documentation - Digital Health and Care Wales</u> (<u>nhs.wales</u>)