

# NDTMS Core Dataset P:

data items for all clients of providers reporting the adult dataset.



Protecting and improving the nation's health

Client	
Initial of client's first name	!
Initial of client's surname	!
Client birth date	!
Client sex at registration of birth	!
Ethnicity	
Country of birth	

KEY	
Items that should be updated over time (eg at care plan reviews)	✓
Data items that, if changed, will generate a 'missing' record that will need to be resolved in the next NDTMS submission	!
New data item for CDS-P	Red Text



Episode	
Agency code	!
Client reference	
Software system used (auto generated)	
Consent for NDTMS	!
Postcode	✓
DAT of residence	✓
Local Authority	✓
<b>Referral date to service</b>	
Referral date	!
Referral source	
Triage date	
Previously treated	
TOP care coordination	✓
Client stated sexual orientation	
Religion or belief	
Disability 1	
Disability 2	
Disability 3	
Accommodation need	
Employment status	
Time since last paid employment	
<b>Veteran of the British armed forces</b>	
Pregnant	
Parental responsibility for a child aged under 18	
<b>Do any of these children live with the client</b>	
How many children under 18 in total live in client house	
What help are the children receiving (1)	
<b>What help are the children receiving (2)</b>	
<b>What help are the children receiving (3)</b>	
Problem substance number 1	
Age of first use of problem substance number 1	
Problem substance number 2	
Problem substance number 3	
Injecting status	
SADQ score	
Health care assessment date	
Hep B intervention status	
Hep C intervention status	
Hep C test date	
Hep C antibody test status	
Hep C PCR test status	
<b>Referred for Hep C treatment</b>	
<b>HIV status</b>	
<b>Referral for alcohol-related liver disease</b>	
<b>Issued with naloxone at episode start</b>	
<b>Administered with naloxone to reverse effects of overdose</b>	
Mental health treatment need	
Receiving treatment for mental health need(s)	
Discharge date	
Discharge reason	



Intervention	
Treatment intervention	!
Date referred to intervention	!
Intervention setting	
Date of first appointment offered for intervention	
Intervention start date	
Intervention end date	



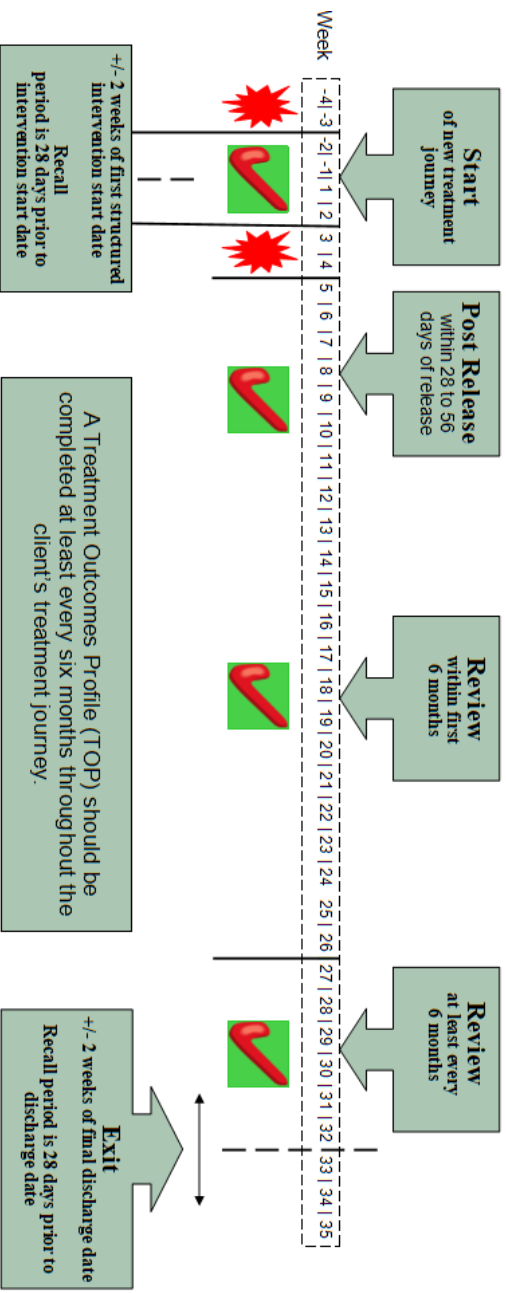
Combined Review Form (CRF)	
<b>TOP</b>	
Outcomes profile date	!
Treatment stage	
<b>CIR</b>	
Client Information Review (CIR) date	!
<b>CIR stage</b>	
CIR data items	
<b>Sub Intervention</b>	
Sub intervention assessment date	!
Sub interventions received	



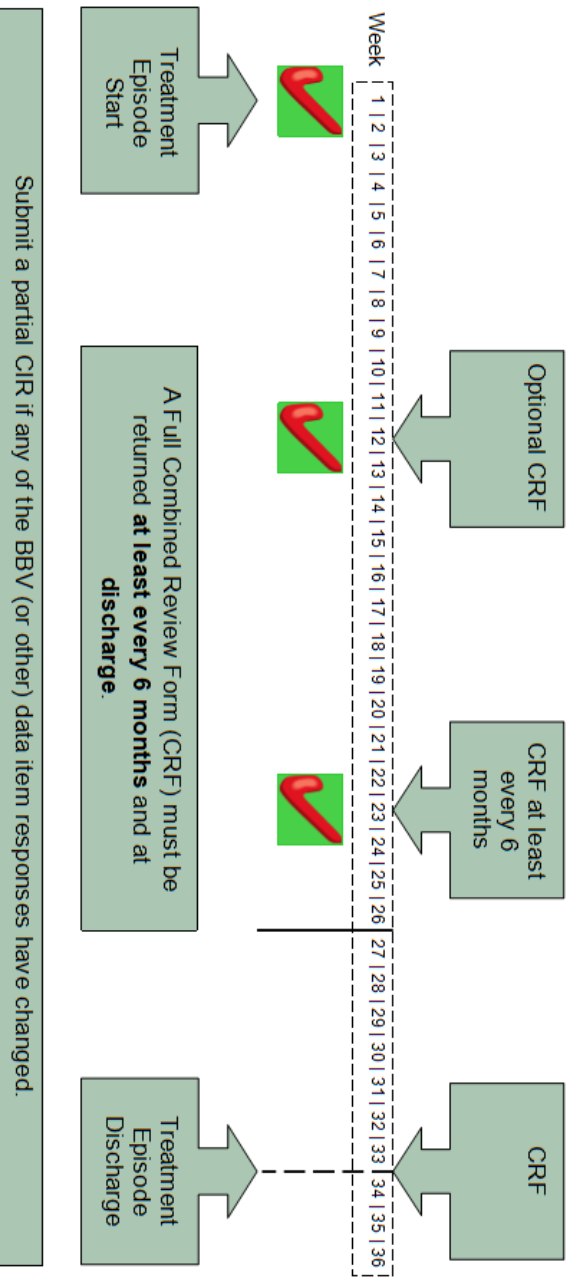
# NDTMS Core Dataset P

<b>Structured</b>	
<b>Pharmacological Intervention</b>	
<p>Methadone (oral solution) / Buprenorphine (tablet/wafer) prescribing intention / daily dose / supervised consumption</p> <p>Buprenorphine depot injection / Diamorphine injection / Methadone injection / Benzodiazepine / Stimulant / Pregabalin / Gabapentin / Naltrexone prescribing intention</p> <p>Chlordiazepoxide /Diazepam/Carbamazepine/Other prescribed medication for alcohol withdrawal</p> <p>Acamprosate/Disulfiram alcohol relapse prevention</p> <p>Vitamin B &amp; C supplement to prevent/treat Wernicke’s encephalopathy/Wernicke-Korsakoffs</p> <p>Other medication for treatment of drug misuse/dependence/withdrawal/associated symptoms</p>	
<b>Psychosocial Intervention</b>	
<p>Client involved with Motivational Interventions</p> <p>Client involved with Contingency Management (Drug Focused)</p> <p>Client involved with Family and Social Network Interventions</p> <p>Client involved with cognitive and behavioural interventions (Substance Misuse Specific)</p> <p>Evidence-based psychological intervention for co-existing mental health problems</p> <p>Client involved with Psychodynamic Therapy</p> <p>Client involved with 12-step work</p> <p>Client involved in Counselling – BACP Accredited</p>	
<b>Non-structured</b>	
<b>Recovery Support</b>	
<p>Client provided with Peer support involvement</p> <p>Client provided with Facilitated access to mutual aid</p> <p>Client provided with Family Support</p> <p>Client provided with Parenting Support</p> <p>Client provided with Housing support</p> <p>Client provided with Employment support</p> <p>Client provided with Education and Training support</p> <p>Client provided with supported work projects</p> <p>Client provided with recovery check ups</p> <p>Structured evidence-based psychosocial interventions to support relapse prevention</p> <p>Client provided with complementary therapies</p> <p>Client provided with Mental health Interventions</p> <p>Client referred to a stop-smoking intervention</p> <p>Client provided with domestic abuse / violence support</p> <p><b>Client provided with prescribing for relapse prevention (post structured treatment only)</b></p>	
<b>Intervention Setting</b>	
Community	<p>The setting that this intervention is provided in, if the setting differs from the one that the provider is registered under in the agency table. This field should be used where a provider has multiple treatment settings or where the client is being treated at another setting that would not report to NDTMS. If the setting of the intervention is the same as that registered then this field must be left blank.</p>
Inpatient Unit	
Primary Care	
Secure Setting	
Residential	
Recovery House	

## TOP Timeline



## Dataset P Items Timeline



Submit a partial CIR if any of the BBV (or other) data item responses have changed.



# NDTMS Date Sequence Timeline

## Healthcare Assessment Date

- Expected to be done after Triage Date and as part of an overall comprehensive assessment process, i.e., not at the Modality Start Date, as we would question whether there would be sufficient time to conduct a thorough and comprehensive assessment process at the first treatment appointment
- Date at which the care co-ordinator is satisfied that initial HCA is completed

## Date Referred to Intervention

- For the **first** intervention of treatment within an episode this should be considered as a date referred to **Treatment Service** (could be a *third-party referral*). This is expected to be earlier than or the same as the referral date
- For interventions after the first within an episode it is the date the key worker agreed with the client that they were to have this treatment

## Referral date

- Date referred for this episode of **structured** treatment
- Expected to be same as or after Date Referred to Intervention

## First Appointment Offered Date for Intervention

- Expected to be the same as or after Triage / Initial Presentation Date
- Not Expected to be after Intervention Start Date

## Intervention End Date

- Expected to be after the Intervention Start Date
- Can be same as Intervention Start Date

## Referral date to service

- Date client was initially referred to this service.
- For structured or non-structured treatment.

## Triage / Initial Presentation Date.

- Date of first face-to-face presentation for structured treatment.
- Expected to be the same as or after the Referral date

## Intervention Start Date

- Expected to be same as or after the Triage / Initial Presentation date and first appointment offered date for modality
- Complete the **setting** that the intervention is delivered in, if it is different to your agency's default setting

## Discharge Date

- Expected to be the latest date in this sequence
- Can be the same as or after Intervention End Date

1<sup>st</sup> April

1<sup>st</sup> May

19<sup>th</sup> May

19<sup>th</sup> May

21<sup>st</sup> May

28<sup>th</sup> May

5<sup>th</sup> November

5<sup>th</sup> November

Key Episode Events

