

Title of Report:	Update on Alcohol Harm Reduction Partnership Activities
Report to be considered by:	Health and Wellbeing Board
Date of Meeting:	30 March 2017

Purpose of Report: To inform the board of current activities and future intentions

Recommended Action: To review and return comment to the Alcohol Harm Reduction Partnership (AHRP)

Reason for decision to be taken: So that the Health and Wellbeing Board can be assured of activity being undertaken against its area of focus for 2017.

Other options considered: n/a

Key background documentation: Reducing barriers to treatment through collaboration and engagement in West Berkshire

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Is this item relevant to equality?	Please tick relevant boxes	Yes	No
<p>Does the policy affect service users, employees or the wider community and:</p> <ul style="list-style-type: none"> • Is it likely to affect people with particular protected characteristics differently? • Is it a major policy, significantly affecting how functions are delivered? • Will the policy have a significant impact on how other organisations operate in terms of equality? • Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics? • Does the policy relate to an area with known inequalities? 		<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	
<p>Outcome (Where one or more 'Yes' boxes are ticked, the item is relevant to equality)</p>			
<p>Relevant to equality - Complete an EIA available at www.westberks.gov.uk/eia</p>			
<p>Not relevant to equality</p>			

Executive Report

1. Introduction

- 1.1 The Health and Wellbeing Board determined that reducing alcohol related harm would be a priority for 2017 within the Health and Wellbeing Strategy. The Board expressed its intention to make measurable progress to reduce alcohol related harm over a 12 month period.
- 1.2 In order to help the Health and Wellbeing Board and other key community stakeholders gain a greater understanding of current services available to reduce alcohol related harm in West Berkshire an Alcohol Hot Focus session was run on October 27th from 09.30am till 12.30pm at the Council Offices in Market Street, Newbury.
- 1.3 The session also sought to demonstrate how it would be possible to achieve the Health and Wellbeing strategic objective of reducing alcohol related harm and what steps would need to be taken.
- 1.4 Attendees were asked to self select to be part of a task and finish group .This group would develop terms of reference and develop an action plan for the next year. The first meeting was set for 15th November 2016.

2. Alcohol Harm Reduction Partnership

- 2.1 The task and finish group became the Alcohol Harm Reduction Partnership (AHRP) as it was felt that the partnership needed to look at future ways of joint working. It has met on three occasions since the Hot Focus event and has agreed its membership and terms of reference. The membership of the AHRP includes a mix of Council services, Health, Police, voluntary sector reps, charities and service providers.
- 2.2 The initial work of the AHRP has been around completing the CLear tool, which aims to bring together all those working to reduce alcohol-related harm in a locality to think through what is working well and to identify the opportunities for further improvement. The outcome of the assessment was that West Berkshire as a locality has average performance and performs below the national average on a number of measures. The outcomes of the self-assessment have informed the AHRP's action plan for 2017 and its medium term objectives.
- 2.3 Two projects have been identified which can be implemented and completed within 12 months, in order to demonstrate measurable progress against reducing alcohol related harm . These are the Blue Light Project and the Identification and Brief Advice (IBA) training project.

3. Blue Light Project

- 3.1 Alcohol specific mortality is not falling and while West Berkshire is below the national average, its performance is rated as amber (warning). There are 46 people in West Berkshire who are long-term alcohol dependent and are highly likely to have been expensive to services.

- 3.2 The Blue Light project is Alcohol Concern's national initiative to develop alternative approaches and care pathways for treatment resistant drinkers who place a burden on public services. It is supported by Public Health England and 23 local authorities across the country.
- 3.3 Drawing on both motivational and harm reduction approaches it provides non-specialist and specialist workers with tools they can use and pathways they can follow which help to manage the risk and directly reduce associated problems such as domestic abuse, fire deaths and health problems.
- 3.4 Swanswell Drug and Alcohol Service have a national record of delivering the Blue Light Project. They have already expressed an interest in delivering the project in West Berkshire, taking a multi agency approach and coordinating via an operational group.
- 3.5 It is proposed that the Council's Public Health service, on behalf of the AHRP, commissions Swanwell to deliver the Blue Light Project in West Berkshire. The Board will be presented with the project plan once it has been developed.

4. Identification and Brief Advice (IBA)

- 4.1 Identification and Brief Advice (IBA) is an alcohol brief intervention which typically involves:
 - (1) **Identification:** using a validated screening tool to identify 'risky' drinking.
 - (2) **Brief Advice:** the delivery of short, structured 'brief advice' aimed at encouraging a risky drinker to reduce their consumption to lower risk levels
- 4.2 IBA can be initiated by front line health and social care roles wherever they have a good opportunity. It is prevention rather than a treatment approach to helping at-risk drinkers make an informed choice about their drinking.
- 4.3 IBA is essentially the delivery of short simple brief advice following Identification (i.e. screening) not usually lasting longer than 5-10 minutes. Extended 'brief intervention' approaches may last around 20 minutes and integrate brief motivational interviewing techniques.
- 4.4 IBA is intended for risky drinkers – those who drink at increasing or higher risk levels but are not alcohol dependent
- 4.5 IBA can be delivered via commissioned training or adopting a train the trainer model. The Council's Public Health service, on behalf of the AHRP, will lead commissioning discussions with IBA to roll out a package of training with selected front line practitioners.

5. Medium and Long Term Objectives

- 5.1 The CLear tool has also lead to the identification of medium and longer term objectives, to be included in the AHRP's strategic action plan:

- (1) Formation of cross sector Alcohol Harm Reduction partnership **(completed)**.
- (2) Completion of Alcohol CleaR assessment tool by all partner agencies. **(completed)**.
- (3) Share the draft Alcohol Strategy shared with the Health and Wellbeing Board for comments and adoption.
- (4) Form a young people's subgroup to update the Young People's Harm Reduction Strategy, considering both direct and indirect harm. Share the draft Strategy with Local Children's Safeguarding Board and HWBB for comments and adoption.
- (5) Ask Health & Wellbeing Board and STP Board to lobby parliament for minimum price per unit.
- (6) Commission delivery of Alcohol Identification and Brief Advise training for both clinical and non-clinical staff. **(To be completed by end of 2017)**
- (7) Explore if West Berkshire can be a member of Community Alcohol Partnership (CAP) in order to apply for funding for alcohol education.
- (8) Ensure AHRP campaigns form part of the H&W Board's Communication strategy.
- (9) Promote sustained recovery through recovery community service in Swanswell.
- (10) Explore the demand for interventions around treatment resistive people.

6. Equalities Impact Assessment Outcomes

- 6.1 Due consideration of the inequalities facing this group will be considered in the planning and implementation of the projects described above, both of which will have clear guidance on managing any equality issues that may arise.

7. Conclusion

- 7.1 If the Board agrees with the proposed projects the AHRP will move forward with commissioning them with a view to completing both within a 12 month period. The Board will receive regular updates regarding the progress of the projects and will provide an evaluation report upon completion.

Appendices

Appendix A - Reducing Alcohol related harm, Reducing barriers to treatment through collaboration and engagement in West Berkshire
 Appendix B – Slides from presentation to AHRP