

CONFIDENTIAL All white boxes should be completed as appropriate where there is an update following the client's review, a discharge from structured treatment or a prison exit. Grey boxes not submitted to NDTMS.

Date completed Client/NOMS ID Keyworker

Client
 First name *initial* Surname *initial*
 Date of Birth *dd/mm/yyyy* Sex at registration of birth

Episode

Hep B intervention status - tick one

- Offered and accepted - not yet had any vaccinations
- Offered and accepted - started having vaccinations
- Offered and accepted - completed vaccination course
- Offered and accepted - refused at later date
- Offered and refused
- Immunised already
- Not offered
- Assessed as not appropriate to offer
- Deferred due to clinical reasons

Hep C intervention status - tick one

- Offered and accepted - not yet had a test
- Offered and accepted - had a hep C test
- Offered and accepted - refused at a later date
- Offered and refused
- Not offered
- Assessed as not appropriate to offer
- Deferred due to clinical reasons

Hep C latest test date Used NPS during treatment Yes / No / Declined to answer

Is the client HIV positive Yes / No / Unknown / Declined Referral for alcohol-related liver disease Yes / No / Unknown

Interventions - end or add new

Intervention type <input type="text"/>	Intervention type <input type="text"/>	Select one or more from below 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 77. Alcohol - prescribing 84. Psychosocial Intervention Mental Disorder 85. Other structured psychosocial intervention 5. Structured Day Programme 12. Other structured intervention 76. Alcohol – brief intervention
Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention type <input type="text"/>	Intervention type <input type="text"/>	
Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention type <input type="text"/>	Intervention type <input type="text"/>	
Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention type <input type="text"/>	Intervention type <input type="text"/>	
Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention start date <input type="text"/> <input type="text"/> <input type="text"/>	
Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	Intervention end date <input type="text"/> <input type="text"/> <input type="text"/>	

Discharge and Prison Exit

Used NPS during treatment Yes / No / Declined to answer

Discharge date

Discharge reason - tick one option

- Treatment completed - drug-free
- Treatment completed - alcohol-free
- Treatment completed - occasional user (not opiates or crack)
- Transferred - not in custody
- Transferred - in custody
- Transferred - re-commissioning transfer
- Incomplete - dropped out
- Incomplete - treatment withdrawn by provider
- Incomplete - treatment commencement declined by client
- Incomplete - client died
- Incomplete - deported
- Incomplete - released from court
- Incomplete - onward referral offered and refused

Prison exit date

Prison exit reason Released / Transferred / Died / Absconded

Prison exit destination

Referral on release status - tick one

- Referred to recovery support services
- Referred to structured treatment provider
- Referred to structured treatment provider and recovery support
- No onward referral

Take home naloxone & training provided Yes / No

Has the client been sentenced? Yes / No

Referred to Hep C treatment during stay within establishment or to community service at release Yes / No

Did the client receive treatment for their mental health during stay Yes / No

Referral for alcohol-related liver disease Yes / No / Unknown