

Cabinet

16 April 2014

Alcohol and Substance Misuse by Young People Review



Report of Lorraine O'Donnell, Assistant Chief Executive

Purpose

1. The purpose of this report is to present the findings, conclusions and recommendations of the Children and Young People's Overview and Scrutiny Committee working group review report on Alcohol and Substance Misuse by Young People attached at appendix 2.

Background

2. At its meeting on 2nd October the Children and Young People's Overview and Scrutiny Committee agreed to undertake a review looking at Alcohol and Substance Misuse by Young People, with a priority focus on alcohol as this is by far the biggest issue in the County.
3. The review followed five key lines of enquiry:
 - Is the problem of underage drinking countywide or concentrated to certain localities?
 - What is the number of related admission into hospital and are these admissions being mirrored in the number of referrals to the 4Real Service? Who makes the referrals to 4Real Service? Why referrals to the service are not being made? What procedures are in place?
 - How are young people getting alcohol? What interventions or measures can the Council use to stop proxy sales/under age sales of alcohol?
 - What is being done in schools to educate young people on the dangers of alcohol and/or substance abuse?
 - Facts indicate that where children and young people are exposed to adults drinking alcohol they will be more likely to start drinking at a young age. What early intervention measures are in place to prevent this from happening?
4. Evidence was gathered over a series of six meetings from officers of the Council from Children and Adult Services, Neighbourhood Services, Durham Constabulary, County Durham and Darlington NHS Foundation Trust and Balance.
5. The review makes five recommendations which can be found towards the end of the attached report in relation to alcohol education, data sharing, increasing

parental awareness, supporting the work of Balance and taking a Think Family approach when addressing alcohol misuse.

Service Response

6. Children and Adult Services welcome the review of alcohol misuse by young people. In particular, we support the Committee's approach of considering both the health implications of overuse of alcohol as well as the crime and anti-social behaviour impacts which tend to dominate public discourse. All future plans should include both of these aspects, rather than focus purely on the public nuisance and crime.
7. The report is relevant for many areas of Children and Adult Services, including Public Health, Community Safety, child protection, support to schools, young people's substance misuse services, early help services, youth services and Think Family.
8. Any successful strategy must tackle both the supply issue and provide education and prevention activity. In particular, effective partnership working is crucial. The service is pleased that the Committee found many examples of effective partnership working, in particular with Police, community safety and neighbourhoods colleagues, schools, the youth offending service and with the voluntary sector. It is clear though, that there is more work to do with health partners, particularly in the acute sector to challenge practice in partnership working for young people admitted to hospital as a result of alcohol misuse.
9. We particularly welcome the involvement of the Area Action Partnerships in local planning and action, and it is clear from the review that this approach has benefitted communities. However, we would encourage AAPs also to include health impacts and to educate and involve parents in future local campaigns, alongside control and community safety campaigns.
10. It is striking that the findings of the committee, supported by numerous research studies, were that a vast majority of young people do not drink and do not drink excessively. This runs counter to the public perception of young people's behaviour, and that perception in turn puts young people under pressure to conform to the perceived social norm. CAS supports current work in schools on social norms and this is proving to be an effective way to provide a balanced view to young people.
11. The role of parents is shown to be critical, both in modelling behaviour with alcohol and in offering access to alcohol. There is clearly a need for parent education and advice on this issue. CAS will consider how best to tackle this.
12. Similarly, school's role is central to the education of young people and the report makes clear that some schools take this matter very seriously and provide effective support and education to their pupils. CAS supports the recommendation of the committee that minimum standards should be agreed for all schools and that Governing Bodies should be actively involved in reviewing their school's policy on alcohol.

13. Having said that the vast majority do not drink and do not drink problematically, it is clear that County Durham has a group of young people who do have a problem with alcohol and who do cause problems for others when they drink.
14. Although alcohol related hospital admissions have reduced, levels in the County are still far too high. That conclusion is drawn on the evidence of one Trust only. It is concerning that two NHS Trusts, likely to deal with many young people from County Durham, have not to date captured data on this subject, which may mean that the problem is even worse.
15. It is also very concerning that the one Trust able to report on hospital admissions of young people so infrequently refer their patients for the help and support of the 4Real Service. This indicates that health services fail to associate problematic, excessive drinking with other vulnerabilities, such as child sexual exploitation, underage and unprotected sex, poor school attendance and achievement as well as crime and disorder. Clear information sharing duties are set out in statutory guidance and legislation for all with a duty to cooperate in the protection of children. These apply to NHS Trusts. Where a child is at risk of harm, or where the wellbeing of a young person is compromised, professionals have a duty to share information to ensure needs can be properly assessed and support provided. Excessive alcohol misuse can indicate a range of other vulnerabilities, both for the child and for his or her family. A referral to 4Real as a minimum would ensure that such assessments would take place. Whilst consent for this onward referral of information would be desirable, there is clear guidance, supported by the Office of the Information Commissioner as well as NHS Caldicott Guardians to support sharing even without consent, in the interest of child protection and welfare.
16. The Local Safeguarding Children's Board has a duty to assure the quality of partnership working to protect children. The report of the Overview and Scrutiny Committee should be considered by the LSCB, so that appropriate discussions can be had with NHS Trusts in order to resolve this issue as a matter of urgency.
17. CAS supports the specific recommendations of the Overview and Scrutiny Committee. Whilst clearly there are areas where national policy is required, such as minimum unit alcohol price, there is work we can do locally.

Recommendation

18. That Cabinet notes the recommendations in the attached report (appendix 2) and formulates a response within the six month period identified in the report for systematic review of recommendations.

Contact: Jenny Haworth
jenny.haworth@durham.gov.uk
Author: Ann Whitton
ann.whitton@durham.gov.uk

Tel: 03000 268071
Tel: 03000 268143

Appendix 1: Implications

Finance - None

Staffing - None

Risk - None

Equality and Diversity / Public Sector Equality Duty – The review report takes into consideration Equality and Diversity; an Equality Impact Assessment has been carried out.

Accommodation - None

Crime and Disorder – The review report received information on the impact of alcohol on young people's offending.

Human Rights – None

Consultation – None

Procurement - None

Disability Issues – None

Legal Implications – None