**Analysis Questions**

**1.What types of treatment are available in a specific micro or macro area or state (choose one)?:**

Look for the answer in the column:

SERVICES\_D: SERVICE SETTING AT DISCHARGE

CBSA: FIPS 2010 CBSACODE (micro area(10 000 population), macro area (up to 50000 population),

STFIPS: CENSUS STATE FIPSCODE

• **“Detox in Hospital ”**DETOXIFICATION, 24-HOUR SERVICE, HOSPITAL INPATIENT:

24 hour per day medical acute care services in hospital setting for detoxification of persons with severe medical

complications associated with withdrawal.

• **“Detox in rehab”** DETOXIFICATION, 24-HOUR , FREE-STANDING RESIDENTIAL:

24 hour per day services in non-hospital setting providing for safe withdrawal and transition to ongoing treatment, medical staff is usually partially present in the detox house or on call.

• **“Hospital”** REHABILITATION/RESIDENTIAL - HOSPITAL (OTHER THAN DETOX):

24 hour per day medical care in a hospital facility in conjunction with treatment services for alcohol and other drug use

and dependency.

• **“RTC”** REHAB RESIDENTIAL - SHORT TERM (30 DAYS OR FEWER):

Typically, 30 days or less of non-acute care in a setting with treatment services for alcohol and other drug use and

dependency.

• **“PHP “**REHAB/RESIDENTIAL - LONG TERM (MORE THAN 30 DAYS):

Typically, more than 30 days of non-acute care in a setting with treatment services for alcohol and other drug use and dependency; this may include transitional living arrangements such as halfway houses.

• “**IOP**” INTENSIVE OUTPATIENT :

As a minimum, the client receives treatment lasting two or more hours per day for three or more days per week.

• “**Outpatient therapy treatment”** therapy and/or medications:

• **“Detox at home , on your own with prescribed meds– outpatient”** AMBULATORY - DETOXIFICATION:

Outpatient treatment services providing for safe withdrawal in an ambulatory setting (pharmacological or

non-pharmacological

**2.What types of treatment are the least and the most effective, and where?**

Look at the following columns:

SERVICES\_D: SERVICE SETTING AT DISCHARGE

Location

REASON: REASON FOR DISCHARGE

**3.Where are located the least effective treatments?**

Look at:

LOS: LENGTH OF STAY

Location

REASON: REASON FOR DISCHARGE

**4.Does the length of stay correlates with outcome of the treatment?**

LOS: LENGTH OF STAY

**5. Does age correlates with the outcome of the treatment?**

REASON: REASON FOR DISCHARGE

**6. Does primary drug of choice correlates with AGE?**

**7. Does length of treatment correlates with the form of payment for the treatment?**

LOS: LENGTH OF STAY

HLTHINS: HEALTH INSURANCE

or

PRIMPAY: EXPECTED/ACTUAL PRIMARY SOURCE OF PAYMENT (This field identifies the primary source of payment for this treatment episode anticipated at the time of admission. Guidelines: States operating under a split payment fee arrangement between multiple payment sources are to default to the payment source with the largest percentage. When payment percentages are equal, the state can select either source. )

**8. Does referral source correlates with outcome of the treatment?**

REASON: REASON FOR DISCHARGE

PSOURCE: REFERRAL SOURCE

9. Is there a correlation between referral source and gender?

10. Does previous substance use treatment correlates with the primary drug of choice?

NOPRIOR: PREVIOUS SUBSTANCE USE TREATMENT EPISODES

12. Does primary drug of choice correlates with the number of previous treatments?

Use SUB1: SUBSTANCE USE AT ADMISSION (PRIMARY)

13. Is there a correlation between the gender or age and form of administration?

ROUTE1: USUAL ROUTE OF ADMINISTRATION (PRIMARY)

14. Is there a correlation between the gender and diagnosis?

DSMCRIT: DSM DIAGNOSIS

15. Is there correlation between the drug of choice or diagnosis and ducation?

EDUC: EDUCATION

16. Is there a correlation between the age at first use and source of income or education?

FRSTUSE1: AGE AT FIRST USE (PRIMARY)

PRIMINC: SOURCE OF INCOME/SUPPORT

EMPLOY: EMPLOYMENT STATUS AT ADMISSION

17. Is there a correlation between the living situation and age at first use?

LIVARAG\_D: LIVING ARRANGEMENTS AT DISCHARGE

FRSTUSE1: AGE AT FIRST USE (PRIMARY)

18. Is there a correlation between the living situation and diagnosis?

DSMCRIT: DSM DIAGNOSIS

LIVARAG: LIVING ARRANGEMENTS AT ADMISSION

19. Is there a correlation between the first and secondary drug of choice?

(are they both uppers or both downers)

20. Is there a correlation between mental health diagnosis (that includes addiction) and reason for discharge?

NOPRIOR: PREVIOUS SUBSTANCE USE TREATMENT EPISODES

DSMCRIT: DSM DIAGNOSIS

21. Is there a correlation between mental health(that includes addiction) diagnosis and criminal charges?

DETCRIM: DETAILED CRIMINAL JUSTICE REFERRAL

DSMCRIT: DSM DIAGNOSIS