



EXPERIENCES WITH COLLECTING TREATMENT DATA IN BARBADOS

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DRUG TREATMENT DATA IN BARBADOS: HOW IS IT COLLECTED?

Data on Treatment Seekers

- The treatment data which is collected in Barbados is largely patient-related i.e. in-take data.
- The data is therefore primarily collected by treatment agencies at time of in-take and includes:
demographics, treatment history, drug motivating the need for treatment, etc.



DRUG TREATMENT DATA IN BARBADOS: HOW IS IT COLLECTED?

- There has been no standardized approach to the collection of this data i.e. each of the agencies has been using their own approach (instruments/methods, etc.) to collect in-take data.
- However, in the first quarter of 2015, the standardized in-take form was officially introduced.



DRUG TREATMENT DATA IN BARBADOS: HOW IS IT COLLECTED?

Data Regarding Treatment Programmes & Their Effectiveness

- To date, no official evaluations have been conducted in the treatment centres.



DRUG TREATMENT DATA IN BARBADOS: HOW IS IT USED?

Recall:

The data collected in Barbados primarily pertains to the treatment seekers themselves.

Micro Level Uses of this Data

- Used for treatment planning



DRUG TREATMENT DATA IN BARBADOS: HOW IS IT USED?

Macro Level Uses of this Data

- Used by agencies/departments to gain insight into the treatment situation in the country
- Agencies (e.g. NCSA, CICAD) collate the data and produce reports
- The reports provide an overview of the treatment situation in Barbados e.g. at each agency, differences/similarities between local agencies, comparisons to the Barbados situation and those in other islands.



DRUG TREATMENT DATA IN BARBADOS: HOW IS IT USED?

- The data from the agencies also allows for the identification of trends re: substance use/abuse which are occurring within the island.
- Links can also be made between treatment data and the trends being observed within the Supply sector.



STANDARDIZED IN-TAKE FORM

History

- Barbados was involved in the initial pilot project (November 2012 – April 2013)
- As a part of the pilot, a member of staff from the NCSA and a member of staff from one of the local treatment agencies attended CICAD training workshops.
- The information gained from this training was shared with persons from the other treatment agencies in preparation for the implementation of the pilot.



STANDARDIZED IN-TAKE FORM

- Once the pilot was completed the data collected was submitted to CICAD and a comparative report (Barbados, Jamaica, Trinidad) was prepared.
- Challenges experienced during the pilot were submitted to CICAD and various adjustments were made to the data collection form and the associated database.



STANDARDIZED IN-TAKE FORM

Present

On December 2, 2014 a sensitization meeting was held at the Ministry of Home Affairs.

- Personnel from the 3 treatment facilities and the Prison attended.
- The meeting was important as:
 - (1) it helped to gain buy-in from the agencies regarding the long-term use of the form
 - (2) Some persons were not aware of the form or the pilot due to personnel changes at some of the agencies as well as the recent decision to include the treatment programme at the Prison.



STANDARDIZED IN-TAKE FORM

- During the meeting, persons from each of the treatment facilities expressed an interest in the form and a commitment to its implementation.
- The form was examined and discussed (including possible changes) by those present.
- Once the form was adjusted by CICAD, it was sent back to the NCSA for distribution to the agencies.



STANDARDIZED IN-TAKE FORM

- This distribution took place during the first quarter of 2015.
- To date, there have been no reports of major issues from the agencies.
- However, understaffing is affecting at least one agency and this has the potential to negatively affect the use of the form at that agency.



STANDARDIZED IN-TAKE FORM

- Some agencies committed to entering their own data into the Epi Info database.
- However, the NCSA will be responsible for entering the data coming from agencies with resource issues (e.g. lack of computers & personnel for data entry, etc.)
- Agencies have been asked to return their data to the NCSA by May 31, 2015. This is to allow the NCSA to have time to enter data where necessary in order to meet the CICAD deadline for submission (June 2015).





EXPERIENCES WITH COLLECTING TREATMENT DATA AT THE PSYCHIATRIC HOSPITAL: USE OF THE STANDARDIZED IN-TAKE FORM

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IMPLEMENTATION

- A standardized data collection tool was WELCOMED.
- Analysis of data will allow for the better planning of changes to the programme or facility.



IMPLEMENTATION

- A trial of one data collector has been started
- The data form is completed at the time of first contact with the client seeking help by the doctor
 - i.e. at the psychiatric evaluation



COMPLETING THE FORM

- No major issues
- Most of the data usually forms part of the psychiatric evaluation



ENTERING DATA

- Data entry into Epi info has not been “user friendly”
- Epi info vs Excel/ Access

