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Substance Misuse Data Set
Implementation Date: 1st April 2014

Business Definition

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Author: Data Standards, NWIS

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Introduction

The purpose of this document establishes, at a business level, the set of data items (known as the Substance Misuse Data Set) to be collected.

This document should not be interpreted as a technical statement – it is intended to serve the business perspective of what data will be managed. From this document, the technical specification was derived and established.

Background

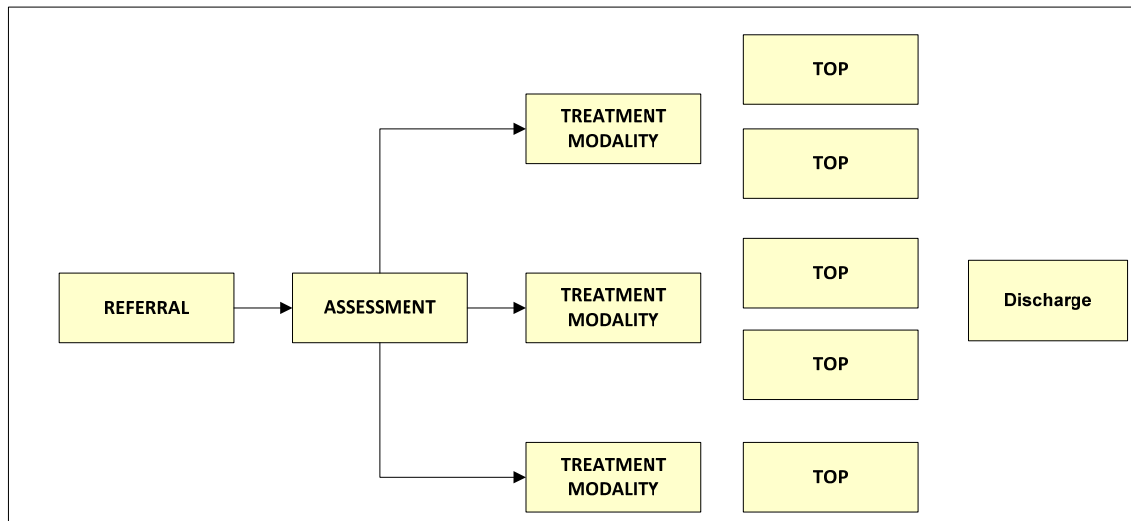
The Substance Misuse Data Set captures data relating to individuals (clients), both young persons and adults, presenting for substance misuse treatment in Wales.

Providers delivering substance misuse treatment in Wales and who are in receipt of Welsh Government substance misuse revenue funding are required to submit the Data Set.

Substance Misuse Data Set

The Substance Misuse Data Set (SMDS) (also known as Welsh National Database for Substance Misuse - WNDSM) captures information relating to a client journey in a substance misuse agency. This journey is made up of a number of 'events' – one referral, one assessment, one (or more) Treatment Modalities, multiple Treatment Outcome Profiles (TOPs) and one discharge.

The diagram below is an example of the events which can occur in a Client Journey.



Data items which form the Substance Misuse Data Set can be considered as belonging to one of 6 different entities or groups. These are:

- Client Details
- Referral Details
- Assessment Details
- Treatment Modality Details
- Treatment Outcomes Profile (TOP) Details
- Discharge Details

The receipt of a referral to a Substance Misuse Agency will trigger the submission of data to the National Database. Future data should be provided as and when the client progresses through their treatment journey.

On implementation of the new data set, Agencies will be required to make an initial submission of all OPEN Client Records on their local databases.

Future submissions to the data base will contain:

1. New referrals received by the agency since the last reporting period
Data relating to existing Client Journeys as they progress through their treatment journey – please refer to example diagram below which outlines the information required to be submitted as each event occurs.
2. Amendments to existing data held on the national data base.

Deletions **should only** occur where data has been incorrectly submitted to the Welsh National Database for Substance Misuse (WNDSM). Agencies are advised that any deletions of duplicates made on local systems will not be automatically deleted on the WNDSM. Deleting records will create inconsistencies between the data held local systems and the data held in the WNDSM.

The diagram below illustrates an example of a client journey and the information required to be reported at each stage.

Referral Received

Client receives full assessment with Care Plan

Client Receives Community Detoxification Treatment

Client Receives Harm Reduction Treatment

Client Discharged from Treatment

Client Details
 Unique Client ID
 First Letter of Last Name
 First Letter of First Name
 Date of Birth
 Gender

Referral Details
 Agency Code
 Agency Client Number
 Date of Referral
 Referral Source

Client Details
 Ethnic Category
 Reduced Postcode
 Local Authority

Assessment Details
 Assessment Date
 Previously Treated
 Ex-Services Personnel
 Parental Responsibility
 Children Living in Household
 Problem Substance 1
 Problem Substance 2
 Problem Substance 3
 Injecting Status
 Hepatitis B Vaccination Status
 Blood Borne Virus Test Status
 Co-occurring Mental Health Issues
 Accommodation Need
 Employment Status

Treatment Modality Details
 Treatment Modality Type
 Modality Referral Date
 Date First Appointment offered for Modality
 Modality Start Date
 Modality End Date
 Modality Exit Status

Treatment Modality Details
 Treatment Modality Type
 Modality Referral Date
 Date First Appointment offered for Modality
 Modality Start Date
 Modality End Date
 Modality Exit Status

Discharge Details
 Date Contact Ended
 Reason Contact Ended

Client has a Treatment Outcome Profile (TOP) at start of treatment

Client has a Review TOP (a review TOP is required to be undertaken 12 weeks post Treatment Start and every 12 weeks thereafter)

Client has exit TOP

PROCESS

Data Items

Information required to be reported to National Database

Treatment Outcome Profile (TOP) Details
 TOP Number
 TOP Interview Date
 Treatment Stage
 Number of Days Alcohol Used
 Number of Days Opiates Used
 Number of Days Crack Used
 Number of Days Cocaine Used
 Number of Days Amphetamines Used
 Number of Days Cannabis Used
 Other Problem Substance Used
 Number of Days Other Substance Used
 Number of Days Non-Prescribed Drugs Used
 Injected with Needle or Syringe used by someone else
 Number of Days Shoplifting
 Number of Days Selling Drugs
 Criminal Offence Status
 Assault or Violence Status
 Psychological Health Status
 Number of Days Paid Work
 Days Attended College or School
 Physical Health Status
 Urgent Housing Problem Status
 Risk of Eviction Status

Data Items

Client Details	Format
NHS Number	10 digit numeric
First Letter of Surname	1 alpha character
First Letter of Forename	1 alpha character
Date of Birth	CCYY-MM-DD
Gender	1 digit numeric
Ethnic Category	1 character alphanumeric
Postcode	6 character alpha numeric
Local Authority	3 digit numeric

Referral Details	Format
Agency Code	6 character alpha numeric
Agency Client Number	15 digit numeric
Date of Referral	CCYY-MM-DD
Source of Referral	2 character alpha numeric

Assessment Details	Format
Assessment Date	CCYY-MM-DD
Previously Treated	1 digit numeric
Ex Services Personnel	1 digit numeric
Parental Responsibility	2 character alpha numeric
Children Living in Household	2 character alpha numeric
Problem Substance 1	4 digit numeric
Problem Substance 2	4 digit numeric
Problem Substance 3	4 digit numeric
Injecting Status	2 character alpha numeric
Hepatitis B Vaccination Status	2 character alpha numeric
Blood Borne Virus Test Status	2 character alpha numeric
Co-occurring Mental Health Issues	1 digit numeric
Accommodation Need	2 character alpha numeric
Employment Status	2 character alpha numeric

Treatment Modality Details	Format
Treatment Modality Type	2 character alpha numeric
Modality Referral Date	CCYY-MM-DD
Modality First Appointment Offered Date	CCYY-MM-DD
Modality Start Date	CCYY-MM-DD
Modality End Date	CCYY-MM-DD
Modality Exit Status	2 character alpha numeric

Treatment Outcome Profile (TOP) Details	Format
TOP Number	6 digit numeric
TOP Interview Date	CCYY-MM-DD
Treatment Stage	2 character alpha numeric
Number of Days Alcohol Used	2 character alpha numeric
Number of Days Opiate Used	2 character alpha numeric

Number of Days Crack Used	2 character alpha numeric
Number of Days Cocaine Used	2 character alpha numeric
Number of Days Amphetamines Used	2 character alpha numeric
Number of Days Cannabis Used	2 character alpha numeric
Other Problem Substance Used	4 digit numeric
Number of Days Other Substance Used	2 character alpha numeric
Number of Days Non-Prescribed Drugs Injected	2 character alpha numeric
Injected with Needle or Syringe used by Someone else	1 digit numeric
Number of Days Shoplifting	2 character alpha numeric
Number of Days Selling Drugs	2 character alpha numeric
Criminal Offence Status	2 character alpha numeric
Committing Assault or Violence	2 character alpha numeric
Psychological Health Status	2 character alpha numeric
Number of Days Paid Work	2 character alpha numeric
Number of Days Attended College or School	2 character alpha numeric
Physical Health Status	2 character alpha numeric
Urgent Housing Problem Status	2 character alpha numeric
Risk of Eviction Status	2 character alpha numeric
Quality of Life Status	2 character alpha numeric

Discharge Details	Format
Date Contact Ended	CCYY-MM-DD
Reason Contact Ended	2 character alpha numeric

Data Definitions

First Letter of Surname

The first initial of the client's surname. For example, "J" where the last name is Jackson and "O" where the last name is O'Sullivan.

Format: 1 alpha character

First Letter of Forename

The first initial of the client's first forename. For example, "M" where the forename is Mary.

Format: 1 alpha character

Date of Birth

The date of birth of the client.

In exceptional cases, where the date of birth is unknown, the default date of '18111111' should be submitted.

Format: CCYY-MM-DD

Gender

The gender of a client (as stated by the client).

Gender identity is a person's sense of identification with either the male or female sex, as manifested in appearance, behaviour, and other aspects of a person's life.

Format: 1 digit numeric

Value	Meaning
1	Male
2	Female
9	Not Specified

Ethnic Category

This is the ethnic group of the patient, as selected by the client. The client is the arbiter of the information. Classifications are based on the 14+1 new ethnic group data categories used in the 2001 Census and the information recorded about ethnic group must be obtained by asking the client.

Format: 1 alpha character

Value	Meaning
	WHITE

A	Any White Background
	MIXED
D	White and Black Caribbean
E	White and Black African
F	White and Asian
G	Any other mixed background
	ASIAN OR ASIAN BRITISH
H	Indian
J	Pakistani
K	Bangladeshi
L	Any other Asian background
	BLACK OR BLACK BRITISH
M	Caribbean
N	African
P	Any other Black background
	OTHER ETHNIC GROUPS
R	Chinese
S	Any other ethnic group
	NOT STATED
Z	Not stated

Reduced Postcode

This is the reduced postcode of the client.

This is the usual address nominated by the client. If clients that usually reside elsewhere are staying in hotels, hostels or other residential establishments for a short term, say a week, they should be recorded as staying at their usual place of residence. However if long term, such as at boarding school, the school address must be recorded. University students may nominate either their home address or the address of their university accommodation.

The 'reduced' postcode consists of the first 4 characters of the postcode plus one space plus the first character of the second part of the post code. This could also be the first 3 characters where the first part of the postcode is 3 characters long as shown in the example below.

Format: 6 character alpha-numeric

The table below shows the full UK postcode format from which this data item's format is derived.

Character Position	1	2	3	4	5	6
Format	C	F	2	4	space	0
	S	A	4	space	space	0

Example

If the full UK postcode is CF24 0AL, the submitted 'reduced' postcode entered would be 'CF24 0', as shown in the layout above.

If a client has no fixed abode, this should be recorded with the appropriate code (ZZ99 3)

NHS Number

The NHS Number of the client.

It is mandatory to record the NHS Number for each patient registered with a GP practice in England and Wales. The NHS Number is allocated to an individual, to enable unique identification for NHS Healthcare purposes.

Format: 10 digit numeric

Agency Code

This is a unique identifier for the Treatment Provider (Agency) and is the nationally recognised code assigned to the agency or practice by the NHS Wales Informatics Service (NWIS).

Format: 6 character alpha numeric

Agency and Practice Codes can be accessed via the National Reference Data Service (NRDS): <http://nrds.cymru.nhs.uk/> (NHS Wales Users Only)

Agency Client Number

This is a system generated number allocated to a client within an Agency. NB: This should be a technical item, and should not hold or be composed of attributers, which might identify an individual.

Format: 15 character alphanumeric

Date of Referral

The date that the referral was received by the agency.

For referrals by telephone, letter, email, online or fax, the date of referral should be recorded as the date the telephone call was made or the date the letter, email etc was received by the agency.

Prison Referrals:

- 1) If a referral is received for a client whilst in prison, the referral date will be the date the client is released from prison.
- 2) If the agency begins working with a client before they are released the original referral date should be used as the date of referral.

Format: 8 digit numeric, CCYY-MM-DD

Source of Referral

The source of referral of each client referral into a substance misuse agency.

Format: 2 character alpha numeric

Value	Meaning
30	Statutory Drug Service
31	Non-Statutory Drug Service
32	General Practitioner
33	Self-Referral
34	Prison / Counselling Assessment Referral Advice and Throughcare (CARAT) / Transitional Support Scheme
35	Youth Offending Team (YOT)
36	Probation Service to include Drug Rehabilitation Requirements
37	NHS Accident and Emergency Department
38	Needle / Syringe Exchange Scheme
39	Psychiatry
40	Community Care Assessment
41	Integrated Offender Interventions Service / Drug Interventions Programme / Arrest Referral Scheme
42	Social Services
43	Community Psychiatric Nurse (CPN) / Community Mental Health Team
44	Solicitor
45	Family / Friends
46	Police
47	Educational Establishment
48	Employment Service
49	Support Agencies e.g. Shelter
50	Domestic Abuse Support Service
51	Armed Forces
52	Court
53	Midwife
54	NHS (Hospital)
55	Peer Mentoring Scheme
56	Single Point of Engagement (SPOE) NB this is only to be used in specific cases; these circumstances will be by prior agreement with Welsh Government.

Assessment Date

The date that the initial assessment was completed.

The full scope and depth of the assessment will vary according to the presenting needs of a client, but should include an initial assessment of the client's physical health and mental health needs.

Format: CCYY-MM-DD

Local Authority

The Local Authority of the client, based on the postcode of their usual place of residence at assessment.

In the event that the client presents with no fixed abode, the code should be that of the local authority in which the agency is located.

Where tier 4 treatment is being provided, the code for the local authority responsible for the referral should be used.

Format: 3 digit numeric.

Value	Meaning
660	Isle of Anglesey
661	Gwynedd
662	Conwy
663	Denbighshire
664	Flintshire
665	Wrexham
666	Powys
667	Ceredigion
668	Pembrokeshire
669	Carmarthenshire
670	Swansea
671	Neath Port Talbot
672	Bridgend
673	The Vale of Glamorgan
674	Rhondda Cynon Taf
675	Merthyr Tydfil
676	Caerphilly
677	Blaenau Gwent
678	Torfaen
679	Monmouthshire
680	Newport
681	Cardiff
999	Other – Outside Wales

Previously Treated

To establish whether the client has advised that they have previously received substance misuse treatment at the current or any other substance misuse agency within Wales.

Format: 1 digit numeric

Value	Meaning
1	Client advises that they have previously received substance misuse treatment in Wales
2	Client advises that they have not previously received substance misuse treatment in Wales

Ex Services Personnel

To establish whether the client has advised that they have previously served in the armed forces.

'Previously served' is defined as anyone who has served for at least **one day** in HM Armed Forces (Regular or Reserve), or Merchant Seafarers and Fisherman who have served in a vessel at a time when it was operated to facilitate military operations by HM Armed Forces.

Format: 1 digit numeric

Value	Meaning
1	Client advises that they have previously served in the armed forces
2	Client advised that that they have not previously served in the armed forces

Parental Responsibility

The parental responsibility of the client – i.e. whether or not dependents reside with them.

Parental responsibility includes biological parents, step parents, foster parents, adoptive parents and guardians. It should also include de facto parents where an adult cohabits with the parent of a child or the child alone and have taken on full or partial parental responsibilities.

Format: 2 character alpha numeric

Value	Meaning
01	The client is a parent of one or more children under 18 and all the client's children (who are under 18) reside with them full time.
02	The client is a parent of children under 18 and some of the client's children (who are under 18) reside with them, others live full time in other locations.
03	The client is a parent of children under 18 but they all live full time in other locations.
04	The client is not a parent of any children under 18.
99	Client declined to answer.

Children Living in Household

The number of children under 18 that live in the same household as the client at least one night a week. The client does not necessarily need to have parental responsibility for the children.

Format: 2 character alpha numeric

Value	Meaning
00	No children live in same household as client.
01-50	The number of children under 18 that live in the same household as the client at least onenight a week.
99	Client declined to answer.

Problem Substance 1

The main problem substance that has led the client to present (or be referred) to the substance misuse agency.

The specific substance causing the problem should still be recorded even if an individual advises that they are currently substance free.

Note: *If a client has been prescribed substitute opioid medication (i.e. Methadone or Buprenorphine) these should not be listed as the main problem substance and instead Opiates should be recorded. If the client is using Methadone / Buprenorphine not prescribed to them it is appropriate to list them as the problem substance.*

Format: 4 digit numeric

[See above] List of permissible values and their meaning can be accessed or requested via the National Reference Data Service (NRDS). List at time of publication is at Appendix A.

Problem Substance 2

The second problematic substance being used, where applicable, that has led the client to present (or be referred) to the substance misuse agency.

The specific substance should still be recorded even if an individual advises they are currently substance free.

N.B. *If a client has been prescribed substitute opioid medication (i.e. Methadone or Buprenorphine), these should not be listed as the problem substance and instead Opiates should be recorded. If the client is using Methadone / Buprenorphine not prescribed to them it is appropriate to list them as the problem substance.*

Format: 4 digit numeric

[See above] List of permissible values and their meaning can be accessed or requested via the National Reference Data Service (NRDS). List at time of publication is at Appendix A.

Problem Substance 3

The third problematic substance being used, where applicable, that has led the client to present (or be referred) to the substance misuse agency.

N.B. If a client has been prescribed substitute opioid medication (i.e. Methadone or Buprenorphine), these should not be listed as the problem substance and instead Opiates should be recorded. If the client is using Methadone / Buprenorphine not prescribed to them it is appropriate to list them as the problem substance.

Format: 4 digit numeric

[See above] List of permissible values and their meaning can be accessed or requested via the National Reference Data Service (NRDS). List at time of publication is at Appendix A.

Injecting Status

The injecting status of the client.

Format: 2 character alpha numeric

Value	Meaning
01	The client is currently injecting (i.e. up to and including the last 28 days)
02	The client has previously injected (i.e. greater than 28 days).
03	The client has never injected.
99	The client declined to answer.

Hepatitis B Vaccination Status

To establish whether the client has been offered information AND immunisation against Hepatitis B.

Format: 2 character alpha numeric

Value	Meaning
01	Vaccination not required. I.e. the client is already fully vaccinated against Hepatitis B. A client is only considered fully immunized against Hepatitis B when they have received a course of 4 injections.
02	Vaccination offered and accepted (this will include clients who are part way through vaccination programme).
03	Vaccination offered and refused.
04	Vaccination not offered.

Blood Borne Virus Test Status

To establish whether the client has been offered testing for blood-borne virus (BBV) infection (Hepatitis B, Hepatitis C and HIV).

Format: 2 character alpha numeric

Value	Meaning
01	Testing not required. I.e. the client has already been tested in the last 12 months or is currently being treated for BBV virus infection
02	Testing offered and accepted.
03	Testing offered and refused.
04	Testing not offered.

Co-occurring Mental Health Issues

To establish whether the client is currently receiving care from either primary or secondary mental health services (or assessed as needing care) for reasons other than substance misuse, as stated by the client.

Format: 1 digit numeric

Value	Meaning
1	Client is currently receiving (or has been assessed as needing) care from Mental Health Services
2	Client is not currently receiving (or assessed as needing) care from Mental Health Services

Accommodation Need

The current accommodation need of the client.

Format: 2 character alpha numeric

Value	Meaning
01	No Fixed Abode (NFA) – Urgent Housing Problem. For example, the client is currently living on the streets, uses hostel accommodation (on a night by-night basis) or is sleeping in different accommodation (e.g. the floor of a friends' house) each night.
02	Housing problem. For example, the client is staying with friends / family as a short term guest, night winter shelter, direct access short stay hostel, short term B&B or is squatting.
03	No housing problem. For example, the client is staying in Local Authority / Register of Social Landlords (RSL) rented, privately rented, approved premises, supported housing accommodation, his own property and/or is settled with friends / family or is classed as a 'traveller'.

Employment Status

The current employment status of the client.

Format: 2 character alpha numeric

Value	Meaning
01	The client is in regular employment.
02	The client is a registered pupil / student.
03	Economically inactive (long term sick / disabled, homemaker, retired from paid work.
04	Unemployed and not seeking work.
05	Unemployed and seeking work
99	The client declined to answer.

Treatment Modality

The treatment modality / intervention a client is receiving as part of their treatment journey.

Format: 2 character alpha-numeric

Value	Meaning
01	Inpatient Treatment
02	Residential Rehabilitation
03	Community Detoxification
04	Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions
05	Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions
06	Psychosocial Interventions
07	Structured Day Programmes
08	Health and Recovery Support Intervention
09	Brief Interventions
10	Harm Reduction

Modality Referral Date

The date when it was mutually agreed that the client required the specified modality / intervention of treatment.

- For the first modality / intervention in a journey, this should be the date that the client was referred to the treatment requiring a structured modality / intervention.
- For subsequent modalities, it should be the date that both the client and the key worker agreed that the client is ready for the modality / intervention.

Format: CCYY-MM-DD

Date of First Appointment Offered for Modality

The date of the first appointment offered to commence the specified treatment modality.

This should be mutually agreed as appropriate for the client.

Format: CCYY-MM-DD

Modality Start Date

The date when the treatment modality commenced – i.e. the client attended the appointment.

Format: CCYY-MM-DD

Modality End Date

The date when the treatment modality ended.

Where a client cuts short a treatment modality (i.e. an unplanned exit), the date of the last face-to-face contact should be used.

Format: CCYY-MM-DD

Modality Exit Status

The exit status from a treatment modality.

Format: 2 character alpha-numeric

Value	Meaning
01	Planned exit from treatment modality (i.e. treatment modality completed as set out in the treatment plan)
02	Unplanned exit from treatment modality

A planned exit is where treatment has completed, this includes:

- Treatment Complete – Problematic Substance Free
- Referred to another service
- Moved to GP Led Prescribing

Unplanned exit is where treatment is withdrawn by the provider, this includes clients who:

- Did not attend or respond to follow up contact
- Moved from area (if client moved from geographical area but was also referred to another service, the latter should be captured.)
- Retained in custody / prison

- Deceased
 - Declined treatment
-

Treatment Outcomes Profile (TOP) Number

A unique number for each TOP undertaken. This is a system generated number.

Format: 6 digit numeric

Treatment Outcomes Profile (TOP) Interview Date

The date on which a Treatment Outcomes Profile (TOP) interview is undertaken.

Format: CCYY-MM-DD.

Treatment Stage

The stage of treatment at which the TOP interview is undertaken.

Format: 2 character alphanumeric

Value	Meaning
01	Treatment Start Outcome Profile
02	Treatment Review Outcome Profile
03	Treatment Exit Outcome Profile
04	Post Treatment Exit Profile

Number of Days Alcohol Used

The number of days the client has consumed alcohol in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No alcohol consumed.
01 - 28	Number of days on which the client has consumed alcohol.
99	The client declined to answer.

Number of Days Opiate Used

The number of days the client has taken opiates in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No opiates taken.
01 - 28	Number of days on which the client has taken opiates.
99	The client declined to answer.

Number of Days Crack Used

The number of days the client has taken crack in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No crack taken.
01 - 28	Number of days on which the client has taken crack.
99	The client declined to answer.

Number of Days Cocaine Used

The number of days the client has taken cocaine in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No cocaine taken.
01 - 28	Number of days on which the client has taken cocaine.
99	The client declined to answer.

Number of Days Amphetamines Used

The number of days the client has taken amphetamine in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No amphetamine taken.
01 - 28	Number of days on which the client has taken amphetamine.
99	The client declined to answer.

Number of Days Cannabis Used

The number of days the client has taken cannabis in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No cannabis taken.
01 - 28	Number of days on which the client has taken cannabis.
99	The client declined to answer.

Other Problem Substance Used

This should be completed if the client has used any other substance within the last 28 days (4 weeks) prior to the TOP interview date other than alcohol, opiates, crack, cocaine, amphetamines and cannabis).

If the client has used more than one 'other problem substance' in the last 28 days (4 weeks) the most predominant substance should be recorded.

Format: 4 character alpha-numeric

Value	Meaning
0000	Not used
1000 - 8888	[INSERT SUBSTANCE CLASSIFICATION]
9999	Not disclosed or not answered

Number of Days Other Substance Used

The number of days the client has taken the "other problem substance" in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
-------	---------

00	No other substance taken.
01 - 28	Number of days on which the other substance was taken.
99	The client declined to answer.

Number of Days Non-Prescribed Drugs Injected

The total number of days the client has injected non prescribed drugs in the last 28 days (4 weeks) prior to the TOP interview date, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	No non-prescribed drugs injected.
01 - 28	Number of days on which the client has injected non-prescribed drugs.
99	The client declined to answer.

Injected with Needle or Syringe Used by Somebody Else

To establish the method of injecting used.

Format: 1 digit numeric.

Value	Meaning
1	Client injected with needle or syringe used by someone else.
2	Client has not injected with needle or syringe used by someone else
9	The client declined to answer

Number of Days Shoplifting

The number of days over the last 28 days (4 weeks) prior to the TOP interview date that the client has shoplifted, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	Client has not shoplifted
01 - 28	Total number of days on which the client has shoplifted.
99	The client declined to answer.

Number of Days Selling Drugs

The number of days over the last 28 days (4 weeks) prior to the TOP interview date that the client has sold drugs, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	The client has not sold any drugs.
01 - 28	Total number of days on which the client has sold drugs.
99	The client declined to answer.

Criminal Offence Status

To establish whether the client has committed theft from or of a vehicle, other property theft, burglary, fraud, forgery or handled stolen goods over the last 28 days (4 weeks) prior to the TOP interview, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
01	Client has committed theft, burglary, fraud, forgery or handled stolen goods.
02	Client has not committed theft, burglary, fraud, forgery or handled stolen goods.
99	The client declined to answer.

Assault or Violence Status

To establish whether the client has committed assault or violence over the last 28 days (4 weeks) prior to the TOP interview, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
01	Client has committed assault or violence
02	Client has not committed assault or violence
99	The client declined to answer.

Psychological Health Status

A score, as stated by the client, with regards to their perceived psychological health status (anxiety, depression and problem emotions and feelings etc.).

A scale of 0 (poor) to 20 (good) is used.

Format: 2 character alpha numeric.

Value	Meaning
00 - 20	Psychological Health Status
99	The client declined to answer.

Number of Days Paid Work

The number of days over the last 28 days (4 weeks) prior to the TOP interview that the client has undertaken paid work, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	The client has not undertaken any paid work.
01 - 28	Total number of days on which the client has undertaken paid work.
99	The client declined to answer.

Number of Days Attended College or School

The number of days over the last 28 days (4 weeks) prior to the TOP interview that the client has attended college (higher or further education) or school, as stated by the client.

Format: 2 character alpha numeric.

Value	Meaning
00	The client has not attended college or school.
01 - 28	Total number of days on which the client has attended college or school.
99	The client declined to answer.

Physical Health Status

A score, as stated by the client, with regards to their physical health status (extent of physical symptoms and bothered by illness etc.).

A scale of 0 (poor) to 20 (good) is used.

Format: 2 character alpha numeric.

Value	Meaning
00 - 20	Physical Health Status
99	The client declined to answer.

UrgentHousing Problem Status

To establish if the client has had an acute housing problem in the last 28 days (4 weeks) prior to the TOP interview.

Acute housing problem is defined as:

- The client is of no fixed abode and has been sleeping a night by night basis on the streets.
- The client has been sleeping in a night shelter on a night by night basis.
- The client has been sleeping on different friends' floors each night.

Format: 2 character alpha numeric

Value	Meaning
01	Client has urgenthousing problem
02	Client does not have urgenthousing problem
99	The client declined to answer.

Risk of Eviction Status

To establish whether the client has been at risk of eviction over the last 28 days (4 weeks) prior to the TOP interview.

Risk of eviction is defined as:

A verbal warning from their landlord concerning their tenancy that concerns some infringement of the agreement such as rent or mortgage arrears.

OR

A formal written warning, notice seeking possession or court order which may result in their eviction from their property

Format: 2 character alpha numeric

Value	Meaning
01	Client has been at risk of eviction
02	Client has not been at risk of eviction
99	The client declined to answer

Quality of Life Status

A score, as stated by the client, with regards to their overall quality of life (e.g. able to enjoy life, gets on well with family and partners).

A scale of 0 (poor) to 20 (good) is used.

Format: 2 character alpha numeric.

Value	Meaning
00 - 20	Quality of Life Status
99	The client declined to answer

Date Contact Ended

The agreed date of discharge or the date the client was last in contact with the agency, either face to face or by telephone.

Format: 8 digit numeric, CCYY-MM-DD.

Reason Contact Ended

The reason contact ended.

Format: 2 character alpha numeric.

Value	Meaning
01	Treatment completed – problematic substance free The client no longer requires a treatment intervention and is judged by the case worker as not using any of the clients reported problematic substances
02	Treatment completed The client has reached their treatment goal(s) as agreed at commencement of treatment
03	Treatment withdrawn by provider The treatment provider has withdrawn treatment provision from the client. This item could be used, for example, in cases where the client has seriously breached a contract leading to their discharge. It should not be used if a client has simply 'dropped out'
04	Referred to another service A client has finished treatment at this provider agency but still requires treatment and the individual has been referred to another substance misuse provider for this. This code should only be used if there is an appropriate referral path available.
05	Did not attend or respond to follow-up contact The treatment provider has lost contact with client for 8 weeks or more without a planned discharge and attempts to re-engage the client have not

	been successful.
06	Moved from area Client has moved from the geographical area in which they are receiving treatment and not referred to another service.
07	Prison / Retained in Custody The client is no longer in contact with the treatment provider as they are in prison or another secure setting.
08	Deceased During their time in contact with the treatment provider the client has died.
09	Inappropriate Referral Client has been contacted following referral and states that they are not ready to engage in treatment or when assessed there is no substance misuse treatment need for client.
10	Client unaware of referral A third party referral has been received and when client has been contacted they were unaware of the referral.
11	Treatment commencement declined by the client The treatment provider has received a referral and has undertaken an initial face-to-face assessment with the client, after which the client has chosen not to commence a recommended structured treatment intervention.
12	Moved to GP Led Prescribing (Primary Care) The client is receiving GP Led Prescribing (Primary Care) and is no longer involved with the substance misuse treatment agency.

Supporting Definitions

Modality Definitions

STRUCTURED TREATMENT MODALITIES

1. Inpatient Treatment

An Inpatient Unit (IPU) provides care to service users with substance-related problems (medical, psychological or social) that are so severe that they require medical, physical and psychological care. The key feature of the IPU is the provision of these services with 24 hour cover 7 days per week, from a multi-disciplinary clinical team who have had specialist training in managing addictive behaviours

Treatment in an inpatient (admitted) setting may involve one or more of the following interventions

1. Assessment
2. Stabilisation
3. Assisted withdrawal (detoxification).

A combination of all three may be provided or one followed by the other.

IPU treatment is based on a plan of care, developed prior to admission, and should encompass relevant preparatory work and a seamless transition to on-going treatment after discharge.

The three main settings for inpatient treatment are:

- General hospital psychiatric units
- Specialist drug misuse inpatient units in hospitals
- Residential rehabilitation units (usually as a precursor to the rehabilitation programme)

The modality / intervention start date is the date of admission to the inpatient facility.

i) Inpatient Treatment Assessment Only (Definition of Intervention)

Individuals with drug and alcohol dependence present with a wide range of psychiatric, physical and social problems.

Substance misuse services provide a comprehensive assessment of these needs and formulate a treatment care plan to tackle them.

A hospital setting permits a higher level of medical observation, supervision and safety for service users needing more intensive forms of care. Specific tasks of the IPU may include assessment of substance misuse / mental health / physical health / social problems.

ii) Inpatient Treatment Stabilisation (Definition of Intervention)

IPU should have care pathways, clinical protocols and sufficient human and physical resources to offer the following range of stabilisation procedures:

1. Dose titration.

Admission to an IPU with staff skilled in monitoring the effects of methadone and the opioid withdrawal syndrome may prevent the individual dropping out of treatment, or else continuing to supplement their prescribed methadone or buprenorphine dose with illicit opioids.

2. Dose titration on injectable opioid medication

IPU admission allows interventions to optimise the service users injection technique, and 24 hour monitoring allows safer and more efficient calculations of dosage.

3. Stabilisation on maintenance therapy

Use of heroin on top of prescription of methadone can be problematic and attempts to tackle it within the community may lead to increasing doses of methadone and rising opioid tolerance without the desired break from the illicit drug market. A short (one or two week) admission to an IPU maybe an effective way of breaking this cycle, particularly when followed up by day care or intensive community support.

4. Combination assisted withdrawal / stabilisation

A period of IPU treatment may allow assessment and treatment of the withdrawal symptoms from stimulant drugs, alcohol or benzodiazepines, and in doing so facilitate stabilisation on opioid maintenance treatment. Such individuals can then continue to receive Tier 3 interventions in a community setting.

iii) Inpatient Treatment Detoxification / Assisted Withdrawal (Definition of Intervention)

Assisted withdrawal should only be encouraged as the first step in a longer treatment process, and needs to be integrated with relapse prevention or rehabilitation treatment programmes.

Withdrawal in an IPU setting offers better opportunities for clinicians to ensure compliance with medication and to manage complications. IPU admission also offers a major opportunity to recruit service users into longer term treatment to reduce the risk of relapse back into regular drug or alcohol use.

The IPU should have care pathways, clinical protocols and sufficient human and physical resources to offer assisted withdrawal for a wide range of single and poly drug and alcohol misuse problems.

This may also include pharmacological interventions (excluding maintenance substitute opiate prescribing) such as acamprosate, disulfiram, methadone, Buprenorphine, lofexidine, Naltrexone, and other prescribing for symptomatic treatment such as nausea.

2. Residential Rehabilitation

Residential rehabilitation consists of a range of treatment delivery models or programmes to address drug and alcohol misuse, including abstinence drug interventions within the context of residential rehabilitation. There are three broad types of rehabilitation provision:

- Rehabilitation programmes based on Social Learning Theory
- 12-step programmes based on the Minnesota Model of addiction recovery treatment
- Faith-based therapeutic communities.

Residential rehabilitation providers may also manage ('second stage'), or have access to, substance free supported accommodation where a client moves after completing an episode of care in a residential rehabilitation unit and where they continue to have a care plan, receive key work and a range of substance and non substance related support.

Residential rehabilitation programmes normally combine a mixture of group work, psychosocial interventions and practical and vocational activities.

The modality / intervention start is the date of admission to a residential establishment or the date on which the detoxification element is started (if detox and rehab are being provided as one package).

3. Community Detoxification

Community based prescribing for withdrawal from alcohol

This can include pharmacological interventions (excluding maintenance substitute opiate prescribing) such as acamprosate, disulfiram, methadone, Buprenorphine, lofexidine, Naltrexone, and other prescribing for symptomatic treatment such as nausea. This may include, relapse prevention, respite, stabilisation and/or preparation for abstinence based treatment.

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

All prescribing interventions must be carried out in line with the Drug Misuse and Dependence – UK Guidelines on Clinical Management 2007. NICE Guideline on Psychosocial Interventions in Drug Misuse 2007

4. Substitute Opioid Prescribing (Methadone) and related Psychosocial Interventions

Substitute Opioid Prescribing (methadone) - maintenance treatment & structured evidence based psychosocial interventions. The care plan for prescribing should include key working to deliver:

- Care plan reviews
- Provision of advice and information
- Harm reduction advice and interventions
- Interventions to increase motivation
- Relapse prevention.

The plan may also include more formal psychosocial interventions including Motivational Interviewing (MI), Community Reinforcement Approach, Cognitive Behavioural Therapy, Family Therapy, and Behavioural Couples Therapy, structured day programmes, structured 1-1 counselling, structured group work.

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

All prescribing interventions must be carried out in line with the Drug Misuse and Dependence – UK Guidelines on Clinical Management 2007. NICE Guideline on Psychosocial Interventions in Drug Misuse 2007

5. Substitute Opioid Prescribing (Buprenorphine) and related Psychosocial Interventions

Substitute Opioid Prescribing (Buprenorphine) maintenance treatment & structured evidence based psychosocial interventions. The care plan for prescribing should include key working to deliver:

- care plan reviews
- Provision of advice and information
- Harm reduction advice and interventions
- Interventions to increase motivation
- Relapse prevention.

The plan may also include more formal psychosocial interventions including Motivational Interviewing (MI), Community Reinforcement Approach, Cognitive Behavioural Therapy, Family Therapy, and Behavioural Couples Therapy, structured day programmes, structured 1-1 counselling, structured group work.

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

All prescribing interventions must be carried out in line with the Drug Misuse and Dependence – UK Guidelines on Clinical Management 2007. NICE Guideline on Psychosocial Interventions in Drug Misuse 2007

6. Psychosocial Interventions

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 or care or treatment plans and goals, provision of drug related advice and information, harm reduction interventions and interventions to increase motivation and prevent relapse. Help to address social problems, for example housing and employment, is also important.

The plan may also include more formal psychosocial interventions including Motivational Interviewing (MI), Community Reinforcement Approach, Cognitive Behavioural Therapy, Family Therapy, Behavioural Couples Therapy, Structured day programmes, structured 1-1 counselling, structured group work.

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 or co-occurring mental disorders
- Alone or in addition to pharmacological interventions

Formal psychosocial interventions should be provided in accordance in line with the Drug Misuse and Dependence – UK Guidelines on Clinical Management 2007. NICE Guideline on Psychosocial Interventions in Drug Misuse 2007. The type of psychosocial intervention should be selected on the basis of the problem and treatment need of a specific client, guided by the available evidence base of effectiveness

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

7. Structured Day Programmes

Structured Day Programme (SDPs) provides a range of interventions where a client must attend 3 – 5 days per week (minimum 16 hours a week). Interventions tend to be either a fixed rolling programme or an individual timetable, according to client need. In either case, the SDP includes the development of a care plan and regular key working sessions. The care plan should address drug and alcohol misuse, health needs, offending behaviour and social functioning.

SDPs usually offer a programme of defined activities for a fixed period of time. Clients will usually attend the programme according to specified attendance criteria, and follow a set timetable that will include group work, psychosocial interventions, educational and life skill activities. Some clients may be attending a SDP as a follow-on or a pre-cursor to other treatment types, or may be attending as part of a criminal justice programme supervised by the probation service (e.g. DRR) or community rehabilitation.

This modality should only be used by agencies who are delivering structured day programmes as part of a commissioned service.

The modality / intervention start is the date that the client starts the programme.

LESS STRUCTURED MODALITIES

8. Health & Recovery Support Intervention

During structured treatment, Recovery Orientated Systems of Care (ROSC) should be recorded for interventions delivered alongside and / or integrated with a psychosocial or pharmacological intervention. Therefore at least one other modality (listed above) needs to be populated. ***Recovery support interventions can also be delivered and recorded outside of treatment however would not be captured on this database.***

The following options are available for recording this activity

ROSC – Peer support / mentoring

Definition – A supportive relationship where an individual has direct or indirect experience of drug and alcohol problems maybe specifically recruited on a paid or voluntary basis to provide support and guidance to peers. Peer support can also include less formal arrangements where shared experience is the basis of the support (e.g. as part of a social group).

Where peer support programmes are available, staff should provide information on access to service users, and support access where service users express an interest in using this type of support.

ROSC – Facilitated access to self help group

Definition – Staff provide service user with information about self help groups. If a service user has expressed an interest in attending a group then the staff member should facilitate initial contact with the group, e.g. arranging transportation to group, attending initial session with service user

ROSC – Social, financial and relationship support

Definition – Staff have assessed that there is a need for on-going support as part of the comprehensive assessment process or as part of their on-going review. Under each heading further information is provided to what type of support can be recorded here.

- Family support (i.e. arranging family support for the family in their own right or family support that includes the individual in treatment)
- Parenting support (i.e. referral to a parental support worker)
- Financial support (i.e. referral to benefit / debt advisor)
- Housing support (i.e. referral to a housing agency for specialist housing support [this can include a range of activities which are designed to allow an individual to maintain their accommodation or deal with an urgent housing need].)
- Employment support (i.e. include specific specialised employment support actions by the treatment service, and /or active referral to an agency for specialist employment support).
- Education & training support (i.e. include specific specialised education / training support actions by the treatment service, and /or active referral to an agency for specialist education / training support).
- Supported work projects (referral to a service providing paid employment positions where the employee receives significant on-going support to attend and perform duties).

ROSC – Aftercare support

Definition - Following completion of treatment there is an agreement for periodic contact between a service provider and the former participant in the structured treatment phase of support. The support is initiated by the service provider

ROSC – Relapse prevention support

Support which is provided to clients who have completed their substance misuse treatment in order to prevent relapse. This can be defined as:

- Evidence based psychosocial interventions to support substance misuse relapse prevention (these are

delivered following completion of structured substance misuse treatment. These interventions have a specific substance misuse focus and are delivered within substance misuse services)

- Evidence based mental health focused psychosocial interventions to support continued recovery. (Evidence based psychosocial interventions for common mental health problems that support continued recovery by focusing on improving psychosocial well-being that might otherwise increase the likelihood of relapse to substance use. These are delivered following completion of structured substance misuse treatment and maybe delivered outside substance misuse services but referred from substance misuse services)

ROSC –Diversionsary activities

This indicates whether the client is involved in an activity that is designed to divert the client away from substance use.

This activity should be sustained and part of a wider programme of recovery rather than a one off session.

9. Brief Interventions

These are brief opportunistic interventions focused on motivation. They normally consist of one or two brief sessions between ten and 60 minutes, which often focus on exploring ambivalence about changing behaviour and are offered in a non-judgemental way. They should be offered to people with no or limited contact with services if they have identified concerns about their drug misuse (for example, attendees at a needle exchange or in primary care). For people not in contact with drug treatment services, such interventions are likely to produce real benefits. However, they would not routinely be offered as the main intervention by a key worker once a care plan for structured treatment was in place (Clinical Management Guidelines). It is noted that this can also include relapse prevention within this context.

This includes a client that receives information only either verbally or in writing but no further treatment.

10. Harm Reduction

This is where a client is given specific advice and techniques for reducing the harm from drug misuse, such as advice on safer injecting techniques and minimising the risk of overdose.

Appendix A

Drug Names & Codes

Group	Drug Code	Drug Name
Heroin	1101	Heroin Illicit
	1102	Diamorphine
	1120	Diamorphine Elixir
	1121	Diamorphine Amps
	1125	Diamorphine Reefers
Methadone	1105	Methadone Unspecified
	1106	Methadone Mixture
	1107	Methadone Linctus
	1108	Methadone Tablets
	1109	Methadone Amps
	1110	Methadone Suppositories
Other Opiates	1000	Opiates Unspecified
	1103	Morphine Sulphate
	1104	Opium
	1111	Dihydrocodeine
	1112	Dextromoramide
	1113	Dipipanone
	1114	Pethidine
	1130	Morphine Sulphate Amps
	1151	Hydromorphone
	1152	Oxymorphone
	1153	Hydrocodone
	1154	Oxycodone
	1155	Levorphanol
	1156	Phenazocine
	1157	Piritramide
	1201	Codeine Tablets
	1202	Dextropropoxyphene
	1203	Pentazocine
	1204	Buprenorphine
	1205	Codeine Unspecified
	1206	Opiate Comp Analgesics
	1251	Nalbuphine
	1252	Alphaprodine
	1253	Anileridine
	1254	Ethoheptazine
	1255	Fentanyl
	1256	Phenoperidine
	1257	Meptazinol
	1258	Papaveretum
	1259	Tramadol Hydrochloride
	1300	Opiate Cont Mixture

	1301	Codeine Linctus
	1302	Gee's Linctus
	1303	Collis-brown
	1304	Phensedyl
	1305	Actifed
	1310	Kaolin and Morphine
	1401	Other Opiates
Benzodiazepines	2200	Benzodiazepines Unspecified
	2201	Diazepam
	2202	Chlordiazepoxide
	2203	Nitrazepam
	2204	Lorazepam
	2251	Clobazam
	2252	Clorazepate
	2253	Ketazolam
	2254	Medazepam
	2255	Oxazepam
	2256	Flurazepam
	2257	Temazepam
	2258	Triazolam
	2259	Lormetazepam
	2260	Prazepam
	2261	Bromazepam
	2262	Flunitrazepam
	2263	Chlormezanone
	2264	Loprazolam
	2265	Alprazolam
	2266	Clonazepam
	2267	Midazolam
Amphetamines (excluding ecstasy)	3100	Amphetamine Unspecified
	3101	Amphetamine Sulphate
	3102	Amphetamine (pharm)
	3103	Methamphetamine
	3104	Dexamphetamine
	3110	Dexamphetamine Syrup
	3111	Dexamphetamine Reefers
	3112	Methamphetamine Amps
	3113	Methylone
	3114	Mephedrone
Cocaine (excluding crack)	3200	Cocaine Unspecified
	3202	Cocaine Hydrochloride Powder
Crack	3201	Cocaine Freebase (Crack)
Hallucinogens	4000	Hallucinogens Unspecified
	4001	Mescaline

	4002	Psilocybin
	4003	Lysergide (LSD)
	4004	Phencyclidine
	4005	Ketamine
	4006	Dimethyltryptamine
	4007	Bromodomethoxyphenylamine
Ecstasy	3406	MDMA
	3407	Methylenedioxyamphetamine
Cannabis	5000	Cannabis Unspecified
	5001	Cannabis Herbal
	5002	Cannabis Resin
	5003	Cannabis Oil
	5004	Cannabis Skunk
Solvents	6000	Solvents Unspecified
	6001	Toluene (Glue)
	6002	Gas (Butane / Propane)
	6003	Volatile (such as Amyl Nitrate)
	6004	Acetone
	6005	Hydro Fluorocarbons
	6006	Trichloroethylene
	6007	Aerosols
	6008	Nitrous Oxide
	6009	Petrol
Barbiturates	2100	Barbiturates Unspecified
	2101	Amytal
	2102	Pentobarbitone
	2103	Quinalbarbitone
	2104	Phenobarbitone
	2151	Butobarbitone
	2152	Heptobarbitone
	2153	Cyclocarbitone
	2154	Hexobarbitone
	2155	Barbitone Unbranded
	2156	Methylphenobarbitone
Major Tranquilisers	8200	Major Tranquilisers Unspecified
	8201	Chlorpromazine (Largactyl)
Anti-Depressants	8300	Anti-depressants
	8301	Fluoxetine
	8302	Amitriptyline
	8303	Dothiepin Hydrochloride
	8304	Lofepamine
	8305	Paroxetine

Alcohol	7000	Alcohol Unspecified
	7001	Beer or Cider
	7002	Wines and Fortified
	7003	Spirits
	7004	Mixture of Alcohol
Other Drugs	2000	Sedatives Unspecified
	2300	Anti-histamines Unspecified
	2301	Hydroxyzine
	2302	Cyclizine
	2303	Promethazine
	2400	Non-barb/benzo Sedatives Unspecified
	2401	Methaqualone
	2402	Chlormethiazole
	2403	Meprobamate
	2404	Zopiclone
	2405	Zolpidem Tartrate
	2451	Propranolol
	2452	Chloral Derivatives
	2453	Glutethimide
	2454	Mephesisin
	2455	Methylpentylolol
	2456	Methylprylone
	2457	Oxyprenolol Hydrochloride
	2501	Other Sedatives
	3000	Stimulants Unspecified
	3151	Drinamyl
	3300	Appetite Suppressant
	3301	Diethylpropion
	3302	Phenmetrazine
	3303	Fenfluramine
	3304	Maizindol
	3305	Phenteramine
	3400	Other Stimulants
	3401	Methylphenidate
	3402	Pemoline
	3403	Prolintane
	3404	Fencamfamin
	3405	Caffeine
	3408	Khat
	3409	Nicotine
	8000	Other Psychoactive Drugs Unspecified
	8001	Procyclidine Hydrochloride
	8002	GHB/GBH
	8100	Minor Analgesics
	8400	Anti-diarrohea / Anti- emetic
	8501	Naltrexone
	8502	Antabuse
	8503	Clonidine

	8504	Lofexidine
	8505	Acamprosate Calcium (Campral)
	8600	Steroids Unspecified
	8601	Nandrolone
	8602	Stanozolol
	8603	Testosterone and Esters
	8604	Tetracosactrin
	8700	Antipsychotic Unspecified
	8701	Depixol
	8702	Thioridazine
	8703	Trifluoperazine
	8704	Pregbalin
	8705	Gabapentin
	8706	Areca Nut (betel, paan)
	8799	Drug Not Otherwise Specified
Prescription Drugs	9001	Diamorphine Prescription
	9002	Methadone Prescription
	9003	Buprenorphine Prescription
	9004	Codeine Prescription
	9005	Suboxone Prescription
	9006	Other Prescribed Drugs
Novel Psychoactive Substances	8800	NPS Other – Predominantly Stimulant
	8801	NPS Other – Predominantly Hallucinogenic
	8802	NPS Other – Predominantly Dissociative
	8803	NPS Other – Predominantly Sedative / Opioid
	8804	NPS Other – Predominantly Cannabis
	8805	NPS Other – Effects different to available classifications or not stated.
Misuse Free	9996	No Second Drug
	9997	No Third Drug