

# The DASIS Report

November 21, 2003

## Discharges from Outpatient Treatment: 2000

### In Brief

- About one third (34 percent) of outpatient treatment episodes involved individuals who completed treatment while 8 percent involved those who were transferred to further treatment
- The outpatient treatment completion rate was highest, at 41 percent, for episodes where alcohol was the primary substance
- The median length of stay for completed outpatient treatment episodes was 91 days

This report examines discharge data in the Treatment Episode Data Set (TEDS).<sup>1</sup> The TEDS system is comprised of two major components, the Admission Data System and the Discharge Data System. Both admission and discharge data come primarily from facilities that receive some public funding.

States are asked to submit data for all discharges from substance abuse treatment. Approximately 348,000 records for clients discharged from treatment in 2000 were submitted by 18 States,<sup>2</sup> and 94 percent of these records could be linked to a TEDS admission record. These 326,000 linked admission/discharge records are referred to as treatment episodes.

**Table 1. Discharges from Outpatient Treatment by Reason for Discharge and Primary Substance at Admission: 2000**

Primary substance at admission	Total	Reason for Discharge				Other
		Treatment completed	Transferred to further treatment	Left against professional advice	Terminated by facility	
Alcohol	59,300	24,200	4,300	12,200	12,300	6,300
Opiates	8,400	2,300	600	2,500	2,300	700
Cocaine	13,700	2,800	1,000	3,600	4,800	1,500
Marijuana/hashish	26,400	8,400	2,100	6,500	6,700	2,700
Stimulants	6,000	1,800	900	1,600	900	800
Other/unknown	3,000	900	200	700	600	600
Total	116,800	40,400	9,100	27,100	27,600	12,600

Source: 2000 SAMHSA Treatment Episode Data Set (TEDS).

This report presents data on the 36 percent (117,000) of these episodes that represent clients who received outpatient treatment (Table 1). Clients discharged from intensive outpatient treatment and outpatient detoxification are not included in this report.<sup>3</sup>

### Reasons for Discharge

About a third (34 percent) of outpatient treatment episodes involved individuals who completed treatment and another 8 percent involved those who were transferred to another treatment program (Figure 1). The remaining outpatient treatment episodes involved clients who left against professional advice (23 percent); whose treatment was terminated by the facility (24 percent); or who were discharged for other reasons (11 percent).

### Primary Substance

Alcohol was the primary substance of abuse<sup>4</sup> in 58 percent of the completed outpatient treatment episodes (Figure 2), followed by marijuana (21 percent), cocaine (8 percent), opiates (6 percent), stimulants (5 percent), and other substances (2 percent).

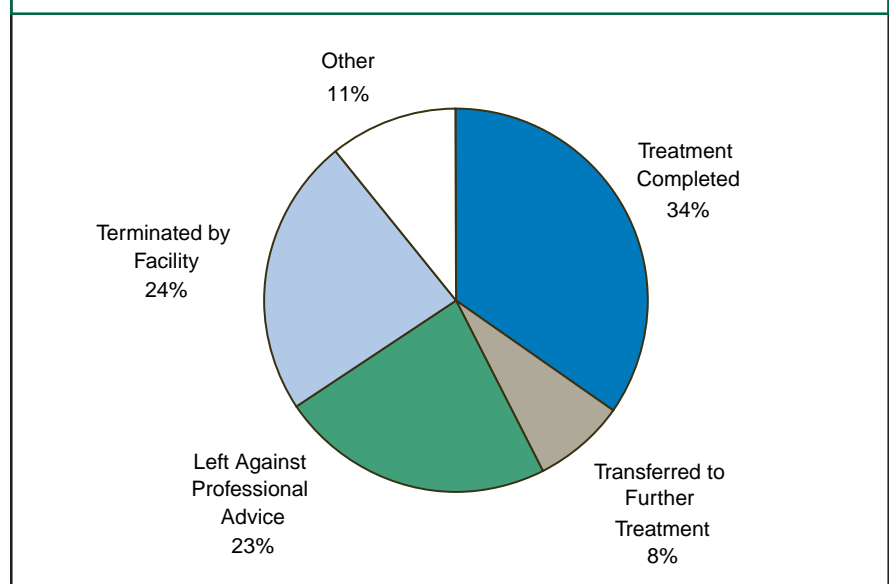
### Completion of Outpatient Treatment

The outpatient treatment completion rate was highest, at 41 percent, for episodes involving alcohol as the primary substance of abuse (Figure 3). For outpatient treatment episodes with marijuana as the primary substance, the completion rate was 32 percent. Outpatient treatment completion rates for episodes where the primary substances were stimulants or opiates were 30 percent and 27 percent. Outpatient treatment episodes involving cocaine as the primary substance were least likely to be completed, at 21 percent.

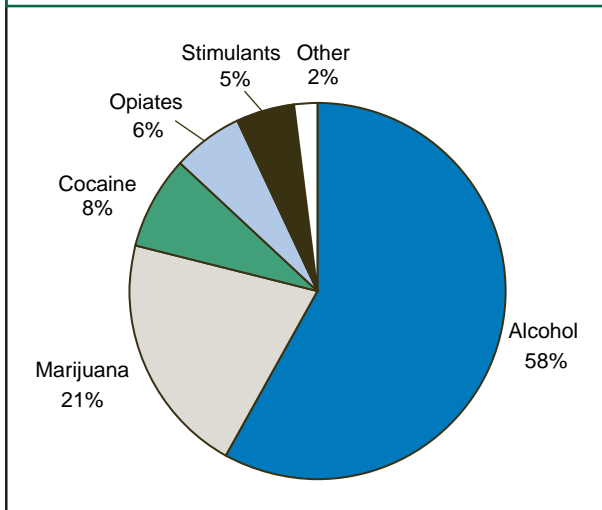
### Median Length of Stay

The median length of stay for completed outpatient treatment episodes was 91 days, ranging from 49 days for opiates to 105 days for stimulants (Figure 4).

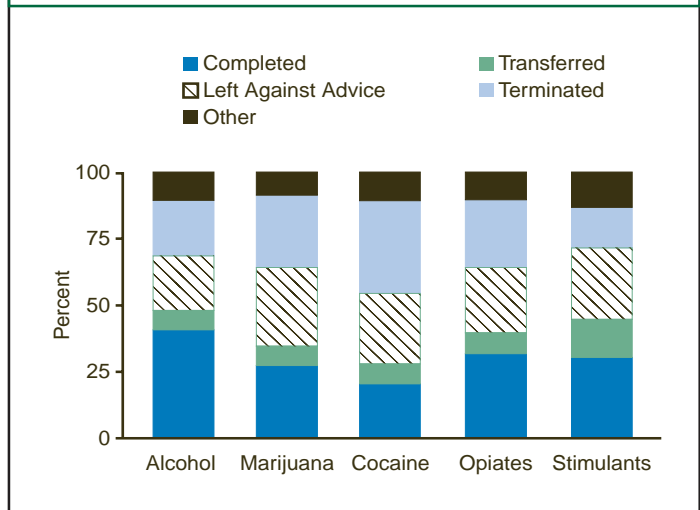
**Figure 1. Reason for Discharge among Outpatient Treatment Discharges: 2000**



**Figure 2. Primary Substance at Admission Among Outpatient Treatment Completers: 2000**



**Figure 3. Primary Substance of Outpatient Treatment Discharges, by Reason for Discharge: 2000**



**End Notes**

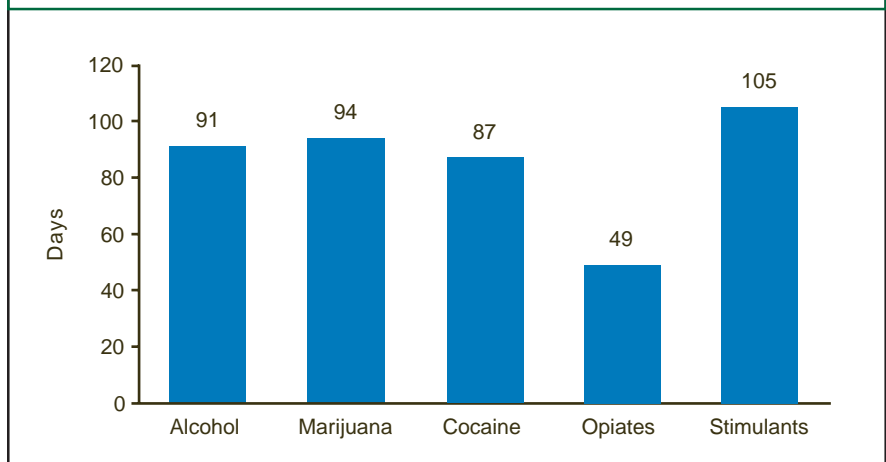
<sup>1</sup> For an earlier report on TEDS discharges, see Substance Abuse and Mental Health Services Administration, Office of Applied Studies. *The DASIS report: Treatment Completion in the Treatment Episode Data Set (TEDS)*. Rockville, MD. January 30, 2003.

<sup>2</sup> States included are CA, GA, HI, IA, IL, MA, MD, ME, MN, MI, MS, MT, NE, NM, OH, OK, UT, and WY.

<sup>3</sup> Because treatment completion rates and lengths of stay vary across modalities or types of treatment, reports on other modalities, including intensive outpatient, short-term residential, long-term residential, and detoxification treatment will be presented in future DASIS reports.

<sup>4</sup> The primary substance of abuse is the main substance abused at the time of admission.

**Figure 4. Median Length of Stay among Outpatient Treatment Completers, by Primary Substance: 2000**



The Drug and Alcohol Services Information System (DASIS) is an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). One component of DASIS is the Treatment Episode Data Set (TEDS). TEDS is a compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. Information on treatment admissions is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. Approximately 1.6 million records are included in TEDS each year. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

*The DASIS Report* is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and RTI, Research Triangle Park, North Carolina.

**Information and data for this issue are based on data reported to TEDS through April 1, 2002.**

Access the latest TEDS reports at: <http://www.samhsa.gov/oas/dasis.htm>

Access the latest TEDS public use files at: <http://www.samhsa.gov/oas/SAMHDA.htm>

Other substance abuse reports are available at: <http://www.DrugAbuseStatistics.samhsa.gov>



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