

**Alcohol CLear
Action Plan
2019**

These actions are informed by the Alcohol CLearR Peer Assessment Report January 2019

Recommendations

RED = Behind target AMBER = On target GREEN = Completed / Closed

1. Recommendations from Alcohol CLearR					
Task No	Recommendation / Deadline	Actions / Task	Lead officer	R	Update report (to inc. milestones)
				A	
				G	
1	Recommendation An updated action/improvement plan should be produced to support your alcohol strategy	Action / Task Refreshed draft action plan to be the basis of a workshop session at the ADHR Group 21 March 19	Jane Sunter / Rachel Osbaldeston	G	Complete An updated action plan has been populated and agreed by partners and now forms the basis of work within the ADHRG
2	Recommendation Rationalise local planning and commissioning processes at a senior level to ensure resources are identified and efficiently allocated across the partnership	Action / Task Mapping exercise to identifying alignment / gaps / opportunities	Pauline Newby	G	Update Appointment of a Joint Public Health Commissioning Strategic Manager will look and rationalise local commissioning processes and provide opportunities to align, reshape and extend provision.
3	Recommendation Seek to align individual agency and partner priorities at strategic and operational levels	Action / Task Mapping exercise to identifying alignment / gaps / opportunities	RO/JS	G	Update The partnership priorities of the ADHRG have been aligned to individual agencies via the ADHRG action plan. They will be monitored via this plan and governance provided by the SDP.
4	Recommendation Increase engagement and ensure appropriate representation of NHS colleagues at relevant groups and commitment to the development and implementation of the refreshed action plan	Action / Task Link to item 13 and request key strategic leaders on the Health and Wellbeing Board to identify NHS leads / champions to become active and visible in the work to reduce alcohol health harm.	RO	A	Update RO to invite representative from Wellbeing for Life service, CCG, primary care, CQUIN lead to attend the ADHRG group and support their attendance. Contact made with Wellbeing for Life, awaiting response from CCG, PC, CQUIN.
5	Recommendation Jointly manage across the partnership the impact of	Action / Task Identify strategic groups who can evaluate and mitigate the impact of	Jane Sunter	G	Update Work being undertaken already by CMT / SDP / HWB / CDP CCG Exec in Common

	anticipated but enforced changes to resources	anticipated but enforced changes to resources			Joint Officers meeting (DCC / Police / Fire / CCDFT)
6	Recommendation Consider opportunities of an integrated approach to planning, commissioning and operational activity to encourage economies of scale and to make best use of available resource and capacity	Action / Task Develop in conjunction with 1.2	Pauline Newby	G	Update Appointment of a Joint Public Health Commissioning Strategic Manager will look and rationalise local commissioning processes and provide opportunities to align, reshape and extend provision.
7	Recommendation Supporting the delivery of the Preventing Ill-Health CQUIN to encourage health practitioners in secondary care settings to embed the identification of, and provision of brief advice addressing alcohol risk into local practice	Action / Task To develop with identify NHS leads / champions	RO	A	Update RO to meet Sara Bright to support joint working between PH and NHS and ensure work is fed into the ADHRG.
8	Recommendation Review the effectiveness of local pathways between secondary care and the community alcohol treatment system when alcohol dependence is identified	Action / Task Mapping exercise to review local pathways identifying alignment / gaps / opportunities	RO	A	Update Work has commenced to support 2 wards in UHND and West Park with DARS recovery workers to engage patients in treatment. RO to work with service to extend reach (Lanchester Road, A&E, CAMHS) RO to scope and develop formal monitoring and reporting system as part of contract quality assurance.
9	Recommendation Public Health to develop a more meaningful involvement in the local licensing process	Action / Task Develop an agreed Public Health procedure for Alcohol Licence applications, variation and reviews. Submission into the Statement of Licensing Policy PH to attend joint licensing inspections with partners.	Sean Barry	G	Complete PHSMT signed off a formal procedural process for all alcohol licence applications and reviews received by Public Health. Responsible Authorities Group set up, meeting bi-monthly PH now attending joint licensing inspections with partners
10	Recommendation Ensure health consideration is actively embedded into the local Statement of Licensing Policy to	Action / Task PH to provide a submission into the Statement of Licensing Policy consultation.	Sean Barry	G	Complete Submission into the Statement of Licensing Policy provided by DCC Public Health, Durham Constabulary, Balance

	help shape future plans	Gain agreement / influence local Head of Environment, Health & Consumer Protection to have PH content more visible in the Statement of Licensing Policy			
11	Recommendation Develop systems for co-ordinated communications to help ensure consistency in messages linked to alcohol-related harm	Action / Task ADHR Group to map / align communications to ensure consistency in messages linked to alcohol-related harm Identify and agreed key alcohol campaigns partners will support	Sean Barry / ADHR ADHR	G	Update An updated action plan has been populated and agreed by partners and now forms the basis of work within the ADHRG
12	Recommendation Review the recording and uploading of information to the National Drug Treatment Monitoring System NDTMS by any partner who has direct involvement in the delivery of a recordable treatment episode to seek improvements	Action / Task Mapping exercise to review local recording processes identifying alignment / gaps / opportunities	Rachel Osbaldeston	A	Update RO to work with NDTMS to understand criteria of recordable treatment episodes. From this work investigate the possibilities of partners work being captured on the system as well as DARS.
13	Recommendation Engaging clinical champions to promote work to reduce alcohol harm across the NHS, particularly within secondary and primary care settings, supporting this agenda as a health priority. (This approach could be taken forward by key strategic leaders on the Health and Wellbeing Board).	Action / Task Link to item 4 and request key strategic leaders on the Health and Wellbeing Board to identify NHS leads / champions to become active and visible in the work to reduce alcohol health harm.	Jane Sunter / Rachel Osbaldeston	A	Update Link to recommendation 4 and 7.