Agenda No 9

AGENDA MANAGEMENT SHEET

Name of Committee	Communities Overview and Scrutiny Committee			
Date of Committee	30 June 2011			
Report Title	Alcohol Implementation Plan: Progress Report			
Summary	This report provides Members with a progress update on the delivery of the Warwickshire Alcohol Implementation Plan 2010-12.			
For further information please contact	Paul HooperKate NashSubstance Misuse StrategyHead of PartnershipsTeam ManagerTel: 01926 412177Tel: 01926 412153katenash@warwickshire.gov.uk			
Would the recommended decision be contrary to the Budget and Policy Framework?	No			
Background Papers	Warwickshire Alcohol Imple	ementation Plan 2010-12.		
CONSULTATION ALREADY UNDERTAKEN:- Details to be specified				
Other Committees				
Local Member(s) (With brief comments, if appropriate)	N/A			
Other Elected Members	X Cllr Chattaway Cllr Saint Cllr Whitehouse			
Cabinet Member (Reports to The Cabinet, to be cleared with appropriate Cabinet Member)	X Cllr Hobbs – 'report not	ed'		
Chief Executive				
Legal	X Sioned Harper			
Finance	X Chris Kaye			



Other Chief Officers	
District Councils	
Health Authority	
Police	X George Stepney – 'I have looked at the paras highlighted and they appear to be an accurate observation on the future risk and barriers'
Other Bodies/Individuals	
FINAL DECISION	YES (If 'No' complete Suggested Next Steps)
SUGGESTED NEXT STEPS :	
SUGGESTED NEXT STEPS :	Details to be specified
SUGGESTED NEXT STEPS : Further consideration by this Committee	Details to be specified
Further consideration by	
Further consideration by this Committee	
Further consideration by this Committee To Council	
Further consideration by this Committee To Council To Cabinet	



Communities Overview and Scrutiny Committee 2011 30 June 2011

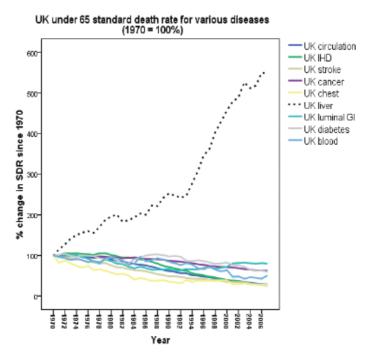
Warwickshire Alcohol Implementation Plan Progress Report

Recommendation

That Members note the progress made through the alcohol implementation plan.

1. Introduction

- 1.1 Alcohol misuse is a major public health problem, placing a heavy burden on society, and affecting a large number of individuals of all ages. Either on its own or in conjunction with other factors, alcohol is estimated to be responsible for at least 33,000 deaths in the UK each year¹. In England, approximately 10 million people are drinking above recommended daily guidelines for the consumption of alcohol² (2-3 units for women and 3-4 for men).
- 1.2 Alcohol is a major cause of liver disease. In the UK, liver disease is the only major disease type that is on the increase, as illustrated in the following graph.



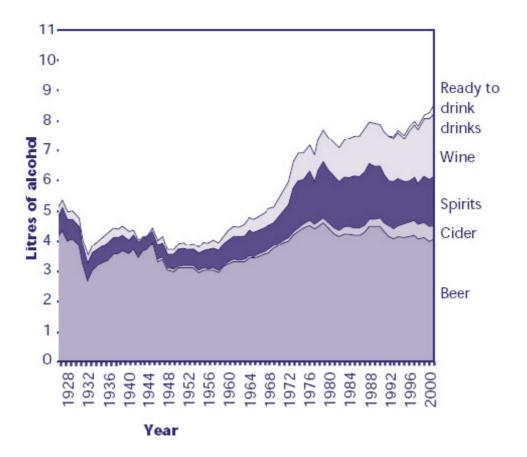
Trends in Standard Death Rates for major diseases since 1970. Data are from the World Health Organisation Health for All Database. Death rates normalised to 100% in 1970 (courtesy of Dr. Nick Sheron). <u>www.euro.who.int/HFADB</u>

² http://www.drinkaware.co.uk/facts/did-you-know/approximately-seven-million-people-in-england-drink-above-the-recommended-guidelines.



¹ http://www.drinkaware.co.uk/facts/did-you-know/alcohol-related-deaths

1.3 Alcohol consumption in the UK has risen steadily since 1950, with the increase seen in spirits, wine and 'ready to drink' drinks such as alcopops, as shown in the following graph.



Alcohol consumption in the UK: 1928 – 2000, Per capita consumption

Original source: British Beer and Pub Association 2000

- 1.4 Reducing alcohol related harm is a priority for both health and community safety partners in Warwickshire. Alcohol has been selected as one of the five priority areas featured within the Joint Director of Public Health's Annual Report 2011 and one of the four community safety priorities for Warwickshire for 2011-12.
- 1.5 Work to tackle alcohol related harm is co-ordinated through the Warwickshire Alcohol Implementation Plan. This was developed in 2010 and approved by the Safer and Stronger Communities Board in February 2011. Over fifteen agencies have committed to working in partnership to deliver the actions within the implementation plan, including Warwickshire County Council, NHS Warwickshire, Warwickshire Police, Warwickshire Probation Trust, the five District and Borough Councils, drug and alcohol treatment providers, service user representatives and hospital trusts. The plan has received the Alcohol Concern³ 'kitemark' for good practice.

³ Alcohol Concern is the national agency on alcohol misuse, campaigning for effective alcohol policy and improved services for people whose lives are affected by alcohol-related problems.



- 1.6 The implementation plan sits beneath the Warwickshire Alcohol Harm Reduction Strategy and, together, these documents show how partner agencies aim to reduce alcohol-related harm to individuals, families and communities. The three themes within the strategy and implementation plan are:-
 - (i) Education and prevention
 - (ii) Treatment and aftercare
 - (iii) Local enforcement of alcohol-related legislation.
- 1.7 This report provides information on progress made through the implementation plan to date and identifies areas for further development.

2. Performance Measures

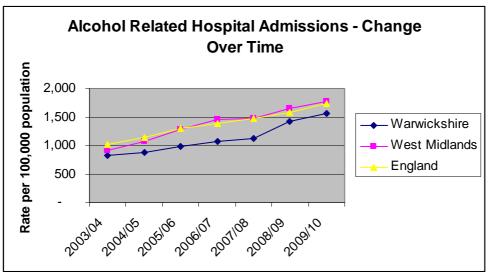
- 2.1 The headline indicator which will be used to measure the success of the plan is alcohol related hospital admissions (formerly National Indicator 39). Data for this indicator is collected by the North West Public Health Observatory (NWPHO) for every Primary Care Trust and Council (both County and District/Borough in two tier areas) in England. Following international best practice, the NWPHO methodology includes a wide range of diseases and injuries in which alcohol plays a part and estimates the proportion of cases that are attributable to the consumption of alcohol. A diagram illustrating this methodology can be found at **Appendix A**.
- 2.2 The rate of alcohol related hospital admissions has increased year on year since 2002/03, rising from 689 per 100,000 in Warwickshire in 2002/03 to 1,562 per 100,000 in 2009/10. The table below shows data for 2009-10 (the last full year for which data is available) compared to the previous year.

Alcohol Related Hospital Admissions (rates per 100,000 population) Percentage Change Information				
	2008-09	2009-10	% Change	
North Warks	1,327	1,541	16%	
Nuneaton and Bedworth	1,682	1,807	7%	
Rugby	1,454	1,704	17%	
Stratford	1,275	1,376	8%	
Warwick	1,364	1,449	6%	
Warwickshire	1,421	1,562	10%	
West Midlands	1,653	1,774	7%	
England	1,582	1,743	10%	

(Source: North West Public Health Observatory)



2.3 The rise in alcohol related hospital admissions in Warwickshire mirrors both the regional and national picture, although the rate has risen slightly faster in Warwickshire over the past two years, as shown in the chart below.



(Source: North West Public Health Observatory)

- 2.4 Data is currently available for the first three quarters of 2010/11. This does provide some positive news, as the rate of admissions during quarter three fell compared to the previous quarter in four of the five Districts and Boroughs and in the county as a whole. However, the longer term trend continues to show an increase, with the rate of admissions across the first three quarters increasing by 9% in Warwickshire when compared to the same period the previous year, from 1,162 admissions per 100,000 to 1,269.
- 2.5 It is important to note that the admissions data does not include information on individuals who present at Accident and Emergency (A&E) departments with alcohol related issues but are not then admitted to hospital. Reducing alcohol related hospital admissions is a long term project, as an individual's current drinking habits may influence the admission statistics in ten, twenty or even thirty years time. Targets have been set for 2010/11 and 2011/12 to slow the rate of increase to below the forecast trajectory. The targets are 1,603 alcohol related hospital admissions per 100,000 residents in 2010/11 and 1,779 per 100,000 residents in 2011/12.
- 2.6 Partners have agreed a number of further high level performance indicators which will be used to measure the success of the plan during the period through to 2013. These are:-
 - (i) Reduction in the number of people drinking at increasing risk and higher risk levels
 - (ii) Reduction in attendances at A&E for alcohol related injuries/conditions
 - (iii) Increase in the numbers of adults and young people receiving effective treatment/care
 - (iv) Increase in the numbers of adults and young people leaving treatment/care with improved outcomes
 - (v) Reduction in the number of alcohol-related violent crime incidents.



2.7 A further update report will be presented in 2012 showing, where possible, data for these indicators comparing 2011/12 to 2010/11. This information will enable the initial success of the implementation plan in reducing alcohol-related harm to individuals, families and communities in Warwickshire to be measured. Work is currently ongoing to improve the capture of relevant alcohol-related information at A&E departments, but it is hoped that it will be possible to present some initial data in the next progress report.

3. Implementation Plan – Progress to Date

3.1 The Alcohol Implementation Plan contains three key themes. The following sections of the report highlight achievements and progress made at a countywide level under each theme to date. Although the plan was only formally approved in February 2011, work on some of the actions commenced as it was being developed during the latter part of 2010.

4. Theme One: Education and Prevention

- 4.1 An Alcohol Hospital Liaison Service has been established at George Eliot Hospital to provide specialist information, advice and care to patients. Work is ongoing with South Warwickshire Hospitals to establish a similar service in the south of the County.
- 4.2 Alcohol information, including contact details for treatment services, has been rolled out on plasma screens around the county, including those in A&E departments, libraries and one stop shops.
- 4.3 A web based information, advice and support tool has been developed for people drinking at higher and increasing risk levels. This will be piloted during summer 2011 and will be evaluated following the pilot phase. Funding has been provided by NHS Warwickshire to market the tool.
- 4.4 A key element of the plan is to increase the knowledge and expertise about alcohol issues amongst practitioners in Warwickshire. In 2010/11, 254 people from a wide range of agencies received substance misuse training, arranged by the Drug and Alcohol Action Team (DAAT). Eight Tier 1 (universal interventions) courses were delivered to staff from both adults and young people's services within 34 agencies. Three Tier 2/3 (specific drug and/or alcohol treatment services) courses were delivered to substance misuse workers from seven agencies. A further four courses will take place during the period April November 2011.
- 4.5 A comprehensive plan is currently being developed to ensure all community safety communications messages produced by partners are co-ordinated around the county. Alcohol will feature as a theme within this plan.
- 4.6 Initial discussions have taken place between NHS Warwickshire and the Local Pharmaceutical Committee which will lead to pharmacy staff being trained to carry out 'Brief Interventions' during 2011. It is hoped that alcohol will be one of the scheduled campaigns run within Warwickshire pharmacies in 2012.



- 4.7 27,000 advice leaflets providing young people with the facts about alcohol and underage drinking have been distributed through a range of agencies including secondary schools, youth services and the Family Information Service.
- 4.8 A toolkit, containing information on screening, brief advice and referrals to specialist support, has been distributed in hard copy to 119 practitioners who have undertaken substance misuse training and electronically to a range of partners working with young people, including all secondary schools.
- 4.9 Information has been provided to parents, via a further 27,000 leaflets circulated through schools, the Family Information Service and parenting support workers, to raise awareness of the potential harm caused by underage drinking and of specialist support available for young people's alcohol misuse.
- 4.10 Some work has been undertaken with employers to provide information about alcohol to employees. A 'Healthy People, Healthy Lives' programme is running with employees at Nuneaton and Bedworth Borough Council and George Eliot Hospital, encompassing advice around alcohol and substance misuse and referrals into specialist treatment where appropriate. Swanswell (the current provider of community alcohol treatment services) have provided alcohol awareness sessions at employee events as part of the Healthy People, Healthy Lives programme, and also at a food distribution factory in Rugby.
- 4.11 Other education and prevention initiatives have also been undertaken by partners locally across the county. Examples include a podcast delivered in North Warwickshire to raise staff and residents' awareness of alcohol and its associated issues. Also in North Warwickshire, the Solomon theatre workshop was delivered to all year 9 students (862) during 2010/11. This discusses the dangers and consequences of drinking alcohol and the impact this can have on local communities.
- 4.12 In Warwick District, partners are working to develop a 'going out and staying safe' policy aimed at both young people and parents and also developing links with the University of Warwick Students Union to ensure these messages are delivered to students, utilising appropriate media. Two 'Your Town, Your Choice' events took place on Saturday evenings in Learnington during 2010/11, providing residents and visitors with information on going out and staying safe, including advice about safe drinking.
- 4.13 In March 2011 Warwickshire Police used social media channels, including YouTube, to promote a locally produced video 'How to get smashed'. The short film highlights the possible consequences of excessive drinking leading to out-of-character violent behaviour.

5. Theme Two: Treatment and Aftercare

5.1 A new, integrated, recovery-focussed drug and alcohol treatment service for adults across Coventry and Warwickshire has been commissioned, with a planned commencement date of 1 December 2011. This re-commissioning exercise has been undertaken to drive improvement in terms of the recovery agenda and ensure value for money. The new service will take responsibility for



a number of alcohol interventions currently in place, including the Alcohol Liaison Service in hospitals and training for professionals, and will provide residents with a co-ordinated single service with appropriate care pathways.

- 5.2 A new drug and alcohol treatment service has also been commissioned for young people in Warwickshire. Again, it is planned that this service will commence on 1st December 2011.
- 5.3 71% of those completing treatment in the community in 2010/11 did so with a reduced Christo score (a measure of treatment effectiveness that measures alcohol use and overall health and wellbeing). With the Christo measure, a reduced score represents a positive outcome.
- 5.4 An alcohol and fire safety protocol has been developed and was launched on 1st April 2011. This protocol ensures that links are in place between the Fire Service and treatment providers, with the aim of increasing referrals between the services and, ultimately, reducing alcohol related fires in the home.
- 5.5 A partnership event was held in December 2010, with the aim of reducing street drinking⁴ in specific areas of concern. Following this event, Swanswell are in the early stages of developing a project working with street drinkers to reduce their alcohol use. District/Borough Councils and the Police have also undertaken actions, including appropriate enforcement, to tackle this issue.
- 5.6 Strong links are in place between domestic abuse and alcohol services. Alcohol service staff receive training in domestic abuse awareness. This is run on a rolling basis to ensure all new staff receive the training, with four sessions provided in 2010/11. Domestic abuse staff are also provided with training on alcohol awareness and referrals into specialist services. A training session for domestic abuse practitioners was held in May 2011 and was heavily oversubscribed, with consideration now being given to the provision of further sessions.
- 5.7 Work has been undertaken to ensure that alcohol treatment interventions for offenders are appropriate and effective. Alcohol Treatment Requirements⁵ (ATRs) are now targeted towards more high risk and complex clients with significant alcohol related offending. 35 individuals completed an ATR in 2010/11, 69% of these with reduced alcohol use. Other clients are offered more appropriate, alternative programmes or services, including the Low Intensity Alcohol Programme (LIAP), generic alcohol treatment services or Identification and Brief Advice (IBA). Three information and brief training sessions have been provided for magistrates to inform them about ATRs and use of these orders.
- 5.8 Housing related support provision, funded by Supporting People, is currently provided to people with alcohol problems to help them maintain their tenancy.

area. ⁵ The Criminal Justice Act 2003 makes available to the courts an Alcohol Treatment Requirement (ATR) as one of the possible requirements of a Community or Suspended Sentence Order. An ATR imposes a requirement on the offender to attend treatment for alcohol dependency for a set period of time (usually between 6 and 9 months).



⁴ The term street drinkers in this context refers to individuals who persistently drink on the streets, usually in groups, and whose behaviour can be perceived as offensive or causing a nuisance to residents and/or visitors in a particular area.

Provision that enhances recovery and rehabilitation is being developed and a contract with a new service is due to be in place from 1 April 2012.

- 5.9 Work has begun with George Eliot Hospital to provide information to enable mainstream services to deliver IBA for alcohol. An action plan is being developed by the NHS Warwickshire Public Health team to link alcohol into other IBA work currently ongoing around other topics, such as smoking, to ensure a co-ordinated approach. This includes community based staff such as health visitors. Discussions are being held to expand this type of signposting and/or referral to reablement teams.
- 5.10 Three GPs will attend alcohol training, funded by the DAAT, in June 2011. Closer working with GPs, through the provision of Shared Care, was included in the specification for the new treatment service and will be taken forward by the new provider.
- 5.11 Research to identify attitudes and barriers to alcohol treatment leading to recommendations for improving engagement rates is being undertaken by Voices 4 Choices (the Warwickshire service user involvement service). A report is expected by September 2011.
- 5.12 A safeguarding action plan was implemented in 2010/11, ensuring that staff in children and family services have the confidence to identify individuals misusing substances and refer to appropriate treatment services. A joint working protocol is now being developed to ensure an effective two-way relationship between children's services and treatment providers.

6. Theme Three: Local Enforcement of Alcohol-Related Legislation

- 6.1 New licensing legislation is currently progressing through Parliament and will lead to a review of existing licensing policies. Some areas have already looked at existing policies to ensure these are robust. Local licensing practices have been reviewed in Rugby, resulting in sharper partnership management of, and response to, incidents at licensed premises. Some amendments to local licensing enforcement have been made following a Home Office Strategy Unit visit to Warwick District in January 2011.
- 6.2 All incidents involving licensed premises are reviewed by the Police on a daily basis. When a premise is involved in several incidents, a meeting will be held with the Designated Premises Supervisor and relevant partners. Partnership action plans are put in place for the most problematic licensed premises, as identified through multi agency groups in each District/Borough. Premises that fail to meet the requirements of the multi agency groups will be subject to a review of their license. A successful example of this process occurred in November 2010, when the license of a public house in Atherstone was revoked, leading to a reduction in violence in the town centre.
- 6.3 Designated Public Place Orders (DPPOs) are now in place across Warwick District and Nuneaton and Bedworth and Rugby Boroughs and in town centres within Stratford District. These orders provide Police Officers and Police Community Support Officers (PCSOs) with the power to ask individuals or



groups to hand over their alcohol if they are behaving anti-socially, or are likely to do so, in public places. Failure to comply with this request is a criminal offence.

- 6.4 Policing of the night time economy remains a significant priority, with intelligence led operations implemented in hotspot locations at peak times for alcohol related violence. Serious violence increased in Warwickshire in 2010/11, with 2,882 incidents recorded by the Police (up from 2,648 in 2009/10). The need to tackle this problem has been recognised and violence has been agreed as another of the partnership community safety priorities for Warwickshire in 2011/12.
- 6.5 The Road Policing Unit runs campaigns designed to identify individuals involved in drink driving, particularly at priority times such as Christmas. These operations are supported by uniformed resources as required. Intelligence received about individuals involved in drink driving is used to target resources effectively. Work is also planned to highlight the risk of individuals still being over the drink drive limit the morning after consuming alcohol.
- 6.6 Test purchasing operations related to under aged sales of alcohol are carried out by Trading Standards and the Police, focusing on premises that generate the highest volume of complaints. In 2010/11, 69 test purchases were attempted by Trading Standards, resulting in nine sales and the issuing of eight Fixed Penalty Notices and one caution. In addition, 70 premises were visited and provided with information and literature about 'challenge 21' and 'challenge 25' schemes.

7. Actions for 2011/12

- 7.1 A specific Identification and Brief Advice tool will be developed to enable midwives to identify alcohol issues amongst pregnant women and ensure that alcohol use during pregnancy is more thoroughly assessed and appropriately treated.
- 7.2 Further work will be undertaken, both within WCC and with external companies, to develop information for employers to provide to employees on alcohol use. In the current financial climate it may not prove cost effective to produce leaflets and other hard copy materials, and ways of providing this information electronically are being explored.
- 7.3 Clear and consistent messages will be developed and used in campaigns to improve knowledge and encourage a more responsible attitude to drinking alcohol amongst targeted groups within the community. The promotion of the new, integrated treatment service will provide an opportunity to deliver these messages to a wide audience.
- 7.4 Work will continue to improve the capture of data relating to alcohol from a range of sources, with an initial focus on the provision of information on alcohol related presentations at A&E departments.
- 7.5 Many agencies currently visit residents in their homes and work needs to be undertaken to join this up and ensure that every contact counts, with individuals being signposted or referred to other services as appropriate.



- 7.6 Appropriate care pathways need to be established between drug and alcohol treatment providers and mental health providers for clients with a dual diagnosis. A detailed mental health needs assessment is being undertaken by NHS Warwickshire during summer 2011 and work to establish appropriate pathways will be undertaken based on the findings of this assessment.
- 7.7 The current service user involvement service will be re-commissioned during 2011/12 and expanded to include services for carers of those with alcohol problems. The new service will commence in April 2012.

8. Potential Barriers to Implementation

- 8.1 Organisational restructures pose a potential threat to the successful delivery of some of the actions within the implementation plan. Consideration may need to be given by partners as to what can be done to help mitigate the risk to the successful delivery of these actions.
- 8.2 During the development of the plan, it was proposed that a framework of preferred providers be developed to assist schools in delivering drug and alcohol education. However, it has now been established that WCC cannot create a list of preferred providers in this way.
- 8.3 Over the past few years, PCSOs have delivered education programmes around key issues, including alcohol, in 13 'Safer Schools' around the county. Funding for these PCSOs is currently provided by WCC and the Police, but is being withdrawn after the summer term. Alternative funding options are being explored, but any reduction in the number of Safer Schools PCSOs poses a risk that crime, anti-social behaviour and associated harm will increase in the vicinity of the schools.
- 8.4 There is an action within the implementation plan for the WCC Youth and Community Service to incorporate screening and brief advice around alcohol into all positive activities for young people. This service is now being significantly changed following major budget reductions. As a result the voluntary and community sector will be expected to play a larger role in providing youth activities and will be able to access training and guidance on alcohol prevention. It is, however, unlikely that data will be available on the amount or type of interventions delivered through voluntary sector providers.
- 8.5 The implementation of a conditional cautioning scheme in Warwickshire could require individuals cautioned for drug and/or alcohol offences to attend sessions with a treatment provider and, as a minimum, receive some information and key facts about the harm caused by drugs and alcohol. Work has been ongoing for some time to explore the possibility of implementing conditional cautioning, but this intervention would impose extra bureaucracy on the Police Officer issuing the caution. The future of conditional cautions nationally is being considered within a Ministry of Justice consultation process. If conditional cautioning cannot be implemented, further work may be necessary to look at alternative ways of increasing engagement in treatment.



- 8.6 The funding available to deliver housing related support services across the county, including those for drug and alcohol service users, is reducing by 25%. Although a new housing support service that enhances recovery and rehabilitation will commence in April 2012, this reduction in funding could have an impact on services to be commissioned in the future.
- 8.7 Care will need to be taken to ensure that the significant reorganisation within Warwickshire Police that was implemented in May does not impact on their capacity to tackle alcohol related harm. Reduction in serious violence remains both a Police and partnership priority for 2011/12.
- 8.8 All GPs in Warwickshire are currently signed up to the Directed Enhanced Service (DES) for alcohol screening for new and at risk patients. This service has not been fully implemented by all GPs and the future of the national funding provided for the scheme is uncertain. Alternative methods for engaging with GPs to ensure patients drinking at increasing or high risk levels receive appropriate support and referrals into specialist treatment are currently being explored.
- 8.9 A targeted project, led by the WCC Youth and Community Service, to reduce alcohol related hospital admissions amongst young people in Nuneaton and Bedworth was implemented during 2010/11. This project came to an end in March 2011 and no further interventions to tackle this issue are planned due to funding reductions.
- 8.10 Many community safety interventions to tackle alcohol related harm are implemented during the evenings and/or weekends. In the current climate, many agencies are not able to fund overtime and now rely solely on staff members volunteering to work outside office hours. If suitable volunteers cannot be found, a significant risk is posed to the implementation and success of these interventions.

9. Conclusion

- 9.1 There is much good work in progress around the county to tackle the harm caused by alcohol to individuals, families and communities. However, reductions in funding and organisational restructures within a number of agencies pose a risk to the successful delivery of some of the actions within the alcohol implementation plan.
- 9.2 Whilst alcohol is currently recognised as a priority by both health and community safety partners in Warwickshire, care will need to be taken during a time of significant change to ensure that the focus on this key issue is not lost. Members who sit on key partnerships are asked to champion the alcohol agenda and enable the solid foundations established through the implementation plan to be built upon in future years.



10. Recommendation

10.1 That Members note the progress made through the alcohol implementation plan.

Author	Paul Hooper
Service Head	Mark Ryder
Strategic Director	Monica Fogarty
Portfolio Holder	Councillor Richard Hobbs



Appendix A: Attributable Fractions Equating to Alcohol Related Hospital Admissions

Colour copies of this figure will be made available at the meeting on the 30th June.

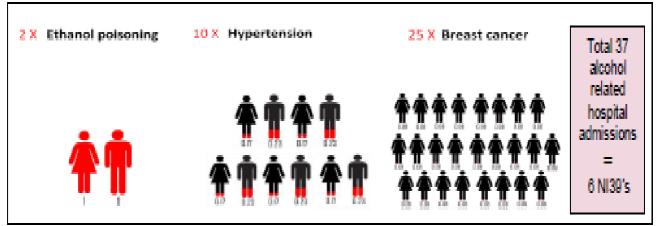


Figure 3.2.1 Attributable Fractions equating to two NI39 hospital admissions.

