

21st June 2013

**Alcohol Harm Reduction Strategy
2012 - 15**

Report of Claire Sullivan, Consultant in Public Health, Children and Adults Services, Durham County Council

1. Purpose of the report

The purpose of this report is to provide the Health and Wellbeing Board with an update on the Alcohol Harm Reduction Strategy 2012-15. This report details the strategic aim and objectives within the strategy and the plans for 2013/14.

2. Background

The Safe Durham Partnership launched its first three year Alcohol Harm Reduction Action Plan in July 2009. Since this date, the Alcohol Harm Reduction group and its three thematic sub groups (Prevention, Treatment and Control) have developed, implemented and monitored the action plans.

The overarching vision for the County Durham Alcohol Harm Reduction Strategy is:

“To reduce the harm caused by alcohol to individuals, families and communities in County Durham while ensuring that people are able to enjoy alcohol responsibly.”

Following a stakeholder event in May 2012 and subsequent consultation the Strategy was launched in November 2012, during Alcohol Awareness Week.

3. The Strategy

In order to achieve the vision we have set eight key objectives under three themes:

Prevention

- 1 To use targeted approaches to raise public awareness in County Durham of the harm caused by alcohol by promoting consistent messages about drinking.

- 2 Provide specific targeted training and education to support individuals, professionals, communities and local businesses to address the harm caused by alcohol.
- 3 Engage with children and young people to develop age and gender specific information, activities, services and education to prevent alcohol related harm.

Control

- 4 Increase the gathering, sharing and use of intelligence to reduce the number of alcohol related incidents impacting upon communities.
- 5 Engage with licensees and target licensed premises where necessary to ensure that licensed premises are managed responsibly.
- 6 Ensure a coordinated approach to policy development, planning and adoption of legislation.

Treatment for recovery

- 7 Commission and deliver effective treatment and recovery services in line with national guidance and undertake work to identify the needs of particular groups where the data is limited e.g. pregnant women.
- 8 Involve and support young people, families and carers (including young carers) living with alcohol related issues in order to break the cycle of alcohol misuse.

The Executive Summary of the Strategy is available to view at Appendix 2. Comprehensive action plans underpin the strategy and ensure that the strategic vision is translated into operational delivery.

The Strategy is also aligned to the Joint Health and Wellbeing Strategy 2013-17 which makes specific reference to alcohol.

4. Priorities for 2013/14

Recognising that the strategy is a three year strategy the Alcohol Harm Reduction Group has identified priority group/actions for 2013-14; these include:

- Males age 25-44
- Pregnant Women
- Older people

- Young people in transition
- Dual diagnosis
- Children and families – proxy sales/provision of alcohol and out of sight drinking
- Licensing including Cumulative Impact Assessment, DCC Licensing Policy review, introduction of EMROs/Late Night Levy's

As a result of the identified priorities, the Alcohol Harm Reduction Group has re-structured and is changing the way it delivers on the strategy. The Group has adopted a task and finish approach based on the priorities rather than the prevention, treatment and control themes.

5. Recommendations

The Health and Wellbeing Board are recommended to:

- note the contents of this report
- receive updates on the implementation of the Alcohol Harm Reduction Strategy in the future.

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Background papers: Alcohol Harm Reduction Strategy 2012-15 Executive Summary

Appendix 1: Implications

Finance

An Action Plan has been developed to support the delivery of the Alcohol Harm Reduction Strategy. The alcohol prevention budget allocated by the former Health and Wellbeing Partnership is no longer available to help with the implementation of the strategy. Funding will be required for implementing any social marketing particularly in relation to the 25-44 year old males priority.

Staffing

The Plan will be implemented using existing resources.

Risk

No adverse implications.

Equality and Diversity

An impact assessment has been undertaken on the Alcohol Harm Reduction Strategy 2012-15.

Accommodation

No adverse implications.

Crime and disorder

The Alcohol Harm Reduction Strategy 2012-15 Control objectives outline the priorities for tackling alcohol related crime and disorder in County Durham.

Human rights

No adverse implications.

Consultation

Statutory consultation with the community and stakeholders was been undertaken as part of the plan's refresh.

Procurement

No adverse implications.

Disability Discrimination Act

No direct adverse implications.

Legal Implications

No implications.

The Safe Durham Partnership

Altogether safer

**Alcohol Harm Reduction
Strategy
2012-2015
Executive Summary**

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Vision

Our overall vision for this strategy is:

To reduce the harm caused by alcohol to individuals, families and communities in County Durham while ensuring that people are able to enjoy alcohol responsibly.

Key Objectives

In order to achieve the vision we have set eight key objectives under three themes.

Prevention

1. To use targeted approaches to raise public awareness in County Durham of the harm caused by alcohol by promoting consistent messages about drinking.
2. Provide specific targeted training and education to support individuals, professionals, communities and local businesses to address the harm caused by alcohol.
3. Engage with children and young people to develop age and gender specific information, activities, services and education to prevent alcohol related harm.

Control

4. Increase the gathering, sharing and use of intelligence to reduce the number of alcohol related incidents and alcohol related offending impacting upon communities.
5. Engage with licensees and target licensed premises where necessary to ensure that licensed premises are managed responsibly.
6. Ensure a coordinated approach to policy development, planning and adoption of legislation.

Recovery Treatment

7. Commission and deliver effective treatment and recovery services in line with national guidance and undertake work to identify the needs of particular groups where the data is limited e.g. pregnant women.
8. Involve and support young people, families and carers (including young carers) living with alcohol related issues in order to break the cycle of alcohol misuse.

Alcohol Profile in County Durham

The Cost of Alcohol Harm in County Durham (Source: Balance)

Nationally alcohol misuse is estimated to cost society around £22.1 billion per year. The estimated cost in County Durham is £189.73million with a cost per

head of population at £371. This is broken down to NHS £48.94m, Crime £59.63m, workplace £63.61m and Social Services £17.55m.

Prevalence of Alcohol Harm in County Durham

County Durham has high levels of hazardous, harmful and binge drinking. Hospital admission rates as a result of alcohol has been rising steadily, however the rate of the increase is starting to slow down. Hospital admission rates as a result of alcohol are significantly higher for both males and females compared to the rate for England but are not as high as the regional average. Alcohol misuse is greater among men than women. County Durham also has one of the highest rates of alcohol specific hospital admission for young people under the age of 18 years nationally; the rank for County Durham is 315/326 Local Authorities. The mortality rate, as a result of alcohol in County Durham is not significantly different to England or the North East.

Alcohol related crime has risen slightly from 8.5% in 2010/11 to 9.5% in 2011/12. Alcohol related anti-social behaviour (ASB) reported to Durham Constabulary accounted for approximately 16% of all recorded anti-social behaviour in the last 3 years. The number of ASB incidents is reducing but the percentage of alcohol related ASB is increasing. Recent perception data captured via the Police Confidence Survey shows that 15.4% of residents in County Durham perceive drunk rowdy behaviour as a problem.

Some of the social Impacts of alcohol include poor parenting, family breakdown, domestic abuse and worklessness. Alcohol also continues to have strong links with sexual violence, drink driving and road traffic accidents

Particular priority groups include:

Older people, children and young people, some ethnic groups, veterans, lesbian, gay, bisexual and trans communities (LGBT), homeless, those with dual diagnosis together with substance misuse or mental health problems, pregnant women and offenders.

Examples of Achievements from 2009-12 include:

- 3591 frontline staff trained in alcohol screening and delivery of brief advice.
- a social marketing plan was developed to target specific segments of society. For example a campaign was targeted at females aged 25-44 years concerned with weight and calories in relation to alcohol.
- the development of a Fire Death Protocol resulted in the Community Alcohol Service referring direct to the Fire & Rescue Service
- 88% of GP practices within County Durham participated in the Locally Enhanced Service. Since 2008/9 GP's have screened 26507 patients and delivered 2911 brief interventions.
- a referral pathway for any young people admitted to hospital or attending A&E due to alcohol has been developed with the County Durham and Darlington Foundation Trust.

- the Community Alcohol Service (CAS) has been reviewed to ensure it is working effectively, meeting the needs identified within the Alcohol Health Needs Assessment and able to respond to the national recovery agenda. Since the launch of the last strategy in 2009, 1478 adults have successfully completed treatment.
- Durham Recovery and Wellbeing Centre (DRAW) opened in September 2011. It promotes wellbeing and supports people to stay in recovery; the centre offers a community drop in facility that promotes mutual aid and further development of the new social networks.
- an Alcohol Treatment Scheme was implemented for those subject to Alcohol Treatment Requirement Orders. The aim is to divert people from custody to an alcohol structured programme delivered jointly by Durham Tees Valley Probation Trust and NECA. This scheme received national recognition from the Butler Trust.
- the Alcohol Education team in HMP Durham and HMP Low Newton offers alcohol specific information on risks to health, offending and family issues.
- a Community Alcohol Partnership (CAP) is currently being piloted in the Stanley area. It tackles harm caused by alcohol through joint working between alcohol retailers, local stakeholders, such as trading standards, police, local authority licensing teams, schools and health networks.
- alcohol arrest referral work has been running as a pilot in County Durham for those who have been arrested as a result of alcohol.
- there is a new co-located Alcohol Harm Reduction Unit (comprising of Trading Standards, Durham County Council, Police Licensing and Environmental Health). It will share intelligence to reduce the harms caused by alcohol.
- Best Bar None is a national award scheme aimed at reducing alcohol related crime and disorder in a town centre by building positive relationships across the licensed trade, police and local authorities.
- Drink Driving leaflets have been developed by the partnership and distributed throughout the Christmas period by Traffic Police to individuals found to be below the legal limit but still with alcohol in their system.
- Operation StaySafe has operated across the County by Neighbourhood Policing Teams together with Partners. These operations are used to target young people who may be vulnerable due to taking alcohol / drugs. A young person is taken to a place of safety and their parent/carer is contacted to collect them, they also receive brief intervention advice from 4Real- the Young Persons' Drug and Alcohol Service.
- in December 2011 a campaign was launched across the County to highlight the impact that one drunken punch can have on both the victim and offender. 'Punched Out Cold' was launched in Bishop Auckland in the lead up to Christmas and was expanded to cover the rest of County Durham in early 2012.

Future plans include:

- utilise social marketing techniques to raise awareness about the harms of alcohol and instigate behaviour change amongst priority groups

- support the 3 Towns Area Action Partnership (rural communities) to implement the community action plan to address anti-social behaviour linked to underage drinking funded nationally by Baroness Newlove
- work with Durham's Local Safeguarding Children's Board to deliver work on the relationship between alcohol and sexual exploitation
- implement a social norms approach to change perceptions and behaviour related to alcohol and reduce demand for alcohol amongst children and young people
- work with schools and families to promote awareness of the risks associated with alcohol use by young people
- support Health Networks and the Voluntary and Community Sector to implement local alcohol related activities
- ensure that activities for young people are developed and/or sustained to divert young people from drinking alcohol
- develop plans to address the issue of proxy sales based on local research
- support workplaces to address alcohol use amongst their workforce
- improve the quality of data capture to understand the full impact of alcohol on anti-social behaviour, crime, offending and re-offending, including in accident and emergency settings
- use intelligence led approaches to inform effective multi-agency based problem solving around people, premises and places
- make effective and appropriate use of enforcement powers
- carry out a co-ordinated and targeted approach to the "policing" of the night time economy
- improve the flow of intelligence between treatment services and the Alcohol Harm Reduction Unit
- Commission an alcohol diversion scheme for binge drinkers who are arrested with an eligible alcohol related offence
- continue to develop Best Bar None
- support the Police to implement their action plan on alcohol to improve Durham Constabulary's response to alcohol related crimes and incidents including the development of alcohol champions across the Constabulary and acting as a national pilot for the development of alcohol tactical advisors
- further develop the understanding on the links between alcohol and child sexual exploitation
- ensure that we target premises where irresponsible drinks promotions are taking place
- develop a multi-agency policy and operating procedures for dealing with under 18 events in licensed premises
- manage process required to implement new legislation including Early Morning Restriction Orders, the Late Night Levy and cumulative impact policies
- Work with the Police and Crime Commissioner to ensure that funding is allocated to reduce alcohol related crime and anti-social behaviour
- target service development towards priority groups to improve access to treatment including males within the 25-44 age group

- undertake further work to understand alcohol misuse in particular groups such as older people, gypsies and travellers, homeless, pregnant women, those with dual diagnosis, LGBT and veterans
- improve the quality of data recording in all settings including the recording of attendances for alcohol misuse in accident and emergency departments
- increase the number of adults and young people accessing and successfully completing treatment
- ensure a seamless transfer of the commissioning of alcohol services into Durham County Council and seize opportunities for alignment with drugs services
- listen to the views of users and carers to continually improve the quality of services
- support County Durham and Darlington Foundation Trust to implement the hospital based alcohol action plan
- evaluate projects including alcohol screening and delivery of brief advice in primary care and pharmacy settings and the Durham Recovery and Wellbeing Centre (DRAW)
- work with Clinical Commissioning Groups to raise the profile of alcohol and provide increased support for those individuals who are repeatedly admitted to hospital as a result of alcohol
- Further develop the work on recovery including recruiting, training and supporting peer mentors
- undertake work to understand the transition of young people to adult treatment services

Governance and Performance Management Framework

The performance management framework aligns to the priorities identified by the Safe Durham Partnership. Each of the priorities is supported by a thematic group with responsibility for delivering improvements. The Alcohol Harm Reduction (AHR) group is a sub group of the Safe Durham Partnership. It also reports on a six monthly basis to the Children and Families Trust and progress of the strategy will also be reported to the Health and Wellbeing Board.

The Alcohol Harm Reduction Group considers a quarterly performance report which contains a range of indicators. The Alcohol Harm Reduction Group maintains an action plan appropriate to the issues raised from the performance report. Any key issues are escalated to the Safe Durham Partnership Board. Further information is provided within the alcohol harm reduction performance framework and actions plan which is available separately.