CLIENT REVIEW/EXIT FORM ADULT SECURE ESTATE DATASET R April 2024 v1		
CONFIDENTIAL All white boxes should be completed as appropriate when there is an update following the client's review, a discharge from structured treatment or an exit. Grey boxes not submitted to NDTMS. KEY - U updateable item		
	Date completed Client/NOMS ID	Keyworker
Client	First name initial Surname initial	Date of Birth dd/mm/yyyy Client stated sex
Healthcare	Offered and accepted - started having vaccinations Offered and accepted - completed vaccination course Immunis Hep C intervention status U - tick one option Offered and accepted - not yet had a test Offered and accepted - had a hep C test Not offer	red ropriate to test/re-test
Interventions	Intervention type Intervention start date Intervention end date Intervention type Intervention start date Intervention end date Intervention end date	Select one or more from 103. Benzodiazepines detoxification 104. Lofexidine 105. Naltrexone 106. Opioid re-induction 107. Opioid reduction - methadone 108. Opioid reduction - buprenorphine 109. Opioid maintenance - methadone 110. Opioid maintenance - buprenorphine 111. Opioid maintenance - buprenorphine depot injection 112. Incentivised Substance Free * non-structured Intervention 122. Incentivised Substance Free * non-structured intervention * 122. Incentivised Substance Free * non-structured reatment, should not be reported in isolation.
	Discharge date Discharge reason - tick one option Treatment completed - drug-free Treatment completed - alcohol-free	Prison exit date Prison exit reason Released / Transferred / Died / Absconded Prison exit destination UTLA or other secure setting Referral on release status - tick one option Only required if 'released'
Discharge and Prison Exit	Treatment completed - occasional user (not opiates or crack) Transferred - not in custody Transferred - in custody Transferred - recommissioning transfer	Referred to structured treatment provider Referred to non- structured treatment provider No onward treatment referral
	Transferred - recommissioning transfer Incomplete - dropped out	Has the client been sentenced?
	 Incomplete - treatment withdrawn by provider Incomplete - treatment commencement declined by client 	Take home naloxone & training provided Only required if 'released'
	Incomplete - client died	Did the client receive treatment for their mental health during stay
	○ Incomplete - deported ○ Incomplete - released from court	Referred to Hep C treatment during stay in establishment or to community on release
	Incomplete - released from court Incomplete - onward referral offered and refused	Referred to Hep C treatment date
		Referral for alcohol-related liver disease Yes / No / Unknown
	Used Receptor Agonists (SCRAs) during treatment u	Has the client been provided with reconnect support? Yes (standard) / Yes (enhanced) / No
	Initial 13 week clinical review undertaken (OST only) u	Only required if 'released' Is client threatened with homelessness in the 56 days (8 weeks) following exit from secure estate? Only required if 'released'