



Public Health  
England

Protecting and improving the nation's health

# National Drug and Alcohol Treatment Monitoring System (NDTMS)

## Core dataset Q

## Specification

DAPB0107 Amd 50/2021

# About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, research, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

Public Health England  
Wellington House  
133-155 Waterloo Road  
London SE1 8UG  
Tel: 020 7654 8000  
[www.gov.uk/phe](http://www.gov.uk/phe)  
Twitter: [@PHE\\_uk](https://twitter.com/PHE_uk)  
Facebook: [www.facebook.com/PublicHealthEngland](https://www.facebook.com/PublicHealthEngland)

Prepared by: Paul Brand  
For queries relating to this document, please contact: [ndtms.admin@phe.gov.uk](mailto:ndtms.admin@phe.gov.uk)



© Crown copyright 2021

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit [OGL](https://www.ogilive.com/). Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Published September 2021  
PHE publications  
gateway number: GOV-9928

PHE supports the UN  
Sustainable Development Goals



# Data Alliance Partnership Board

Acting on behalf of the Data Alliance Partnership Board (DAPB), which holds delegated authority from the Secretary of State for Health and Social Care, the Data Alliance Partnership Sub Board (DAPSB) has approved a new information standard for publication under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Standards Assurance Service (DSAS) and approved by the Data Alliance Partnership Board (DAPB).

This information standard comprises:

- Specification
- Change Request
- Implementation Guide

An Information Standards Notice (DAPB0107 Amd 50/2021) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS Digital website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 30 September 2021

## Amendment history

Version	Date	Amendment history
0.1	20/07/2021	Draft for review
0.2	16/08/2021	Updated following feedback from NHSD

## Glossary of terms

Term	Definition
Adult	Clients are deemed to be adults if they are aged 18 or over at presentation (triage).
Attributor	In NDTMS, the clients' two initials, date of birth, gender and local authority of residence are collectively used to identify an individual. Records relating to individual clients are isolated and linked on the basis of the attributor. This minimises the extent of multiple counting within the datasets.
Client	An adult or young person drug or alcohol user, presenting for treatment
DET	The Data Entry Tool (DET) is a system provided by NDTMS for treatment providers that do not have a clinical management system that is capable of producing NDTMS data.
DHSC	Department of Health and Social Care (DHSC). DHSC is a ministerial department, supported by a number of agencies and partner organisations.
Episode	A period of contact with a treatment provider, from referral date to discharge incorporating a set of interventions with a specific care plan. A client may attend one or more interventions/modalities of treatment during the same episode of treatment. A client may also have more than one episode in a year. A client is considered to have been in contact during the year (and hence included in statistics) if any part of an episode occurs within the year. An episode occurs at a single NDTMS agency. A client may perceive his/her treatment as a single pathway of care made up of continuous treatment, however for statistical and performance reasons, NDTMS requires that the pathway of care be broken up into individual episodes of care by provider.
NDTMS	The National Drug and Alcohol Treatment Monitoring System (NDTMS) captures data about structured drug and alcohol treatment in the community and in secure settings (including secure children's homes and IRCs). NDTMS also collect the Criminal Justice Interventions Team (CJIT) dataset which relates to pathways into treatment for criminal justice clients.
NDTMS V2	NDTMS V2 is an online portal provided and maintained for providers to use to submit their NDTMS data. Some providers who do not have an NDTMS compliant third party software system may also use the NDTMS V2 inbuilt data entry tool (DET) for their NDTMS data entry.

OHID	The Office for Health Improvement and Disparities (OHID) will sit within DHSC, and will lead work across government to improve and level up the health of the nation by tackling obesity, improving mental health and promoting physical activity.
Public Health England (PHE)	Executive agency of the Department of Health and Social Care (DHSC) that exists to protect and improve the nation's health and wellbeing, and reduce health inequalities.
Setting	The setting in which an intervention takes place, for example community, home or residential unit. The same client could be receiving the same intervention in more than one setting within the same episode.
Software supplier	Any third party case file management system provider with the functionality to output a csv file compliant with NDTMS data submission requirement. For full details see <a href="http://gov.uk">gov.uk</a> .
Structured treatment	<p>Structured treatment follows assessment and is delivered according to a care plan, with clear goals, which are regularly reviewed with the client. It may comprise a number of concurrent or sequential specialist drug and alcohol focused interventions. It addresses multiple or more severe needs that would not be expected to respond, or have already not responded, to less intensive or non-specialist interventions alone. Structured treatment requires a comprehensive assessment of need, and is delivered according to a recovery care plan, which is regularly reviewed with the client. The plan sets out clear goals which include change to substance use, and how other client needs will be addressed in one or more of the following domains: physical and psychological health; criminal involvement and offending; and social functioning.</p> <p>All interventions must be delivered by appropriately trained and competent staff, within supervision and clinical governance structures. Structured drug and alcohol treatment provides integrated access to specialist medical assessment and intervention, and works jointly with mental &amp; physical health services, and safeguarding &amp; family support services according to need.</p> <p>In addition to pharmacological and psychosocial interventions provided as part of the key working or case management function of structured treatment, service users should be provided with the following as appropriate: harm reduction advice and information; BBV screening and immunisation; advocacy; appropriate access and referral to healthcare and health monitoring; and crisis and risk management.</p> <p>For a full definition of structured treatment see the <a href="#">NDTMS business definitions</a>.</p>
Treatment journey	A new treatment journey is defined if an individual's latest presentation fulfils all of the following criteria; an earlier episode is not still open, the discharge date in an earlier episode is not after the discharge date in a later episode and the difference between modality start date in the later episode and the discharge date in the earlier episode is greater than 3 weeks (21 days).
Treatment provider	A provider of services for the treatment of drug or alcohol misuse. The agency may be statutory (for example NHS) or non-statutory (for example

	third sector) and be providing structured or non-structured treatment. Each agency has an NDTMS agency code and there may be several NDTMS agencies at one location as per the requirements of local performance/contract management.
Young people	Clients are deemed to be young people if they are aged under 18 at triage. There is no distinction between those with a primary problem substance of drugs (such as cannabis) or alcohol; they are all classified as in substance misuse treatment.

# Contents

<b>About Public Health England</b>	<b>2</b>
<b>Data Alliance Partnership Board</b>	<b>3</b>
<b>Amendment history</b>	<b>4</b>
<b>Glossary of terms</b>	<b>4</b>
<b>1. Overview</b>	<b>8</b>
2.1.1 Requirements	11
2.1.2 Conformance criteria	11
2.2.1 Requirements	12
2.2.2 Conformance criteria	13
2.3 <i>NDTMS</i>	13
2.3.1 Requirements	13
2.3.2 Conformance criteria	13
<b>3. Reporting requirements</b>	<b>15</b>
3.5 <i>Extract submission</i>	17
<b>Appendix A – Sponsor, SRO &amp; Developer contacts</b>	<b>20</b>

# 1. Overview

## 1.1 Summary

The table below contains a summary of the information standard.

Standard	
Standard number	DAPB0107
Standard title	National Drug and Alcohol Treatment Monitoring System (NDTMS)
Release Number	Amd 50/2021
Description	<p>The NDTMS dataset collates information on drug and alcohol treatment in England.</p> <p>NDTMS data help drug and alcohol treatment demonstrate the outcomes it achieves for the people it treats and in doing so aids accountability for the money invested in it. NDTMS is a national standard and is applicable to young people and adults within community and secure setting based treatment providers.</p> <p>NDTMS data are used to:</p> <ul style="list-style-type: none"> <li>• provide measurements that support the outcome and recovery focus of the government's drug strategy</li> <li>• provide information which can be used to monitor how effective drug and alcohol treatment services are and help to plan and develop services that better meet local needs</li> <li>• produce statistics and support research about drug and alcohol use and treatment</li> <li>• provide measures to support the <b>Public Health Outcomes Framework</b></li> </ul> <p>Substance misuse treatment providers have been reporting drug and alcohol treatment data to Regional Drug Misuse Databases (RDMDs) since the late 1980s. The National Drug Treatment Monitoring System (NDTMS) was established in 2004 as a central repository for this data collection. NDTMS moved into Public Health England (PHE) in 2013. In October 2021, NDTMS will move to the Office for Health Promotion (OHP) within the Department of Health and Social Care (DHSC).</p> <p>The dataset is termed Core Dataset Q (CDS-Q) and will be implemented in April 2022.</p> <p>Data are submitted to NDTMS by providers using the NDTMS V2 web portal.</p>

About this change	<p>In order to align current business needs and clinical practice and to support data quality, various changes have been made to the dataset as follows:</p> <p>63 new data items have been added.</p> <p>16 data items have been removed.</p> <table border="1" data-bbox="424 555 1198 824"> <thead> <tr> <th></th> <th colspan="4">Dataset</th> </tr> <tr> <th>Data items</th> <th>AD</th> <th>YP</th> <th>SA</th> <th>SY</th> </tr> </thead> <tbody> <tr> <td><b>New</b></td> <td>25</td> <td>20</td> <td>11</td> <td>4</td> </tr> <tr> <td><b>Added from another dataset</b></td> <td>0</td> <td>4</td> <td>0</td> <td>3</td> </tr> <tr> <td><b>Removed</b></td> <td>5</td> <td>6</td> <td>3</td> <td>2</td> </tr> <tr> <td><b>Difference</b></td> <td><b>+20</b></td> <td><b>+18</b></td> <td><b>+8</b></td> <td><b>+5</b></td> </tr> </tbody> </table> <p>AD = Adult Drug community dataset  YP = Young People community dataset  SA = Secure estate adult dataset  SY = Secure estate young people dataset</p>		Dataset				Data items	AD	YP	SA	SY	<b>New</b>	25	20	11	4	<b>Added from another dataset</b>	0	4	0	3	<b>Removed</b>	5	6	3	2	<b>Difference</b>	<b>+20</b>	<b>+18</b>	<b>+8</b>	<b>+5</b>
	Dataset																														
Data items	AD	YP	SA	SY																											
<b>New</b>	25	20	11	4																											
<b>Added from another dataset</b>	0	4	0	3																											
<b>Removed</b>	5	6	3	2																											
<b>Difference</b>	<b>+20</b>	<b>+18</b>	<b>+8</b>	<b>+5</b>																											
Applies to	<p>All drug and alcohol treatment providers who are delivering structured treatment, including adult and young people's services as follows:</p> <ul style="list-style-type: none"> <li>• community services including NHS, third sector and private providers</li> <li>• residential rehabs and detox centres</li> <li>• primary care</li> <li>• inpatient units</li> <li>• secure setting services including prisons, Young Offender Institutions (YOIs), Secure Training Centres (STCs), Immigration Removal Centres (IRCs), secure children's homes and welfare only homes</li> </ul> <p>The data outputs will be used by:</p> <ul style="list-style-type: none"> <li>• treatment providers including third sector, NHS and private providers</li> <li>• treatment commissioners including local authority commissioners and NHS England commissioners</li> <li>• Department of Health and Social Care (DHSC)</li> </ul>																														
<b>Release</b>																															
Release number	Amd 50/2021																														
Release title	Core Dataset (CDS) Q																														
Publication date	30 September 2021																														

## 1.2 Supporting documents

The Specification should be read in conjunction with the following documents:

Title
CSV file format
NDTMS technical definitions
NDTMS reference data
Adult drug and alcohol misuse treatment business definitions
Young people's drug and alcohol treatment business definitions
Secure setting adult drug and alcohol treatment business definitions
Secure setting young people's drug and alcohol treatment business definitions
NDTMS patient information leaflet
NDTMS consent and confidentiality guidance
Data sharing protocol between drug and alcohol treatment services and PHE
Consent to NDTMS
DAPBB0107 Amd 50/2021 Change Specification
DAPB0107 Amd 50/2021 Implementation Guidance
DAPB0107 Amd 50/2021 Information Standards Notice

## 1.3 Contacts

For general queries about this document please contact [ndtms.admin@phe.gov.uk](mailto:ndtms.admin@phe.gov.uk). Treatment providers should contact their regional NDTMS team if they have any questions. Regional team contact details can be found in the table below. Software suppliers should contact [NDTMS.admin@phe.gov.uk](mailto:NDTMS.admin@phe.gov.uk) if they have any questions.

Region	Email address
London	<a href="mailto:NDTMS.London@phe.gov.uk">NDTMS.London@phe.gov.uk</a>
South East	<a href="mailto:NDTMS.SouthEast@phe.gov.uk">NDTMS.SouthEast@phe.gov.uk</a>
South West	<a href="mailto:NDTMS.SouthWest@phe.gov.uk">NDTMS.SouthWest@phe.gov.uk</a>
West Midlands	<a href="mailto:NDTMS.WestMidlands@phe.gov.uk">NDTMS.WestMidlands@phe.gov.uk</a>
East & East Midlands	<a href="mailto:NDTMS.Eastern@phe.gov.uk">NDTMS.Eastern@phe.gov.uk</a>
North West	<a href="mailto:NDTMS.NorthWest@phe.gov.uk">NDTMS.NorthWest@phe.gov.uk</a>
Northern and Yorkshire	<a href="mailto:NDTMS.NorthernAndYorkshire@phe.gov.uk">NDTMS.NorthernAndYorkshire@phe.gov.uk</a>

## 2. Requirements and conformance criteria

This section outlines the requirements that this standard places upon:

- treatment providers who are submitting data to NDTMS
- software providers who provide NDTMS compliant software systems
- NDTMS staff

It also outlines the conformance criteria that will be used to ensure these requirements are being satisfied.

### 2.1 Treatment providers

#### 2.1.1 Requirements

Requirement	
1	All drug and alcohol treatment providers delivering structured drug and alcohol treatment and reporting to NDTMS MUST comply with this standard.
2	All data providers SHOULD have read the Information Standards Notice (ISN).
3	All NDTMS data providers SHOULD have access to an NDTMS compliant software system to submit NDTMS data. If a provider does not have access to a third party compliant software system they MUST use the NDTMS Data Entry Tool (DET) to enter and submit their NDTMS data.
4	All NDTMS provider staff who are responsible for obtaining NDTMS consent from clients MUST be familiar with the <a href="#">NDTMS consent and confidentiality guidance</a>
5	For additional guidance on the practical implementation of the dataset treatment providers SHOULD refer to the <a href="#">NDTMS CDS-Q reference data</a> and <a href="#">NDTMS CDS-Q business definitions</a> .
6	NDTMS data MUST be submitted monthly in <a href="#">CSV file format</a> via NDTMS V2.
7	All treatment provider staff responsible for the reporting of NDTMS data SHOULD attend NDTMS training sessions as and when required.

#### 2.1.2 Conformance criteria

Criterion	
1	All local authority commissioned and NHS England commissioned structured drug and alcohol treatment providers in England report treatment data to NDTMS.
2	All data providers have worked with their system suppliers to ensure systems conform to CDS-Q requirements.
3	All treatment provider staff involved in the collection and reporting of NDTMS data have been alerted to CDS-Q.
4	All treatment provider staff involved in the data entry and reporting of NDTMS data are trained on the use of the software system and have attended NDTMS training.

5	All treatment provider staff involved in the collection, entry and reporting of NDTMS data are familiar with the NDTMS supporting documents including the NDTMS business definitions.
6	All mandatory fields are present in the data submission.
7	All data submissions are made by regional deadline dates (available from the regional NDTMS team) and cover the time period required (currently active clients since 1 <sup>st</sup> January 2020).
8	All data conforms to definitions given in the Technical Definitions and this document.
9	All providers have a process in place to correct any validation errors and warnings prior to monthly submission.
10	All providers have a process in place to resolve any mismatches prior to monthly submission.
11	All submissions are made in CSV file format using NDTMS V2.
12	All providers have a system in place to investigate and resolve data quality issues highlighted through the NDTMS data quality metric reports available on NDTMS V2.

## 2.2 Software suppliers

### 2.2.1 Requirements

All NDTMS data providers must have access to an NDTMS compliant software system. There are a number of commercially available accredited systems (details can be found [here](#)). Alternatively, the free Data Entry Tool (DET) enables providers to enter and submit their NDTMS data if they do not have access to a third party compliant software system. It would be expected that all providers have a service level agreement (SLA), with their system supplier to ensure future development needs are sufficient to meet changes to the standard.

Requirement	
1	Software suppliers offering an NDTMS compliant system <b>MUST</b> implement the NDTMS standard as defined by the NDTMS CDS-Q Specification.
2	For additional guidance on the technical implementation of the dataset software suppliers <b>SHOULD</b> refer to the <b>NDTMS technical definitions</b> , the <b>CSV file format</b> and the <b>NDTMS reference data</b> .
3	Software suppliers <b>SHOULD</b> attend core dataset implementation workshops held by NDTMS six months in advance of any changes being made to ensure they are fully aware of all forthcoming changes.
4	Software suppliers <b>MUST</b> adhere to the NDTMS software system accreditation process for each dataset change to maintain accreditation (details of accreditation process are available <a href="#">here</a> ).
5	All software suppliers <b>SHOULD</b> provide training, support and guidance to users of their system on how to correctly enter and extract NDTMS data.

## 2.2.2 Conformance criteria

Criterion	
1	All software suppliers are familiarised with NDTMS <b>documentation for software suppliers</b> .
2	All software suppliers have updated their systems accordingly to conform to any revised standards in order to maintain accreditation.
3	All software suppliers have ensured that all data items can be collected and extracted in accordance with the format stipulated by this standard and in the <b>NDTMS technical definitions</b> and <b>NDTMS reference data</b> .
4	At times of core dataset change, all software suppliers have made the necessary revisions to their system facilitating treatment provider's implementation of the latest core dataset upon go live.
5	At times of dataset change all software suppliers familiarise themselves with the updated standard, <b>NDTMS technical definitions</b> and <b>NDTMS reference data</b> .
6	All software suppliers SHOULD work with NDTMS to ensure their extract capability by working through the available <b>test scenarios and sign off process</b> .

## 2.3 NDTMS

### 2.3.1 Requirements

Requirement	
1	All staff working with NDTMS data MUST be familiar with the standard and other supporting documentation listed in section 1.2.
2	All NDTMS staff MUST sign the Staff Confidentiality Declaration on starting employment with NDTMS and refresh this annually. All staff MUST also complete annual information governance training.

### 2.3.2 Conformance criteria

Criterion	
1	NDTMS will ensure that data are held securely and in accordance with the <b>NDTMS data sharing protocol</b> .
2	NDTMS regional teams will provide regional support to treatment providers over the telephone and face to face when required.
3	NDTMS regional teams will provide regular new starter and refresher training.
4	NDTMS will ensure that a full suite of documentation to support treatment providers and software suppliers will be available on <b>gov.uk</b> .
5	DHSC will provide reports at a provider, local authority and national level using NDTMS data.
6	All suggestions for change are agreed by the NDTMS board and publically consulted on. Stakeholders are informed of the consultation outcome prior to a six month implementation period which will include NDTMS training provided by regional teams and updated core documentation.
7	NDTMS will support software providers to implement the standard by testing files to check compliance.

8	NDTMS will provide and maintain a list of software providers that have passed dataset compliance tests to support treatment providers in selecting a compliant software system. Full details can be found <a href="#">here</a> .
---	--

## 3. Reporting requirements

### 3.1 Information flow

A diagrammatic summary of the data flow for NDTMS can be found [here](#).

Data submissions are made via the NDTMS online portal called NDTMS V2.

Data providers submit a CSV file via NDTMS V2 (either by uploading a CSV extract from their software system or, for DET users, by pressing the 'transfer data' button within NDTMS V2).

All files submitted to NDTMS V2 initially go through a number of validation checks. These checks may result in errors, warnings or mismatches that the user has to rectify before they are able to submit the file to the regional NDTMS team. Any errors will affect a file's load percentage, any warnings will affect a file's data quality percentage. Once the errors and warnings are rectified the file will reach 100% load and 100% data quality and can be submitted to the regional NDTMS team. The regional NDTMS team will check the file and as long as there are no further issues the file will be loaded into the NDTMS V2 database. Once the file has been loaded providers are able to access data quality reports based on their latest loaded file. They can choose to rectify any data quality issues highlighted in the data quality (DQ) reports and make a further submission prior to the deadline if they wish to.

NDTMS consists of 4 datasets which are:

- community adult
- community young people
- secure setting adult
- secure setting young people

Each agency will report one of the above datasets to NDTMS based on the clients they treat at their agency. This dataset must then be submitted for all clients at that agency.

The appropriate outcome record for the selected dataset must be completed for all clients; for the adult drug and secure adult datasets the Treatment Outcome Profile (TOP) should be completed, for the young people and secure young people datasets the Young People's Outcome Record (YPOR) should be completed.

All current field headers for all datasets must be present in the CSV file provided to NDTMS, any additional headers or any missing headers and the file will be rejected. It is expected that only the columns and values in the CSV relevant to the dataset that the

provider is submitting should be populated. Any data supplied in the CSV file that is not part of the current dataset will be nulled and not accepted into the NDTMS database, or may cause the file submission to fail.

For full details of which data items should be reported for each dataset and the associated verification rules please see the [NDTMS technical definitions](#).

NDTMS data items may be considered as belonging to one of 7 different sections which are:

- Client
- Episode
- Intervention
- Sub intervention review (SIR)
- Outcomes Profile - either the Treatment Outcome Profile (TOP) or the Young People's Outcomes Profile (YPOR)
- Client Information Review (CIR)

In general, all data are required. Fields with verification rule 2 in the [NDTMS technical definitions](#) must be provided on all records, all other fields should be provided as and when the client progresses through their treatment. Note that if the client has not given consent for the data to be shared with NDTMS, then only AGENCY, CONSENT and CLIENTID need to be provided. Further details on the extraction of no consent records can be found in the [NDTMS technical definitions](#).

All data items should be provided in code only (not values), as specified by the [NDTMS technical definitions](#).

### 3.2 Reporting time period

Extracts should cover the 'reporting period' to the end of the most recent calendar month. The reporting period changes in September each year.

The reporting periods are as follows:

Data submission period	Reporting period
September 2019 – July 2020	01/01/18 to current month
September 2020 – July 2021	01/01/19 to current month
September 2021 – July 2022	01/01/20 to current month

For example, in September 2021 providers would have submitted data from 01/01/20 – 31/08/21.

### 3.3 Frequency of reporting

Providers submit data to NDTMS on a monthly basis. Regional deadlines vary between the 7<sup>th</sup> and 15<sup>th</sup> of the month. Most regions will use the same date each month.

The exception to this is that there is no NDTMS submission in August. The July submission tends to require data until later in July (June part July) and then the September submission will require the remainder of July and all of August's data.

An example of a current submission calendar is below but providers should check with their regional NDTMS team who will be able to provide them with the dates for their region:

Submission	Reporting period (inclusive)	Submission made to NDTMS (between)	Regional submission deadline (approximate)
Sept 20	01/01/19 – 30/09/20	01/10/20 - 12/10/20	12/10/20
Oct 20	01/01/19 – 31/10/20	01/11/20 – 12/11/20	12/11/20
Nov 20	01/01/19 – 30/11/20	01/12/20 – 12/12/20	12/12/20
Dec 20	01/01/19 – 31/12/20	01/01/21 – 11/01/21	12/01/21
Jan 21	01/01/19 – 31/01/21	01/02/21 – 12/02/21	12/02/21
Feb 21	01/01/19 – 28/02/21	01/03/21 – 12/03/21	12/03/21
Mar 21	01/01/19 – 31/03/21	01/04/21 – 12/04/21	12/04/21
Apr 21	01/01/19 – 30/04/21	01/05/21 – 10/05/21	12/05/21
May 21	01/01/19 – 31/05/21	01/06/21 – 12/06/21	12/06/21
June part July 21	01/01/19 – 14/07/21	14/07/21 – 19/07/21	19/07/21
Reporting period rolls on to commence 01/01/20			
Part July Aug 21	01/01/20 – 31/08/21	01/09/21 – 12/09/21	12/09/21
Sept 21	01/01/20 – 30/09/21	01/10/21 – 11/10/21	12/10/21

### 3.4 Extract format

Files from third party software systems must be extracted in CSV format by the software system.

Full details of the CSV file format can be found [here](#).

### 3.5 Extract submission

CSV files must be uploaded to NDTMS V2 using the 'upload file' button. DET users can transfer their DET data electronically from within the system by pressing the 'transfer data' button (there is no need for them to take an extract).

To access NDTMS V2 users require a log on, password and **Yubikey** which will be linked to their account by the NDTMS regional team. Yubikeys can be loaned to

providers by NDTMS regional teams upon completion of a Yubikey Terms and Conditions document. Yubikeys ensure two factor authentication is required to access the system. Users are only given a user name and password once the relevant system access forms have been completed and verification checks have been made by the regional NDTMS team.

Requests for accounts should be sent to your NDTMS regional team.

NDTMS V2 can be found at this site: <https://phev2.ndtms.org.uk/>

### 3.6 Outputs

The data collected by NDTMS are used in annual official statistical releases published on gov.uk that report on people in drug and alcohol treatment. Data are aggregated to national and regional levels and no patient level data are published.

DHSC also produce restricted statistics for use by treatment providers and commissioners on a monthly, quarterly and annual basis which can be used for local treatment monitoring, needs assessment, value for money assessment, etc. All restricted reports are available on NDTMS V2 (for treatment providers) and on [NDTMS.net](#) (for commissioners), both of which require an account and secure log on.

## 3. Consent and confidentiality

The NDTMS dataset collects some personal information about the people using drug and alcohol treatment services. This includes client's initials, date of birth, gender, local authority area of residence and the first part of their postcode. NDTMS never collects full names and addresses. It never contacts service users, and it does not pass any personal information on to the police or any other organisation.

DHSC and NDTMS never publish any information that could be used to directly identify individual users of drug and alcohol treatment services.

NDTMS has a legal basis for collecting this personal data under General Data Protection Regulations (GDPR) of Article 6(1)(e) "processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller" and Article 9(2)(i) "processing is necessary for reasons of public interest in the area of public health, such as .... or ensuring high standards of quality and safety of health care" 2 but will continue with a policy of allowing service users to consent and to withdraw their consent for contributing their information to NDTMS, following the requirements of the common law duty of confidentiality.

All drug and alcohol treatment services are expected to have their own clear confidentiality/data handling policy which is presented and clearly explained to the service. As part of this the service users should be given the content of the **NDTMS patient information leaflet** and ACTIVELY AGREE to the sharing of some of their treatment data with NDTMS. Every service user MUST agree to the NDTMS **statement of consent** before the service shares their data with NDTMS. If a service user refuses NDTMS consent, this should be recorded in the service users' case notes and on their clinical information system.

Full details and guidance on NDTMS consent and confidentiality can be found [here](#), including details on how service users can withdraw consent.

All treatment provider staff involved in the consenting of clients should ensure that they are familiar with these documents.

All new treatment providers are required to confirm that they have implemented the latest **Consent to NDTMS**.

For any queries relating to client confidentiality and consent please contact your regional NDTMS team.

## Appendix A – Sponsor, SRO & Developer contacts

<b>Sponsor</b>	
Name	Andrea Duncan
Role	Deputy Branch Head, Healthy Behaviours and Team Leader
Organisation	Department of Health and Social Care
<b>Senior Responsible Officer</b>	
Name	Professor John Newton
Role	Chief Knowledge Officer
Organisation	Public Health England
<b>Developer</b>	
Name	Paul Tansley
Role	NDTMS Programme Manager
Organisation	National Drug and Alcohol Treatment Monitoring System (NDTMS), Public Health England
Email address	<a href="mailto:Paul.Tansley@phe.gov.uk">Paul.Tansley@phe.gov.uk</a>