

Warwickshire Alcohol Implementation Plan

**TACKLING
DRUGS
& ALCOHOL
CHANGING
LIVES
IN WARWICKSHIRE**

2012 – 2014

An Equality Impact Assessment on this policy was undertaken in October 2012 and will be reviewed in October 2015.

Introduction

A comprehensive alcohol implementation plan was agreed by partners in Warwickshire in 2010. This plan was awarded the Alcohol Concern 'kitemark' for good practice.

In March 2012, the Government launched its new national alcohol strategy. This strategy sets out the Government's approach to turning the tide against irresponsible drinking.

Activity within the national strategy sits under three broad themes:

- Challenge and enforcement
- Health, treatment and recovery
- Education and prevention.

This refreshed implementation plan reflects both the direction of the new national strategy and developments locally since the original plan was produced. It shows how agencies in Warwickshire will aim to tackle the harm caused by alcohol, with a focus on activity under each of the three themes above where significant value can be added through effective partnership working.

Outcomes

Warwickshire partners have agreed that the overall success of this plan will be measured through the achievement of a number of high level performance indicators. Systems are already in place to measure the following indicators:

- A reduction in the amount of alcohol-related serious violent crime
- A reduction in the rate of alcohol-related hospital admissions for both adults and under 18s
- An increase in the numbers of adults and young people successfully completing alcohol treatment
- A reduction in the percentage of young people drinking alcohol on most days.

Partners have also agreed that the following outcomes will provide a good indication of the success of the plan. However, these cannot currently be measured. Work will be undertaken by partners during the period covered by this plan to look to establish systems which will enable the following to be measured:

- An increase in levels of understanding about safe drinking limits

- A reduction in the number of adults drinking above the NHS guidelines
- A reduction in the number of people “binge drinking”
- A reduction in attendances at Accident and Emergency for alcohol related injuries / conditions.

The 12 actions within the plan with the potential to have the most significant impact on reducing alcohol related harm have been selected and marked with an asterisk (*). The number of these actions that are successfully implemented will form an additional output measure, to be used to assess the overall performance of the plan.

Monitoring

The specific detail of the actions within this plan will be monitored through the Drugs and Alcohol Management Group (DAMG). The lead agency (or, in a few cases, agencies) is listed for each action and this agency is responsible for co-ordinating activity required to develop the strand of work and providing updates to the Drug and Alcohol Action Team (DAAT) in a timely fashion. The actual implementation of many of the actions within this plan is likely to involve several partners, and a list of all the partner agencies signed up to the plan can be found at Appendix A.

This is principally a countywide action plan, with a focus on county level actions. Additional actions to be undertaken at a District / Borough level can be found in the Community Safety Partnership (CSP) Partnership Plans and specific action plans, which will be monitored at a local level. Please note that each action within the plan is identified with a letter and number to aid navigation.

Theme 1: Challenge and Enforcement

Action	Who – Lead Agency	Timescale and Comments
* A1. Implement intelligence led Policing operations to ensure appropriate provision in town centres during peak times for alcohol related violence.	Police – Chief Inspector, Response Policing	Ongoing from April 2012. The success of this action will be a reduction in <u>serious</u> violent crime. Early intervention and arrests for lower level violence may prevent more serious harm later in the evening.
A2. Undertake enforcement activity throughout the year to identify individuals involved in drink driving and take appropriate action against those caught over the limit.	Police – Road Safety	Ongoing from April 2012. Any driver involved in a collision (where Police are aware) is automatically tested for alcohol.
* A3. Agree a countywide framework and consistent multi-agency approach to the enforcement of alcohol-related licensing powers.	District and Borough Council Licensing Managers	Broad framework in place by March 2013. Action to be taken forward through the Licensing Managers meeting. The approach adopted should be flexible, to allow for local differences within the broad countywide framework.
A4. Work with licensed premises to ensure that they are aware of all their responsibilities under the Licensing Act.	District and Borough Council Licensing Managers	Ongoing from April 2012. Activity required will depend on the premise, but may include training to ensure all staff are aware of their responsibilities. Multi-agency licensing visits should be used to ensure all premises are complying with the conditions of their licence.
A5. Develop evidence based action plans for the most problematic licensed premises in each area, as identified through multi-agency licensing meetings.	Police - Licensing	Plans in place for problematic premises in each area by September 2012. Monthly meetings held with problematic premises, discussing incidents stored on the Police licensing database.

Action	Who – Lead Agency	Timescale and Comments
A6. Explore policies of major online retailers regarding online orders and home delivery, to ensure robust systems are in place to prevent the sale of alcohol to under 18s.	Police - Licensing	Exploration commenced with major retailers in July 2012 and fully undertaken by March 2013. Follow up discussions held with any retailer whose policies on preventing sales of alcohol to under 18s do not seem to be robust.
A7. Report any alcohol advertising perceived to be irresponsible to the appropriate authorities.	DAAT to coordinate	All partners to raise the need to report irresponsible activity to the DAAT with relevant staff and have processes in place for reporting by December 2012.
A8. Monitor the activity of local businesses signed up to the Responsibility Deal and report any incidents of non-compliance.	DAAT to coordinate	All partners to raise the need to report non-compliance activity to the DAAT with relevant staff and have processes in place for reporting by December 2012. Information on business signed up to the Responsibility Deal can be found here: http://responsibilitydeal.dh.gov.uk/pledges/
A9. Undertake an assessment of the extent to which alcohol-related violence and anti-social behaviour occurs in Warwickshire's hospitals.	Warwickshire Observatory	Assessment undertaken by February 2013. Dependant on findings, discussions may need to be held between the DAAT, Public Health, NHS Warwickshire and Hospital Trusts to agree any follow up action required.
A10. Amend data recording mechanisms to enable intelligence to be gathered about alcohol related attendances at Accident and Emergency departments.	Hospital Trusts	Data recording mechanisms to be put in place by March 2013. Links into outcome measure to be used to measure the overall success of the plan.

Action	Who – Lead Agency	Timescale and Comments
A11. Undertake an audit of the alcohol-related data currently being collected around the county, and ensure that this is shared between all relevant partners wherever possible.	Public Health	Audit completed by March 2013.
A12. Launch a campaign publicising the services offered by Trading Standards and encouraging complaints about under age alcohol sales.	Trading Standards	<p>Campaign to be launched by December 2012.</p> <p>Consideration to be given to making schools the focus of the campaign, utilising school newsletters and other methods of communication to encourage parents to report any premise they know is selling alcohol to under 18s.</p>
A13. Undertake test purchase operations in on and off-licensed premises, focusing on those receiving high volumes of complaints.	Trading Standards	<p>Ongoing from April 2012.</p> <p>Fixed Penalty Notices issued to all individuals caught selling alcohol to under 18s. Follow up advice offered to premises to prevent repeat offences.</p>
A14. Distribute information and literature about age check 25 and the illegality of proxy sales to priority on and off-licensed premises.	Trading Standards	<p>Ongoing from April 2012.</p> <p>A condition is also placed on all new premise licences, requiring the premise to display information about age check 25.</p>
A15. Utilise existing powers to prosecute and sentence those persistently selling alcohol to under 18s.	Trading Standards	<p>Ongoing from April 2012.</p> <p>Problem premises to be targeted for test purchasing activity.</p>

Action	Who – Lead Agency	Timescale and Comments
* A16. Implement the Alcohol and Drug Diversion Scheme in Warwickshire.	Police – Head of Incident Resolution, Recovery Partnership	Scheme implemented by March 2013. Funding available to implement the scheme must be utilised by March 2013. The Recovery Partnership is fully committed to the scheme, which is already in place in Coventry.
A17. Develop the use of effective Alcohol Treatment Requirements (ATRs), delivered as part of a Community Sentence.	Warwickshire Probation Trust - Assistant Chief Executive (Interventions)	Audit of current arrangements undertaken by December 2012. Any amendments identified as being required with ATR processes made by March 2013.
A18. Explore the potential to provide information about ATRs to Magistrates via brief training sessions.	Recovery Partnership – Criminal Justice Team Leader	Feasibility of providing training sessions explored by December 2012. Sessions provided by March 2013 if feasible.

Theme 2: Health, Treatment and Recovery

Action	Who – Lead Agency	Timescale and Comments
* B1. Provide effective and appropriate alcohol treatment, support and recovery services for both adults and young people.	Recovery Partnership, Compass	Ongoing from April 2012. Extended opening hours being explored to increase the effectiveness of services for people who work during office hours.
B2. Provide effective alcohol treatment services for young people working with the Youth Justice Service, where this is appropriate.	Youth Justice Service	Protocol setting out joint working arrangements between Compass and the Youth Justice Service, including circumstances in which referrals should be made between the services, to be agreed by September 2012.
* B3. Provide support, including a peer mentoring service, for alcohol treatment service users and their carers.	ESH Works	Ongoing from April 2012. Peer mentoring service to be fully established by September 2012. Once this service is up and running, peer mentors can be utilised to increase engagement in alcohol treatment.
B4. Ensure GPs are appropriately supported to deliver the Identification and Brief Advice (IBA) section of the revised NHS Health Check and are aware of appropriate onward referral mechanisms to specialist alcohol treatment.	Public Health - Consultant in Public Health	IBA to be included in NHS Health Check from April 2013. Information to be provided to GPs in Warwickshire ahead of this launch date. Use of GP 'champions' to promote IBA for alcohol to be considered.
B5. Explore the potential to develop a Warwickshire alcohol Local Enhanced Service (LES) with pharmacies.	Public Health - Health Development	Decision made on the feasibility of an alcohol LES with pharmacies by March 2013. LES implemented by December 2013 if feasible. This could link into Healthy Living Pharmacy work currently being developed.

Action	Who – Lead Agency	Timescale and Comments
* B6. Roll out IBA for alcohol to all mainstream services through the 'Making Every Contact Count' (MECC) programme designed to improve unhealthy lifestyles.	Public Health – Consultant in Public Health	MECC programme to be rolled out to all relevant services by summer 2013. Health agencies have targets for the delivery of MECC in their contracts. This now needs to be rolled out to non-health related agencies.
B7. Consider and implement as appropriate the recommendations of the Alcohol Concern review into alcohol hospital liaison services in Warwickshire.	DAAT to co-ordinate and monitor	Agreed priority actions to be implemented by December 2012, with a report back to DAMG in January 2013. Actions B7 and B8 link into Integrated Acute Liaison (IAL) work ongoing to join up hospital and treatment services.
B8. Develop, approve and implement an alcohol pathway between Warwickshire hospitals, Compass and school nurses.	Compass	Pathway approved and implemented by December 2012.
B9. Ensure appropriate links are in place between treatment services and the Integrated Offender Management (IOM) scheme, to enable all offenders with alcohol misuse issues to access appropriate treatment.	Recovery Partnership – Criminal Justice Team Leader, IOM Co-ordinator	Ongoing from April 2012. Drugs and alcohol has been identified as one of seven pathways required to break the cycle of reoffending in the Warwickshire Reducing Reoffending Strategy. Intensive outreach will be required with some offenders to (re)engage them in treatment.

Action	Who – Lead Agency	Timescale and Comments
* B10. Ensure effective referral mechanisms are in place between specialist treatment services for young people and all relevant partners including; schools, colleges, Youth Justice Service (YJS), services for looked after children, Child and Adolescent Mental Health Services (CAMHS), A&E departments and family and parenting services.	Compass	Referral mechanisms in place and promoted to all services by December 2012.
B11. Raise awareness of young people's treatment services in schools, academies, colleges, GPs and pharmacies.	DAAT, Compass	Ongoing from April 2012. All available opportunities (Alcohol Awareness Week, Alcohol and Pharmacy Week etc) utilised to promote services as widely as possible.
* B12. Extensively promote the new adult treatment service to all partners, to ensure practitioners are aware of referral routes for clients requiring specialist support.	DAAT, Recovery Partnership	Ongoing from April 2012. All available opportunities utilised to promote services as widely as possible. Services to be promoted to and through agencies that may not previously have received information including; libraries, Children's Centres, cafes and hostels.
B13. Ensure that appropriate care pathways are in place between treatment services and mental health providers for clients with a dual diagnosis.	Recovery Partnership	Pathways in place by March 2013. A 12 month pilot project Improving Access to Psychological Therapies (IAPT) launched for Prolific and Priority Offenders (PPOs) in July 2012. The outcomes from this may usefully inform future provision for drug and alcohol service users.

Action	Who – Lead Agency	Timescale and Comments
B14. Ensure that appropriate support is made available to families with drug or alcohol problems as identified through the Troubled Families initiative.	Recovery Partnership	<p>Troubled Families initiative in place and support being provided to individuals and families identified through the scheme by March 2013.</p> <p>Links will need to be established between treatment services and providers of the Troubled Families scheme, to ensure referrals are made for specialist treatment where appropriate.</p>
B15. Identify cases where drug and alcohol use is becoming intergenerational across families and liaise with relevant services to ensure that all family members are appropriately supported.	Recovery Partnership	<p>Ongoing from April 2012.</p> <p>Links with ESH Works and floating support provider for alcohol users, as well as wider family support services, will be crucial to ensuring the successful implementation of this action.</p>
B16. Undertake work with siblings of young people who offend, exploring a range of issues including substance misuse with the aim of breaking the cycle of offending.	Youth Justice Service	Ongoing from April 2012.
B17. Work with children and family services to develop and implement a substance misuse and safeguarding joint working protocol.	DAAT	Protocol developed, approved and implemented by December 2012.
B18. Undertake visits to all new prisoners at Onley prison to discuss their role as a parent and identify potential support needs upon release.	Warwickshire County Council, Early Intervention Service	<p>Process for visits in place by September 2012.</p> <p>Number of referrals to specialist treatment services made following prison visits to be recorded by the Early Intervention Service.</p>

Action	Who – Lead Agency	Timescale and Comments
B19. Appoint one Multi-Agency Risk Assessment Conference (MARAC) champion per team, with a role to promote the use of the Domestic Abuse, Stalking and Honour-Based Violence (DASH) risk assessment tool within their team.	Recovery Partnership	Champions to be appointed by March 2013. Champions scheme currently being developed by the Domestic Abuse Manager at Warwickshire County Council, with information to be provided to all services by March 2013.
B20. Provide arrest referral services in Police custody suites at key times (including weekends and Bank Holidays) to ensure individuals requiring alcohol treatment are identified at an early stage within the criminal justice system.	Recovery Partnership – Criminal Justice Team Leader	Ongoing from April 2012. New shift pattern implemented for arrest referral workers, to increase the number of hours Recovery Partnership staff are available in Police custody suites. Referral processes from the Police in place for times when arrest referral workers are not present.
B21. Consider the new alcohol pathway in prisons when this is published and incorporate into service provision as appropriate.	Recovery Partnership	Pathway being developed nationally and will be considered when published. Pilot pathways being established in four prisons from July 2012.
B22. Re-launch the Substance Misuse and Fire Protocol and monitor delivery to ensure effective two-way referral processes are in place.	Recovery Partnership, Fire and Rescue	Protocol to be re-launched by December 2012.
B23. Co-ordinate the work of the Warwickshire Recovery Forum, to address key issues of concern including housing, employment, health and wellbeing and support for family members and carers of those with drug and alcohol problems.	DAAT	Ongoing from April 2012. Forum established in February 2012 as a result of a recommendation arising from the alcohol needs assessment. Potential to expand this group to include wider family support services to be explored.

Action	Who – Lead Agency	Timescale and Comments
B24. Develop housing related support provision that enhances recovery and rehabilitation.	Supporting People	Enhanced housing related support provision developed by April 2013.
B25. Implement the recommendations of the DAAT employability review to improve employment outcomes for drug and alcohol service users.	DAAT to co-ordinate.	Implementation of all recommendations to have commenced by December 2012, with a report back to DAMG in January 2013. Recommendations to be fully implemented by July 2013.
B26. Implement the action plan to address the key findings and recommendations from the Voices 4 Choices research into why people choose not to engage in alcohol treatment.	DAAT to co-ordinate.	Action plan implemented by March 2013. Implementation of plan to be monitored through the Recovery Forum.

Theme 3: Education and Prevention

Action	Who - Lead Agency	Timescale and Comments
<p>* C1. Develop a rolling programme of alcohol awareness campaigns targeting key groups.</p>	<p>DAAT to coordinate</p>	<p>Ongoing from April 2012.</p> <p>Delivery mechanisms appropriate to the target audience for each campaign need to be utilised. Initial campaigns could focus on:</p> <ul style="list-style-type: none"> - Young people (under 18s) - Young adults (18-25) - Pregnant women and those trying to get pregnant - Parents - High risk drinkers - Appropriate migrant communities (information needs to be available in a variety of languages) - Prevention of drink driving (jointly with Road Safety). <p>Learning from any campaigns proven to work elsewhere to be incorporated into the Warwickshire information.</p>
<p>C2. Launch an alcohol awareness campaign and interventions tool kit for midwives and health visitors.</p>	<p>DAAT</p>	<p>Toolkit to be developed by December 2012. Campaign to be launched by March 2013.</p> <p>Potential for a joint campaign with Stop Smoking services to be explored. Links to be made with the Family Nurse Partnership to help deliver the campaign.</p> <p>Number of referrals made to treatment services following the campaign to be monitored.</p>
<p>C3. Utilise all available opportunities to highlight the links between alcohol and domestic abuse, using both local and national resources.</p>	<p>Warwickshire County Council, Domestic Abuse Manager</p>	<p>Ongoing from April 2012, utilising available local and national materials.</p>

Action	Who - Lead Agency	Timescale and Comments
C4. Promote the Change4Life campaign locally.	DAAT	<p>Ongoing from April 2012, utilising available national materials.</p> <p>Messages to be made relevant to Warwickshire where appropriate and promoted via social media and incorporated into local campaigns.</p>
C5. Reflect messages from the national youth marketing programme in the partnership communications tool kit and launch appropriate campaigns promoting these messages.	DAAT	<p>Warwickshire toolkit to be updated if required when the national youth marketing programme is launched.</p> <p>This programme aims to ensure that young people know the risks associated with alcohol and drive reductions in regular smoking, drinking, drug use and risky sexual behaviour during teenage years.</p>
* C6. Explore and promote opportunities for delivering key messages about alcohol to young people during the school timetable.	DAAT to coordinate	<p>Ongoing from April 2012.</p> <p>Potential options for delivering messages within schools could include:</p> <ul style="list-style-type: none"> - Provision of alcohol specific training for teachers to enable them to feel confident in delivering key messages - Via Safer Schools PCSOs - Via Third Sector providers - Commissioning theatre companies to run workshops - Delivery of Enterprise Events, enabling young people to develop their own alcohol-related resources.

Action	Who - Lead Agency	Timescale and Comments
* C7. Circulate information about alcohol to parents and promote this as appropriate throughout the year.	DAAT to coordinate	<p>Ongoing from April 2012.</p> <p>Potential ways of delivering messages to parents could include:</p> <ul style="list-style-type: none"> - Information at parents' evenings - Press and media campaigns - Supermarket stalls - Provision of information via young people in schools. <p>Potential for schools to offer rewards (e.g. discounts for school trips) to parents if they attend relevant alcohol related events to be explored.</p>
C8. Promote information and guidance from the Centre for the Analysis of Youth Transitions (CAYT) to schools as it becomes available.	DAAT	<p>Information to be promoted to schools as it becomes available.</p> <p>The CAYT has been established to provide robust evidence on transitions between childhood and adulthood and inform government policy. Information is available here: http://www.ioe.ac.uk/research/40814.html</p> <p>Available research will need to be considered alongside Warwickshire policies and key messages before decisions are made on how to promote this to schools.</p>
C9. Increase the total number of young people receiving brief advice on substance misuse.	Compass	Number of young people receiving brief advice to increase in 2013/14 compared to 2012/13.

Action	Who - Lead Agency	Timescale and Comments
C10. Work with universities and further education colleges to raise awareness about the risks of excessive alcohol consumption.	DAAT (in partnership with Coventry City Council)	Links made with Warwick University and all colleges by March 2013. Possible methods of engagement include: Freshers' Fairs Engagement with student unions Recruitment of student 'champions' to promote key messages to their peers Online debates.
C11. Provide alcohol awareness training to targeted professionals from a range of partner agencies, including health trainers and those working with young people.	Recovery Partnership, Compass	Ongoing from April 2012. Sessions to be tailored to meet need. Links into MECC agenda.
C12. Update and distribute the 'Guidance for practitioners working with young people using alcohol' toolkit.	DAAT	Guidance to be updated and re-distributed by December 2012. Potential for this to be hosted on the schools e-learning platform to be explored.
C13. Develop an inventory of services and key contacts involved in alcohol harm reduction work for use by all partners.	Public Health to co-ordinate	Comprehensive inventory to be developed as part of the MECC programme and rolled out to partners by summer 2013. Responsibility of providers to keep Public Health updated of any changes to contact details to be established through contracts.
C14. Develop an alcohol resources 'library' for use by practitioners working with both adults and young people.	DAAT	Resources library developed and information circulated to partners on how to access items within it by March 2013.

Actions relating to the implementation plan as a whole

Action	Who – Lead Agency	Timescale and Comments
D1. Regularly report work to reduce alcohol harm to the Health and Well-Being Board, Clinical Commissioning Groups (CCGs), Safer and Stronger Partnership Board (SSPB) and Police and Crime Commissioner (PCC)	DAAT	Ongoing from April 2012.
D2. Respond to Government consultations when published	DAAT to coordinate	Responses developed and submitted to meet deadlines for each consultation.
* D3. Share information as appropriate, within the principles of the Warwickshire Information Sharing Charter, to enable effective services to be delivered.	DAAT to coordinate	Ongoing from April 2012. All partners to ensure that the principle of appropriate information sharing is embedded within their organisation.

Appendix A

The following agencies have committed to working in partnership to deliver the actions within this implementation plan:

- Warwickshire County Council
- NHS Warwickshire
- Warwickshire Police
- Warwickshire Probation Trust
- Warwickshire Youth Justice Service
- North Warwickshire Borough Council
- Nuneaton and Bedworth Borough Council
- Rugby Borough Council
- Stratford District Council
- Warwick District Council
- The Recovery Partnership
- Compass
- ESH Works
- Local Pharmaceutical Committee
- George Eliot Hospital NHS Trust
- University Hospitals Coventry and Warwickshire NHS Trust
- South Warwickshire NHS Foundation Trust.

