
Alcohol Harm Reduction Partnership Final Report 2017/18 – Supporting Information

1. Introduction/Background

- 1.1 As part of the development process undertaken by the Health and Wellbeing Board following the LGA Peer Review in March 2016, the Health and Wellbeing Strategy was revised and two priorities were chosen to be taken forward for delivery in 2017/18. The Health and Wellbeing Board identified that one of its priorities for 2017 would be to ‘reduce alcohol related harm for all age groups’.
- 1.2 West Berkshire’s residents generally have good health outcomes relating to alcohol when compared to England averages. However, the number of alcohol-related hospital admissions has been increasing and residents experience inequalities. The Health and Wellbeing Board were of the view that there was still work to be done in partnership in order to foster even better health outcomes.
- 1.3 A ‘Hot Focus’ session on alcohol was held on 27 October 2016 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.
- 1.4 The Hot Focus Session produced the following areas for action and the Alcohol Harm Reduction Partnership (AHRP) was established in order to carry them forward:
 - (1) Looking at successful models of work in other areas and see if they can be implemented in West Berkshire.
 - (2) Map local provision across a range of organisations and community assets to develop awareness of services and community resilience. Use the alcohol Clear Toolkit to provide a structure for the mapping.
 - (3) More involvement of primary care, focus on prevention, early identification of those at risk. The use of night safe to deliver alcohol awareness messages.
 - (4) Change the narrative locally from thinking about alcohol use as either safe or harmful to being on a continuum with each unit as an increased risk.

2. Establishment of the Alcohol Harm Reduction Partnership

- 2.1 The AHRP first met on 15 November 2016 as a multi-agency group including Council Services, Healthwatch, Newbury and District CCG, Thames Valley Police, Swanswell and voluntary sector organisations.
- 2.2 The AHRP reported the following ‘quick wins’ to the Health and Wellbeing Board at its meeting on 25 May 2017:

- (1) There was now a strategic approach to reducing alcohol related harm in West Berkshire through the establishment of a multi-agency Alcohol Harm Reduction Partnership (AHRP).
- (2) Analysis of young people's concerns on cannabis rather than alcohol had led to the establishment of a sub-group to the AHRP to develop and implement a combined drug and alcohol strategy, with support from the Children's Delivery Group.
- (3) Data analysis had demonstrated that West Berkshire was the 3rd best performing local authority area for alcohol-related admissions.
- (4) Secondary prevention and communication have been identified as key areas of improvement following the completion of the Alcohol CLear tool to 'stock take' West Berkshire services. West Berkshire's rating on the CLear tool benefitted significantly from the establishment of a partnership group.
- (5) The Alcohol CLear tool was peer-reviewed and found to be robust.
- (6) Two projects (Identification and Brief Advice and the Blue Light Project) have been identified for implementation in 2017. The Public Health team's budget had been realigned to commission these projects.
- (7) The AHRP had decided to establish West Berkshire as a Community Alcohol Partnership (CAP) area and were looking into a shared Community Alcohol Partnership Officer with Reading Borough Council, funded by Public Health England.

3. Young People's Substance Misuse Strategy Group

- 3.1 The Young People's Substance Misuse Strategy Group was formed as a sub-group of the Alcohol Harm Reduction Partnership and chaired by Denise Sayles, Senior Programme Officer in Public Health, with a specific task to write a new local strategy (Appendix D) based on the most current national strategy documents.
- 3.2 These included the July 2017 National Drug Strategy, NICE guidelines and current research, to ensure an evidence based strategy. A recent review by an external commissioner (Bracknell-Forest) was also considered in the writing of the strategy, which included a consultation of young people.
- 3.3 The group was multi-disciplinary and worked positively together over six months. Members included representatives from schools, Public Health, Children's Services, The Edge, Thames Valley Police and Swanswell.
- 3.4 An action plan is being developed to support the delivery of the strategy.

4. Projects

- 4.1 The commencement and development of projects has been a central focus for the AHRP and the update reports to the Health and Wellbeing Board have mainly centred on the progress of each project. Alcohol Concern has been commissioned to deliver the Blue Light Project and Alcohol Identification and Brief Advice training

and Mike Ward presented to the Health and Wellbeing Board at their Development Session on 29 March 2018.

Blue Light Project

- 4.2 The Blue Light Model has been developed by Alcohol Concern to identify those drinkers outside of a treatment setting who are high impact users on a range of public services. The Blue Light project is a national initiative to develop alternative approaches and care pathways for change resistant drinkers. This approach has demonstrated the ability to be cost effective and has been positively evaluated by Blue Light clients (Alcohol Concern, 2017).
- 4.3 The project was launched on 17 October 2017 to a multi-agency workshop which set out the plan for implementing the project.
- (1) Delivery of Blue Light training:
 - (a) Alcohol Concern delivered a train the trainer training programme for recovery workers from Swanswell to enable them to deliver Blue Light training.
 - (b) Alcohol Concern then co-facilitated Blue Light training with Swanswell Recovery workers to other staff groups from the police, social care, health and other relevant partners.
 - (c) Adopting this methodology ensures the training and project are more sustainable.
 - (2) Establish two multiagency groups:
 - (a) Alcohol Concern chairs the Blue Light Strategic Group and is responsible for ensuring all appropriate documentation is signed off e.g. data sharing protocols. Terms of Reference for the group have been approved by the AHRP. The Blue Light Strategic group will comprise of managers with delegated authority to sign off data sharing protocols and commit resources to the operational group. This group will provide oversight to the Operational Group and will oversee the allocation of the £25,000 enablement fund. The enablement fund is held by West Berkshire Council Public Health and Wellbeing service
 - (b) The Blue Light Operational Group will identify and develop joint care plans for Blue Light clients. They will make representations to the strategic group for allocation of the enabling fund. Alcohol Concern will also chair this group initially until an alternative chair is identified and the group is functional.
- 4.4 Once clients have been identified and supported, Alcohol Concern will calculate the client's cost to public services before and after involvement in the Blue Light approach.
- 4.5 As of the end of 2017/18, seven training sessions have been held in total to implement the Blue Light model.

- 4.6 Next steps are to establish the Operational Group so that members can begin to identify Blue Light clients.
- 4.7 The Health and Wellbeing Board will continue to be informed on project progress through the Health and wellbeing Strategy Delivery Plan.

Alcohol Identification and Brief Advice

- 4.8 NICE Guidance (PH24) recommends the use of a combination of approaches and interventions to reduce alcohol-related harm. One approach is Identification and Brief Advice (IBA) which is a method of early identification of alcohol use disorders among adults and adolescents. IBA involves offering people who are not seeking treatment for alcohol problems a short 'screening' to identify people who may benefit from a brief intervention or in case of dependency referral to specialist treatment.
- 4.9 West Berkshire Council's Public Health Team refocused their substance misuse treatment oriented budget to encompass prevention, following the identification through the CLear tool that West Berkshire needed to strengthen its prevention offer around alcohol. This enabled funding of the Identification and Brief Advice (IBA) training project to a range of partners, an initiative previously confined to GP practices. Large-scale delivery of brief advice and early interventions can help people to become aware of the harm they may be doing to their health.
- 4.10 A Programme Officer was seconded one day per week to support the running of the IBA training project, including writing the service specification. In researching for the service specification, the Programme Officer tested the target figure to train 1000 staff and volunteers to deliver IBA. They concluded that 450 would be a more reasonable figure based on actual numbers of front line staff across partner organisations who could benefit from and effectively use the training. The target was therefore amended to 450, however it should be noted that this is in addition to the 100 GPs that Swanswell are currently commissioned to train in IBA.
- 4.11 Alcohol Concern won the contract to deliver IBA training and six awareness raising campaigns/ events; the contract commenced in November 2017. Alcohol Concern were already delivering the Blue Light Project in West Berkshire so are uniquely placed to ensure there would be a relationship between the two schemes.
- 4.12 The first of the training sessions was held in January 2018 to coincide with Dry January. Further sessions are planned to run through to the end of the contract in March 2019 with bespoke sessions for primary care and older people's services. 70 people will have been trained by 2017/18 year end.
- 4.13 The training sessions have attracted a wide range of attendees from various services within the council and partner organisations including the voluntary sector. The training will be held at locations around the district in order to facilitate a wide attendance.
- 4.14 Feedback has indicated that the training and trainer are of a high quality. The contract end date is March 2019 and the training commenced in January 2018 so the remaining 380 people will be trained over the 2018/19 financial year.
- 4.15 Methods for outcome monitoring are also being explored as the ultimate aim of IBA is to reduce the number of adults in West Berkshire who are at increasing risk of

alcohol related harm, due to their alcohol consumption. Sovereign Housing and the Crime Reduction Company have agreed to complete follow-up IBAs in order to gather evidence to identify whether delivery of IBA does influence a person to reduce their alcohol consumption.

- 4.16 The principle aim of the IBA project is that, by the end of March 2019, 450 people from a range of organisations will have received training on alcohol awareness and IBA techniques.
- 4.17 The Health and Wellbeing Board will continue to be informed on project progress through the Health and Wellbeing Strategy Delivery Plan.

Community Alcohol Partnership

- 4.18 Community Alcohol Partnerships bring together local retailers & licensees, trading standards, police, health services, education providers and other local stakeholders to tackle the problem of underage drinking and associated anti-social behaviour.
- 4.19 The CAP model is unique in that it recognises that retailers and licensees are part of the solution and has been shown to be more effective than traditional enforcement methods alone. Each CAP scheme operates in a clearly delineated and usually compact local community and draws on local partners to develop and implement delivery at grassroots level.
- 4.20 The AHRP decided to establish West Berkshire as a Community Alcohol Partnership (CAP) area and are working with a shared Community Alcohol Partnership Officer with Reading Borough Council, funded by Public Health England. In West Berkshire, the areas identified are; Thatcham, Tilehurst, Calcot and Theale.
- 4.21 Setting up Thatcham CAP has got off to a great start with crucial buy in from Key Partners, to form the CAP working group including Thames Valley Police, Community Engagement , Co-Op Manager, Kennet School, Councillor Dan Carter , Berkshire Youth/ Thatcham Youth, Thatcham Town Council, West Berkshire Youth Offending Team, Waitrose Manager and Trading Standards.
- 4.22 An action plan has been drafted and was agreed at the meeting on 18 April 2018.
- 4.23 The Thatcham CAP Launch has been booked to happen at the Thatcham Fun Day on the 24th June 2018 (no press has been involved with this as yet).
- 4.24 Kennet School are fully supportive of this Partnership. There have been several meetings with the Head and they allow the CAP to use the school for the working group meeting.
- 4.25 Surveys have been completed with retailers of all off licences and on licences, young people and residents. These baseline surveys are crucial to making the Action Plan effective and to allow the CAP to measure the activities undertaken going forward, to ensure they are making the difference.
- 4.26 A strong partnership has been formed and the CAP is looking ahead to tackling the issue of underage drinking and associated anti-social behaviour as a team approach. The action plan and more details will be shared after the launch date.

5. Other Activity

- 5.1 Two meetings of the Hungerford Multi-Professional Lens have been held on the theme of substance misuse. Concerns arose regarding the impact of parental substance misuse (including alcohol misuse) on their children's attendance at school, drink driving around Lambourn, 'cuckooing' (where a vulnerable person's home is taken over) among a number of other issues. The group will be considering how to take things forward.
- 5.2 The Health and Wellbeing Board received a presentation on 'Get Your Coat', a smartphone application to help people on a night out to track their alcohol consumption and get home safely. The Board has endorsed the app which will be launched in the summer. A Beta version is available on the App Store and Google Play Store.
- 5.3 Although not as a result of the partnership, the Family Safeguarding Team in Children and Family Services at the Council has appointed two Drugs/ Alcohol Recovery Workers to support a whole family approach to safeguarding.
- 5.4 Links have also been made with Royal Berkshire Hospital's Accident and Emergency Department and the local GP Council by the Senior Programme Officer in Public Health.

6. Next Steps - Rebranding as Substance Misuse Harm Reduction Partnership

- 6.1 On 25 November 2017, the AHRP proposed to the HWBB that the group could expand their remit to include substance misuse. This was approved and a launch event will be held in Spring/Summer 2018.
- 6.2 The Substance Misuse Harm Reduction Partnership, as it will be named, has been undertaking a review of membership and has set some priorities for 2018/19.
 - (1) The Misuse of Prescription Drugs
 - (2) Adult Cannabis use
 - (3) Alcohol and health and wellbeing
 - (4) Alcohol and older people
 - (5) Dual diagnosis- mental health and substance misuse
- 6.3 The Board is asked to continue to support the Partnership with its new, expanded remit.

7. Conclusion

- 7.1 'Reducing alcohol related harm' has been a priority for the Health and Wellbeing Board in 2017/18. The Board's focus and attention has been useful as it has supported a multi-agency partnership being established and several areas of work have commenced that otherwise might not.

7.2 The Substance Misuse Harm Reduction Partnership will continue to report project outcomes to the Health and Wellbeing Board through the Strategy Delivery Plan and the Chair will continue to link in to the Board's Steering Group.

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