

Assessment of quality of 2014/15 National Drug Treatment Monitoring System (NDTMS) community data and robustness for use in National Statistics Publications

1. Background

Data collection through the National Drug Treatment Monitoring System was suspended between November 2014 and February 2015 (a period of four months), to introduce urgent security enhancements into the system.

During this suspension

- None of the 1,300 providers of community drug and alcohol treatment could submit any data to the NDTMS.
- The 40% that use data collection systems provided by PHE were unable to enter any data locally during this time.
- The remaining 60% that use their own clinical databases were able to collect and record activity as usual. They were then able to submit the data to NDTMS when the system was reinstated.

The NDTMS system was fully restored in March 2015 and providers were able to enter data up until the end of July 2015.

- Those providers using their own clinical databases were then able to submit and validate the data collected and entered locally during the suspension.
- Those providers using data collection systems provided by PHE were then able to record, submit and validate any backlog of data.

2. Data quality support provided by PHE

Public Health England works closely with all the providers of drug and alcohol treatment. There are 8 regionally based NDTMS teams which support the data collection, provide advice and ensure that high level data quality practice is supported and maintained. They have built up excellent relationships over the past 10 years which continued during and since the NDTMS suspension. Whilst the NDTMS suspension was unscheduled, PHE ensured that the downtime was very well managed and coordinated.

This level of support by PHE is appreciated by the provider sector and the treatment providers reciprocated with commitment and goodwill by ensuring that any risks to providing a complete 2014/15 dataset were minimised.

PHE analyses the NDTMS data and provides the drug and alcohol sector with excellent, regular, high quality benchmarked reports. As all stakeholders (commissioners, providers, OGD's and users) value this, there was a significant and joint interest in ensuring that the 2014/15 data is fit for purpose.

The specific support that PHE provided during, and immediately after the NDTMS suspension is outlined below:

- All NDTMS systems were reinstated for any treatment providers that were being decommissioned during the suspension. This enabled all existing records for the out-going provider to be closed accurately and for the incoming provider to be supported, as they would be under normal circumstances. This ensured that no data was lost in Local Authorities that were de-commissioning and re-commissioning and that data quality for outgoing providers was assured. NB This is very pertinent for the alcohol and drug sector as it is estimated that a third of LA's re-commission each year due to LA rules and the NDTMS suspension occurred at the point in the year when most changes in provider would occur.
- A bespoke report was produced for each Local Authority and every treatment provider that presented monthly activity from October 14 and compared this to monthly activity over the same period last year. (The latter was used to take into account any seasonal variations). The data items that were included in this report for young people, adult alcohol and drugs were:
 - Total numbers in treatment
 - New individuals starting treatment
 - Individuals leaving treatment and reason for leaving
 - Interventions received
 - Treatment Outcome Profile assessments received

This bespoke report was prepared after each data submission between March 2015 and July 2015, in order that PHE teams, providers and commissioners could monitor progress of any outstanding data submission and resolve any possible issues.

- When NDTMS was reinstated, every provider was contacted individually to inform them of the new security arrangements and to facilitate access. During this contact, the NDTMS regional teams worked with all providers to identify any risks to submitting full data for 2014/15 by the July 2015 submission date, with plans to address any risks put in place.
- Local Authority areas of concern were added to a risk register and received on-going support. This risk register was reviewed dynamically on a weekly basis with support resources directed to those that required it most.

Assessment of 14/15 data quality

In August 2015, in order to further interrogate the submissions, the final year-end data was received and analysed. A report was produced that highlighted where Local Authorities were reporting falls of over 20 per cent in activity in 2014/15. The eight regional NDTMS teams were instructed to work with providers to explain these falls. There were 26 of the 152 local authorities for adults (drugs and alcohol) and 22 for young people where this was the case.

Regional NDTMS teams reported that

- To the best of their knowledge, all data quality and compliance work in their region had been completed and that the backlog of data entry generated during the downtime had all been cleared
- Data quality metrics remained consistently high in their regions once NDTMS data collection had resumed
- The introduction of the new security measures had not had any adverse effects on providers ability to collect and submit NDTMS information (initially there were some delays with local IT systems accommodating the new enhanced security)
- The falls in activity recorded were not due to the NDTMS suspension but were caused by different factors with the most common being:
 - the changes were reflective of activity and represented falls in demand or performance
 - a local authority had re-commissioned services during 14/15 and this process had included an audit / removal of clients recorded in treatment
 - the process of collecting outcome data was not undertaken by the incoming provider at the same level as the outgoing one. (this will be addressed in DQ work locally)
 - there were local system re-configurations that resulted in refocusing of the treatment system with some clients now being signposted into lower threshold services (by definition not recorded on NDTMS)

These stated reasons for changes in activity would be consistent with expectation and experience based on previous years in a data collection system of this size and there is no evidence to suggest that they occurred with any more frequency in 14/15 than in previous years.

Comparison of 2014/15 and 2013/14 activity using year end submission (old methodology)

The following data presents the changes over time in the numbers in treatment, new presentations and numbers exiting. A comparison of missing or inconsistent data is also included. All data is presented for alcohol, drugs and young people.

Trends in drug activity and missing / inconsistent data

	New journeys	Numbers in treatment	Number of Exits	Proportion of exits	Missing or inconsistent data		
					Referrals	Housing	Ethnicity
2008-09	84,520	210,815	61,384	29%			
2009-10	79,255	206,889	62,685	30%			
2010-11	74,028	204,473	64,994	32%			
2011-12	69,434	197,110	63,020	32%			
2012-13	69,247	193,575	61,899	32%			
2013-14	70,930	193,198	64,272	33%	1%	2%	<1%
2014-15	68,676	188,435	62,734	33%	1%	2%	<1%

There has been a three percent fall in the number of people starting drug treatment and a 2% reduction in overall numbers in treatment between 2013-14 and 2014-15. The number of people leaving the drug treatment system has reduced by 2%, with the proportion leaving remaining unchanged.

The levels of missing data for the three profile items have remained virtually unchanged.

Trends in alcohol activity and missing / inconsistent data

	New journeys	Numbers in treatment	Number of Exits	Proportion of exits	Missing or inconsistent data		
					Referrals	Housing	Ethnicity
2008-09	67,912	100,098	53,014	53%			
2009-10	72,641	111,381	63,632	57%			
2010-11	73,705	111,025	66,495	60%			
2011-12	74,353	108,906	66,894	61%			
2012-13	75,773	109,683	70,194	64%			
2013-14	80,929	114,920	74,291	64%	1%	5%	1%
2014-15	76,648	112,042	72,667	65%	1%	3%	1%

There has been a five percent fall in the number of people starting alcohol treatment and a 3% reduction in overall numbers in treatment between 2013-14 and 2014-15. The number of people leaving the alcohol treatment system has reduced by 2% with the actual proportion leaving increasing slightly.

The levels of missing data for the three profile items have remained unchanged except with housing where a small improvement has been seen.

Trends in Young People (YP) activity and missing / inconsistent data

	Numbers in treatment	Number of Exits	Proportion of exits	Missing or inconsistent data		
				Referrals	Housing	Ethnicity
2008-09	24,053	14,620	61%			
2009-10	23,528	14,665	62%			
2010-11	21,955	14,006	64%			
2011-12	20,688	13,187	64%			
2012-13	20,032	12,947	65%			
2013-14	19,126	12,510	65%	0%	3%	1%
2014-15	18,349	12,074	66%	0%	2%	1%

The fall in the number of YP in treatment has continued in 2014/15, with a four percent reduction since last year though this is slightly down in the reduction seen the year before. The number of exits has also fallen, though the proportion has increased slightly and is broadly consistent with previous years.

Summary

While there have been falls in activity for young persons, drugs and alcohol, the intelligence gathered by NDTMS teams as part of their support of treatment providers suggest that these changes are reflective of activity and/or are as a response to changes in local commissioning arrangements rather than from any system downtime

All appropriate measures were put in place to try and ensure full data recovery and there is no current evidence that the downtime had any adverse long term effects on quality or compliance.