

Publication Report



Mental Health (Psychiatric) Hospital Activity Statistics year ending 31 March 2012

Publication date – 18 December 2012

Contents

Contents	2
About ISD	3
Official Statistics	3
Introduction.....	4
Key points.....	4
Results and Commentary	5
Hospital inpatients	5
Mental illness Inpatient specialties	8
Formal and Informal Admissions	9
Length of stay	10
Discharges by diagnosis group	11
Destination on Discharge	14
Psychiatric readmission.....	14
Outpatients Summary of attendances at outpatient clinics in psychiatric specialties...	15
Links to other information sources.....	16
Glossary	17
List of Tables	18
Contact	19
Further Information	19
Appendix.....	20
A1 – Background Information	20
A2 – Publication Metadata (including revisions details).....	20
A3 – Early Access details (including Pre-Release Access)	22

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

Introduction

The collection of information relating to mental health care reflects the variety of clinical settings in which this service is delivered. People receiving their care as inpatients in psychiatric hospitals generate records held nationally on Scottish Morbidity Record 04 (SMR04) which is dedicated to this area of health service provision. Conversely, patient contact with, for example, specialist community mental health teams, general practice or outpatient facilities is recorded as part of more general or locally specific data schemes. This publication mainly covers psychiatric inpatient (SMR04) data, with reference, where possible, to data on other mental health care services and their associated data sources.

The information contained in this publication has been updated to include available data for year ending 31 March 2012.

Ongoing efforts to improve the quality of SMR04 data may result in differences to previously published information. **It should be noted that due to the implementation of a new patient management system, information on treatments delivered at NHS Ayrshire & Arran, as taken from SMR04 for the year to 31 March 2012, is not available and is excluded from this publication. As a result, Scotland level data for the latest year are not directly comparable to previous years.**

For further information on national data completeness and data quality, please see the link to [Managing Data Quality](#)

ISD intends to undertake a comprehensive review of the statistics and data presentation of this publication in 2013. Comments on what is currently most useful or what other information would be beneficial are encouraged and should be sent to nss.isdmentalhealth@nhs.net

Key points

- There were around 19,265 inpatient admissions to mental health hospitals (excluding those treated in NHS Ayrshire & Arran) during the year ending 31 March 2012.
- In 2011/12 around 55% of all inpatient mental health admissions were re-admissions (patients readmitted after a break in inpatient care). This percentage is similar to those of the previous five years.
- Alcohol/drug related problems accounted for 22% of all discharge diagnoses in men and schizophrenia accounted for a further 20%. For women, mood (affective) disorders accounted for 33% of the diagnoses recorded, while dementia diagnoses were identified in 13% of discharges.
- In 2011/12, around 65% of all mental health discharges had a hospital length of stay of 4 weeks or less. This is similar to previous years.

Results and Commentary

Hospital inpatients

This section provides a summary of psychiatric hospital activity, including admissions, discharges, the age & sex characteristics of patients and geographic comparisons.

The majority of currently available information on the care of Mental Health problems in the NHS Scotland comes from acute and psychiatric hospitals. As part of the Scottish Morbidity Record system which covers all inpatient and day case activity in Scottish hospitals, information on people admitted to mental illness specialties has been collected (from SMR04) since the 1960s. Data are collected on all patients at the time of admission to hospital and at the time of discharge from hospital.

The most recent revision of the SMR04 mental health record came into effect on 1st April 1996 and one of the notable changes that was made was the facility to classify the psychiatric specialty. Five mental illness specialties are currently available: general psychiatry, psychiatry of old age, adolescent psychiatry, child psychiatry and forensic psychiatry.

Admissions to mental illness specialties in hospital in Scotland are classified into 3 main types (as recorded by the psychiatric hospital when a patient is admitted):

First admissions: Patients who have not previously received psychiatric inpatient care

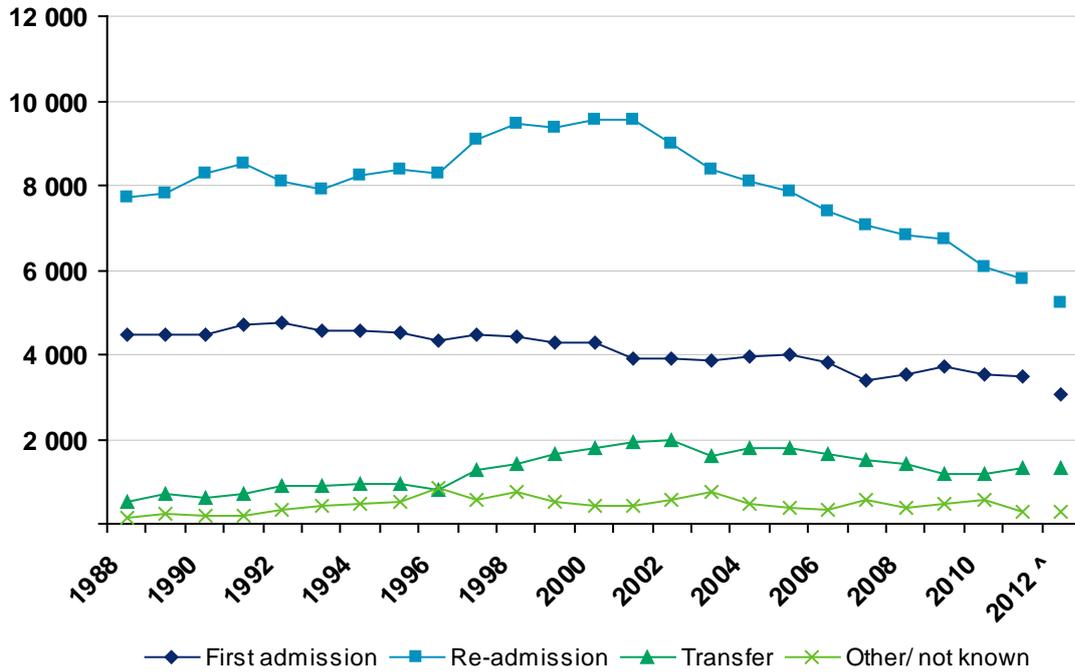
Re-admissions: Patients who are re-admitted following a break from psychiatric inpatient care

Transfers: Direct transfer from another psychiatric hospital or from one consultant to another within the same hospital

- In 2011/12 there were 19,265 inpatient admissions to mental illness specialties (excluding those treated in NHS Ayrshire & Arran).
- Total inpatient admissions peaked in 1997/98 at 32,004. The increase from earlier years is mostly accounted for by a rise in the number of male re-admissions over time (which continued into the early 2000s), rather than increases in the number of first (i.e. new) psychiatric admissions.
- There has been a continuous reduction of female first admissions since the 1980s. Male first admissions by contrast remained relatively stable until the late 1990's before beginning to show small decrease from around year 2000.

Trends in the number of admissions to mental illness specialties for each of the three listed categories of admission are shown in the charts below. The data cover the years ending March 1988 to March 2012 however, as data for the latest year exclude treatments in NHS Ayrshire & Arran, data for 2011/12 are not directly comparable to previous years and no trend line is shown.

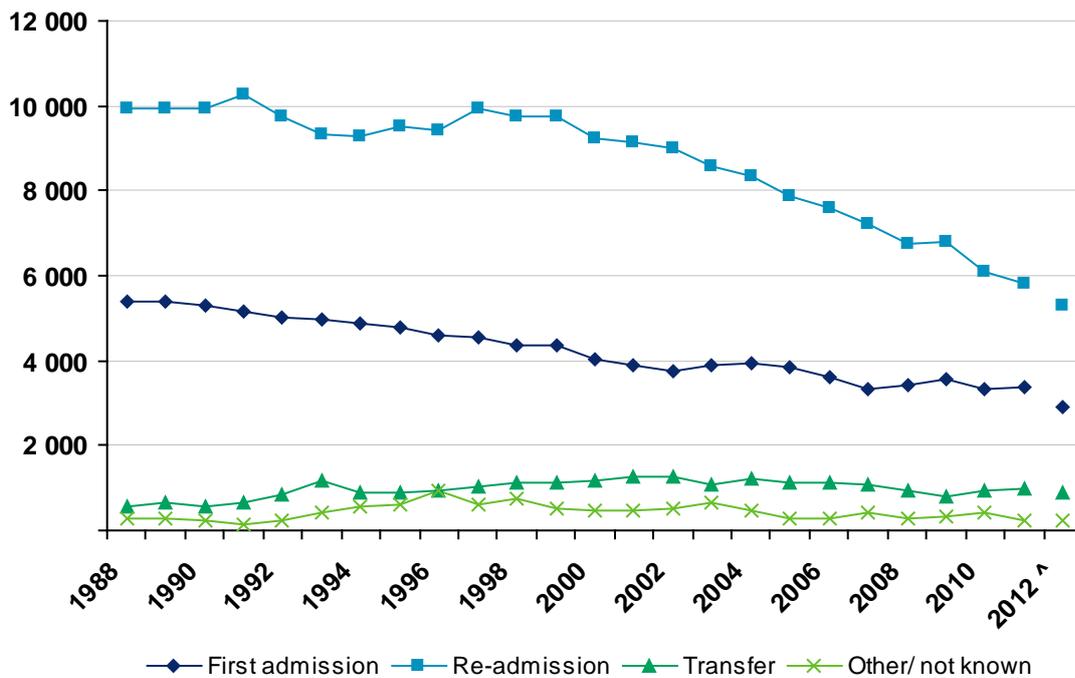
Admissions to mental illness specialties in Scottish hospitals - MALE admissions; 1987/88 to 2011/12.



^ Excludes information on treatments at NHS Ayrshire & Arran for year ending 31 March 2012

Source: SMR04

Admissions to mental illness specialties in Scottish hospitals - FEMALE admissions; 1987/88 to 2011/12.



^ Excludes information on treatments at NHS Ayrshire & Arran for year ending 31 March 2012

Source: SMR04

For further information on admissions to mental illness specialties please see:

[Admissions to mental illness specialties by admission type - years ending 31 March 1988 - 2012](#)

[Psychiatric admissions, admission type by age and gender - years ending 31 March 2008 – 2012](#)

[Psychiatric admissions, residents and discharges by Health Board of residence and Community Healthcare Partnership - years ending 31 March 2008 - 2012^R](#)

^R – Jun 2014. The sheets labelled 2011_2012 and 2010_2011 have been updated as figures presented by health board in the first five columns were incorrect. Scotland totals remain unaffected.

Mental illness Inpatient specialties

Treatments at mental illness hospitals are divided into five separate clinical specialties. The number of discharges from each specialty for the year ending 31 March 2012 are shown in the table below. These are broadly similar to the numbers seen in previous years.

Mental illness specialties in Scottish hospitals: discharges by specialty – year ending 31 March 2012.

	All discharges	First Admissions ¹	Re – admissions ²	Transfers ³	Other/not known
Male					
All specialties	9 720	3 034	5 177	1 233	276
General Psychiatry	7 617	2 193	4 494	776	154
Child psychiatry	14	14	-	-	-
Adolescent Psychiatry	60	35	15	9	1
Forensic Psychiatry	276	20	54	199	3
Psychiatry of Old Age	1 753	772	614	249	118
Female					
All specialties	9 270	2 865	5 277	881	247
General Psychiatry	6 772	1 800	4 284	566	122
Child psychiatry	10	5	4	-	1
Adolescent Psychiatry	144	81	41	17	5
Forensic Psychiatry	16	2	9	5	-
Psychiatry of Old Age	2 328	977	939	293	119

1 First ever recorded admission to psychiatric inpatient care

2 Re-admission following a break in inpatient care

3 Direct transfer from another psychiatric hospital or from one consultant to Another within the same hospital

Source: ISD Scotland SMR04

Excludes information on treatments at NHS Ayrshire & Arran

Formal and Informal Admissions

A patient may be admitted as either an informal or a formal admission. A formal admission refers to a patient admitted under the Mental Health (Scotland) Acts 1960 & 1984 and the Mental Health (Care and Treatment) (Scotland) Act 2003. Only a small proportion of all admissions to mental illness specialties are formal.

It should be noted that a patient's status may change during an inpatient episode. Patients who are admitted on a formal basis and have their status revoked whilst in hospital will still be counted as a formal admission in the analysis below.

- The proportion of all admissions that were formal is similar to the previous year, at around 16%.
- The percentage of first admissions that were formal was similar for males and females (11.9% and 11.8% respectively).
- The percentage of readmissions that were formal was higher for males (16.2%) than females (12.9%) in the year ending 31 March 2012.

For further information on Formal/Informal admissions please see:

[Admissions to psychiatric specialties by status on admission - years ending 31 March 2008 - 2012](#)

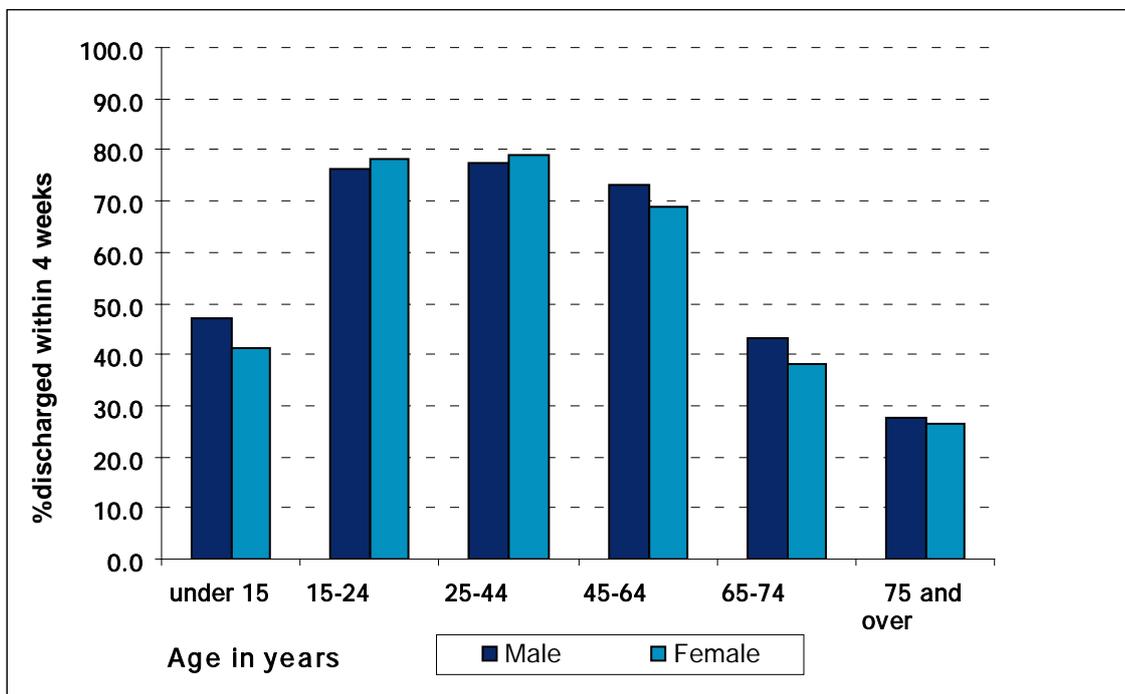
Further more detailed information on patients admitted under the Mental Health (Scotland) Acts 1960 & 1984 and the Mental Health (Care and Treatment) (Scotland) Act 2003 can be obtained from the Mental Welfare Commission at:

<http://www.mwscot.org.uk/>

Length of stay

A significant proportion of patients who are admitted to psychiatric inpatient hospitals stay for extended periods of time due to the nature of their illness. This is particularly the case for older people who may be suffering chronic, degenerative illnesses such as dementia and require long-term care. This is illustrated in the chart below where around 77% of discharges occur within 4 weeks of admission in the 15 - 44 year old age groups, declining to around 27% of discharges in people aged 75 and over.

Discharges from mental illness specialties in Scottish hospitals Percentage of patients discharged within 4 weeks of admission, by sex and age Year ending 31st March 2012



Source: SMR04

Excludes information on treatments at NHS Ayrshire Arran

For more detailed information on length of stay for discharges and resident inpatients see:

[Discharges from mental illness specialties in Scottish hospitals, number and percentage of patients discharged by age, sex and length of stay – year ending 31 March 2012](#)

Discharges by diagnosis group

Information Sources and Codes

Psychiatric inpatient episode records (SMR04) provide a source of diagnostic information, with details recorded both on admission to hospital and on discharge (from mental illness specialties).

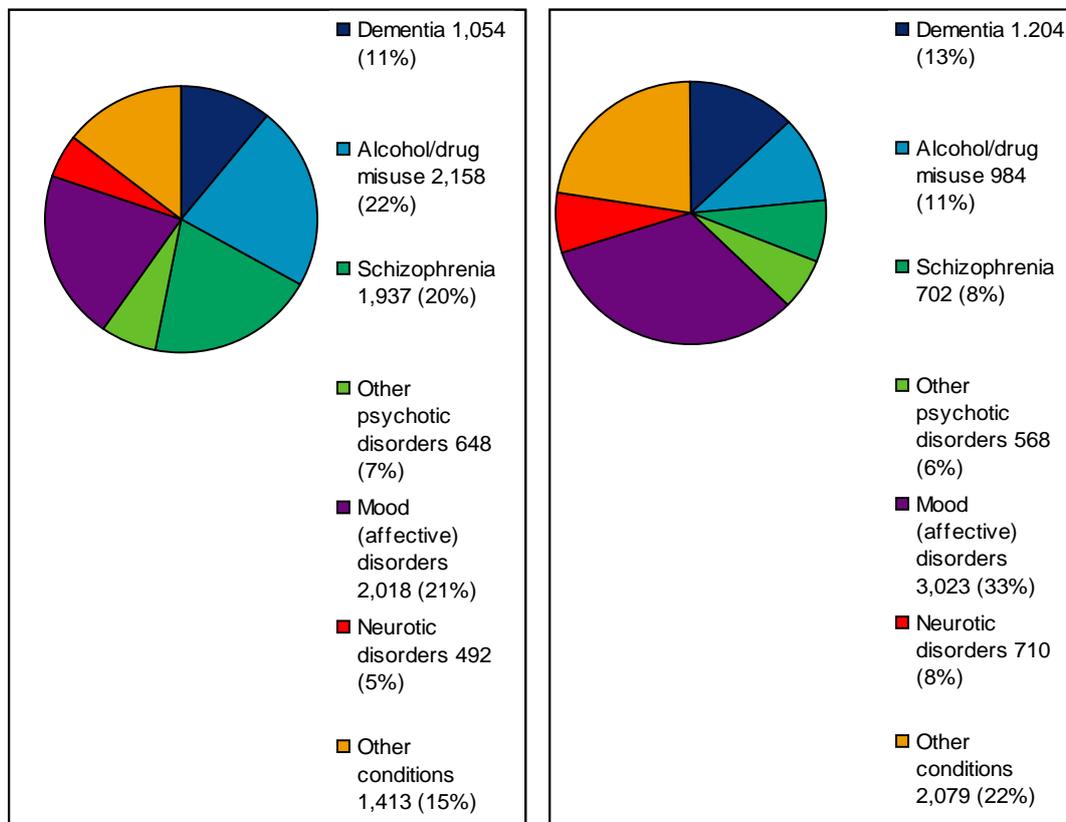
A main diagnosis is reported, together with provision for up to three further diagnoses on admission, and five further diagnoses on discharge. The main diagnosis recorded should come from Chapter V (Mental and behavioral disorders) of the International Classification of Diseases 10th Revision (ICD-10).

All information presented in this section is based on diagnosis at the time of discharge from hospital. This is understood to be a more robust and complete method of measuring diagnosis as in some cases a specific diagnosis may not be reported on admission to psychiatric hospital and a diagnosis such as 'under observation' may be recorded. It is worth noting that a diagnosis may change between admission and discharge of a patient and that diagnoses of those patients still resident in psychiatric hospitals will not be included here.

In order to aid interpretation and robustness of analysis, data is presenting combining the diagnostic codes into broad groupings. However, if required, information on individual diagnoses is available on request.

Discharges from mental illness specialties in Scottish hospitals by main diagnosis: Year ending 31 March 2012

1. All diagnosis groups



Totals percentages may not sum to 100% due to rounding
Source: SMR04

Excludes information on treatments at NHS Ayrshire Arran

- A higher proportion of males than females discharged from psychiatric inpatient care have a diagnosis of alcohol / drug-related problems or schizophrenia.
- Conversely a higher proportion of females than males have a diagnosis of mood (affective) disorder or dementia.
- The category mood (affective) disorders covers a range of conditions including bipolar affective disorder, depressive episodes and recurrent depressive disorders
- Depressive disorder accounts for approximately half of all mood (affective) disorders cases
- For some conditions, most notably schizophrenia, a small number of people may require a relatively large number of spells in hospital.

The diagnosis groups and their associated ICD10 codes are shown in Appendix A1.

Further information on discharges from mental illness specialties, aggregated into seven broad diagnostic groupings (main diagnosis on discharge) by gender is available in the following tables

[Psychiatric hospital discharges by diagnosis, type of admission and gender – years ending 31 March 2008 - 2012](#)

[Psychiatric hospital discharges by diagnosis, gender and age with rates – years ending 31 March 2008 - 2012](#)

Destination on Discharge

Information on where patients go when they are discharged from mental illness specialties is routinely collected on SMR04. More than 60 different detailed destination types can be coded. For ease of presentation, these are aggregated into the seven broad categories below.

- Approximately 74% of psychiatric inpatient episodes end with a discharge to the patient's home
- Around 11% of total discharges are transfers to other psychiatric care providers for ongoing mental illness treatment
- These are broadly similar to the proportions for previous years.

Discharges from mental illness specialties in Scottish hospitals by destination on discharge: year ending 31 March 2012

	Male Number	%	Female Number	%	Total number	%
All discharges	9 720	100.0	9 270	100.0	18 990	100.0
Discharged home	7 048	72.5	7 075	76.3	14 123	74.4
Transfer to other psychiatric care	1 311	13.5	849	9.2	2 160	11.4
Transfer to other inpatient care	243	2.5	256	2.8	499	2.6
Discharged to other NHS/private institution	638	6.6	797	8.6	1 435	7.6
Discharged to local authority/voluntary care	-	-	-	-	-	-
Died	224	2.3	177	1.9	401	2.1
Other / not known	256	2.6	116	1.3	372	2.0

Source: SMR04

Excludes information on treatments at NHS Ayrshire Arran

Psychiatric readmission

Readmissions to psychiatric hospitals was the subject of a HEAT target running from December 2004 to December 2009. The HEAT target was to '*reduce the number of readmissions (within one year) for those that have had a psychiatric hospital admission of at least seven days by 10 per cent by the end of December 2009*'.

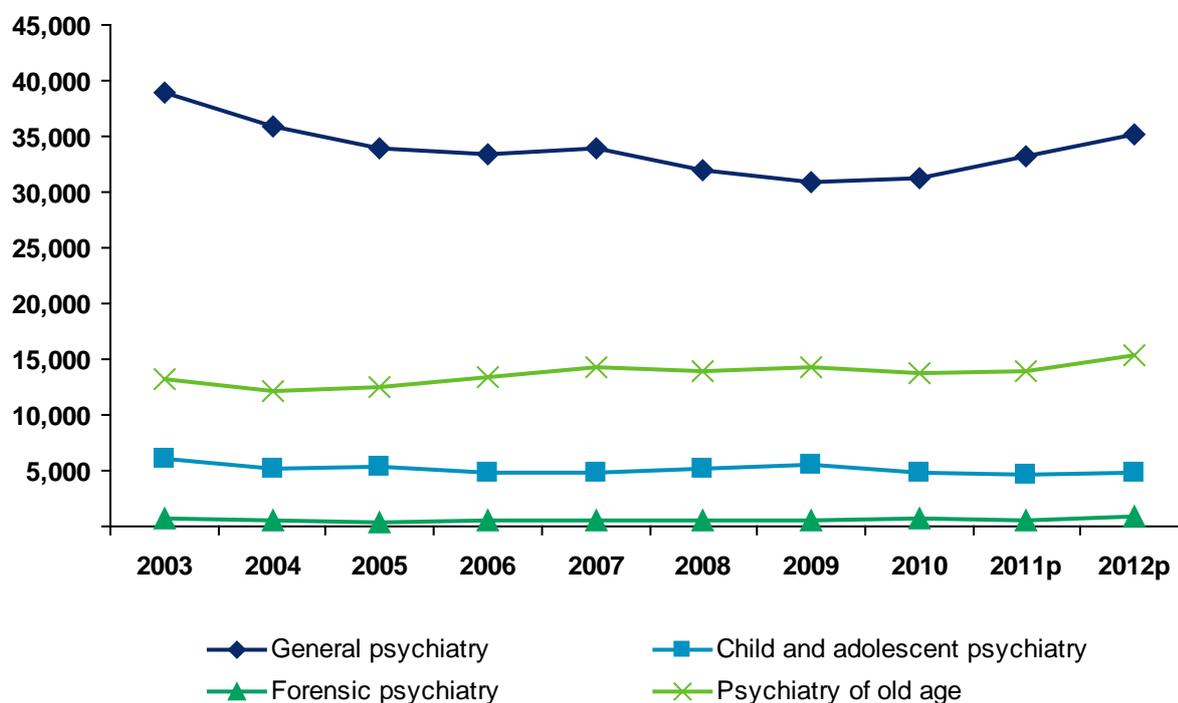
The target included patients with an initial discharge occurring up to the end of December 2009. As readmissions up to one year after the initial discharge were counted for the target, information on admissions up to the end of December 2010 was required to allow final performance against this target to be assessed.

This information was included in the 2011 version of this report. The previously published table is included again here for historic purposes only. [Psychiatric readmissions by NHS board](#)

Outpatients Summary of attendances at outpatient clinics in psychiatric specialties

Attendances at consultant led psychiatric outpatient clinics are an important additional source of information on the care of patients with mental health problems.

Trends in new (first) outpatient appointments at consultant clinics within mental health specialties. Years ending 31st March 2003 to 2012



Source ISD(S)1

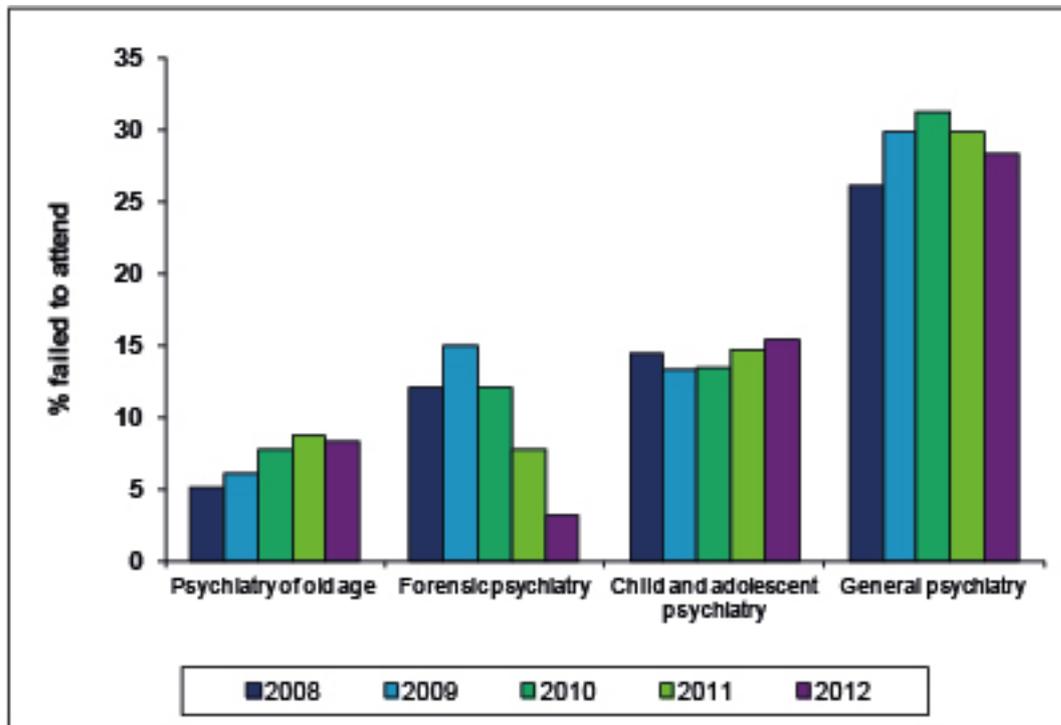
Information presented includes data for NHS Ayrshire & Arran

Includes first appointments made where a patient did not attend

p. 2011 and 2012 data are provisional at this date. Where outpatient activity figures are unavailable due to data submission issues, data has been estimated by ISD using the last complete data submission. ISD are in the process of contacting NHS boards with long standing data submission issues. Revisions to data are expected to be small and estimates will be replaced with actual data in future publication

Rates for people who failed to attend their outpatient appointment at psychiatric specialties vary considerably. For example, in the year ending 31 March 2012 for patients attending the specialties of forensic psychiatry or psychiatry of old age, the failure to attend rate was around 6%. In the specialty of general psychiatry however, the rate of failure to attend rose to 28%.

Rates (%) of new outpatients who failed to attend their appointment within mental health specialties. Years ending 31st March 2008 to 2012



Source SMR00
Information presented includes data for NHS Ayrshire & Arran

Links to other information sources

Information on the following mental health topics is also available:

- Mental Health diagnoses in Acute (general) hospitals
- Psychiatric bed provision
- SPARRA MD report final
- Child Health
- Community prescriptions
- General Practice
- Suicide
- Health and Social Community Care
- Substance Misuse
- Workforce
- Waiting Times

These can be accessed via the following link:

[Other information sources](#)

Glossary

SMR04	Scottish Morbidity record 04 – records information on all inpatient admissions and discharges from NHS mental health (psychiatric) hospitals in Scotland.
Formal Admission	Formal detention – Admission to psychiatric inpatient facilities under the jurisdiction of the Mental Health (Scotland) acts 1960 and 1984 and the Mental Health (Care and Treatment) (Scotland) Act 2003.
Forensic Psychiatry	A specialised branch of clinical psychiatry which relates to mentally disordered offenders and others with similar problems.

List of Tables

Table No.	Name	Time period	File & size
1	Psychiatric admissions, admission type by age and gender - years ending 31 March 2008 - 2012	Years ending 31 March 2008 to 2012	Excel [32kb]
2	Admissions to mental illness specialties by admission type - years ending 31 March 1988 - 2012	Years ending 31 March 1988 to 2012	Excel [20kb]
3	Psychiatric admissions, residents and discharges by Health Board of residence and Community Healthcare Partnership - years ending 31 March 2008 - 2012^R	Years ending 31 March 2006 to 2011	Excel [120kb]
4	Psychiatric formal/ informal admissions for years ending 31 March 2008 - 2012	Years ending 31 March 2008 to 2012	Excel [27kb]
5	Psychiatric hospital discharges by diagnosis, type of admission and gender - years ending 31 March 2008 - 2012.	Years ending 31 March 2008 to 2012	Excel [61kb]
6	Psychiatric hospital discharges by diagnosis, gender and age with rates - years ending 31 March 2008 - 2012	Years ending 31 March 2008 to 2012	Excel [147kb]
7	Discharges from mental illness specialties in Scottish hospitals, number and percentage of patients by age, sex and length of stay - year ending 31 March 2012	Year ending 31 March 2012	Excel [40kb]
8	Psychiatric re-admissions (HEAT) target	Year ending 31 December 2010	Excel [36kb]

^R – Jun 2014. The sheets labelled 2011_2012 and 2010_2011 have been updated as figures presented by health board in the first five columns were incorrect. Scotland totals remain unaffected.

Contact

Gordon Thomson

Senior information analyst
gordond.thomson@nhs.net
0131 275 6844

Cheryl Denny

Principal information analyst
cheryl.denny@nhs.net
0131 275 6373

Further Information

Further information can be found on the [ISD website](#)

ISD intends to undertake a comprehensive review of the statistics and data presentation of this publication in 2013. Comments on what is currently most useful or what other information would be beneficial are encouraged and should be sent to nss.isdmentalhealth@nhs.net

Appendix

A1 – Background Information

Diagnosis groupings

Diagnosis	ICD code (10 th revision)
Dementia	F00 - F03 (main diagnosis) or F00*, F02* (second diagnosis)
Alcohol misuse	F10.0 - F10.9
Drug misuse	F11.0 - F19.9
Schizophrenia	F20
Mood (affective) disorders	F30 – F39
<i>Bipolar affective disorders</i>	F31
<i>Depressive episode</i>	F32
<i>Recurrent depressive disorder</i>	F33
Other psychotic disorders	F04, F05, F09, F22, F23, F24, F28, F29
Disorders of childhood	F80, F81, F82, F83, F84, F88, F89, F90, F93, F94, F98
Neurotic, stress – related and somatoform disorders	F40 – F48
Personality disorders	F60
Learning disability	F70 – F79
Other conditions	All other codes from Chapter V

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication Title	Mental Health (Psychiatric) Hospital Activity Statistics
Description	Mental health activity data collected across NHSScotland based on nationally available information routinely drawn from hospital administrative systems. The principal data source is the SMR04 (mental health) return which collects information on admissions to and discharges from NHS psychiatric hospitals in Scotland
Theme	Health and Social Care
Topic	Mental Health
Format	Excel workbooks PDF
Data sources	Scottish Morbidity Record 04 (SMR04)
Release date	18 December 2012
Frequency	Annual
Timeframe of data and timeliness	Data up to 31 March 2012 (SMR04 data excludes information on treatments at NHS Ayrshire & Arran due to data completeness issues)
Continuity of data	

Revisions statement	<p>Includes tables and reports showing year on year comparisons</p> <p>As with other SMR data collections, SMR04 – the main source of data included in this publication – is dynamic and each new publication includes revised data for previous years. Data relating to day patients (taken from ISD(S)1) have been removed in this publication. With the recent organisational restructure in ISD, the management and responsibility for the processing and updating of ISD(s)1 has moved to the Data Support & Monitoring Team within ISD's Data Management Service. Several issues concerning the completeness and quality of ISD(s)1 data have been highlighted across Scotland, in particular for those boards implementing the TrakCare Patient Management System.</p> <p>ISD have begun a process to engage more proactively with all boards, working in collaboration with them to improve the completeness and quality of this data.</p>
Revisions relevant to this publication	<p>June 2014. The sheets labelled 2011_2012 and 2010_2011 in Table 3 have been updated as figures presented by health board in the first five columns were incorrect. Scotland totals remain unaffected.</p>
Relevance and key uses of the statistics	<p>Making information publicly available for planning, epidemiology, provision of service and providing comparative information</p>
Accuracy	<p>Quality checks are conducted by NHS boards and ISD. Figures are compared to previously published data and expected trends</p>
Completeness	<p>Nationally SMR4 is estimated to be 99% complete for year to 31 March 2012. However, due to data submission issues treatments at NHS Ayrshire & Arran are excluded from this publication.</p>
Accessibility	<p>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines</p>
Value type and unit of measure	<p>Numbers and percentages</p>
Disclosure	<p>Medium risk of disclosure; cell values suppressed</p>
Official Statistics designation	<p>Official Statistics</p>
UK Statistics Authority assessment	<p>Not yet submitted for assessment</p>
Last published	<p>December 2011</p>
Next published	<p>December 2013</p>
Help email	<p>nss.isdmentalhealth@nhs.net</p>
Date form completed	<p>December 2012</p>

A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

Standard Pre-Release Access:
Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication leads

Extended Pre-Release Access

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)