

National Psychiatric In-Patient Reporting System (NPIRS)

Introduction

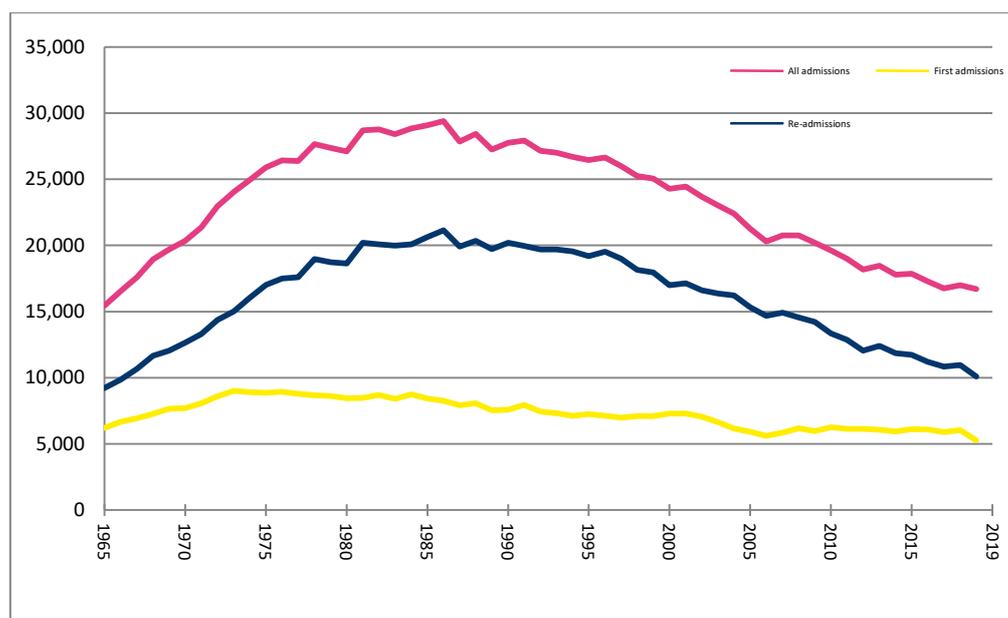
This bulletin is a synopsis of data from the National Psychiatric In-Patient Reporting System (NPIRS) for 2019. The rates reported below were calculated using the Census of Population 2016 (Central Statistics Office 2018) and all rates are per 100,000 total population.

All and first admissions 2019 – national statistics

There were 16,710 admissions to Irish psychiatric units and hospitals in 2019, a rate of 350.9 per 100,000 population. Admissions declined by 290, from 17,000 in 2018 (Figure 1), with the rate of admission also increasing from 357.0 in 2018.

First admissions decreased by 762, from 6,039 in 2018 to 5,277 in 2019, with the rate of first admissions also increasing from 126.8 in 2018 to 110.8 in 2019. However, one independent/private hospital was unable to provide information on the order of admission (first-ever or re-admission) for 1,348 admissions. These admissions have been classified as 'unknown order of admission'. It is not possible therefore to determine if the true number and rate of first admissions has declined from 2018-2019.

Figure 1: All, first and re-admissions. Ireland 1965-2019. Numbers



Re-admissions increased from 10,961 in 2018 to 10,085 in 2019, with the rate similarly increasing from 230.2 per 100,000 in 2018 to 211.8 in 2019. Sixty per cent of all admissions in 2019 were re-admissions. As mentioned above however, it is possible that the re-admissions figure may be greater than this.

Males accounted for 51% of all admissions and males had a slightly higher rate of all admissions, at 361.4 per 100,000, compared with 340.7 for females. The 20–24 year age group had the highest rate of all admissions, at 568.3 per 100,000, followed by the 18–19 year age group, at 484.6 and the 55-64 year group, at 471.4. The 18–19 year age group had the highest rate of first admissions, at 260.8 per 100,000.

Single persons accounted for 59% of all and first admissions. Divorced persons had the highest rate of all (442.8) and first (129.0) admissions, while married persons had the lowest, at 223.3 for all admissions and 68.5 per 100,000 for first admissions.

The unskilled occupational group had the highest rate of all (482.5). However, as over half (61%) of occupations were returned as unknown or unspecified in 2019, making assignment to a socio-economic group impossible, caution should be exercised when interpreting data on socio-economic group.

Depressive disorders accounted for 24% of all and first admissions; schizophrenia accounted for 21% of all and 17% of first admissions; mania accounted for 10% of all and 8% of first admissions; and neuroses accounted for 10% of all and 11% of first admissions. Admissions for depressive disorders, schizophrenia, mania and neuroses accounted for two-thirds of all admissions.

Depressive disorders had the highest rate of all admissions, at 85.8 per 100,000, followed by schizophrenia, at 74.3, and mania, at 35.5 (Figure 2). Similarly, depressive disorders had the highest rate of first admissions, at 26.8 per 100,000, followed by schizophrenia, at 18.7, neuroses, at 12.6 and other drug disorders, at 9.2.

Fourteen per cent of all and 17% of first admissions were involuntary, virtually unchanged from proportions in 2018. The rate of involuntary all admissions increased from 46.7 per 100,000 in 2018 to 49.4 in 2019, while that for first admissions increased from 17.3 in 2018 to 18.4 in 2019.

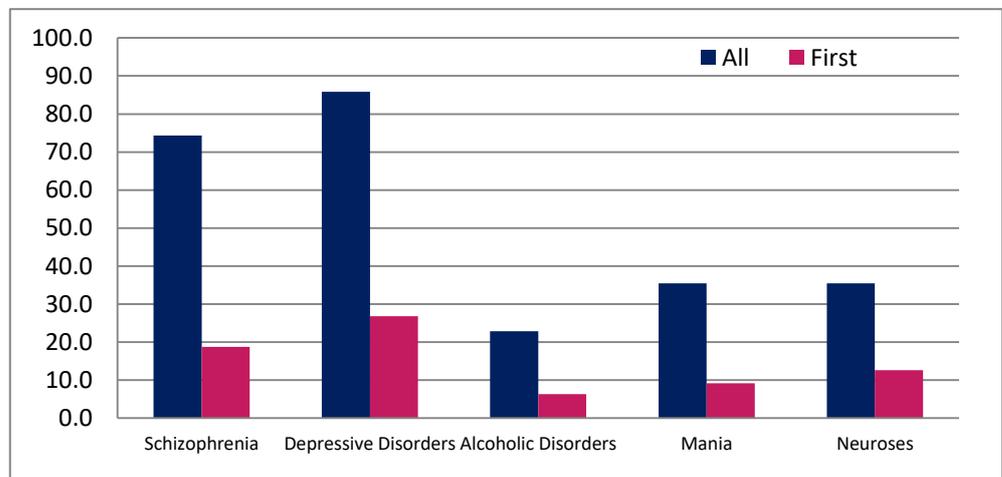
There were 68 admissions of non-residents in 2019, an increase from 54 in 2018. Twenty-nine per cent of non-residents had an address originating in Northern Ireland, 28% in England, 19% in the USA, 6% in Germany, 4% in Scotland, 3% in France and 10% in various other countries. Over one-third (35%) of all admissions of non-residents had a primary admission diagnosis of schizophrenia, 15% had a diagnosis of depressive disorders, 13% had a diagnosis of mania, and 9% each had personality and behavioural disorders and other drug disorders.

There were 297 admissions with no fixed abode in 2019; 71% of these were male, 76% were single and 28% had a primary admission diagnosis of schizophrenia.

National discharges and deaths

There were 16,608 discharges from, and 127 deaths in, Irish psychiatric units and hospitals in 2019. Males accounted for 61% of all deaths in 2019, and 78% of those who died were aged 65 years and over.

Figure 2: All and first admissions for selected diagnostic groups. Ireland 2019. Rates per 100,000 total population



Ninety-two per cent of all admissions in 2019 were discharged in 2019.

Twenty-nine per cent of all discharges in 2019 occurred within one week of admission, 17% occurred within one to two weeks of admission, almost 20% occurred within two to four weeks and 28% occurred within one to three months. Overall, 94% of all discharges in 2019 occurred within three months of admission and 99% occurred within one year of admission.

Half of all discharges for other drug disorders, 46% of discharges for personality and behavioural disorders, almost 46% for behavioural and emotional disorders of childhood and adolescence and 43% with intellectual disability occurred within one week of admission. Over 90% of all discharges for most disorders took place within three months of admission with the exception of organic mental disorders (77%) and intellectual disability (79%).

The average length of stay for all discharges was 64.2 days (median 15 days). Discharges with a primary discharge diagnosis of intellectual disability had the longest average length of stay, at 1,942 days (median 9 days). When discharges with a length of stay of one year or more were excluded, the average length of stay was 27.7 days (median 15 days). Discharges with a diagnosis of organic mental disorders (excluding those with a length of stay of one year or more) had the longest average length of stay of all diagnoses, at 54.4 days (median 27 days).

Community Healthcare Organisations (CHOs)

The address from which a person was admitted was used to assign him/her to a CHO area and thus, CHO area refers to the CHO area of residence of the person. All admission rates were highest for those resident in CHO 9, at 402.5 per 100,000 and first admission rates were highest for those resident in CHO 8, at 129.7.

Males accounted for a higher proportion of admissions than females in CHO 1, CHO 2, CHO 4, CHO 5 and CHO 8, while females had a higher proportion in CHO 3, CHO 6, CHO 7 and CHO 9.

Age groups were condensed into two distinct groups, under 45 years and 45 years and over. The 45 year and over age group had higher rates than the under 45 year group in all areas, with rates ranging from 564.3 per 100,000 in CHO 9 to 364.7 in CHO 2.

Depressive disorders had the highest rate of all admissions in six of the nine CHOs, with rates ranging from 105.7 per 100,000 in CHO 2 to 63.1 in CHO 6.

Admissions resident in CHO 9 had the highest proportion of involuntary all admissions, at 18%, followed by CHO 7, at 16%, CHO 4, at 15%, and CHO 2, at 15%. CHO 9 had the highest rate of involuntary all admissions, at 72.4 per 100,000 while CHO 4 had the lowest rate, at 31.4. Discharges for CHO 9 had the longest average length of stay, at 91.8 days (median 15), followed by CHO 2, at 86.3 days (median 18) and CHO 4, at 80.5 days (median 15). When discharges with a length of stay of one year or more were excluded, average length of stay was longest in CHO 6, at 33.4 days (median 22), followed by CHO 3, at 30.9 days (median 18) and CHO 4, at 28.9 days (median 15).

Hospital type

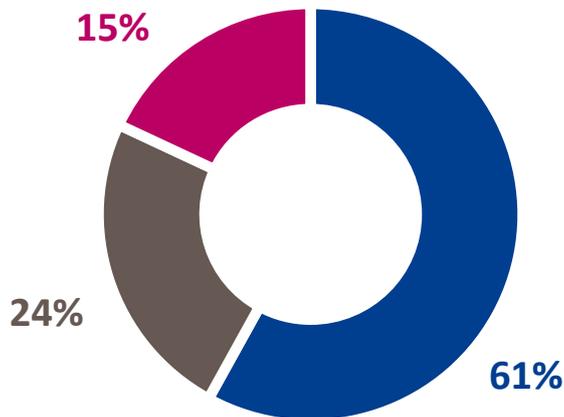
Sixty-one per cent of all admissions were to general hospital psychiatric units; 15% of all admissions were to public psychiatric hospitals/continuing care units and 24% were to independent/private and private charitable centres (Figure 3).

“The mean age at admission to independent/ private and private charitable centres was older, at 51.5 years, than that to general hospital psychiatric units, at 42.5 years or psychiatric hospitals/continuing care units, at 45.5 years. Almost two-thirds (64%) of admissions to independent/private and private charitable centres were aged 45 years and over compared with 41% to general hospital psychiatric units and 49% to psychiatric hospitals/continuing care units.”

Involuntary admissions accounted for 22% of all admissions to psychiatric hospitals/continuing care units, 17% of admissions to general hospital psychiatric units and 2% of admissions to independent/private and private charitable centres.

When discharges of one year or more were excluded, independent/private and private charitable centres had the longest average length of stay, at 36.6 days (median 32), followed by psychiatric hospitals/continuing care units, at 27.1 days (median 13) and general hospital psychiatric units, at 24.3 days (median 11).

Figure 3: Hospital type. All admissions. Ireland 2019. Percentages



61% General hospital psychiatric units
24% Independent/private and private charitable centres
15% Psychiatric hospitals/continuing care units

Children and adolescents

There were 497 admissions for children and adolescents (under 18s) in 2019, an increase of 89 from 408 admissions in 2018. These include admissions to psychiatric units and hospitals who were under 18 years of age and also those admitted to specialised child and adolescent in-patient units. Sixty-three per cent (311) were first admissions. Of the 497 admissions, 443 were to child and adolescent in-patient units (public and private units).

Females accounted for 64% of all and 59% of first admissions. Thirty-seven per cent of all admissions for under 18s were aged 17 years on admission, 27% were aged 16 years, 19% were aged 15 years, 11% were aged 14 years and 6% were aged 13 years or younger.

“ There were 54 admissions of under 18s to adult units and hospitals.”

Depressive disorders accounted for 32% of all and 33% of first admissions for children and adolescents. Sixteen per cent had a diagnosis of neuroses, 11% had a diagnosis of eating disorders and 10% had a diagnosis of schizophrenia.

Eighty-nine per cent of all admissions for under 18s to child and adolescent services were to child and adolescent in-patient units, 10% were to general hospital psychiatric units and less than 1% were to psychiatric hospitals/continuing care units.

Eighty-five per cent of those admitted in 2019 were discharged in 2019. The average length of stay for under 18s who were admitted and discharged in 2019 was 38.5 days (median 28 days). The average length of stay was longest for child and adolescent units, at 42.2 days (median 34), followed by general hospital psychiatric units, at 13.4 days (median 4 days) and psychiatric hospitals/continuing care units, at 3.3 days (median 4 days).

In-patient census 2019

There were 2,198 patients resident on 31 December 2019, a rate of 46.2 per 100,000. This is a reduction of 110 patients resident since 31 March 2019. Fifty-five per cent of patients were male. Thirty-four per cent were aged 65 years and over, 34% were aged 45–64 years, 25% were aged 25–44 years and 7% were aged 24 years or younger. Thirty-seven per cent had a diagnosis of schizophrenia, 14% depressive disorders and 9% organic mental disorders.

References

Central Statistics Office (2017) Census of Population 2016, www.cso.ie.