

Treatment system-based data collection and analysis strategy

Results of a EMCDDA cross-unit working group

Dagmar Hedrich, TDI Meeting 2012 - 20 September 2012, Lisbon

Cross-unit project on treatment

Time frame: Sept 2010 - December 2012

Members:

Alessandra Bo Alessandro Pirona

Bruno Guarita Danica Klempova

Julian Vicente Katerina Skarupova

Linda Montanari Marica Ferri

Teodora Groshkova

Coordinator: Dagmar Hedrich

Supervisor: Roland Simon



Objectives of the cross-unit project

- Develop and implement a strategy of treatment data collection and analysis;
 - Facilitate communication between staff working in treatment area;
 - Ensure overall coherent, scientifically sound approach to the treatment area;
 - Avoid overlaps in data collection/reporting;
 - Ensure maximum analytical value of reporting tools;
 - Adopt common concepts;
 - Conceptualise new analyses and products;
 - Offer platform for exchange on treatment;
- Timing: Kick-off September 2010, finalise strategy by December 2012.



2010: Focus on data mapping

Main areas:

- characteristics of national TDI database structures, incl. level of access of NFP staff to case-data, potential options of joint analyses at European level;
- types of inter-linkages and data-flow between national TDI and OST databases; to assess amount of double-counting & number of OST cases covered by TDI reporting;
- 3. compilation of online treatment inventories (websites) from all countries, structured description of a main national inventory, analysing its usefulness for assessing reporting coverage.

2011: Focus on integration

Main task: To integrate the available treatment data

- Comparison between numbers reported in ST24/TDI prevalence/TDI;
- Design of graphical models of national treatment systems;
- Launch of CT: "Assessment of national estimates of total number in treatment" July 2011;
- Develop generic treatment system map
- Development of model for integrated overview of treatment and other health and social responses (integrated response profiles);
- Draft framework (Nov. 2011)



2012: Focus on analysis

- Expert meeting January 2012 on 'Similarities and differences in treatment systems in Europe and consequences for treatment monitoring'
- Draft framework circulated in May 2012
- Expert meeting September 2012 on 'Treatment facility surveys: which perspectives for data collectionat European level?'
- Still to be done:
- Finalise Technical report on characteristics of OST databases;
- Draw up implementation plan;
- Submit proposal of strategy to NFPs: November 2012.



Framework

+ Treatment system maps (generic)

Improve knowledge about treatment coverage

Use of available data from existing monitoring systems, e.g. clients entering treatment (TDI); clients in substitution treatment

+ Estimation toolkit

Improve national estimate on total numbers reached

+ Facility survey

Collect data on characteristics, provision, and quality of services

Country: The Czech Republic

Report: The Czech Republic

Date: 10/12/2011

Outpatient Network

Units	Patients					
Total Outpatient Units		Total	l Outpatients			
rep	369		rep	16343		
rep	218		rep	6169		

Spec	cialised Treatment res		ction Treatment lities (inc. alc/tob)	
	5		1,604	
	ni		ni	

Low	Threshold Agencies	Outp	atient by NGO	
	#101		#1533	
	72		4,162	

Day	Care Centres		grated Outpatient lities (inc. alc/tob)	
	26		3,886	
	ni		ni	
	•			

GPs 283		GPs alc/to	+ Psychiatrists (inc.		
	283			#25400	
	ni			ni	

Priso	ns	Priso	ons	
	10		ni	
	ni		ni	

OST		Opia Trea	d Substitution tment (OST)	
	53		3896	
	n/a		ni	
			•	

Othe	r	Sobe alc/to	ering-up Units (inc. ob)	
	14		#27664	
	ni		ni	

Units				Patie	nts	
Total Units		Total Patients				
calc		720	Н	rep	16343	М
2	217 276		M	rep	8207	М

Inpatient Network

Units	Patients					
Total Inpatient Units		Total Inpatient Units Total Inpatients		Inpatients		
calc	351		, , , , , , , , , , , , , , , , , , , 		5651	
rep	58		rep	2838		

Hospital - Detoxification / Emergency		oital Detoxification + rgency Department	
	14		ni
	ni		ni
			'

Hospital - Rehabilitation		Psychiatric Hospitals / Units in Hospitals			
	51			5,308	
	ni			ni	

Therapeutic Communities		Therapeutic Communities			
	14			343	
	ni			ni	

Residential Communities		inclu	ncluded in above		
	0			0	
	0			0	

Prison		included in Outpatients			
	0			0	
	0			0	

Other			ucational Facilities for ung (not included)	
	272		#7820	
	ni		ni	

Other		n	n/a	
	0		0	
	0		0	



Meeting on facility surveys: 19 September

Facility surveys provide knowledge about characteristics, treatment service options, standards and quality assurance mechanisms

Facility surveys can generate valuable information to determine the coverage of the TDI-based monitoring system

Experts from 21 countries participated in the meeting.

Many countries have facility surveys and some are currently planning to launch them.

Facility surveys are used for a range of purposes incl. documentation, accreditation, policy planning and can be linked to funding-allocation – the 'why' / the initiative is typically linked to specific national policy goals

An important purpose of FS is the documentation of similarities and differences (within and between countries)

Complexity, length, and datasets seem to vary, although several common elements were apparent in the country examples.

A common minimum dataset for Europe was considered to be an advantage.

The use of electronic platforms was common, and seemed cost-effective.

A clear mandate would be needed for the implementation of an European FS.



Thank you