



Indicator Definitions and Supporting Information

Indicator number	2.15i
Indicator full name	2.15i - % of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months
Rationale	Individuals achieving this outcome demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health. It aligns with the ambition of both public health and the
	Government's drug strategy of increasing the number of individuals recovering from addiction. It also aligns well with the reducing reoffending outcome [Indicator 1.13] as offending behaviour is closely linked to substance use and it is well demonstrated that cessation of drug use reduces re-offending significantly. This in turn will have benefits to a range of wider services and will address those who cause the most harm in local communities.
Definition	Number of users of opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of opiate users in treatment.
Data source	National Drug Treatment Monitoring System (NDTMS)
Indicator production	Calculated by National Drug Evidence Centre (NDEC) on behalf of Public Health England using data from the National Drug Treatment Monitoring System
Definition of numerator	The number of adults that successfully complete treatment for opiates in a year and who do not re-present to treatment within 6 months.
Source of numerator	National Drug Treatment Monitoring System
Definition of denominator	The total number of adults in treatment for opiate use in a year .
Source of denominator	National Drug Treatment Monitoring System
Value type	Proportion
Methodology	Number of users of opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a proportion of the total number of opiate users in treatment
Unit	%
Age	18-99 yrs
Sex	Persons
Year type	Calendar

Frequency	Annual
Disclosure control	For the purposes of suppression, rates of the following areas have been generated using combined values: Cornwall and the Isles of Scilly; Leicestershire and Rutland; and City of London and Hackney.
Notes	The data for PHOF 2.15i, 2.15ii and 2.15iii was revised and backdated for the November 2016 upload. The three indicators are based on a single cohort of people in treatment for substance misuse based on a hierarchy which assigns individuals to a category based on the substances they report using problematically when presenting for treatment. This prioritises opiate use (the individual is counted towards PHOF 2.15i), then non-opiate use (the individual is counted towards PHOF 2.15ii) and finally alcohol use alone (the individual is counted towards PHOF 2.15iii).
	For the November 2016 upload, two changes were made to this categorisation. Firstly, individuals specifically citing prescribed opiates were moved from the non-opiate to the opiate category. Secondly, individuals citing only nicotine and/or caffeine use alongside alcohol use were moved from the non-opiate to the alcohol category. In total, these changes lead to reduced numbers of individuals being counted towards 2.15ii and increased numbers for 2.15i and 2.15iii. A further slight alteration was made to how individuals in treatment in the reporting period were identified which has led to a small increase in the number of individuals in the whole national cohort.
	At a national level, successful completion rates for each of the three indicators remain similar to the figures previously reported, however in some local authorities there may be more significant discrepancies. Please contact your local PHE centre team if you have any queries about the effect of these changes in your local area.
	The method used in reporting this indicator was also updated in Nov 14 to reflect changes made in the way PHE now reports the underpinning data to local areas so that the two are consistent.
	These changes reflect the fact that some people are receiving treatment for drugs and alcohol across a continuous pathway of care, while at the same time acknowledging that they are not on the road to recovery unless they complete treatment successfully for both.
	This follows a consultation last year with commissioners and providers who welcome the updates as they reflect an increasingly integrated approach to local authority commissioning.