

National Psychiatric In-Patient Reporting System (NPIRS) National Bulletin Ireland 2011

October 2012

The Health Research Board (HRB) provides statistical reports and related database research on mental health service activity. Later this year, the Executive Summary report on in-patient activity from the National Psychiatric In-Patient Reporting System (NPIRS) for 2011 will be published along with the full report on CD-ROM. In the interim, we provide summary information for each HSE area and in relation to the national picture. This bulletin presents national data for 2011. The Mental Health Information Systems (MHIS) Unit would like to thank services for providing quarterly returns – your cooperation has resulted in timelier reporting. We look forward to your continued support in the future.

Rosalyn Moran
Head of MHIS

Introduction

This bulletin is a synopsis of data from the National Psychiatric In-Patient Reporting System (NPIRS) for 2011. The rates reported below were calculated using the Census of Population 2011 (www.cso.ie) and all rates are per 100,000 total population. However, as the Small Area Population Statistics (SAPS) were not available at the time of production of this bulletin, it was not possible to calculate rates for age, marital status or socio-economic groups for each of the HSE areas. Thus, for age, the 2006 census of population figures have been used. Proportions are presented for marital status and socio-economic group.

All and first admissions 2011 – national statistics

There were 18,992 admissions to Irish psychiatric units and hospitals in 2011, a rate of 413.9 per 100,000 population (Figure 1), a decrease in the number (19,619) and rate of admissions (462.7) from 2010. There was also a decrease in the number of first admissions from 6,266 in 2010 to 6,129 in 2011. The rate of first admissions also decreased from 147.8 in 2010 to 133.6 per 100,000 in 2011. Re-admissions accounted for 68% of all admissions, representing no change in the proportion of admissions that were re-admissions from 2010.

There was an equal proportion of male and female admissions; however, males had a slighter higher rate of admission, at 421.7 per 100,000, than females, at 406.3. The 45–54 year age group had the highest rate of all admissions, at 632.5 per 100,000 total population, while the 20–24 year age group had the highest rate of first admissions, at 242.6 per 100,000.

Single persons accounted for over half of all (54%) and 49% of first admissions. Divorced persons had the highest rate of all (791.8) and first (217.6) admissions, while married persons had the lowest, at 292.9 for all admissions and 108.0 per 100,000 for first admissions.

The unskilled occupational group had the highest rate of all (874.6) and first (199.4) admissions. However, as 47% of occupations were returned as unknown or unspecified in 2011, making assignment to a socio-economic group impossible, caution should be exercised when interpreting data on socio-economic group.

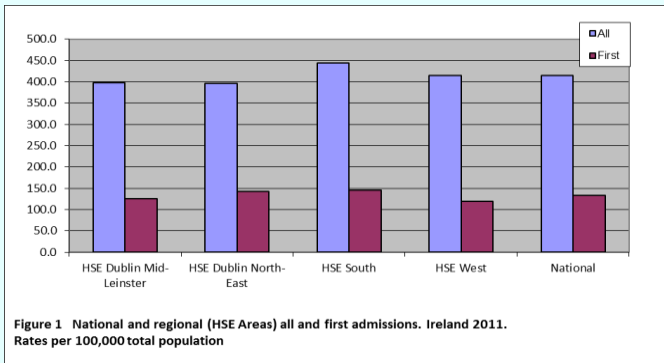


Figure 1 National and regional (HSE Areas) all and first admissions. Ireland 2011. Rates per 100,000 total population

Depressive disorders accounted for 29.5% of all and 31% of first admissions; schizophrenia accounted for 20% of all and 12% of first admissions; while alcoholic disorders accounted for almost 9% of all and 10% of first admissions. Admissions for depressive disorders, schizophrenia, alcoholic disorders and mania accounted for 69% of all admissions.

Depressive disorders had the highest rate of all admissions, at 122.3 per 100,000, followed by schizophrenia, at 84.2, and mania, at 44.3 (Figure 2). Similarly, depressive disorders had the highest rate of first admissions, at 41.3 per 100,000, followed by schizophrenia, at 16.5, and neuroses, at 15.8.

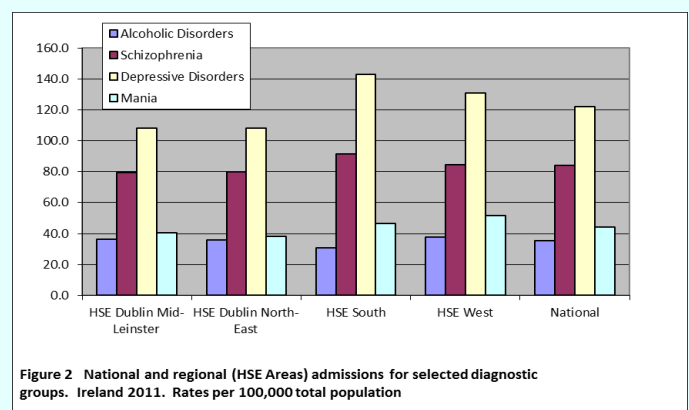


Figure 2 National and regional (HSE Areas) admissions for selected diagnostic groups. Ireland 2011. Rates per 100,000 total population

Almost 10% (9.5%) of all and almost 11% (10.5%) of first admissions were involuntary, a slight increase from 8% of all and 9% of first admissions in 2010. Similarly, there was a slight increase in the rate of involuntary all admissions, from 37.8 per 100,000 in 2010 to 39.4 in 2011.

National discharges and deaths

There were 18,968 discharges from, and 118 deaths in, Irish psychiatric units and hospitals in 2011. Males accounted for 63% of all deaths in 2011, and 75% of deaths were aged 65 years and over. Ninety-three per cent of all admissions in 2011 and 94% of first admissions in 2011 were discharged in 2011.

Almost half (48%) of all discharges occurred within two weeks of admission; 20% occurred within two to four weeks and 26% occurred

within one to three months. Ninety-four per cent of discharges occurred within three months of admission and almost 2% of discharges occurred after one year or more in hospital.

Forty-one per cent of discharges with alcoholic disorders, 27% with depressive disorders and 20% with schizophrenia occurred within one week of admission. Over 90% of all discharges for most disorders occurred within three months of admission, with the exception of organic mental disorder, schizophrenia, intellectual disability and development disorders. The average length of stay for all discharges was 63.7 days (median 14 days). Discharges with a diagnosis of intellectual disability had the longest average length of stay, at 861.1 days (median 10 days). When discharges with a length of stay of one year or more were excluded, the average length of stay was 25.8 days (median 14 days). Discharges with a diagnosis of organic mental disorder (excluding those with a length of stay of one year or more) had the longest average length of stay of all diagnoses, at 45.4 days (median 22 days).

Health Service Executive (HSE) areas admissions and discharges

HSE South had the highest rate of all (443.5 per 100,000 population) and first admissions (146.1) (Figure 1).

Females had higher rates of all admissions compared with males in Dublin Mid-Leinster (399.9 for females and 396.6 for males) and Dublin North-East (401.0 for females and 391.1 for males). Males had higher rates of first admissions than females in all areas, ranging from 154.7 in Dublin North-East to 131.2 in HSE West.

Age groups were condensed into two distinct groups, under 45 years and 45 years and over. The 45 years and over group had the highest rate of admissions in all HSE Areas, with rates ranging from 702.4 in Dublin Mid-Leinster to 604.0 in HSE South.

Depressive disorders had the highest rate of all and first admissions in all HSE areas, with rates for all admissions ranging from 143.1 per 100,000 in HSE South to 108.2 in Dublin Mid-Leinster and in Dublin North-East.

HSE South and HSE West had the highest rate of involuntary all admissions, at 44.5 each, followed by Dublin North-East, at 38.6, and Dublin Mid-Leinster, at 30.2 per 100,000.

Discharges for HSE South had the longest average length of stay, at 84.1 (median 14), followed by HSE West, at 70.8 days (median 14), Dublin North-East, at 57.6 (median 14), and Dublin Mid-Leinster, at 43.1 (median 15). When discharges with a length of stay of one year or more were excluded, average length of stay was longest in Dublin Mid-Leinster, at 26.7 days (median 15), followed by HSE South, at 26.0 (median 14), Dublin North-East, at 25.5 (median 13), and HSE West, at 24.7 (median 14).

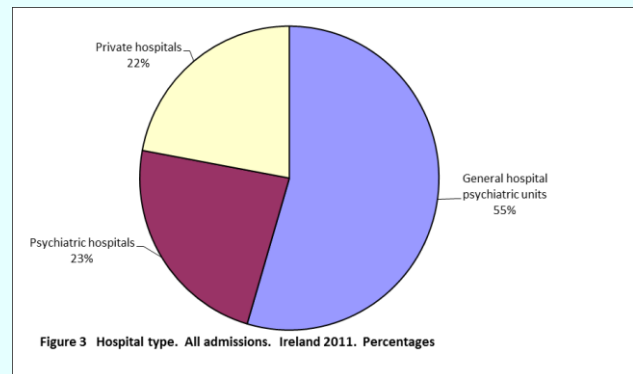
There were 49 admissions of non-residents in 2011, and 159 admissions for persons with no fixed abode.

Hospital type

Fifty-five per cent of all admissions and 56% of first admissions were to general hospital psychiatric units. Twenty-three per cent of all admissions were to public psychiatric hospitals and 22% were to private hospitals (Figure 3).

Involuntary admissions accounted for 13% of all admissions to psychiatric hospitals, 11% of admissions to general hospital

psychiatric units and 1.5% of admissions to private hospitals. Discharges from private hospitals had the longest average length of stay, at 34.4 days (median 29.0 days), when discharges of one year or more were excluded.



Children and adolescents

There were 435 admissions for children and adolescents in 2011, unchanged from 2010. These include admissions to psychiatric units and hospitals who were under 18 years of age and also those who were admitted to dedicated child and adolescent units. There were 322 first admissions, representing 74% of all admissions. Of the 435 admissions, 303 were to dedicated child and adolescent services. Females accounted for over half of all (56%) and first (57%) admissions. Forty-one per cent of all admissions were aged 17 years on admission, 26% were aged 16 years, 15% were aged 15 years, 8% were aged 14 years, and 9% were aged 11–13 years. In addition, three admissions to child and adolescent units were aged 18 years or over on admission.

Depressive disorders accounted for 35% of all and 38% of first admissions for children and adolescents. Thirteen per cent of all admissions had a diagnosis of neurosis, 12% had a diagnosis of schizophrenia and 10% had a diagnosis of eating disorders.

Seventy per cent of all admissions for under 18s to child and adolescent services were to dedicated child and adolescent inpatient units. Twenty-six per cent were to general hospital psychiatric units, 4% were to psychiatric hospitals and less than 1% (0.5%) was to private hospitals.

Ninety per cent of those admitted in 2011 were discharged in 2011. The average length of stay for under 18s/child and adolescent services admissions who were admitted and discharged in 2011 was 33.5 days (median 19 days). The average length of stay was longest for child and adolescent units, at 45.5 days (median 37), followed by general hospital psychiatric units, at 10 days (median 5), psychiatric hospitals, at 9 days (median 6), and private hospitals, at 2 days (median 2).

References

Central Statistics Office, www.cso.ie.

Daly A and Walsh D (2012) HRB Statistics Series 18 *Activities of Irish Psychiatric Units and Hospitals 2011*. Dublin: Health Research Board.

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