



Office for Health
Improvement
& Disparities

National Drug Treatment Monitoring System (NDTMS)

**Secure Settings Young People Business Definitions
(Dataset R)**

V1.2

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Introduction

The National Drug and Alcohol Monitoring System (NDTMS) is an English substance misuse treatment data collection that has been in place since 2004. This is hosted within the Office for Health Improvement and Disparities (OHID) in the Department of Health and Social Care.

Statistics derived from the collection (including those designated as Official and National Statistics) facilitate needs-assessment and targeting of resources, assessment of demand for services, evaluation of intervention/harm-reduction strategy effectiveness and service performance, service quality assurance and analyses of substance misusing populations. NDTMS data currently underpins key indicators that support the government's drug strategy.

NDTMS is a national standard and is applicable to young people and adults within community and secure setting-based treatment providers. The dataset is accredited by NHS Digital and the [Information Standard](#) is published under section 250 of the Health and Social Care Act 2012.

This document defines the items to be collected and utilised by NDTMS for use with young people who are receiving structured drug and alcohol treatment in secure settings.

See [Appendix A](#) for the definition of structured treatment. Young people's secure settings include secure children's homes, welfare only homes, young offender institutions (with populations under 18 years of age) and secure training centres. [Information and definitions relating to data collection from adults and young people in the community and adults in the secure setting can be found here.](#)

This document is intended to be a definitive and accessible source for use. It is not intended to be read from end to end, rather as a reference document which is utilised by a variety of readers, including:

- interpreters of data provided from OHID systems
- suppliers of systems to OHID
- suppliers of systems that interface to OHID systems
- OHID/National Drug Treatment Monitoring System (NDTMS) personnel

This document should not be used in isolation. It is part of a package of documents supporting the NDTMS dataset and reporting requirements.

Please read this document in conjunction with:

- NDTMS CSV File Format Specification – defines the format of the CSV file used as the primary means of inputting the core dataset into NDTMS
- NDTMS technical definitions – provides the full list of fields that are required in the CSV file and the verification rules for each item
- NDTMS geographic information – provides geographic information eg UTLA of residence
- NDTMS reference data – provides permissible values for each data item

These definitions and guidance documents can be found on the [NDTMS.net website](https://www.ndtms.net).

To assist with the operational handling of CSV input files, each significant change to the NDTMS dataset is allocated a letter. The current version, commonly referred to as the NDTMS Core Dataset Q (CDS-Q) for national data collection, will come into effect on 1 April 2022.

NDTMS is a consented to dataset meaning that all young people should give informed and evidenced consent for their information to be shared with NDTMS. [For further details, refer to NDTMS consent and confidentiality guidelines.](#)

Purpose of NDTMS

The data items contained in the NDTMS dataset are intended to:

- provide measurements that support the outcome and recovery focus of the government's drug strategy, such as:
 - proportion of clients successfully completing treatment
 - proportion of clients that do not return to treatment following a successful completion
 - value for money
 - housing and employment
 - health and quality of life outcomes
 - support for children and families of drug and alcohol dependent people
- provide information which can be used to monitor how effective drug and alcohol treatment services are and help to plan and develop services that better meet local needs
- produce statistics and support research about drug and alcohol use treatment
- provide measurements to support the Public Health Outcomes Framework

Data entities

The NDTMS dataset consists of fields that are updateable (such as the young person's postcode and BBV information) and fields that should not change and should be completed as per the start of the episode (such as the young person's ethnicity). The [NDTMS dataset fields table](#) details for each data item the question, the definition and whether it is updateable during the episode of treatment or whether the information reported should be as per the start of the episode. In general, all data is required.

The data items listed in this document may be considered as belonging to 1 of 4 different sections, which are used throughout this document.

Client details

Details pertaining to the young person including initials, date of birth, sex, ethnicity and nationality.

Episode details

Details pertaining to the current episode of treatment including information gained on reception and at triage such as geographic information, problem substance/s, parent and child status, BBV, among others. A treatment episode includes time spent engaged in treatment at one secure setting, made up of one triage date and one discharge date but can (and in most circumstances will) include multiple treatment interventions. Multiple treatment episodes can be recorded at each setting at different times to record young people who may complete or drop out of treatment but re-present later in their stay.

Treatment intervention details

Details regarding which intervention/s the young person has received and the relevant start and end dates.

NDTMS dataset fields

Note: where items are designated as 'should not change' this does not include corrections or moving from a null in the field to it being populated.

1. Client details

Field description	CSV header	Definition	Field updatability
Client ID	CLIENTID	<p>A mandatory, unique technical identifier representing the young person, as held on the clinical system used by the treatment provider.</p> <p>This should be a technical item and must not hold or be composed of attributors which might identify the young person.</p> <p>A possible implementation of this might be the row number of the young person in the client table.</p>	Must be completed. If not, the record will be rejected. This is populated by your software system. Should not change.
Initial of client's first name	FINITIAL	<p>The first initial of the young person's first name eg Max would be 'M'. If a young person legally changes their name this should be updated on your system.</p> <p>This will create a mismatch at your next submission for which you should select 'replace' or 'delete'.</p>	Must be completed. If not, the record will be rejected. Should not change (record as per start of episode). If changed will create a validation mismatch.
Initial of client's surname	SINITIAL	<p>The first initial of the young person's surname eg Smith would be 'S', O'Brian would be 'O' and McNeil would be 'M'. If a young person legally changes their name this should be updated on your system.</p> <p>This will create a mismatch at your next submission for which</p>	Must be completed. If not, the record will be rejected. Should not change (record as per start of episode). If changed will create a validation mismatch.

Field description	CSV header	Definition	Field updatability
		you should select 'replace' or 'delete'.	
Client birth date	DOB	The day, month and year that the young person was born.	Must be completed. If not, the record will be rejected. Should not change (record as per start of episode). If changed will create a validation mismatch.
Client stated sex	SEX	The sex as stated by the client on their birth certificate or gender recognition certificate.	Must be completed. If not, the record will be rejected. Should not change (record as per start of episode). If changed will create a validation mismatch.
Ethnicity	ETHNIC	The ethnicity that the young person states as defined in the Office of Population Censuses and Surveys (OPCS) categories. If a young person declines to answer, then 'not stated' should be used. If the young person does not know then 'Ethnicity is unknown' should be used.	Should not change (record as per start of episode).
Country of birth	NATION	Country of birth. Kosovo should be recorded as Serbia as per NHS data dictionary.	Should not change (record as per start of episode).
Agency code	AGENCY	A unique identifier for the treatment provider that is defined by the regional NDTMS team eg L0001.	Must be completed. If not, the record will be rejected. This is populated by your software system. Should not change. If changed file will fail on validation.
Client reference	CLIENT	A unique number or ID allocated by the treatment provider to a young person - this should be the NOMS ID if applicable.	Should not change and should be consistent across all episodes at

Field description	CSV header	Definition	Field updatability
		The client reference should remain the same within a treatment provider for a young person during all treatment episodes. This must not hold or be composed of attributors which might identify the young person.	the treatment provider.

2. Episode details

Field description	CSV header	Definition	Field updatability
Episode ID	EPISODID	A mandatory, unique technical identifier representing the episode, as held on the clinical system used at the treatment provider. This should be a technical item and should not hold or be composed of attributors which might identify the individual.	Must be completed. If not, the record will be rejected. This is populated by your software system. Should not change.
Software system and version used	CMSID	A mandatory, system identifier representing the clinical system and version used at the provider.	Must be completed. If not, the record will be rejected. This is populated by your software system. May change (record as per current situation).
Consent for NDTMS	CONSENT	Whether the young person has agreed for their data to be shared with NDTMS. Informed and evidenced consent must be sought from all young people. For further information on obtaining NDTMS consent, see the NDTMS consent and privacy notices .	The young person must give consent before their information can be sent to NDTMS. May change (record as per current situation).
Postcode	PC	The postcode of the young person's place of residence prior to entering the secure setting. The postcode should be truncated by your system when extracted for NDTMS (the final 2 characters of the postcode should be removed, eg 'NR14 7UJ' would be truncated to 'NR14 7'). If a young person states that they are of no fixed abode or they are normally resident outside of the UK then the default postcode ZZ99 3VZ should be recorded (and truncated on extract).	Should not change (record as per prior to entry to the secure setting).

Field description	CSV header	Definition	Field updatability
Upper tier local authority	UTLA	<p>This field will be electronically mapped by software providers based on the postcode of the client. Treatment providers will not need to complete this field.</p> <p>The upper tier local authority (UTLA) in which the young person normally resides (as defined by the postcode of their normal residence).</p> <p>If the young person is resident in Scotland, Wales, Northern Ireland or outside of the UK record the code that reflects this.</p> <p>If a young person states that they are of no fixed abode (NFA) record the partnership UTLA area where the young person was last NFA.</p> <p>See NDTMS Geographic Information document for a list of UTLA codes.</p>	<p>MUST be completed. If not, the data may be excluded from performance monitoring reports.</p> <p>Should not change (record as per prior to entry to the secure setting).</p>
Initial reception date	INTRCPTD	The date that the young person was received into the first secure setting where they began their current continuous period in the secure setting.	<p>Must be completed. If not, the record will be rejected.</p> <p>Should not change.</p>
Reception date	RECPDT	The date that the young person was received into the current secure setting.	<p>Must be completed. If not, the record will be rejected.</p> <p>Should not change.</p>
Transferred from (other secure setting)	PRISON	The previous secure setting which the young person has transferred from into the current secure setting (if applicable). If this is the first secure setting the young person has entered during this custodial period this field should be left blank.	Should not change. Should be blank if the young person hasn't been transferred in.
Triage date	TRIAGED	The date that the young person made a first face-to-face (or equivalent) presentation to a substance misuse worker (this includes healthcare staff who initiated substance misuse treatment for the young person).	<p>Must be completed. If not, the record will be rejected.</p> <p>Should not change (record as per start of episode).</p>

Field description	CSV header	Definition	Field updatability
Pregnant	PREGNANT	Is the young person pregnant at triage?	Should not change (record as per start of episode).
Disability 1	DISABLE1	Whether the client considers themselves to have a disability. If a client declines to answer, then 'not stated' should be entered and DISABLE2 and DISABLE3 should be left blank. If the client has no disability, then 'no disability' should be entered and DISABLE2 and DISABLE3 should be left blank. Refer to Appendix J for disability definitions.	Should not change (record as per start of episode).
Disability 2	DISABLE2	Whether the client considers themselves to have a second disability. If the client has no second disability then this field should be left blank. Refer to Appendix J for disability definitions.	Should not change (record as per start of episode).
Disability 3	DISABLE3	Whether the client considers themselves to have a third disability. If the client has no third disability then this field should be left blank. Refer to Appendix J for disability definitions.	Should not change (record as per start of episode).
Accommodation need	ACCMNEED	The accommodation need of the young person prior to entering the secure setting. The accommodation need refers to the housing need of the young person in the 28 days prior to entering the secure setting. Services reporting the NDTMS young person's secure setting must use YP specific accommodation codes.	Should not change (record as per start of episode).

Field description	CSV header	Definition	Field updatability
		Appendix B describes the reference data for this item and the relevant definitions for young person's services.	
Parental responsibility	PARENT	<p>In the 28 days prior to entering the secure setting did the young person have parental responsibility for a child aged under 18?</p> <p>A child is a person who is under 18 years of age. Parental responsibility should include biological parents, step-parents, foster parents, adoptive parents and guardians. It should also include de facto parents where a young person lives with the parent of a child or the child alone (eg a young person who cares for younger siblings) and has taken on full or partial parental responsibilities. Parental responsibility as used here is wider than the legal definition of parental responsibility.</p>	Should not change (record as per start of episode).
If client has parental responsibility, do any of these children live with the client?	PRNTSTAT	<p>If the young person has parental responsibility (PARENT = yes), record whether none of, some of or all of the children they are responsible for lived with the young person for the majority of the time in the 28 days prior to them entering the secure setting. A child is a person who is under 18 years old.</p> <p>See Appendix C for data items and definitions.</p>	Should not change (record as per start of episode).
How many children under 18 in total live in the same house as the client?	CHILDWTH	<p>The total number of children under 18 that lived in the same household as the young person at least one night a fortnight in the 28 days prior to entering the secure setting. The young person does not necessarily need to have parental responsibility for the children. Due to this being a numerical field, record code '98' as the response if the young person has declined to answer. For young people living in care this should be recorded as 0, unless the young person is living with other siblings. In this case the number of siblings should be recorded.</p>	Should not change (record as per start of episode).

Field description	CSV header	Definition	Field updatability
If client has parental responsibility and/or children living with them, what help are the children receiving? (1)	EHCS	<p>Prior to entering the secure setting, what help are the young person's children and/or any other children living with the young person receiving? This question applies to the children aged under 18 for which the young person has parental responsibility (regardless of whether this child lives with the young person or not) and to children aged under 18 living with the young person (regardless of whether the young person has parental responsibility or not).</p> <p>If more than one option applies, then complete EHCS2 and EHCS3 as appropriate.</p> <p>If none of the children are receiving any help record 'None of the children are receiving any help' and leave EHCS2 and EHCS3 blank.</p> <p>If the young person declines to answer record 'client declined to answer' and leave EHCS2 and EHCS3 blank.</p> <p>See Appendix C for data items and definitions.</p>	Should not change (record as per start of episode).
If client has parental responsibility and/or children living with them, what help are the children receiving? (2)	EHCS2	<p>Prior to entering the secure setting, what help are the young person's children and/or any other children living with the young person receiving?</p> <p>If more than two options apply, then complete EHCS3 as appropriate.</p> <p>If the young person declines to answer or if no help is being received then this field should be left blank.</p> <p>See Appendix C for data items and definitions.</p>	Should not change (record as per start of episode).
If client has parental responsibility and/or children living with them, what help are	EHCS3	<p>Prior to entering the secure setting, what help are the young person's children and/or any other children living with the young person receiving?</p> <p>If the young person declines to answer or if no help is</p>	Should not change (record as per start of episode).

Field description	CSV header	Definition	Field updatability
the children receiving? (3)		being received, then this field should be left blank. See Appendix C for data items and definitions.	
Problem substance number 1	DRUG1	The substance that brought the young person into treatment at the point of triage/initial assessment, even if they are no longer actively using this substance. If a young person presents with more than one substance the provider(s) is/are responsible for clinically deciding which substance is primary.	Must be completed. If not, the record will be rejected. Should not change (record as per start of episode).
Problem substance number 2	DRUG2	An additional substance that brought the young person into treatment at the point of triage/initial assessment, even if they are no longer actively using this substance. If no second problem substance then leave this field blank.	Should not change (record as per start of episode).
Problem substance number 3	DRUG3	An additional substance that brought the young person into treatment at the point of triage/initial assessment, even if they are no longer actively using this substance. If no third problem substance then leave this field blank.	Should not change (record as per start of episode).
Number of days in the 28 days prior to initial reception that the client consumed alcohol	ALCDDAYS	Number of days in the 28 days prior to initial reception that the client consumed alcohol.	Should not change (record as per start of episode).
Typical number of units consumed on a drinking day in the 28 days prior to initial reception	ALCUNITS	Typical number of units consumed on a drinking day in the 28 days prior to initial reception.	Should not change (record as per start of episode).
Injecting status	INJSTAT	In the 28 days prior to entering the secure setting was the young person injecting? Record 'C - currently injecting' if the young person was	Should not change (record as per start of episode).

Field description	CSV header	Definition	Field updatability
		<p>injecting in the 28 days prior to entering the secure setting.</p> <p>Record 'P - previously injected' if the young person has previously injected but not in the 28 days prior to entering the secure setting.</p> <p>Record 'N - never injected' if the young person has never injected.</p> <p>Record 'Z - client declines to answer' if the young person declines to answer.</p>	
AUDIT score (alcohol use disorders identification test)	AUDIT	<p>What was the young person's AUDIT score on reception? This should be the young person's score on the full AUDIT completed during the initial healthcare screening and/or the substance misuse assessment. The score should be between 0 and 40. AUDIT-C scores should not be recorded here, only the full ten-question AUDIT score. If a full AUDIT has not been completed for the young person, leave this field blank.</p> <p>AUDIT scores should be recorded for all young people coming into contact with substance misuse treatment services, including those not requiring structured alcohol treatment but accessing treatment to address their drug misuse.</p>	Should not change (record as per start of episode).
Hep B intervention status	HEPBSTAT	<p>Whether the young person was offered a vaccination for hepatitis B within the current episode at the secure setting, and if that offer was accepted by the young person.</p> <p>For further information on recording BBV details, refer to the Recording NDTMS data about blood-borne virus interventions document.</p>	May change (record as per current situation).

Field description	CSV header	Definition	Field updatability
Hep C intervention status	HEPCSTAT	Whether the young person was offered a test for hepatitis C within the current episode at the secure setting, and if that offer was accepted by the young person. For further information on recording BBV details, refer to the Recording NDTMS data about blood-borne virus interventions document .	May change (record as per current situation).
Dual diagnosis	DUALDIAG	Does the young person have need of a mental health intervention for reasons other than substance misuse? See Appendix H for definitions.	Should not change (record as per start of episode).
YP care status	YPLCS	What was the care status of the young person in the 28 days prior to entering the secure setting? The term 'looked after children' is defined in law under the Children Act 1989. A child is looked after by a local authority if he or she is in their care or is provided with accommodation for more than 24 hours by the authority. For further details about the definitions of looked after child and child in need, Appendix C .	Should not change (record as per start of episode).
YP sexual exploitation	YPSSEXEX	Was the young person being sexually exploited in the 28 days prior to entering the secure setting? Young people may be reluctant to disclose that they are being sexually exploited when they start treatment. In order to get a true reflection, this item should be updated if sexual exploitation prior to entering the secure setting is disclosed during treatment. See Appendix D for further information.	This item should only be updated if sexual exploitation is disclosed during treatment.
YP self-harm	YPSSLFHM	Did the young person self-harm in the 28 days prior to entering the secure setting?	This item should only be updated if self-harm is disclosed during

Field description	CSV header	Definition	Field updatability
		Young people may be reluctant to disclose that they are self-harming when they start treatment. In order to get a true reflection, this item should be updated if self-harm prior to entering the secure setting is disclosed during treatment. If the young person disclosed self-harm at the start of the episode, this should not be updated even if they report that they are no longer self-harming. See Appendix D for further information.	treatment.
YP education/ employment/ training status	YPSESTAT	What was the education status of the young person in the 28 days prior to entering the secure setting? See Appendix E for further information.	Should not change (record as per start of episode).
YP registered with GP	YPSGP	Was the young person registered with a General Practitioner in the 28 days prior to entering the secure setting?	Should not change (record as per start of episode).
YP engaged in unsafe sex	YPSUSS	Was the young person engaged in unsafe sex in the 28 days prior to entering the secure setting? See Appendix D for further information.	Should not change (record as per start of episode).
YP subject to a Child Protection Plan	YPCPL	Was the young person subject to a Child Protection Plan (CPP) in the 28 days prior to entering the secure setting? See Appendix C for further information.	Should not change (record as per start of episode).
YP involved in gangs	YPGANGS	Was the young person involved in gangs in the 28 days prior to entering the secure setting? A gang is a group of people (at least 3) with one or more characteristics that enable its members to be identified by others as a group and engages in gang-related violence or is involved in the illegal drug market. The young person may not necessarily be (or have been)	Should not change (record as per start of episode).

Field description	CSV header	Definition	Field updatability
		a member of a gang but is associated with a gang (eg because of where they live or of a family connection) or they may feel that they are being targeted or coerced to join a gang. OHID is collecting this information as part of our wider monitoring of vulnerabilities amongst children receiving substance misuse treatment. Children involved with gangs are at a greater risk of gang violence and child criminal exploitation.	
YP affected by child criminal exploitation	YPCRIMEX	<p>Was the young person affected by child criminal exploitation in the 28 days prior to entering the secure setting?</p> <p>Child criminal exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.</p>	Should not change (record as per start of episode).
YP affected by substance misuse in their close family /members of their household	YPASMFM	Does the young person feel they were affected by substance misuse in their close family/members of their household in the 28 days prior to entering the secure setting?	Should not change (record as per start of episode).
Has the client ever been the victim of domestic abuse*?	DOMVIC	The Domestic Abuse Act 2021 , for the first time, introduced a statutory definition for domestic abuse. The behaviour of one person towards another is considered domestic abuse if it is “abusive”, and both are aged 16+	This item should be updated if being the victim of domestic abuse prior to entering the secure setting is disclosed during treatment.

Field description	CSV header	Definition	Field updatability
		<p>and are “personally connected” to one another, irrespective of where they live. The Act recognises children as victims if they “see, hear or otherwise experience the effects of abuse” and are related to either the abuser or abused. The term “Abusive” can refer to: physical or sexual abuse; violent or threatening behaviour; controlling or coercive behaviour and gaslighting; economic abuse; psychological abuse; female genital mutilation (FGM); 'honour-based' violence and more.</p> <p>Young people may be reluctant to disclose that they have been the victim of domestic abuse when they start treatment. In order to get a true reflection, this item should be updated if being the victim of domestic abuse prior to entering the secure setting is disclosed during treatment. If the young person disclosed being the victim of domestic abuse at the start of the episode, this should not be updated even if they report that they are no longer the victim of domestic abuse.</p> <p>Record 'Not appropriate to ask' if you are not alone, there is a language barrier or staff are not confident to ask this question etc.</p>	
Has the client ever abused* someone close to them?	DOMPER	<p>The Domestic Abuse Act 2021, for the first time, introduced a statutory definition for domestic abuse. The behaviour of one person towards another is considered domestic abuse if it is “abusive”, and both are aged 16+ and are “personally connected” to one another, irrespective of where they live. The Act recognises</p>	This item should be updated if being the victim of domestic abuse prior to entering the secure setting is disclosed during treatment.

Field description	CSV header	Definition	Field updatability
		<p>children as victims if they “see, hear or otherwise experience the effects of abuse” and are related to either the abuser or abused. The term “Abusive” can refer to: physical or sexual abuse; violent or threatening behaviour; controlling or coercive behaviour and gaslighting; economic abuse; psychological abuse; female genital mutilation (FGM); 'honour-based' violence and more.</p> <p>Young people may be reluctant to disclose that they have ever abused someone close to them when they start treatment. In order to get a true reflection, this item should be updated if the young person discloses, during treatment, that they have ever abused someone close to them prior to entering the secure setting. If the young person disclosed having ever abused someone close to them at the start of the episode, this should not be updated even if they report that they are no longer abusing someone close to them.</p> <p>Record 'Not appropriate to ask' if you are not alone, there is a language barrier or staff are not confident to ask this question etc.</p>	
Discharge date	DISD	<p>The date that the young person stopped receiving structured treatment in the secure setting (even if they remain in the same secure setting). If a young person has had a planned discharge from treatment, then the date agreed within this plan should be used. If a young person's discharge was unplanned then the date of the last face-to-face (or equivalent) contact with the treatment provider should be used.</p> <p>If a young person is discharged from treatment and then</p>	<p>Discharge date required when young person is discharged from treatment. Prior to discharge all interventions must have end dates. If discharge date is populated then discharge reason must also be populated. Should only change from 'null' to populated as episode progresses.</p>

Field description	CSV header	Definition	Field updatability
		re-presents for further treatment at a later date, the expectation is that the young person should be reassessed, and a new episode created with a new triage date. If this proves burdensome, we can accept the reopening of the young person's previous episode (by removing discharge date and discharge reason) as long as the gap between discharge from the old episode and re-presentation is less than 21 calendar days. In this scenario, the previous interventions should remain closed and new interventions should be opened.	
Discharge reason	DISRSN	The reason why the young person's episode of structured treatment was ended. For discharge codes and definitions see Appendix F .	Discharge reason required when young person is discharged from treatment. Prior to discharge all interventions must have end dates. If discharge reason is populated then discharge date must also be populated. Should only change from 'null' to populated as episode progresses.
Is the client threatened with homelessness in the 56 days (8 weeks) following exit from secure setting?	HOMELESSEXIT	Homelessness Reduction Act 2017 places a duty on housing authorities to work with people who are threatened with homelessness within 56 days to help prevent them from becoming homeless. This field should be populated if the client's exit reason is 'released'.	Required when the young person leaves the secure setting and exit reason is released. Should not change (record as per release from secure setting).
Secure setting exit date	EXITD	The date that the young person left the secure setting (or died).	Secure setting exit date required when the young person exits current secure setting. Prior to exit all episodes must have discharge dates

Field description	CSV header	Definition	Field updatability
			and discharge reasons. If exit date is populated exit reason must also be populated. Should only change from 'null' to populated as episode progresses.
Secure setting exit reason	EXITRSN	The reason that the young person left the secure setting. For detailed definitions see Appendix F .	Secure setting exit reason required when young person exits current secure setting. Prior to exit all episodes must have discharge dates and discharge reasons. If exit reason is populated exit date must also be populated. Should only change from 'null' to populated as episode progresses.
Secure setting exit destination	EXITDEST	The partnership area to which the young person was released or the secure setting that the young person was transferred to. Use 'outside UK' option if young person is deported or leaving the country on release. For any services that do not report to NDTMS (eg secure hospitals) record 'non NDTMS reporting secure setting'. See NDTMS Geographic Information document for a list of UTLA codes.	Required if secure setting exit date is populated and exit reason is recorded as 'transferred', or if the young person is 'released' and referred to a structured treatment service or youth offending team, then the treatment service partnership/local authority should be recorded. Should not change (record as per exit from secure setting).
Referral on release status	RTOAGNCY	If the reason for the exit from the secure setting is 'released', record whether a referral was made to non-structured treatment provider or to a structured treatment provider in the community or if no onward treatment referral was made for the young person.	Required when the young person leaves the secure setting and exit reason is released. Should not change (record as per release from secure setting).

3. Treatment intervention details

Field description	CSV header	Definition	Field updatability
Intervention ID	MODID	A mandatory, unique technical identifier representing the intervention, as held on the clinical system used at the treatment provider. This should be a technical item and should not hold or be composed of attributors which might identify the individual.	Must be completed. If not, the record will be rejected. This is populated by your software system. Should not change.
Treatment intervention	MODAL	The treatment intervention a young person has been referred for/commenced within this treatment episode as defined in Appendix G of this document. There are different interventions for adults and young people. A young person may have more than one treatment intervention running sequentially or concurrently within an episode.	Required as soon as the intervention is known. Should not change (record as per intervention start). If changed, it will create a validation mismatch.
Intervention start date	MODST	The date the treatment intervention commenced eg the date the young person attended their first appointment.	Required when young person starts an intervention. Should only change from 'null' to populated as episode progresses.

Field description	CSV header	Definition	Field updatability
Intervention end date	MODEND	The date that the stated treatment intervention ended. If the intervention has had a planned end, then the date agreed within the plan should be used. If it was unplanned then the date of last face-to-face (or equivalent) contact date within the intervention should be used.	Required when young person completes an intervention or is discharged. Should only change from 'null' to populated as episode progresses.

Appendix A: definition of specialist substance misuse treatment for young people

Treatment providers should be delivering specialist treatment interventions for young people in secure settings. The definition that has been agreed across government departments, and should be used in this context, is that young people's specialist substance misuse treatment is a care-planned medical, psychosocial or specialist harm reduction aimed at alleviating current harm caused by a young person's substance misuse.

Universal, targeted or early intervention substance misuse activity for young people should not be reported to NDTMS. Any treatment providers providing universal, targeted and/or early intervention services for substance misuse should ensure they report only substance misuse activity for young people receiving specialist treatment to NDTMS.

Young people's structured specialist substance misuse treatment interventions require additional competencies for the worker and delivery within a governance framework including appropriate supervision.

Appendix B: accommodation need guidance for young people's services

The young person's accommodation need should be reported as per the situation in the 28 days prior to entering the secure setting.

The codes specific to the young person's dataset are defined below:

Code	Reference data	Definition
26	YP living with relative	The young person is living with parents, relatives or other carers.
27	Independent YP – settled accommodation	The young person is living in accommodation without the support of their family of origin (birth/adopted). The young person could be living in their own property, or in privately rented accommodation.
28	Independent YP – unsettled accommodation	The young person is staying with friends or family as a short-term guest, residing in a bed and breakfast or hostel accommodation. Young people who are at risk of losing their long-term accommodation could also be categorised as living in unsettled accommodation.
29	Independent YP with No Fixed Abode	The young person is living on the streets or using night hostels (on a night-by-night basis). This could also include young people who are staying with friends or family as a very short-term guest, eg sleeping on a different friend's floor each night.
31	YP supported housing	The young person is living in accommodation specifically commissioned to meet the needs of young people. The young person could be living in a foyer or other accommodation provided by a registered social landlord.
33	YP living in care	The young person has been placed in care, such as children's homes or foster care for a looked after child.

Appendix C: safeguarding definitions

These questions should be answered as per the situation of the young person in the 28 days prior to entering the secure setting.

If client has parental responsibility, do any of these children live with the client? (PRNTSTAT)

The question only needs to be completed if the response to PARENT is 'yes'.

Code	Reference data	Definition
11	All the children live with client	The young person has parental responsibility for one or more children, and in the 28 days prior to entering the secure setting all the children (under 18) the client has parental responsibility for resided with them the majority of the time
12	Some of the children live with client	The young person has parental responsibility for children under 18, and in the 28 days prior to entering the secure setting some of the children (under 18) the young person has parental responsibility for resided with them for the majority of the time, others lived in other locations for the majority of the time
13	None of the children live with client	The young person has parental responsibility for one or more children under 18 but in the 28 days prior to entering the secure setting none of the children (under 18) the young person has parental responsibility for resided with them, they all live in other locations for the majority of the time
15	Client declined to answer	Only use where the young person declines to answer

What help are the client's children and/or any other children living with the client receiving? (EHCSC1/2/3)

If either parental responsibility is 'yes' or there are children under the age of 18 living in the same house as the young person, then this field should be completed.

This question applies to children of the young person in treatment (regardless of whether this child lives with the young person or not) and to children living with the young person (regardless of whether this is the child of the young person or not).

Code	Reference data	Definition
1	Early Help (family support)	The needs of the child and family have been assessed and they are receiving targeted Early Help services as defined by Working Together to Safeguard Children 2015 (HM Government)
2	Child in Need (LA service)	The needs of the child and family have been assessed by a social worker and services are being provided by the local authority under Section 17 of the Children Act 1989
3	Has a Child Protection Plan (LA service)	Social worker has led enquiries under Section 47 of the Children Act 1989 . A child protection conference has determined that the child remains at continuing risk of 'significant harm' and a multi-agency child protection plan has been formulated to protect the child
4	Looked after Child (LA service)	Arrangements for the child have been determined following statutory intervention and care proceedings under the Children Act 1989 . Looked after children may be placed with parents, foster carers (including relatives and friends), in children's homes, in secure accommodation or with prospective adopters
5	None of the children are receiving any help	None of the children are receiving early help nor are they in contact with children's social care
6	Other relevant child or family support service	Any other child or family support service not mentioned.
7	Not known	-
99	Client declined to answer	Question was asked but the young person declined to answer.

Care status prior to entering the secure setting (YPLCS)

The question should be answered in relation to the young person's care status prior to entering the secure setting.

A young person may have a care status of either a 'looked after child' or a 'child in need'. A young person may be subject to a child protection plan regardless of their care status.

Code	Reference data	Definition
1	Looked after child	<p>The definition of a looked after child is:</p> <p>“Children looked after includes all children being looked after by a local authority including those subject to care orders under Section 31 of the Children Act 1989 and those looked after on a voluntary basis through an agreement with their parents under Section 20 of the Children Act 1989”. See The Children Act 1989.</p> <p>Looked after children fall into 4 main groups:</p> <ul style="list-style-type: none"> • children who are accommodated under voluntary agreement with their parents (Section 20 of the Children Act 1989) • children who are the subject of a care order or interim care order, (Section 31 of the Children Act 1989 and Section 38 of the Children Act 1989) • children who are the subject of emergency orders for their protection, (Section 44 of the The Children Act 1989 and Section 46 of the The Children Act 1989) • children who are compulsorily accommodated – this includes children remanded to the local authority or subject to a criminal justice supervision order with a residence requirement, (Section 21 of the The Children Act 1989) <p>All young people remanded by the court into the young people’s secure setting will have ‘looked after child’ status for the duration of the remand. This ceases on release or sentence. (If a young person is remanded for more than 13 weeks this entitles them to leaving care support on release).</p>
3	Child in need	<p>Under Section 17 of the The Children Act 1989 a child is a ‘child in need’ if:</p> <ul style="list-style-type: none"> • he/she is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him/her of services by a local authority • his/her health or development is likely to be significantly

Code	Reference data	Definition
		<p>impaired, or further impaired, without the provision for him/her of such services</p> <ul style="list-style-type: none"> • he/she is a disabled child <p>These legislative definitions may be summarised into the following categories of children in need:</p> <ul style="list-style-type: none"> • significant harm: children who have suffered significant harm • disabled children: children with physical disabilities, sensory disabilities, learning disabilities or emotional and behavioural disabilities • parental illness/disability: alcohol or drug misusing parents, acutely ill parents (short term), chronically disabled parents, chronically mentally ill parents, children assuming responsibility for chronically ill, addicted, or disabled parents • family in acute stress: homeless family, unsupported single parent, death of carer • family dysfunction: domestic violence, inconsistent parenting, family breakdown • socially unacceptable behaviour: disorderly behaviour, offending, truancy, unsafe sexual behaviour • low income: asylum seeking families, non-habitually resident status, independent young people • absent parenting: parents died, unaccompanied child asylum seekers, children privately fostered • other: step-parent adoptions, inter country adoptions, court reports, subject access to files, historical allegations/complaints
2	Not a looked after child or a child in need	-

Subject to a Child Protection Plan prior to entering the secure setting (YPCPL)

A child protection plan is a formal plan developed by the local authority confirming intentions for a child's protection. The initial child protection conference is responsible for agreeing a child protection plan for any child with or without a care status. For further information, refer to [Working Together to Safeguard Children](#).

Appendix D: risk/vulnerabilities

These items are collected to determine what wider vulnerabilities the young person may have been experiencing prior to entering the secure setting alongside their substance misuse.

Sexual exploitation

Sexual exploitation is defined as follows: 'Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.' For a full definition, see [Safeguarding children from sexual exploitation](#) for more information.

Young people may be reluctant to disclose that they are being/have been sexually exploited when they start treatment. In order to get a true reflection, this item should be updated if sexual exploitation prior to entering the secure setting is disclosed during treatment. If the young person disclosed being sexually exploited at the start of the episode, this should not be updated even if they report that they no longer are.

Self-harm

For the purposes of NDTMS, self-harm is defined as 'self-poisoning or self-injury, irrespective of the apparent purpose of the act'.

A young person may be reluctant to disclose that they are self-harming when they start treatment. In order to get a true reflection, this item should be updated if self-harm prior to entering the secure setting is disclosed during treatment.

Unsafe sex

For the purposes of NDTMS, this refers to a young person's current engagement in unsafe sex or unprotected sex. Unsafe sex is sexual activity engaged in without precautions to protect against sexually transmitted infections eg not using condoms, either with a regular or casual partner, having multiple sexual partners and anal sex.

Domestic abuse

This will include any negative effect to the young person, whether they have been a victim of abuse or witnessed it. An abuse case does not have to have gone to court to be included in this question. Please be aware that in the under 16s, law denotes that this is termed child abuse. However for ease, this question has used just one terminology (domestic abuse) – this question should be asked of all young people in treatment.

For the purposes of NDTMS, domestic abuse is defined as: 'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial and emotional'.

Controlling behaviour is defined as 'a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour'.

Coercive behaviour is defined as 'an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.'

This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group'. See [Violence against women and girls](#).

Appendix E: education, employment and training status

This question should be answered as per the situation of the young person in the 28 days prior to entering the secure setting.

Code	Reference data	Definition
1	Mainstream education	Includes schooling delivered in academies and further education colleges.
2	Alternative education	Includes schooling delivered within a pupil referral unit or home setting.
3	Temporarily excluded	Young people who were excluded from school on a temporary basis for a fixed term (no more than 45 days a year).
4	Permanently excluded	Young people who were excluded from school but alternative schooling arrangements had not yet been made.
5	Persistent absentee	Young people who were regularly absent from school without authorisation from a teacher or other authorised representative of the school.
6	Apprenticeship or training	Young people who were undertaking a structured training programme such as National Vocational Qualifications (NVQ) or key skills qualifications including BTEC or City & Guilds certificates.
10	Economically inactive caring role	Young people who were not employed/in education because they had a role within the home as a parent or carer which prevented them from working or studying.
11	Economically inactive health issue	Young people who were not employed/in education because they had a health or mental health issue which prevented them from working or studying.

Code	Reference data	Definition
12	Voluntary work	Young people who were carrying out non-paid voluntary work, full or part time.
13	Regular employment	School leavers (of school leaving age+ only) who were in regular and sustained employment.
14	Not in employment or education or training (NEET)	Young people who have the capacity to work but were not in education, employment or training.
Z	Client declined to answer	-

Appendix F: discharge reason and exit reason definitions

Below are the current discharge reasons and their definitions:

Code	Reference data	Definition
80	Treatment completed – drug free	The young person no longer requires structured drug (or alcohol) treatment interventions and is judged by the clinician not to be using heroin (or any other opioid, prescribed or otherwise) or crack cocaine or any other illicit drug.
82	Treatment completed – occasional user (not opiates or crack)	The young person no longer requires structured drug or alcohol treatment interventions and is judged by the clinician not to be using heroin (or any other opioid, prescribed or otherwise) or crack cocaine. There is evidence of use of other illicit drug or alcohol use but this is not judged to be problematic or to require treatment.
83	Transferred – not in custody	The young person has finished treatment at this provider but still requires further structured drug and/or alcohol treatment interventions and the individual has been referred to an alternative non-secure setting provider for this. This code should only be used if there is an appropriate referral pathway with two-way communication and care-planned structured drug/alcohol treatment pathways are available.
84	Transferred – in custody	The young person is being transferred to another secure setting and a continuation of structured treatment has been arranged. This will consist of the appropriate onward referral of care planning information and two-way communication between the referring and the receiving secure setting treatment providers to ensure that an assessment and care-planned treatment will be provided as appropriate.
74	Transferred – recommissioning transfer	The young person has been transferred for further structured drug and/or alcohol treatment as a result of the service being decommissioned.
71	Incomplete – onward referral offered and refused	The young person has finished treatment at this secure setting provider but still requires further structured drug and/or alcohol treatment interventions. A referral to another secure setting

Code	Reference data	Definition
		provider or a community provider was offered but the young person refused the transfer.
85	Incomplete – dropped out	The treatment provider has lost contact with the young person without a planned discharge and activities to re-engage the young person back into treatment have not been successful.
86	Incomplete – treatment withdrawn by provider	The treatment provider has withdrawn treatment provision from the young person eg in cases where the young person has seriously breached a contract leading to their discharge. It should not be used if the young person has simply ‘dropped out’.
88	Incomplete – treatment commencement declined by the client	The treatment provider has received a referral and has had a face-to-face (or equivalent) contact with the young person after which the young person has chosen not to commence a recommended structured drug treatment intervention.
98	Incomplete – deported	Without completing their episode of structured treatment, the young person has been deported to another country.
99	Incomplete – released from court	The treatment provider has been unable to continue the young person’s treatment due to them being released from court.
89	Incomplete – client died	During their time in contact with structured treatment the young person died.

Discharging clients as ‘transferred’

When a discharge reason of ‘transferred’ is selected, the expectation is that there should be 2-way communication between the transferring provider and the receiving provider to ensure continuity of the young person’s care. If the young person commences a structured treatment intervention at the receiving provider within 21 days of their discharge date from the transferring provider, then NDTMS count this as a successful transfer and the young person continues their treatment within the same treatment journey.

If they do not start a structured treatment intervention elsewhere within 21 days of their discharge date, they will be recorded as an unsuccessful transfer at the provider level and their treatment journey will end. If the young person should re-present for treatment after more than 21 days, then they will be deemed to have started a new treatment journey.

Secure setting exit reasons

Below are the current secure setting exit reasons and their definitions:

Code	Data item name	Definition
T	Transferred	The young person has been transferred to another secure setting.
R	Released	The young person is no longer in a secure setting and has been released.
A	Absconded	The young person has escaped from the secure setting without permission.
D	Died	During their time in the secure setting the young person has died.

Appendix G: definitions of interventions

Young people under the age of 18 must be able to access each of the young people's specialist substance misuse treatment interventions described below. Interventions include social and health care interventions, all of which are important and complement each other in reducing harm caused by a young person's substance misuse.

Psychosocial interventions are structured treatment interventions that encompass a wide range of actions. Key working is the basic delivery mechanism for a range of key components including the review of care plans and goals, provision of substance related advice and information, interventions to increase motivation and prevent relapse and help to address social problems, eg peer relationships, family relationships and education. In addition, a range of formal psychosocial interventions may be provided by key workers or others with the appropriate competences.

Formal psychosocial interventions may be provided alone or in combination with other interventions and should be targeted at addressing assessed need. They may be provided:

- to treat substance misuse including alcohol or co-occurring mental health disorders
- alone or in addition to harm reduction or pharmacological interventions

Formal psychosocial interventions should be provided in accordance with [Drug Misuse and Dependence: UK guidelines on clinical management](#) (also known as the 'clinical guidelines' or 'orange book') and relevant NICE clinical guidelines.

The type of psychosocial intervention should be selected on the basis of the problem and treatment need of the specific young person guided by the available evidence base on effectiveness.

Definitions of the secure setting interventions for young people are provided below:

Specialist pharmacological intervention

These are substance misuse specific pharmacological interventions, which include prescribing for detoxification, stabilisation and symptomatic relief of substance misuse as well as prescribing of medications to prevent relapse.

The intervention start is the date of dispensing the first dose of medication.

Counselling

Counselling is a process in which a counsellor holds face-to-face (or equivalent) talks with the young person to help him or her solve a problem, or help improve the young person's attitude and/or behaviour towards substance misuse.

Cognitive behavioural therapy

Cognitive behavioural therapy is a psychotherapeutic, talking therapy that aims to solve problems concerning dysfunctional emotions, behaviours and cognitions through a goal oriented, systematic procedure.

Motivational interviewing

Motivational interviewing is a brief psychotherapeutic intervention. The aim is to help the young person reflect on their substance use in the context of their own values and goals and motivate them to change.

Relapse prevention

Relapse prevention CBT focuses on helping young people to develop skills to identify situations or states where they are most vulnerable to drug use, to avoid high-risk situations, and to use a range of cognitive and behavioural strategies to cope more effectively with these situations.

Family work

Interventions using psychosocial methods to support parents, carers and other family members to manage the impact of a young person's substance misuse and enable them to better support the young person eg working with siblings, grandparents, foster carers.

Family work should only be reported to NDTMS if and when a young person who is a member of the family receiving family work, is currently accessing specialist substance misuse treatment services and should be reported using the young person's attributors.

The intervention start is the date of the first formal and time-limited appointment.

YP harm reduction service (specialist)

Care-planned substance misuse specific harm reduction is not brief advice and information. This intervention must be delivered as part of a structured care plan and after a full assessment of the young person's substance misuse and risks.

Specialist harm reduction interventions should include services to manage those at risk of, or currently involved in:

- injecting – these treatment services could include needle exchange, advice and information on injecting practice, access to appropriate testing and treatment for blood borne viruses
- overdose – advice and information to prevent overdose, especially overdose associated with poly-substance use, which requires specialist knowledge about substances and their interactions
- risky behaviour associated with substance use – advice and information to prevent and/or reduce substance misuse related injuries and substance misuse related risky behaviours

The intervention start is the date of the first appointment where specialist harm reduction interventions were provided.

Appendix H: dual diagnosis

Data item

“Does the client have need of a mental health intervention for reasons other than substance misuse?”

Data item definition

Identification of the need for a current or future mental health intervention could be based on information obtained from community services eg GP, community mental health service or could be a need newly identified by healthcare staff in the secure setting.

Where and when the intervention is delivered will depend on the level of need, the time the young person spends in the secure setting and/or access to appropriate services.

The mental health intervention can include a range of evidence-based interventions delivered according to individual needs and provided by the child and adolescent mental health services (CAMHS). It can also include interventions to support children who have experienced violence, abuse and other adverse childhood experiences.

The need for specific mental health support/intervention may be clear even if it may not involve diagnosis of a specific mental disorder, or a particular structured specialist mental health intervention required.

Appendix I: disability definitions

Code	Reference data	Definition
1	Behaviour and emotional	Should be used where the client has times when they lack control over their feelings or actions
2	Hearing	Should be used where the client has difficulty hearing, or needs hearing aids, or needs to lip-read what people say
3	Manual dexterity	Should be used where the client has difficulty performing tasks with their hands
4	Learning disability	Should be used where the client has difficulty with memory or ability to concentrate, learn or understand which began before the age of 18
5	Mobility and gross motor	Should be used where the client has difficulty getting around physically without assistance or needs aids like wheelchairs or walking frames; or where the client has difficulty controlling how their arms, legs or head move
6	Perception of physical danger	Should be used where the client has difficulty understanding that some things, places or situations can be dangerous and could lead to a risk of injury or harm
7	Personal, self-care and continence	Should be used where the client has difficulty keeping clean and dressing the way they would like to
8	Progressive conditions and physical health	Should be used where the client has any illness which affects what they can do, or which is making them more ill, which is getting worse, and which is going to continue getting worse eg HIV, cancer, multiple sclerosis, fits etc
9	Sight	Should be used where the client has difficulty seeing signs or things printed on paper or seeing things at a distance
10	Speech	Should be used where the client has difficulty speaking or using language to communicate or make their needs known

Code	Reference data	Definition
11	Special educational needs	Should be used where the client has learning, physical, and developmental disabilities; behavioural, emotional and communication disorders; learning deficiencies
XX	Other	Should be used where the client has any other important health issue including dementia or autism
NN	No disability	-
ZZ	Not stated	Client asked but declined to provide a response

Appendix J: Changes to the NDTMS YP secure settings dataset implemented in dataset R

Fields being removed

Level	CSV File Header	Field
Episode	DAT	DAT of residence
Episode	RECONNECT	Has the client been provided with Reconnect support?
YPOR	PTEDAWDD	Alcohol use weekday daytime
YPOR	PTEDAWDE	Alcohol use weekday evening
YPOR	PTEDAWED	Alcohol use weekend daytime
YPOR	PTEDAWEE	Alcohol use weekend evening
YPOR	PTEDOYO	Alcohol use alone
YPOR	PTEUSWDD	Drug use weekday daytime
YPOR	PTEUSWDE	Drug use weekday evening
YPOR	PTEUSWED	Drug use weekend daytime
YPOR	PTEUSWEE	Drug use weekend evening
YPOR	PTEUSOYO	Drug use alone
YPOR	TOPID	TOP ID
YPOR	TOPDATE	Outcomes profile (TOP/YPOR) date
YPOR	ALCUSE	Alcohol use (days)
YPOR	CONSMP	Consumption (alcohol units)
YPOR	OPIUSE	Opiate use (illicit) (days)
YPOR	CRAUSE	Crack use (days)
YPOR	COCAUSE	Cocaine use (days)
YPOR	AMPHUSE	Amphetamine use (days)
YPOR	CANNUSE	Cannabis use (days)
YPOR	OTDRGUSE	Other substance use (days)
YPOR	UNSTHSE	Unsuitable housing

Level	CSV File Header	Field
YPOR	CAUSPD	Cannabis average use per day (grams)
YPOR	OTHR2YP	Other substance use 2 (days)
YPOR	OTHR3YP	Other substance use 3 (days)
YPOR	TOANIC	Tobacco/nicotine
YPOR	ECSTSYYP	Ecstasy use (days)
YPOR	SOLVYP	Solvent use (days)
YPOR	KETAMNYP	Ketamine use (days)
YPOR	GHBYP	GHB use (days)
YPOR	LEHIGSYP	Psychoactive substances use (PS)
YPOR	TRANYP	Tranquilisers use (including benzodiazepines)
YPOR	AFUCAN	Age substance first used: cannabis
YPOR	AFUALC	Age substance first used: alcohol
YPOR	AFUTOBN	Age substance first used: tobacco/nicotine
YPOR	AFUOOL	Age substance first used: opiates (illicit)
YPOR	AFUCRACK	Age substance first used: crack
YPOR	AFUCOC	Age substance first used: cocaine
YPOR	AFUEST	Age substance first used: ecstasy
YPOR	AFUAMP	Age substance first used: amphetamines
YPOR	AFUSLV	Age substance first used: solvents
YPOR	AFUKET	Age substance first used: ketamine
YPOR	AFUGHB	Age substance first used: GHB
YPOR	AFULHU	Age substance first used: Psychoactive substances (PS)
YPOR	AFUTQL	Age substance first used: tranquilisers (including benzodiazepines)
YPOR	AAUSFWK	Alcohol use over past 28 days/28 days prior to custody: male over 8 units/female over 6 units
YPOR	LINSTUS	Ever injected
YPOR	YPIVDRGU	Injecting drug use (last 28 days/28 days prior to custody)
YPOR	LISREDYS	How satisfied YP is with life today?
YPOR	ANSTS	How anxious did YP feel yesterday?

Level	CSV File Header	Field
YPOR	HAPSTYS	How happy did YP feel yesterday?
YPOR	RATEFAM	How well does YP get on with family?
YPOR	RATEFRI	How well does YP get on with friends?

Fields being added

Level	CSV File Header	Data Item
Episode	ALCDDAYS	Number of days in the 28 days prior to initial reception that the client consumed alcohol.
Episode	ALCUNITS	Typical number of units consumed on a drinking day in the 28 days prior to initial reception.

Existing fields being amended

Level	Field	Changes
Episode	PRISON	Rename 'Transferred from' to 'Transferred from (other secure setting'

Reference data within appendices

There have been a number of changes to reference data items which have been amended/removed/added to this document. For a full list of changes and all permissible data items, refer to the [Reference Data document](#).

Revision History

Version	Author	Purpose/reason
1.1	J Palmer	PREGNANT - removed "applies to female clients only"
1.2	S Grimwood	Minor amendments to improve clarity and remove ambiguity.