



HRB Statistics Series 15

Activities of Irish Psychiatric Units and Hospitals 2010

Main Findings

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Published by:

Health Research Board, Dublin
An Bord Taighde Sláinte

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HRB Statistics Series ISSN: 2009-034x
Sub-series ISSN: 2009-0692

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Introduction

This report is a summary of the annual report on the activities of Irish psychiatric in-patient units and hospitals for the year 2010. Data in this summary and in the full report were sourced from the National Psychiatric In-patient Reporting System (NPIRS) on all admissions to, discharges from, and deaths during 2010 in the 69 Irish psychiatric units and hospitals approved by the Mental Health Commission for the reception and treatment of patients. Comparative data for 2009 used in this summary are from the publication *Activities of Irish Psychiatric Units and Hospitals 2009 Main Findings* (Daly and Walsh 2010) and rates reported are per 100,000 total population. In the computation of rates for Health Service Executive (HSE) areas and for county, private hospital admissions are returned to their area of origin, i.e., the area/county from which they were admitted, and they are thus included in the rates for those areas/counties.

Data in the full report are presented nationally, regionally by HSE area, and locally, by county, by hospital type, and by individual psychiatric units and hospital. The full report is available on the DVD enclosed in this publication and can also be downloaded at www.hrb.ie.

Key findings

National admissions

There were 19,619 admissions to Irish psychiatric units and hospitals in 2010, a rate of 462.7 per 100,000 total population. This is a reduction of 576 admissions from 2009 (20,195). The rate of admissions also declined from 476.3 in 2009 to 462.7 per 100,000 population in 2010. There were 6,266 first admissions in 2010, an increase in the number of first admissions from 2009 (5,972). The rate of first admissions also increased from 140.9 per 100,000 in 2009 to 147.8 in 2010. There was a reduction in the number of re-admissions from 14,223 in 2009 to 13,353 in 2010.

There was an equal proportion of male and female admissions and the admissions rates were similar for both; 464.6 per 100,000 for males and 460.9 for females. The equal distribution of male and female admissions has been reported for the last three years. Males had a higher rate of first admission than females, at 159.0 compared with 136.6 for females.

The 45–54 year age group had the highest rate of all admissions, at 727.7 followed by the 35–44 year age group, at 660.4 and the 55–64 year group, at 659.1 per 100,000 population. The 75 year and over age group had the lowest rate of all admissions, at 461.6 per 100,000 population. The 18–19 year age group had the highest rate of first admissions, at 291.6 per 100,000, followed by the 20–24 year age group, at 216.4 and the 25–34 year age group, at 193.4. The 55–64 year age group had the lowest rate of first admission, at 162.4 per 100,000.

Single persons accounted for over half (54.5%) of all admissions in 2010, married persons accounted for 27%, widowed accounted for 4% and divorced accounted for 3%. The unskilled occupational group had the highest rate of all (749.2) and first admissions (175.1).

Depressive disorders and schizophrenia together accounted for almost half (48%) of all admissions; depressive disorders accounted for 29% of all and 30% of first admissions while schizophrenia accounted for almost 20% (19.5%) of all and 12% of first admissions. Depressive disorders had the highest rate of all (132.8) and first admissions (44.7). Schizophrenia had the second-highest rate of all admissions, at 90.1 per 100,000. Neuroses had the second-highest rate of first admissions, at 18.2 per 100,000, followed by schizophrenia, at 17.7 and alcoholic disorders, at 15.0.

Eight per cent of all and nine per cent of first admissions were involuntary, representing no change in all admissions from 2009 and a one percentage point increase in involuntary first admissions from 2009 (8%).

There were 202 admissions with no fixed abode in 2010.



National discharges and deaths

There were 19,614 discharges from, and 140 deaths in, Irish psychiatric units and hospitals in 2010. Males accounted for 62% of all deaths in 2010 and 58% of deaths were aged 75 years and over.

Almost half (48%) of all discharges took place within two weeks of admission, a further 20% occurred within two to four weeks of admission and 26% occurred within one to three months of admission. Ninety-four per cent of all discharges occurred within three months of admission.

The average length of stay for all discharges, excluding those of one year or more, was 26.0 days (median 14.0) days. Discharges with a diagnosis of organic mental disorder had the longest average length of stay, at 45.6 days (median 22.0 days), followed by schizophrenia, at 36.5 days (median 20.0 days).

Health Service Executive Areas

Twenty-seven per cent of admissions were resident in Dublin Mid-Leinster in 2010 with a further 27% resident in HSE South, 24% were resident in HSE West and 21% were resident in Dublin North East. Less than one per cent of all admissions in 2010 were recorded as non-resident.

The HSE South had the highest rate of all admissions, at 496.6 per 100,000, followed by HSE West, at 462.8 and Dublin North-East, at 447.2. Dublin Mid-Leinster had the lowest rate of all admissions, at 439.9 per 100,000 population. Dublin North-East had the highest rate of first admissions, at 164.4 per 100,000 followed by HSE South, at 151.4. Dublin Mid-Leinster and HSE West had the same rate of first admissions each, at 137.3 per 100,000.

Females had higher rates of all admissions than males in Dublin Mid-Leinster (458.6 per 100,000 for females and 420.9 for males) and in Dublin North-East (453.3 per 100,000 for females and 440.9 for males), while males had higher rates in HSE South (512.7 for males and 480.3 for females) and in HSE West (480.5 per 100,000 for males and 444.8 for females). Males had the highest rates of first admissions in all HSE areas, with rates ranging from 175.9 per 100,000 in Dublin North-East to 143.6 in Dublin Mid-Leinster.

The 45 years and over group had the highest rate of admissions in all HSE Areas, with rates ranging from 678.9 in Dublin North-East to 601.9 in HSE West.

Depressive disorders had the highest rate of all admissions in all four HSE areas, with rates ranging from 158.2 in HSE South to 113.0 in Dublin North-East. Similarly, rates for first admissions for depressive disorders were highest across all four areas, ranging from 52.0 in HSE West to 36.5 in Dublin Mid-Leinster.

HSE South had the highest rate of involuntary all admissions, at 46.4 per 100,000, followed by HSE West, at 40.9 and Dublin North-East, at 31.8, and Dublin Mid-Leinster had the lowest, at 31.2 per 100,000.

Thirty-two per cent of discharges for Dublin North-East, 28% for Dublin Mid-Leinster, 30% for HSE South and 27% for HSE West occurred within two weeks of admission. Half of all discharges for Dublin North-East occurred within two weeks of admission, 49% for HSE South, 47% for HSE West and 45% for Dublin Mid-Leinster. Ninety-four per cent of discharges for all areas occurred within three months of admission.

Dublin Mid-Leinster had the longest average length of stay, at 27.5 days (median 15.0 days), followed by Dublin North-East, at 25.8 days (median 13.0 days), HSE West, at 25.5 days (median 14.0 days) and HSE South, at 25.0 days (median 13.0 days).

There were 55 admissions for non-residents in 2010, a reduction of 14 from 2009. Thirty-eight per cent had an address originating in England, 33% had an address in Northern Ireland, and 7% had an address in the United States. Almost 35% of non-residents had a diagnosis of schizophrenia, 18% had a diagnosis of mania, 13% had a diagnosis of alcoholic disorders and 11% had depressive disorders.

County of admission

The highest rates of first admissions were reported for counties Longford (206.4), Carlow (196.6), Westmeath (186.5) and Wexford (172.3). Monaghan had the lowest rate of first admissions, at 62.5 per 100,000, followed by Cavan, at 76.6.

Hospital type

Fifty-two per cent of all admissions in 2010 were to general hospital psychiatric units, 26% were to psychiatric hospitals (including the Central Mental Hospital Dundrum, Carraig Mór, Cork and St Joseph's Intellectual Disability Services, St Ita's Hospital, Portrane) and 22% were to private hospitals.

Over one-third of all (34%) and first (36%) admissions to private hospitals had a diagnosis of depressive disorders. Thirty per cent of all admissions to general hospital psychiatric units and almost 23% (22.5%) to psychiatric hospitals had a diagnosis of depressive disorders. Twenty-four per cent of all admissions to psychiatric hospitals and 23% of admissions to general hospital psychiatric units had a diagnosis of schizophrenia, compared with almost 7% (6.5%) to private hospitals. The proportion of all admissions to private hospitals with a diagnosis of alcoholic disorders, at 15%, was twice that of admissions to general hospital psychiatric units, at 7%, and almost twice that of admissions to psychiatric hospitals, at 8%. A somewhat similar pattern was observed for first admissions; 18% to private hospitals, 10% to psychiatric hospitals and 9% to general hospital psychiatric units.

Involuntary admissions accounted for 10% of all admissions to general hospital psychiatric units and 10% of admissions to psychiatric hospitals. In contrast, just 2% of admissions to private hospitals were involuntary.

Over one-third of discharges from general hospital psychiatric units (34%) and from psychiatric hospitals (34%) occurred within one week of admission, compared with just 12% of discharges from private hospitals. Over half of all discharges from general hospital psychiatric units (54%) and from psychiatric hospitals (53%) occurred within two weeks of admission, compared with one-quarter of discharges from private hospitals. Average length of stay for all discharges, excluding those of one year or more, was longest in private hospitals, at 33.5 days (median 29.0 days). This compares with an average length of stay of 26.0 days (median 11.0) in psychiatric hospitals and 22.8 days (median 12.0) in general hospital psychiatric units.

Child and adolescent admissions

There were 435 admissions for under 18s in 2010. This is an increase in admissions for under 18s from 2009 (367). Seventy-nine per cent of these were first admissions. There were 272 admissions to dedicated child and adolescent units in 2010. Eighty-three per cent of these admissions were first admissions.

Over half of all (53%) and first admissions (53%) for under 18s were females. Thirty-five per cent of all admissions were aged 17 years on admission, 33% were aged 16 years, 13% were aged 15 years, 11% were aged 14 years and a further 7% were aged 11–13 years. Similar proportions were observed for first admissions.

Fifty-seven per cent of all admissions and of first admissions to dedicated child and adolescent units were female. Over one-third (35%) of all admissions to dedicated child and adolescent units were aged 16 years, 19% were aged 17 years, 18% were aged 15 years, 17% were aged 14 years and 11% were aged 11–13 years. Similar proportions were observed for first admissions.

Twenty-eight per cent of all admissions for under 18s had a diagnosis of depressive disorders, 11% had neuroses, 9% had schizophrenia and 8% had eating disorders. Females accounted for 69% of all admissions for under 18s with depressive disorders, 37% of those with neuroses and 85% of those with eating disorders. In contrast, males accounted for 73% of under 18s with a diagnosis of schizophrenia.

Depressive disorders accounted for 29% of first admissions for under 18s, neuroses accounted for 11%, schizophrenia accounted for 9% and eating disorders accounted for 7%. Females accounted for 69% of first admissions for under 18s with a diagnosis of depressive disorders, 88% of those with a diagnosis of eating disorders and 32% of those with neuroses. Males accounted for 73% of those with schizophrenia and 68% of those with neuroses.

Almost 63% (62.5%) of all admissions for under 18s were to dedicated child and adolescent in-patient units, almost 29% (28.5%) were to general hospital psychiatric units, 7% were to psychiatric hospitals and just 2% were to private hospitals. Similar proportions were observed for first admissions.

Ninety-five per cent of under 18s admitted in 2010 were discharged in 2010. Almost 28% (27.5%) were discharged within one week of admission, 11% were discharged within one to two weeks, 16% were discharged within two to four weeks, 39% were discharged within one to three months and 6% were discharged within three months to one year.

The average length of stay for persons under 18s admitted and discharged in 2010 was 33.2 days (median 23.5 days). The average length of stay for under 18s was longest for those admitted to child and adolescent units, at 47.1 days (median 41.0 days), followed by private hospitals, at 27.9 days (median 25.0), general hospital psychiatric units, at 11.4 days (median 4.0 days), and psychiatric hospitals, at 7.4 days (median 5.0 days).

Ten-year review

In the ten-year period 2001-2010 there has been a 20% decline in all admission numbers, from 24,446 in 2001 to 19,619 in 2010. First admissions fell by 14% from 7,301 in 2001 to 6,266 in 2010. Re-admissions fell from 17,146 in 2001 to 13,353 in 2010, a reduction of 22% and, for the first time since 1980, re-admissions dropped to below 70% of all admissions (68%). In the ten-year period from 2001-2010 admissions to general hospital psychiatric units have increased from 42% to 52%, admissions to psychiatric hospitals have decreased from 44% to 26% and admissions to private hospitals have increased from 14% to 22%.





