



***National Treatment Agency
for Substance Misuse***

National Drug Treatment Monitoring System (NDTMS)

NDTMS Data Set G

Technical Definition

April 2010

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Revision History

Version	Author	Purpose / Reason	Date
6.0.0	G Scott	Initial Version for NDTMS Data Set F New Fields YP questions at Treatment Start Discharge Destination TOP Care Coordination YP Questions at Treatment Exit	11/11/2008
6.0.1	J. Jaswani	YP Education Status at Treatment Exit changed from 9 characters to 8 characters (YPSEDSTAT changed to YPSESTAT) to comply with internal system requirements.	06/02/2009
6.0.2	J. Jaswani	Removal of Historical Item Accommodation Status as this is only concerned with CDS C. Preferred Date format (YYYYMMDD) Consent for NDTMS (CONSENT) is a mandatory field. DAT of Residence (DAT) is a mandatory field. Top Care Coordination (TOPCC) is an Alphanumeric field. Date Sequences Diagram updated	09/02/2009
6.1.0	R. Bull	Consolidation of 6.0.1 and 6.0.2 changes	16/02/2009
6.1.1	R. Bull	YPESTD field entered twice - incorrect field position removed	25/02/2009
6.2	M. Roxburgh	Notification of intention to drop YP Parent in substance misuse and mental health treatment.	16/10/09
6.2	J.Jaswani	Changed wording for verification rules 39 and 40 – Fields SHOULD contain a value rather than MUST contain a value.	16/10/09
7.01	J.Jaswani	Introduction of new data items for Alcohol Records (i.e. Primary Drug Alcohol) Drinking days more than binge limit - BINGEDAY AUDIT Score - AUDITALC Smoking Status - SMOKESTS Treatment Goal – TREATGOL	09/11/09
7.01	J.Jaswani	Changes to YP data set Removed items (Removed from NDTMS Schema) YP Parent in MH at Treatment Start - YPSMHTR YP Parent in SM at Treatment Start – YPSSMTR YP Involved in unsafe sex at Treatment Start – YPSUNSEX YP has safe sex at Treatment Exit - YPESSEX	09/11/09

Version	Author	Purpose / Reason	Date
		<p>Introduction of new data items (Additions to NDTMS Schema)</p> <p>Location of CLA – CLALOCTN</p> <p>YP Registered with GP at Treatment Start – YPSGP</p> <p>YP has CAF at Treatment Start – YPSCAF</p> <p>YP in contact with learning difficulty services at Treatment Start – YPSLNDIF</p> <p>YP in contact with learning difficulty services at Treatment Exit – YPELNDIF</p> <p>YP Sexually Active at Treatment Start – YPSSEXAC</p> <p>YP Sexually Active at Treatment Exit – YPESEXAC</p> <p>Local Authority moved to core NDTMS data set.</p>	
7.02	J.Jaswani	<p>Removed items (Removed from NDTMS Schema)</p> <p>Drinking days more than binge limit - BINGEDAY</p> <p>AUDIT Score - AUDITALC</p> <p>Smoking Status - SMOKESTS</p> <p>Treatment Goal – TREATGOL</p> <p>Changes to field Descriptions</p> <p>DoB – Person Birth Date</p> <p>Sex – Person gender at registration</p>	01/03/2010

External References

Ref No	Title	Version
1	NDTMS Data Set - Reference Data Core Data Set G	7.01
2	NDTMS CSV Input File Format	7.01
3	NDTMS Data Set Business Definition for Adult Alcohol Treatment Providers	7.01
4	NDTMS Data Set Business Definition for Adult Drug Treatment Providers	7.01
5	NDTMS Data Set Business Definition for Young People’s Treatment Providers.	7.01

This document uses the convention that any external references are indicated by square brackets e.g. [3]

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1 INTRODUCTION

This document establishes the technical definition (data schema) for the NDTMS Data Set – this is the set of data items to be collected and loaded into the National Drug Treatment Monitoring System (NDTMS).

It establishes for each item:

- A (descriptive) name
- Permissible values
- Verification rules.

The NDTMS Data Set Business Definition documents (Refs [3], [4] and [5]) detail the business definitions for the fields in the NDTMS Data Set.

2 FILE FORMAT

The file format in which the NDTMS Data Set can be submitted to NDTMS is defined in Ref [2].

3 VERSION OF NDTMS DATA SET

To assist with the operational handling of CSV input files (see Ref[2]), each significant change to the NDTMS Data Set is allocated a version number.

The current version (commonly referred to as the NDTMS Data Set 'G') will come into effect for national data collection from 1st April 2010.

4 DESIGN CONSTRAINTS – CODE vs. NAME

Some data items (i.e. PCT, Main Problem Substance, and Secondary Problem Substance) present significant problems to agency personnel when collecting data from the client. These items typically have a large number of permissible values – so many that the data entry person cannot be expected to remember them all. Rather than enter the exact code, it is only necessary to enter a text string describing the item. For example, in the case of Drugs, entering the name “Crack” would give the code “3201”.

For these fields, either the code or the textual value may be entered.

5 DATA ENTITIES

The data items (listed later in this document) may be considered as belonging to one of five different sections or groups. These are:

- Client details.
- Referral Episode (including client details, which may vary over time).
- Treatment Modality/Intervention details.
- Treatment Outcomes Profile (TOP) details.
- Local (i.e. regional) fields whose usage will depend on regional requirements.

In general, all data is required. Those fields labelled "Mandatory" must be provided on all records, all other fields should be provided as and when the client progresses through their treatment journey.

The only fields that are not mandatory are those fields in section 5 of the NDTMS DATA SET FIELDS table; they are for the use of one or more regions. The requirement to provide this data will be determined at the regional level.

Note that if the client has not given consent for the data to be shared with NDTMS, then only the <Agency Code>, <Consent for NDTMS> and <Client Id> need to be provided – for further clarification please refer to Section 6 below.

The <Client Id>, <Episode Id> and <Modality Id> fields are included for technical support purposes. It is expected that the nature of their population will depend upon the clinical software used by the agency, which produces the NDMTS CSV extract – for further clarification see Refs [3], [4] and [5].

6 EXTRACTION CRITERIA FOR NO CONSENT RECORDS

All extraction criteria are covered in Ref[2].

Where the client has **not given consent** for their data to be shared with NDTMS, then the <Consent for NDTMS> field should be populated with an "N" and the <Client Id> field populated with an identifier which uniquely identifies the client in the source system – apart from the <Agency Code> no other fields for this record should be populated.

Note the <Client Id> must not contain any attributable information; a possible source for this field could be the row number of the client in the source system – for further clarification see Refs [3], [4] and [5].

Note: Consent is at the episode level, so it is possible that a client could consent to one episode and then not consent to another (in which case, there would be two records)

If the client had three episodes (two of which are no-consented) then it is the choice of the software supplier as to whether they produce one or two no-consent records – it does not make any difference to NTA as the NTA simply counts the number of clients that have no consented (rather than the number of their episodes).

7 REGIONAL ITEMS

A number of regions have in the past requested that their treatment providers collect additional data items – this led to software suppliers being approached individually and asked to produce special variations of the NDTMS Core Data Set.

These items have now been incorporated into the NDTMS Core Data Set, so that a uniform layout can be maintained nationally. It is expected that the list of such items will be reviewed with the regions periodically, and synchronised with up-issues of the NDTMS Core Data Set.

Whether or not these items are populated with data will depend on the region in which the treatment provider operates.

8 NDTMS DATA SET FIELDS

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory?	Additional Rules	CDS Introduced
1	1	Initial of Client's First Name	FINITIAL	A	Mandatory	1; 2;	CDS – A/Apr 04
	2	Initial of Client's Surname	SINITIAL	A	Mandatory	1; 2;	CDS – A/Apr 04
	3	Person Birth Date	DOB	YYYYMMDD	Mandatory	1; 2; 3; 6, 7	CDS – A/Apr 04
	4	Person gender at registration	SEX	A	Mandatory	1; 2; 4;	CDS – A/Apr 04
	5	Ethnicity	ETHNIC	A		1; 4;	CDS – A/Apr 04
	6	Nationality	NATION	C(50)		1: 4	CDS – D/Apr 07

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory?	Additional Rules	CDS Introduced
2	7	Referral Date	REFLD	YYYYMMDD	Mandatory	1; 2; 3; 7; 31	CDS – A/Apr 04
	8	Agency Code	AGNCY	C(6)	Mandatory	1; 2; 4;	CDS – A/Apr 04
	9	Client Reference	CLIENT	C(36)		1;	CDS – A/Apr 04
	10	Client Id	CLIENTID	C(36)		1; 20	CDS – C/Apr 06
	11	Episode Id	EPISODID	C(36)		1;	CDS – C/Apr 06
	12	Consent for NDTMS	CONSENT	A	Mandatory	1; 2; 5; 20	CDS – C/Apr 06
	13	Previously treated	PREVTR	A		1; 5;	CDS – A/Apr 04
	14	Post Code	PC	C(8)		1; 28	CDS – A/Apr 04
	15	Accommodation Need	ACCMNEED	C(50)		1; 4;	CDS – D/Apr 07
	16	Location of CLA	CLALOCTN	C(50)		1; 4; 46;	CDS – G/Apr 10
17	Parental Status	PRNTSTAT	C(50)		1; 4	CDS – C/Apr 06	

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory?	Additional Rules	CDS Introduced
	18	YP lead professional at treatment start	YPSLEAD	C(50)		1; 4; 39	CDS - F/Apr 09
	19	YP in contact with MH services at treatment start	YPSMHS	C(50)		1; 4; 39	CDS - F/Apr 09
	20	YP in contact with YOT at treatment start	YPSYOT	C(50)		1; 4; 39	CDS - F/Apr 09
	21	YP Involved in Sexual Exploitation at treatment start	YPSSEXEX	C(50)		1; 4; 39	CDS - F/Apr 09
	22	YP Involved in Self Harm at treatment start	YPSLHFM	C(50)		1; 4; 39	CDS - F/Apr 09
	23	YP Involved in unsafe drug use at treatment start	YPSUNSDR	C(50)		1; 4; 39	CDS - F/Apr 09
	24	YP Involved in offending at treatment start	YPSOFFND	C(50)		1; 4; 39	CDS - F/Apr 09
	25	YP Education status at treatment start	YPSSESTAT	C(50)		1; 4; 39	CDS - F/Apr 09
	26	YP registered with GP at Treatment Start	YPSGP	C(50)		1; 4; 39	CDS – G/Apr 10
	27	YP has CAF at Treatment Start	YPSCAF	C(50)		1; 4; 39	CDS – G/Apr 10
	28	YP in contact with learning difficulty services at Treatment Start	YPSLNDIF	C(50)		1; 4; 39	CDS – G/Apr 10
	29	YP Sexually active at Treatment Start	YPSSEXAC	C(50)		1; 4; 39	CDS – G/Apr 10
	30	DAT of residence	DAT	C(50)	Mandatory	1; 2; 4;	CDS – A/Apr 04
	31	PCT of residence	PCT	C(50)		1; 4;	CDS – A/Apr 04
	32	Local Authority	LA	C(50)		1; 4;	CDS – G/Apr 10
	33	Problem Substance No 1	DRUG1	C(50)	Mandatory	1; 2; 4;	CDS – A/Apr 04
	34	Age of first use of Problem Substance No 1	DRUG1AGE	N(3)		1; 21	CDS – C/Apr 06
	35	Route of Administration of Problem Substance No 1	ROUTE	A		1; 4;	CDS – A/Apr 04
	36	Problem Substance No 2	DRUG2	C(50)		1; 4;	CDS – A/Apr 04
	37	Problem Substance No 3	DRUG3	C(50)		1; 4;	CDS – B/Apr 05
	38	Referral Source	RFLS	N(2)		1; 4;	CDS – A/Apr 04

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory?	Additional Rules	CDS Introduced
	39	Triage Date	TRIAGED	YYYYMMDD	Mandatory	1; 2; 3; 7; 9;32; 38	CDS – A/Apr 04
	40	Care Plan Started Date	CPLANDT	YYYYMMDD		1; 7; 14, 31	CDS – B/Apr 05
	41	Injecting Status	INJSTAT	A		1; 4;	CDS – A/Apr 04
	42	Children	CHILDWTH	N(2)		1; 22	CDS – D/Apr 07
	43	Pregnant	PREGNANT	A		1; 5	CDS – D/Apr 07
	44	Drinking Days	ALCDDAYS	N(2)		1; 23; 27	CDS – D/Apr 07
	45	Units of Alcohol	ALCUNITS	N(3)		1; 24; 27	CDS – D/Apr 07
	46	Dual Diagnosis	DUALDIAG	A		1; 5	CDS – D/Apr 07
	47	Hep C – Latest Test Date	HEPCTSTD	YYYYMMDD		1: 7; 15, 31	CDS – B/Apr 05
	48	Hep C – Intervention Status	HEPCSTAT	C(50)		1; 4	CDS – D/Apr 07
	49	Hep B Vaccination Count	HEPBVAC	C		1;4	CDS – B/Apr 05
	50	Hep B Intervention Status	HEPBSTAT	C		1:4;	CDS – B/Apr 05
	51	Drug Treatment Health Care Assessment Date	HLCASSDT	YYYYMMDD		1; 7; 17, 31; 38	CDS – C/Apr 06
	52	TOP Care Coordination	TOPCC	A		1; 5	CDS - F/Apr 09
	53	Discharge Date	DISD	YYYYMMDD		1; 3; 7; 10; 13; 33; 34; 35; 36; 38	CDS – A/Apr 04
	54	Discharge Reason	DISRSN	N(2)		1; 4; 13;	CDS – A/Apr 04
	55	Discharge Destination	DISDEST	C(50)		1;4	CDS - F/Apr 09
	56	YP lead professional at treatment exit	YPELEAD	C(50)		1; 4; 40	CDS - F/Apr 09
	57	YP in contact with MH services at treatment exit	YPEMHS	C(50)		1; 4; 40	CDS - F/Apr 09
	58	YP in contact with YOT at treatment exit	YPEYOT	C(50)		1; 4; 40	CDS - F/Apr 09
	59	YP Involved in Sexual Exploitation at treatment exit	YPESEXEX	C(50)		1; 4; 40	CDS - F/Apr 09
	60	YP Involved in Self Harm at treatment exit	YPESLFHM	C(50)		1; 4; 40	CDS - F/Apr 09

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory?	Additional Rules	CDS Introduced
	61	YP Involved in unsafe drug use at treatment exit	YPEUNSDR	C(50)		1; 4; 40	CDS - F/Apr 09
	62	YP Involved in offending at treatment exit	YPEOFFND	C(50)		1; 4; 40	CDS - F/Apr 09
	63	YP has CAF at treatment exit	YPECAFE	C(50)		1; 4; 40	CDS - F/Apr 09
	64	YP in contact with learning difficulty services at Treatment Exit	YPELNDIF	C(50)		1; 4; 40	CDS – G/Apr 10
	65	YP Sexually active at Treatment Exit	YPESEXAC	C(50)		1; 4; 40	CDS – G/Apr 10
	66	YP Sexual Health Interventions at treatment exit	YPESTD	C(50)		1; 4; 40	CDS - F/Apr 09
	67	YP registered with GP at treatment exit	YPEGP	C(50)		1; 4; 40	CDS - F/Apr 09
	68	YP met goals agreed on care plan at treatment exit	YPECAREP	C(50)		1; 4; 40	CDS - F/Apr 09

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory	Additional Rules	CDS Introduced
3	69	Treatment Modality	MODAL	N(2)	Mandatory ¹	1; 4; 8;	CDS – A/Apr 04
	70	Date Referred to Modality	REFMODDT	YYYYMMDD	Mandatory ¹	1; 3; 7; 8; 18, 31	CDS – C/Apr 06
	71	Modality Id	MODID	C(36)		1	CDS – C/Apr 06
	72	Date of First Appointment Offered for Modality	FAOMODDT	YYYYMMDD		1; 7; 19	CDS – C/Apr 06
	73	Modality Start Date	MODST	YYYYMMDD		1; 3; 7; 11; 25;34	CDS – A/Apr 04
	74	Modality End Date	MODEND	YYYYMMDD		1; 3; 7; 12; 26	CDS – A/Apr 04
	75	Modality Exit Status	MODEXIT	C(50)		1; 4; 26	CDS – D/Apr 07

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory	Additional Rules	CDS Introduced
4	76	Treatment Outcomes Profile (TOP) date	TOPDATE	YYYYMMDD	Mandatory ¹	1; 3; 7; 32; 33; 34; 35; 36	CDS – E/Oct 07
	77	TOP Id	TOPID	C(36)		1	CDS – E/Oct 07
	78	Treatment Stage	TRSTAGE	C	Mandatory ¹	1; 4;43;44	CDS – E/Oct 07
	79	Alcohol use	ALCUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	80	Opiate use	OPIUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	81	Crack use	CRAUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	82	Cocaine use	COCAUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	83	Amphetamine use	AMPHUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	84	Cannabis use	CANNUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	85	Other drug use	OTDRGUSE	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	86	IV drug use	IVDRGUSE	C(2)	Mandatory ¹	1, 29;42	CDS – E/Oct 07

¹Mandatory if any items in this section above are not null.

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory	Additional Rules	CDS Introduced
	87	Sharing	SHARING	A(2)	Mandatory ¹	1, 37;42	CDS – E/Oct 07
	88	Shop theft	SHOTHEFT	C(2)	Mandatory ¹	1, 29	CDS – E/Oct 07
	89	Drug selling	DRGSELL	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	90	Other theft	OTHTHEFT	A(2)	Mandatory ¹	1, 37;	CDS – E/Oct 07
	91	Assault/violence	ASSAULT	A(2)	Mandatory ¹	1, 37;	CDS – E/Oct 07
	92	Psychological health status	PSYHSTAT	C(2)	Mandatory ¹	1, 30;	CDS – E/Oct 07
	93	Paid work	PWORK	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	94	Education	EDUCAT	C(2)	Mandatory ¹	1, 29;	CDS – E/Oct 07
	95	Acute housing problem	ACUTHPBM	A(2)	Mandatory ¹	1, 37;	CDS – E/Oct 07
	96	Housing risk	HRISK	A(2)	Mandatory ¹	1, 37;	CDS – E/Oct 07
	97	Physical health status	PHSTAT	C(2)	Mandatory ¹	1, 30;	CDS – E/Oct 07
	98	Quality of Life	QUALLIFE	C(2)	Mandatory ¹	1, 30;	CDS – E/Oct 07

The following columns are "local" fields, and are used by one or more regions. These local fields relate to a clients episode or in some instances the clients modality (section 6). They are to be used only at the express direction of the specific regional NDTMS database manager (if in doubt, leave unpopulated). Irrespective of whether they are actually populated with data, the column headers must appear in the CSV file.

Sect No	Col No	Field Description	CSV File Header	Layout	Mandatory	Additional Rules	CDS Introduced
5	99	Injected in last 28 days?	INJECT	A		1; 5	CDS – B/Apr 05
	100	Ever Shared?	SHARE	A		1; 5	CDS – B/Apr 05
	101	Previously Hep B Infected?	PREVHEPB	A		1; 5	CDS – B/Apr 05
	102	Hep C Positive?	HEPCPOS	A		1; 5	CDS – B/Apr 05
	103	Referred for Hepatology?	REFHEPGY	A		1; 5	CDS – B/Apr 05
	104	Sex Worker Category	SEXWKCAT	C(50)		1; 4	CDS – C/Apr 06
	105	Sexuality	SEXUAL	C(50)		1; 4	CDS – D/Apr 07
	106	Employment Status	EMPSTAT	N		1; 4	CDS – C/Apr 06
6	107	Local Agency Details (Modality data item)	OPRAGNCY	C(50)		1;	CDS – G/Apr 10

Key:

N Numeric
A Alphabetic (Upper Case)
C Alphanumeric
DD Numeric Day (including a leading zero, if relevant)
MM Numeric Month (including a leading zero, if relevant)
YYYY Numeric Year

9 VERIFICATION RULES

When the data is received by NDTMS, it is subjected to a validation process. To assist system design, details of this process are given below – however, it must be emphasised that these checks must NOT be used as part of the data extraction process – it is better that NDTMS receives data with errors in it, rather than missing some data.

In the table described in Section 8, if present (i.e. not null) each data item will be subjected to none, one or more Verification Rules, specified as follows. (Note this list refers to the most significant validations performed and does not include the information messages that NDTMS also generates.

Rule No	Description
1	There must be no leading spaces in any field
2	Field is mandatory
3	Must be a valid date, down to the day (e.g. in the form YYYYMMDD)
4	Must be as specified in the appropriate sub-section of Section 4 of Ref[1]. May be provided as code or text value.
5	Must be Y or N - May be provided as code or text value
6	Date of Birth must be after 1902, and before Referral Date, reporting period end date (One year plus one day before Referral Date)
7	Date must be historic (i.e. on or before the current date)
8	Mandatory if any of following fields not null – Treatment Modality; Date Referred to Modality; Modality Id, Date of First Appointment Offered for Modality; Modality Start Date; Modality End Date; Modality Exit.
9	Triage/First Presentation Date must occur on or after the Referral Date, and on or before the Modality Start Date and Discharge Date
10	Discharge Date must occur on or after the Referral Date, Triage/First Presentation Date and Modality End Date
11	Modality Start Date must occur on or after the Triage/First Presentation Date and on or before the Modality End Date and Discharge Date
12	Modality End Date must occur on or after the Modality Start Date and on or before Discharge Date
13	Discharge Reason must be provided if Discharge Date is present (and vice versa)
14	Care Plan Started Date must occur on or after the Triage/First Presentation Date and on or before Discharge Date
15	Hep C Latest Test Date must occur after the Date of Birth and be no more than 1 year after the Discharge Date
16	Referral Date must occur after the Date of Birth, and on or before Triage/First Presentation Date and reporting period end date
17	Health Care Assessment Date must occur after the Date of Birth and on or before Discharge Date
18	Date Referred to Modality must occur after the Date of Birth and on or before Date of First Appointment Offered for Modality, Modality Start Date and

Rule No	Description
	Discharge Date
19	Date of First Appointment Offered for Modality must occur on or after Referral Date and Date Referred to Modality and on or before Modality Start Date and Discharge Date
20	If Consent for NDTMS is not Y then Client ID must be given and an agency code
21	Age of first use must be less than or equal to the clients age at referral
22	Number of children must be a value between 0 and 30 (inclusive)
23	Number of days must be a value between 0 and 28 (inclusive)
24	Units of Alcohol must be a value between 0 and 200 (inclusive)
25	Modality Start Date must be provided if Modality End Date is present
26	Modality Exit must be provide if Modality End Date is present (and visa versa)
27	Drinking Days must be provided if Units of Alcohol is present (and visa versa)
28	The Post Outcode and the Post Incode must be separated by a space (e.g. WC1V 2AB or NW7 3)
29	Number of days in previous 28 days. Value must be between 0 and 28 (inclusive) or NA (not answered)
30	Client reported score between 0 and 20. Value must be between 0 and 20 (inclusive) or NA (not answered)
31	Date must be on or after Date of Birth (plus 1 year and 1 day)
32	TOP date must occur on or after Referral date and on or after Triage Date
33	TOP (with a classification of a treatment stage of Treatment Start) must be before all Review TOP dates; must be before all Treatment Exit TOP dates; must be before all Post Treatment Exit TOP dates; must be on or before the (episode) Discharge date.
34	TOP (with a classification of a treatment stage Review) must be after all Treatment Start TOP dates; must be before all Treatment Exit TOP dates; must be before all Post Treatment Exit TOP dates.
35	TOP (with a classification of a treatment stage of Treatment Exit) must be after all Treatment Start TOP dates; must be after all Review TOP dates; must be before all Post Treatment Exit TOP dates; must be +/- 14 days of the (episode) Discharge date.
36	TOP (with a classification of a treatment stage of Post Treatment Exit) must be after all Treatment Start TOP dates; must be after all review TOP dates; must be after all Treatment Exit TOP dates; must be on or before the (episode) Discharge date plus 2 years.
37	Must be Y or N or NA (not answered)
38	HLCASSDT must be on or after TRIAGE Date, but before DISCHARGE Date. - (This is an informational message ONLY)

Rule No	Description
39	Field should contain a value if there is a Modality Start date for a structured Intervention – Applicable to YP Treatment Providers only
40	Field should contain a value is the episode has been closed (Discharge date is present) – Applicable to YP Treatment Providers only
41	Field must contain a value if TOP data is being provided (TOP date is present)
42	A value of IV Drug Use = 0 and Sharing = yes is not permissible
43	Only one TOP can be submitted per episode for Treatment Start TOP
44	If a client is discharged 'referred on/Transferred (code 5/83/84)', then a Treatment Exit TOP should not be present
45	Field should contain a value if it is an Alcohol Record (Drug 1 is Alcohol)
46	Field should contain a value if Accommodation Need code is CLA

11 HISTORICAL FIELDS

The following historical fields may be included in CDS-F files:

- Frequency of Use of Problem Substance No 1 (CDS C-E)

Any data provided will be subject to the validation rules that were present when the field was included in the NDTMS Data Set.

12 FILES CONTAINING TREATMENT OUTCOMES PROFILE (TOP) DATA AND TREATMENT MODALITY DATA

When providing TOP data, NO Modality data may be provide on the same row.

When providing Modality data, NO TOP data may be provided on the same row.

13 FILE NAMING STANDARDS & LAYOUT

Ref [2] documents the naming standard and layout to be used.