



Public Health
England

Protecting and improving the nation's health

Drug data: JSNA support pack

**Key data to support planning for effective
drugs prevention, treatment and recovery in
2016-17**

East Sussex

(using latest available data)

ABOUT THIS JSNA SUPPORT PACK

This pack provides key performance and recovery outcomes information about your treatment system with national data for comparison. It presents data from the National Drug Treatment Monitoring System (NDTMS), the Treatment Outcomes Profile (TOP), Criminal Justice data (CJITDET), matched data from NDTMS and local market system data used by Jobcentre Plus and estimates of the prevalence of opiate and/or crack cocaine use. Although drug treatment services treat dependence for all drugs, heroin users remain the group with the most complex problems and the majority of those in treatment use heroin, so separate data is provided for them.

VALUE FOR MONEY

Alcohol and drug dependency leads to significant harms and places a financial burden on communities. Investment in prevention, treatment and recovery interventions reduces this burden. For example, alcohol and drug users commit fewer crimes and are less prone to blood-borne viruses and other illnesses when they access substance misuse services. Furthermore, treatment can not only improve the lives of the people receiving it, but also that of their family.

To help local areas assess the benefits investment in substance misuse brings to them, the Adult Drug and Alcohol Social Return on Investment (SROI) tool produced by PHE will be available in November 2015. Focusing on SROI can help local authorities make informed decisions about how to spend their money effectively on services that improve lives, opportunities, health and wellbeing. SROI analysis is also in keeping with The Public Services (Social Value Act) 2012, which recommends that all public bodies, including local authorities, consider how their commissioning decisions benefit society. The SROI tool is based on work approved by an advisory group comprising commissioners, Directors of Public Health, PHE Centre Directors, alcohol and drug policy leads, health economists and senior economists in PHE, NICE and other government departments.

KEY FACTORS INFLUENCING YOUR TREATMENT OUTCOMES

Data within this pack presents outcomes for clients during their time in treatment and also longer-term recovery outcomes. The outcomes achieved while in treatment are demonstrated to be very good predictors of successful completion and non re-presentation especially housing and employment and abstinence from illicit drug use.

In addition the latest successful completion and non re-presentation rates are a very good indicator of future performance in the Public Health Outcomes Framework (PHOF) indicators 2.15i and 2.15ii

<http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000042/par/E12000004/ati/102/page/0>

Key factors influencing your treatment outcomes 2014-15 compared to 2013-14				Overall activity in 2014-15 compared to 2013-14			
	Successful completions	Waiting times under 3 weeks	Non re-presentations	Numbers in treatment		New presentations to treatment	
Opiate	▼ Down 2%		▲ Up 4%	1,154	▲ Up 4%	361	▲ Up 24%
Non-opiate	▼ Down 31%		◀ No Change	112	▼ Down 15%	87	▼ Down 16%
Non-opiate and alcohol	▼ Down 29%		◀ No Change	348	▼ Down 8%	268	▼ Down 5%
All	▼ Down 12%	▼ Down 1%	▲ Up 1%	1,614	▼ Down 0%	716	▲ Up 6%

PREVALENCE ESTIMATES

The estimated number of opiate and/or crack users (OCU) and injectors in your area is set out below. Collectively, they have a significant impact on crime, unemployment, safeguarding children and long-term benefit reliance.

Nationally, women make up 27% of adults in drug treatment. Women presenting to treatment often experience poor mental health, domestic violence and abuse, which may impact upon their recovery, and are more likely to be carers of children. Some of the data presented below is split by gender to assist local areas in considering and meeting women's needs.

Local prevalence estimates (2011-12)								
(Aged from 15-64)	Local	Lower confidence interval	Upper confidence interval	Rate per 1000	Lower confidence interval	Upper confidence interval	Treatment Penetration	Treatment Penetration by gender
	n							M F
OCU	2,152	1,850	2,641	6.69	5.75	8.21	53%	47% 70%
Opiate	1,672	1,530	1,869	5.20	4.76	5.81	66%	
Crack	1,121	929	1,399	3.49	2.89	4.35	36%	
Injecting	825	560	1,100	2.57	1.74	3.42	53%	

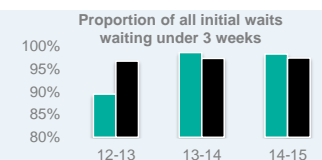
National prevalence estimates (2011-12)								
(Aged from 15-64)	National	Lower confidence interval	Upper confidence interval	Rate per 1000	Lower confidence interval	Upper confidence interval	Treatment Penetration	Treatment Penetration by gender
	n							M F
OCU	293,879	291,029	302,146	8.40	8.32	8.63	55%	51% 65%
Opiate	256,163	253,751	263,501	7.32	7.25	7.53	61%	
Crack	166,640	161,621	173,706	4.76	4.62	4.96	40%	
Injecting	87,302	85,307	90,353	2.49	2.44	2.58	56%	

WAITING TIMES

Local ● National ●

This data shows the number of drug users who waited less than three or more than six weeks to start treatment. Drug users need prompt help if they are to recover from dependence. Local efforts to keep waiting times low mean that the national average waiting time is less than one week. Keeping waiting times low will play a vital role in supporting recovery in local communities.

	Local	Proportion of all initial waits	National	Proportion of all initial waits
Adults waiting under three weeks to start treatment	n 705	98%	n 76,996	97%
Adults waiting over six weeks to start treatment	6	1%	582	1%

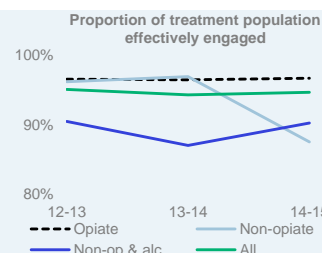


TREATMENT ENGAGEMENT

When engaged in treatment, people use less illegal drugs, commit less crime, improve their health, and manage their lives better – which also benefits the community. Preventing early drop out and keeping people in treatment long enough to benefit contributes to these improved outcomes. As people progress through treatment, the benefits to them, their families and their community start to accrue. The information below shows the proportion of adults in your area in 2014-15 who have been in treatment for three months or more – a measure for effective treatment engagement.

Adults effectively engaged in treatment 2014-15

	Local	Growth in numbers from 13-14	Proportion of treatment population	National	Growth in numbers from 13-14	Proportion of treatment population
Opiate	n 1,116	4%	97%	n 145,875	-2%	95%
Non-opiate	98	-23%	88%	21,857	-2%	87%
Non-opiate and alcohol	314	-4%	90%	24,686	-2%	88%
All	1,528	0%	95%	192,418	-2%	93%



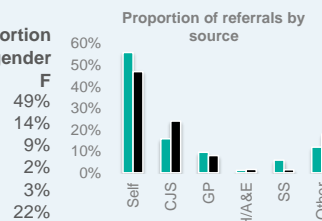
ROUTES INTO TREATMENT

Local ● National ●

The table below shows the routes into drug treatment in 2014-15. These give an indication of the levels of referrals from criminal justice and other sources into specialist treatment. 'Referred through CJS' means referred through an arrest referral scheme or via a Drug Rehabilitation Requirement (DRR), prison or the probation service.

Source of referral into treatment

	Local	Proportion of referrals	Proportion by gender		National	Proportion of referrals	Proportion by gender	
			M	F			M	F
Self-referral	n 400	56%	58%	51%	n 37,285	47%	46%	49%
Referred through CJS	113	16%	18%	11%	19,070	24%	27%	14%
Referred by GP	68	9%	9%	11%	6,329	8%	7%	9%
Hospital/A&E	8	1%	1%	1%	1,249	2%	1%	2%
Social services	42	6%	2%	16%	1,121	1%	1%	3%
All other referral sources	85	12%	13%	10%	14,329	18%	17%	22%



INTERVENTIONS

We know that the types of intervention delivered to service users will have an impact on their achievement of recovery outcomes. The table below shows in detail what treatment staff in your area actually do with service users, and in what settings. The last item focuses on those who receive pharmacological interventions only, something not recommended in guidance. Paying attention to these interventions will let you consider how much is being done to promote and facilitate real recovery options.

Setting	Local high level interventions						Total individuals**		Proportion by gender	
	Pharmacological		Psychosocial		Recovery Support		n	%	M	F
Community	n 1,064	88%	n 1,500	99%	n 707	97%	1,564	99%	99%	99%
Inpatient unit	87	7%	20	1%	14	2%	87	5%	5%	7%
Primary care	152	13%	160	11%	2	0%	188	12%	10%	15%
Residential	3	0%	47	3%	17	2%	50	3%	3%	3%
Recovery house	0	0%	1	0%	4	1%	5	0%	0%	0%
Young person setting	0	0%	0	0%	0	0%	0	0%	0%	0%
Missing	0	0%	0	0%	0	0%	0	0%	0%	0%
Total individuals*	1,208		1,522		727		1,584			

Number and % of individuals who were in treatment for the entire year and have only pharmacological interventions
Of which received maintenance only interventions

n 0
% 0

* This is the total number of individuals receiving each intervention type and not a summation of the setting the intervention was delivered in.

** This is the total number of individuals receiving any intervention type in each setting and not a summation of the pharmacological, psychosocial and recovery support columns.

RESIDENTIAL REHABILITATION

Local ● National ●

The data below shows the number of adult drug users in your area who have been to residential rehabilitation during their latest period of treatment (as a proportion of your whole treatment population and against the national proportion). Drug treatment mostly takes place in the community, near to users' families and support networks. Residential rehabilitation may be cost effective with someone who is ready for active change and a higher intensity treatment at any stage of their treatment, and local areas are encouraged to provide this option as part of an integrated recovery-orientated system.

	Local	Proportion of treatment population	Numerical split by gender		National	Proportion of treatment population	Proportion of treatment population who attended residential rehabilitation
	n		M	F	n		
Number of adults who attended residential rehabilitation	59	4%	40	19	5,693	3%	

SAFEGUARDING

The data below shows the number of drug users in treatment who live with children; users who are parents but do not live with children; and users for whom there is incomplete data. This item is included to help you consider the possible hidden population(s) of drug-dependent parents, or those with childcare responsibilities in contact with local treatment services.

	Local	Proportion of treatment population	Proportion by gender		National	Proportion of treatment population	Proportion by gender	
	n		M	F	n		M	F
Living with children (own or other)	365	23%	16%	37%	61,331	30%	25%	43%
Parents not living with children	580	36%	39%	29%	53,184	26%	27%	23%
Not a parent/no child contact	669	41%	45%	34%	88,250	43%	47%	32%
Incomplete data	0	0%	0%	0%	3,352	2%	2%	2%

PRESCRIPTION ONLY MEDICINE/OVER-THE-COUNTER MEDICINE (POM/OTC)

Local ● National ●

People in treatment for prescription-only medicines (POM) or over-the-counter medicines (OTC), and drug users who have a problem with these as well as illicit drugs are presented below. Health and public health commissioners will want to understand local need in relation to misuse of and dependence on prescription and over-the-counter medicines, so that together they can commission appropriate responses.

	Local	Proportion of treatment population	Numerical split by gender		National	Proportion of treatment population	Proportion of treatment population citing POM/OTC use
	n		M	F	n		
Number of adults citing POM/OTC use:							
Illicit use	263	16%	183	80	26,266	13%	
No illicit use	82	5%	42	40	6,173	3%	
Total	345	21%	225	120	32,439	16%	

NPS AND CLUB DRUGS

Local ● National ●

The data below covers the main 'club' drugs reported by new treatment entrants who are also using opiates (first table) or using club drugs and other drugs but not opiates (second table). Opiate users still dominate adult treatment, and generally face a more complex set of challenges and are much harder to treat. Non-opiate-using, adult club drug users typically have good personal resources – jobs, relationships, accommodation – that mean they are more likely to make the most of treatment.

	Local	Proportion ¹	National	Proportion ¹	Proportion of club drug use and opiate use of those citing use at treatment start (opiate use)
	n		n		
Adults new to treatment citing club drug use and opiate use	Ecstasy	0	96	12%	
	Ketamine	0	72	9%	
	GHB/GBL	0	15	2%	
	Methamphetamine	1	36	4%	
	Mephedrone	0	350	43%	
	NPS Other	2	265	33%	
	Any club drug use ²	3	1%	807	
Adults new to treatment citing club drug use (no additional opiate use)	Ecstasy	6	1,188	29%	
	Ketamine	3	354	9%	
	GHB/GBL	2	306	8%	
	Methamphetamine	0	287	7%	
	Mephedrone	2	1,674	41%	
	NPS Other	7	889	22%	
	Any club drug use ²	18	5%	4,046	

¹ Proportions of ecstasy, ketamine, GHB/GBL, methamphetamine, mephedrone and NPS Other as a percentage of any club drug use. Clients' citing the use of multiple club drugs will be counted once under each drug they cite. Therefore figures may exceed the total (labelled any club drug use) and proportions may sum to more than 100%.



² Any club drug use is a percentage of all new treatment entrants.

BLOOD-BORNE VIRUSES AND DRUG-RELATED DEATHS

The data below shows the drug users in treatment in your area who have had a hepatitis B vaccination and current or past injectors who have been tested for hepatitis C. Drug users who share injecting equipment can spread blood-borne viruses. Providing methadone and sterile injecting equipment protects them and communities, and provides long-term health savings. Although local drug-related death data is not provided, understanding and preventing deaths is an important function of a recovery orientated drug treatment system.

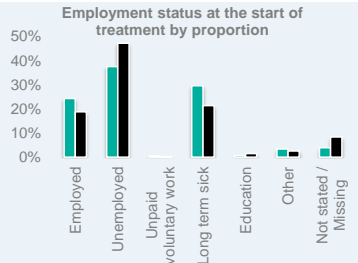
	Local	Proportion of eligible clients	Proportion by gender		National	Proportion of eligible clients	Proportion by gender	
	n		M	F	n		M	F
Adults new to treatment eligible for a HBV vaccination who accepted one	112	38%	39%	37%	21,726	40%	40%	41%
Of those:								
the proportion who started a course of vaccination	52	46%	42%	55%	4,746	22%	22%	23%
the proportion who completed a course of vaccination	12	11%	15%	3%	4,700	22%	22%	20%
Previous or current injectors eligible for a HCV test who received one	620	92%	90%	97%	80,447	81%	81%	83%

EMPLOYMENT AND BENEFITS

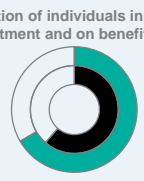
Local  National 


The first data item below shows self-reported employment status at the start of treatment in 2014-15. All subsequent items show the benefit profile of your in-treatment population on 31 March 2012 (from a match between NDTMS and DWP data). Improving job outcomes for this group is key to sustaining recovery and requires improved multi-agency responses with Jobcentre Plus and Work Programme providers. An updated data match is planned later in the year, following which more recent local authority data will be released.

Employment status at the start of treatment	Local n	Proportion of new presentations	National n	Proportion of new presentations
Regular employment	174	24%	15,080	19%
Unemployed/Economically inactive	269	38%	37,893	47%
Unpaid voluntary work	4	1%	197	0%
Long term sick or disabled	212	30%	17,135	21%
In education	5	1%	1,181	1%
Other	24	3%	2,062	3%
Not stated/Missing	28	4%	6,694	8%



Benefit profile of treatment population	Local n	Proportion of all in treatment on 31/03/2012	National n	Proportion of all in treatment on 31/03/2012
Number of individuals in drug treatment on 31/03/2012	906		134,090	
Number of individuals in drug treatment on 31/03/2012 recorded as being on benefits (of any type) on the 31/03/2012	603	67%	82,347	61%
Number of individuals in treatment recorded as being on benefits on the 31/03/2012 (by type)*:				
Jobseekers Allowance (JSA)	93	10%	19,178	14%
Employment Support Allowance (ESA)	205	23%	28,378	21%
Incapacity Benefit (IB)	228	25%	25,552	19%
Income Support (IS)	232	26%	26,315	20%
Disability Living Allowance (DLA)	158	17%	19,167	14%
Other	41	5%	4,308	3%
Median length of time (years) on benefits between the start of benefit claim and 31/03/2012 (by type)**:				
Jobseekers Allowance (JSA)	0.30		0.53	
Employment Support Allowance (ESA)	0.64		0.56	
Incapacity Benefit (IB)	8.39		8.02	
Income Support (IS)	6.69		6.48	
Disability Living Allowance (DLA)	4.77		5.03	
Other	5.77		3.73	
Number of individuals in drug treatment who left successfully in 2011-12	238		29,858	
Of those successful completions, those who at the point of discharge:				
were on benefits	107	45%	14,416	48%
were not on benefits	131	55%	15,442	52%



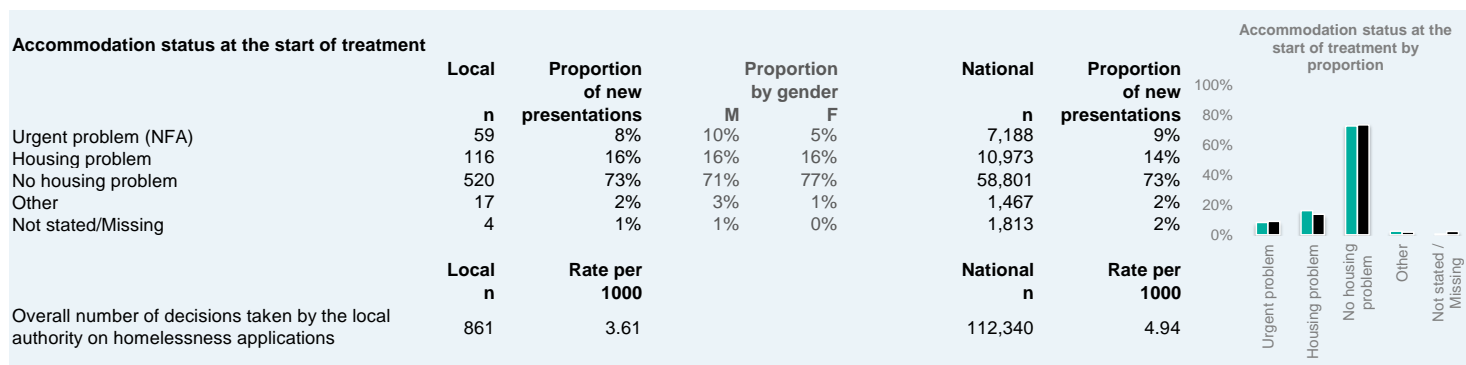
* Individuals are counted once under each type of benefit they received

** Length of time on benefits counted as the length of the benefits spell from the start until 31st March 2012, regardless of the length of time spent in treatment

HOUSING AND HOMELESSNESS

Local ● National ●

The first data item below shows self-reported housing status of adults when they started in your treatment services. The second, the overall number of homelessness decisions made in your area (unavailable for drug users only), to give a sense of housing need in your area. A safe, stable home environment enables people to sustain their recovery; insecure housing or homelessness threatens it. Addiction and homelessness do not exist in isolation. People experiencing both are likely to have a range of needs cutting across health and social care, substance use and criminal justice. The Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS) can be used to identify and commission across these interdependencies. Engaging with local housing and homelessness agencies can help ensure that the full spectrum of homelessness is understood and picked up: from statutorily homeless; single homeless people, rough sleepers to those at risk of homelessness.



IN TREATMENT OUTCOMES

Local ● National ●

The data below is drawn from the Treatment Outcomes Profile (TOP), which tracks the progress drug users make in treatment. This includes information on rates of abstinence from drugs and statistically significant reductions in drug use and injecting, and those successfully leaving treatment with secure housing and in work. Data from NDTMS suggests that clients who stop using illicit opiates in the first six months of treatment are almost five times more likely to complete successfully than those that continue to use.

Six month review outcomes	Abstinence				Significant reductions in use					
	Local n	Proportion	Proportion by gender		National n	Local n	Proportion	Proportion by gender		National n
			M	F				M	F	
Opiate	56	32%	29%	40%	41%	61	35%	39%	26%	25%
Crack	32	50%	50%	50%	49%	8	13%	13%	8%	13%
Cocaine	27	48%	44%	62%	69%	12	21%	23%	15%	9%
Amphetamines	4	67%	0%	100%	58%	0	0%	0%	0%	8%
Cannabis	44	42%	43%	40%	45%	11	11%	9%	13%	14%
Alcohol (adjunctive)	38	20%	18%	25%	31%	36	19%	19%	18%	16%

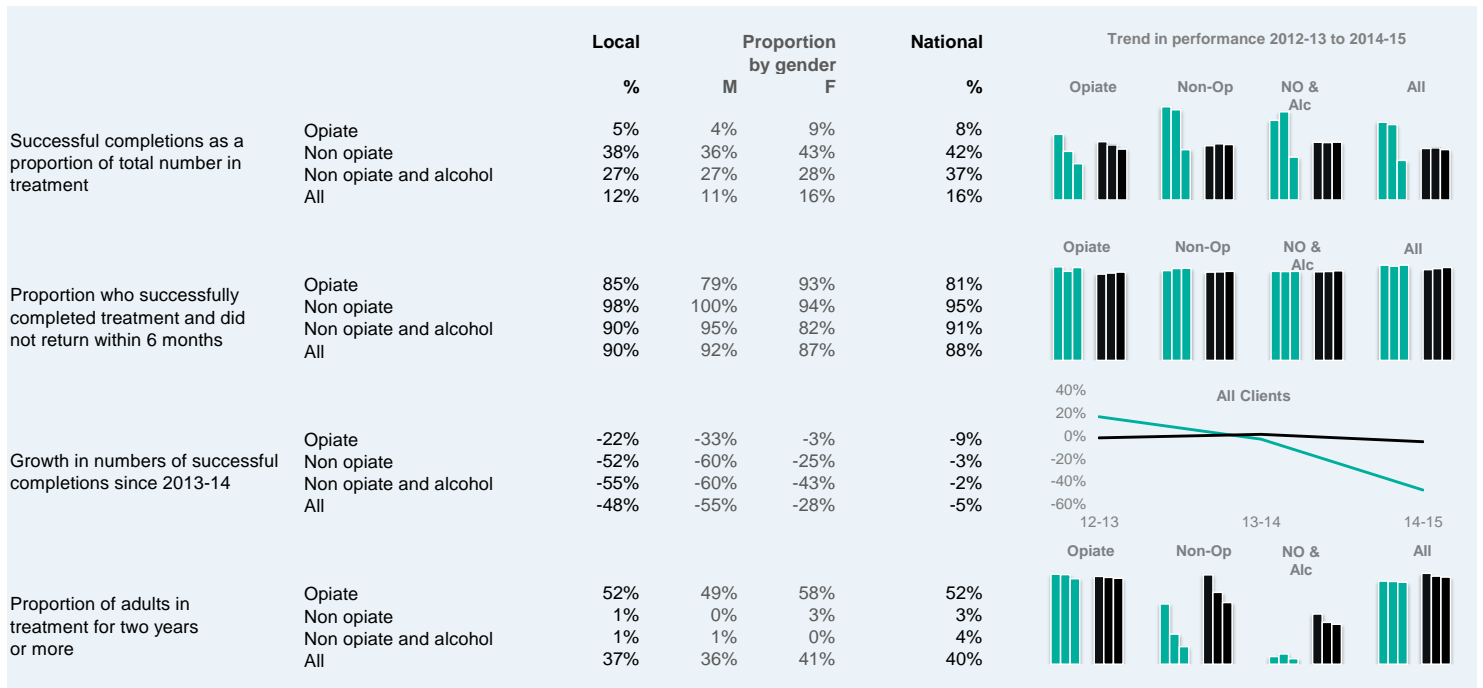
Injecting use, housing need and employment	Local		Proportion		Proportion by gender		National		Proportion		Proportion by gender	
	n	Proportion	M	F	n	Proportion	M	F	n	Proportion	M	F
Adults no longer injecting at six month review	31	35%	34%	36%	4,337	56%	56%	53%				
Adults successfully completing treatment no longer reporting a housing need	26	84%	80%	91%	2,975	81%	82%	78%				
Adults working ten or more days in the month before successfully completing treatment	51	30%	38%	18%	7,480	29%	33%	17%				

Please note that all data is displayed here, regardless of TOP compliance in the local area

SUCCESSFUL COMPLETIONS

The data below shows the proportion of drug users who complete their treatment free of dependence, the progress your area has made on people successfully completing treatment, and those successfully completing who do not relapse and re-enter treatment. Helping people to overcome drug dependence is a core function of any local drug treatment system. Although many individuals will require a number of separate treatment episodes spread over many years, most individuals who complete successfully do so within two years of treatment entry.

Also below is the proportion of adults who have been in treatment for more than two years – the data tells us that the likelihood of clients completing treatment and not re-presenting decreases the longer they remain in treatment over 2 years.



ADDITIONAL DRUGS DATA

The following links provide information regarding additional drug-related data sources which may be available to you either locally or via national surveys or data collection systems.

Primary and secondary care data

Estimates of the prevalence of opiate use and/or crack cocaine use, 2011/12

Provides estimates of the prevalence of opiate and/or crack cocaine use at the regional and national level in England for 2011/12.

<http://www.nta.nhs.uk/uploads/estimates-of-the-prevalence-of-opiate-use-and-or-crack-cocaine-use-2011-12.pdf>

Crime survey for England and Wales: Drug misuse declared

Contains information about drug use by region, including information about levels of use of particular drugs in different parts of the country.

<https://www.gov.uk/government/statistics/drug-misuse-findings-from-the-2014-to-2015-csew>

Deaths related to drug poisoning in England and Wales, 2013

National Statistics on deaths related to drug poisoning (both legal and illegal drugs) and drug misuse (involving illegal drugs) in England and Wales.

<http://www.ons.gov.uk/ons/rel/subnational-health3/deaths-related-to-drug-poisoning/england-and-wales---2013/stb---deaths-related-to-drug-poisoning-in-england-and-wales--2013.html>

Shooting Up: infections among people who inject drugs in the UK

Describes the extent of infections among people who inject drugs (PWID) in the United Kingdom.

<https://www.gov.uk/government/publications/shooting-up-infections-among-people-who-inject-drugs-in-the-uk>

Local authority revenue expenditure and financing England: 2015 to 2016 individual local authority data

Contains budget estimates of local authority revenue expenditure and financing for the financial year April 2013 to March 2014.

<https://www.gov.uk/government/statistics/local-authority-revenue-expenditure-and-financing-england-2015-to-2016-budget>

National Drug Treatment Monitoring System performance reports

A collection of reports available on a monthly, quarterly and annual basis, providing detailed information on those in structured drug and alcohol treatment from the NDTMS. Access is partially restricted and granted to PHE staff, commissioners and Local Authorities.

<https://www.ndtms.net/Reports.aspx#>

Wider Public Health Data

Public Health Outcomes Framework (PHOF)

A collection of outcomes indicators covering the full spectrum of public health. The drugs PHOF indicators (2.15i and 2.15ii) are presented in the 'health improvement' domain. Comparisons with a benchmark and trend data are provided and information is updated on a quarterly basis.

<http://www.phoutcomes.info/public-health-outcomes-framework#qid/1000042/pat/6/ati/102/page/0/par/E12000004/are/E06000015>

RESTRICTED STATISTICS

You are reminded that the data provided in this document are official statistics to which you have privileged access in advance of release. Such access is carefully controlled and is provided for management, quality assurance, and briefing purposes only. Release into the public domain or any public comment on these statistics prior to official publication planned for November 2015 would undermine the integrity of official statistics. Any accidental or wrongful release should be reported immediately and may lead to an inquiry.

Wrongful release includes indications of the content, including descriptions such as "favourable" or "unfavourable". If in doubt you should consult Jonathan Knight, via EvidenceApplicationTeam@phe.gov.uk, who can advise. Please prevent inappropriate use by treating this information as restricted, refrain from passing information on to others who have not been given prior access and use it only for the purposes for which it has been provided. If you intend to publish figures from the JSNA after November 2015 you must restrict all figures under 5 and any associated figures to prevent deductive disclosure.

The restricted status of this data will be lifted after the release of the annual report planned for November 2015.