

Alcohol and Drug Outcome Measure (ADOM)

Client Name: NHI: DOB:
Gender: ☐ Male ☐ Female ☐ Another gender Ethnicity : Team:
Referral Date: Referral Source: ☐ Mandated ☐ Voluntary

Reason for collection: Treatment Start: ☐ New ☐ Other AOD Service ☐ Assessment only (up to 2 contacts)
Treatment review: ☐ 6 weeks ☐ 12 weeks
Treatment End: ☐ Routine ☐ DNA ☐ Other AOD Service ☐ Other

Date of Collection: Collected by: Number of days covered: (7-28)
Focus of care: ☐ Engagement/Assessment ☐ Active Treatment ☐ Continuing care CEP: ☐ Yes ☐ No

Section 1: Alcohol and other drug use

In the past four weeks how many days did you use/drink:	Days used 0-28	Notes	Main substance of concern
1. Alcohol			
2. How many standard drinks did you consume on a typical drinking day?		Refer to ALAC conversion chart (over page)	
3. Cannabis			
4. Amphetamine-type Stimulants		e.g. Methamphetamine, speed, Ritalin	
5. Opioids		e.g. poppies, poppy seed, morphine, Nurofen plus, codeine	
6. Sedatives/Tranquilisers		e.g. Diazepam (Valium), Temazepam, Benzos	
7. Any other drugs? Specify what drugs (maximum of 3 'other drugs')		e.g. Ecstasy, hallucinogens, solvents, GHB, party pills etc	
1.		If 'other drugs' contains substances covered above, return to that question and recode If vaping is involved, record vaping in Question 7. Note the estimated average nicotine cigarette equivalent in Question 8	
2.			
3.			
8. How many cigarettes have you smoked per day , on average ?		50gm tobacco = 100 cigarettes	
9. Main substance of concern. For Questions 1 to 8 above, please identify up to three main substances of concern by writing a 1, 2 or 3 in the right hand column to identify priority.			
10. On how many days have you injected drugs?		If none, enter 0 and go to question 12.	
11. Have you shared any injecting equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	See over to clarify 'shared'.	

Section 2: Lifestyle and wellbeing

In the past four weeks :	Not at all	Less than weekly	Once or twice a week	Three or four times a week	Daily or almost daily
12. How often has your general physical health caused problems in your daily life?					
13. How often has your general mental health caused problems in your daily life?					
14. How often has your alcohol or drug use led to problems or arguments with friends or family members?					
15. How often has your alcohol or drug use caused problems with your work or other activities in any of the following: social, recreational, looking after children or other family members, study or other personal activities?					
16. How often have you engaged in any of the following: paid work, voluntary work, study, looking after children or other caregiving activities?					
17. Have you had difficulties with housing or finding somewhere stable to live?					
18. How often have you been involved in any criminal or illegal activity such as driving a motor vehicle under the influence of alcohol or drugs, assault, shoplifting, supplying an illicit substance to another person? (do not include using illegal drugs)					

Section 3: Recovery

19. Overall, how close are you to where you want to be in your recovery? Tick the number that best fits where you are now.
(10 is the best possible)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

20. How satisfied are you with your progress towards achieving your recovery goals?

☐ Not at all ☐ Slightly ☐ Moderately ☐ Considerably ☐ Extremely

ADOM Practitioner Prompt Sheet

About the ADOM

ADOM was developed for use in community-based outpatient addiction services, including community-based 'after care' programmes, where outcomes (change) can be measured over a period of time.

Addiction practitioners are required to complete ADOM training with a recognised ADOM trainer, and be familiar with the guidance contained in the ADOM Guide for Addiction Practitioners before collecting ADOM with tangata whai ora.

Introducing the ADOM to service users

To introduce ADOM, provide the handout *ADOM information for service users/tangata whai ora* and go through with them. Cover all points in the sheet and check for other questions and concerns.

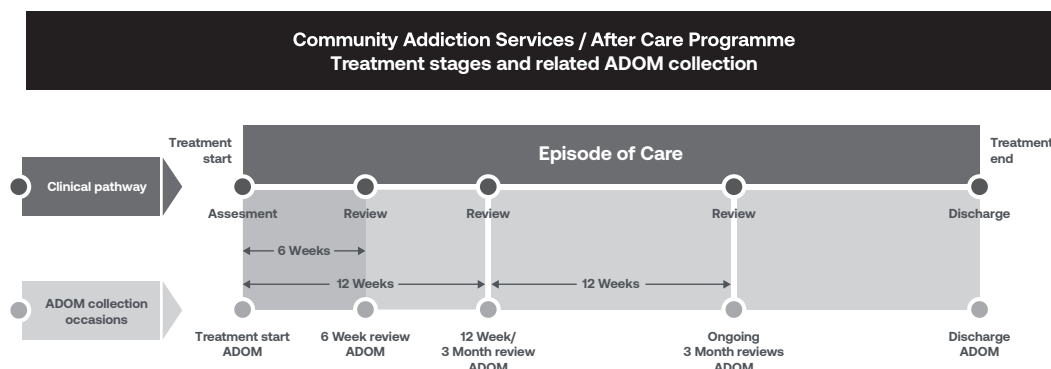
Ensure you cover confidentiality including use of information (local privacy protocols and that information is encoded when shared with MOH and researchers).

Where information is to be shared with other service providers it is good practice to ensure tangata whai ora consent is gained. It is important that sharing information occurs according to local and national protocols and legislation.

Why we are using ADOM

Data from each ADOM collection provides information about change to the status of the tangata whai ora in relation to their substance use and psychosocial wellbeing. This helps in care planning and seeing what's happening as well as making looking back for changes easy. It also helps services to evaluate how well they are providing treatment.

When is ADOM collected?



How to complete the ADOM (for the complete Information Collection Protocol read the ADOM Guide for Addiction Practitioners)

- To be completed in person in a collaborative manner between tangata whai ora and practitioner.
- Frame the interview – use the calendar page to clarify the last 28 days and record important events during this period that the tangata whai ora recalls – this will help as you go through the form. Start at the top of the form and work through it.
- Number of days covered:* The tangata whai ora must have been in the community for 7 or more consecutive days immediately prior to an ADOM collection. Do not complete an ADOM until this is the case.
- Timeline – work back through each week – and record number of days as you go – then add for total.
- Introduce each question, and if needed explain the intent of the question – give the tangata whai ora time to think about it.
- Where Nil use – enter 0. It is important that '0' scores are not mistaken for missing/unanswered data.
- If the question cannot be answered, the item should be identified as NA 'Not answered'. This should be avoided as much as possible.
- Q11.* Sharing means using someone else's equipment which has already been used, or someone using yours, regardless of whether you were both present at the time or not – this includes partners/couples. Equipment includes needles, syringes, water, spoons, filters.

Section 2 – Lifestyle and wellbeing

- Before completing Section 2, highlight confidentiality and how the questions only record frequency, not the activity.
- Rating Scale – if NO – tick 'Not at all'. If YES – support the tangata whai ora to look at the calendar and calculate frequency by week – then determine the best rating and 'tick'.

Section 3 – Recovery

- Identify the response that best describes the current feeling of the tangata whai ora about their recovery progress.

Section 1 – Alcohol and other drug use

- The questions do not apply to prescribed medications; however, any misuse of prescription medication should be included, for example, taking more than prescribed; injecting of medications not intended to be injected.
- Use the ALAC conversion table (right) for alcohol

What is a standard drink?

Standard drinks measure the amount of alcohol you are drinking. One standard drink equals 10 grams of pure alcohol.

*RTD (Ready To Drink)

Standard Drink	10g of Alcohol
APPROX 1.0 Standard Drinks	
330ML Can of Beer @ 4% ALC	1
100ML Glass of Table Wine @ 12.5% ALC	1
335ML Bottle of RTD* Spirits @ 8% ALC	2.1
750ML Bottle of Wine @ 13% ALC	7.7
1000ML Bottle of Spirits @ 47% ALC	37
3 Litre Cask of Wine @ 12.5% ALC	30
Standard Drinks	