One Corby Policy Committee  
28th September 2010

Northamptonshire Alcohol Harm Reduction Strategy

SYNOPSIS BOX
To seek formal endorsement of the county Alcohol Harm Reduction Strategy and note proposals for the development of a Corby Alcohol Harm Reduction action plan.

1. Relevant Background Details

Following the Audit Commission’s first Area Assessment for Northamptonshire the county received a “red flag” for alcohol harm. As an initial response to this the Public Service Board held a conference in November 2009.

The county-wide, multi-agency, report highlighted the increasing rate of people being admitted to hospital because of alcohol, which more than doubled between 2002 and 2008. It also highlighted that the existing alcohol harm reduction strategy had “not been effective. Local services have not had a concerted effective focus on alcohol harm”.

As such the decision was taken to rewrite the alcohol harm reduction strategy and ensure that all key organisations were aware of, and signed up to, a new strategy. The Chief Executive’s group, on behalf of the Public Service Board, took a lead in overseeing the development of the strategy in partnership with key stakeholders.

A six week stakeholder engagement process was carried out in developing the final strategy during which key organisations and partnerships were invited to comment on the strategy. The Council’s Crime & Disorder Committee (18th March 2010), the Corby Community Safety Partnership (23rd March 2010) and the Local Strategic Partnership (9th July 2010), all received a presentation on the draft Strategy.

In addition, prior to the finalisation of the strategy, NGS Northamptonshire had a visit from the National Support team for Alcohol (18-21 May) to assess what is being done in the county and what support might be needed. Recommendations from the team will be incorporated into the countywide action plan as it is developed further.

2. Report

The strategy is intended to develop Northamptonshire as a leading County Partnership for tackling the causes of alcohol related harm with robust actions, which on the one hand provide information, advice and treatment to those who seek it, and on the other, target those who are acting irresponsibly through inappropriate sale or abuse of alcohol. At the same time the strategy recognises that alcohol can play an important role in the social life of people. The overall vision of this strategy is to make Northamptonshire a place to enjoy alcohol safely and responsibly.

The strategy identifies that alcohol misuse is a substantial problem that impacts across services in the county and which:

- impairs the health and quality of life of our residents
- is associated with crime and anti-social behaviour
- creates pressures on our local health, social care and enforcement systems
- compromises the safety of all road users
- affects our local economy by causing sickness absence from work.

The strategy identifies three strong themes that focus on changing behaviour which underpin what the strategy seeks to achieve and how it will be delivered in the county:

- The promotion of a culture of safe and responsible drinking in Northamptonshire where people do not cause harm to themselves or others through the quantity of alcohol that they are drinking or the manner in which they are drinking it.

- Increasing public awareness and understanding of alcohol, safe drinking limits, and the risks of drinking at higher levels. Providing advice, interventions and treatment to those people who are exhibiting harmful behaviour, illness or criminal behaviour through excess alcohol consumption.

- Developing a robust policy for enforcement of responsible retailing for those who supply alcohol and, where problematic drinking leads to criminal or anti-social behaviour, to ensure that individuals are processed in a way that leads to a change of behaviour.

The strategy proposes that key activity will focus on four strategic priorities:

- Providing education and awareness
- Managing the supply and pricing of alcohol
- Delivering health and treatment services
- Reducing alcohol-related crime and disorder

The Drug and Alcohol Team (DAAT) Chief Officer Group will own the Northamptonshire Alcohol Harm Reduction Strategy reporting into the Chief Executive’s group as required. The Chief Executives group in turn will be accountable to the Public Service Board.

The draft countywide action plan will continue to be developed once the strategy has been endorsed by all partners.

The strategy proposes that, once finalised, Local Strategic Partnerships (LSPs) and Community Safety Partnerships (CSPs) in each of the borough and district areas will lead the development of a local action plan, informed by a local alcohol harm profile, to reflect the specific issues in the local areas. This aligns with one of the key recommendations made by the National Support Team following their visit in May.

3. Options to be considered (if any)

Corby Borough Council is a member of the Public Service Board, which has adopted the countywide Alcohol Harm Reduction Strategy and has recommended it for adoption by all partner organisations.

Given the involvement of the Council in the development of the strategy and its adoption by the Public Service Board, of which Corby Borough Council is a member, not endorsing the strategy as an organisation would be contrary to the position the council has taken to date in acknowledging the issues facing the county in relation to alcohol and in supporting and endorsing the strategy as a county partnership.

It is being recommended that the Strategy be endorsed by the Council.

4. Issues to be taken into account:-

Policy Priorities

Adoption of the Strategy would be consistent with the objectives and priorities in the More in Corby Community Strategy 2008-2013 and the Council’s One Corby Corporate Plan 2008-2013.
Financial
There are no financial implications associated directly with endorsing the Strategy. Development of a local action plan will be accommodated within existing resources.

Legal
There are no legal implications for the Council arising from the report.

Equalities
There are no equality issues specifically arising from the endorsement of the Strategy. The equality impact of any actions developed to deliver the strategy will need to be evaluated.

Community Safety
Detailed within the report and Strategy document.

5. Conclusion
Alcohol harm is a major issue in Corby, both in terms of its impact on health/life expectancy and on crime/anti-social behaviour. In order to maximise the impact of the Council’s activities and meet our corporate objectives there is a need to work with partners in addressing the important health & community safety issues identified. There are clear benefits to the citizens of the Borough and the Council in adopting a countywide approach which will provide additional support, generate greater impact and may attract additional resources to supplement existing One Corby priorities and activities.

6. Recommendation
It is recommended that Corby Borough Council formally endorses the Northamptonshire Alcohol Harm Reduction Strategy and develops a complementary local action plan in response through its Community Safety Partnership.

Background Papers
Northamptonshire Alcohol Harm Reduction Strategy 2010-2015
Northampton BC Report (June 2010)

External Consultations
As detailed within the report.

List of Appendices
Northamptonshire Alcohol Harm Reduction Strategy 2010-2015

Officer to Contact
Chris Mallender, Chief Executive, Ext.4001
NORTHAMPTONSHIRE HAS A DRINK PROBLEM

It is time for us all to face the facts. Northamptonshire has a drink problem.

One in three adults in the county are drinking too much – FACT.

Harmful drinking costs each county household £925 a year for police and health services – FACT.

People going to hospital because of drink has soared 109% - FACT.

Everyone knows that the first step to beating the bottle is admitting you have a problem and here in Northamptonshire we are doing just that.

We all have a role to play in helping rid the county of its problem.

This strategy shows how the Northamptonshire Partnership will get to grips with the problem with far-reaching new projects aimed at slashing harmful drinking in our communities.

And the partnership is challenging the government to match its determination in tackling the problem by introducing a national minimum price for alcohol and freeing up government bodies to work together to spot and treat those with drink problems.

It is time for us to beat the bottle. This strategy shows how we will do it.

We call upon the Government to help us by:

Introducing a national minimum price per unit of alcohol.

Freeing up central government departments, such as Job Centre Plus, to work more collaboratively with local agencies to identify and treat those with alcohol problems.
For 20-24 year olds the percentage change for alcohol related hospital admissions was 144% between 2002/03 to 2007/08.
1.1 Introduction

In Northamptonshire alcohol affects the lives of many of its residents. Its effects can be seen in all aspects of life and we all pay a high price in putting it right.

A partnership approach is essential to ensure an effective response.

Prior to the 2009 Comprehensive Area Assessment (CAA) for Northamptonshire the county had developed and agreed an Alcohol Harm Reduction Strategy. It was recognised within the county that this strategy had not been progressed sufficiently and this was confirmed by the CAA, which highlighted alcohol harm as a key issue for the county. The Audit Commission felt that the strategy had not been fully supported, neither was it delivering effectively, the county received a red flag from the CAA for the harm being caused by alcohol. The key partners in Northamptonshire fully accepted the assessment by the CAA and chose to use this opportunity to develop a new Alcohol Harm Reduction Strategy. It was agreed that this strategy should not be a strategy to make the ‘red flag’ go away but a comprehensive, long term strategy to reduce the impact of harm in the county. The partnership agreed that it should be innovative, challenging, comprehensive and include engaging widely with communities and partner agencies in the county. This document is the new strategy for the Northamptonshire Partnership; it has been agreed by all its constituent organisations, who together will ensure that the strategy leads to effective delivery of our priorities.

This strategy is intended to develop Northamptonshire as a leading County Partnership for tackling the causes of alcohol related harm with robust actions, which on the one hand provide information, advice and treatment to those who seek it, and on the other, target those who are acting irresponsibly through inappropriate sale or abuse of alcohol. At the same time we recognise that alcohol can play an important role in the social life of people. The overall vision of this strategy is to make Northamptonshire a place to enjoy alcohol safely and responsibly.

Based on estimates provided by the Cabinet Office Strategy Unit, alcohol related harm costs every household in England & Wales on average £925 a year (costs relate to health, police, fire service, unemployment and community cohesion). Based on the Office of National Statistics estimates these would equate to approximately £271 million per annum for the households of Northamptonshire.

Alcohol misuse is a substantial problem that impacts across our services, which:

- impairs the health and quality of life of our residents
- is associated with crime and anti-social behaviour
- creates pressures on our local health, social care and enforcement systems
- compromises the safety of all road users
- affects our local economy by causing sickness absence from work.
Alcohol misuse in Northamptonshire is on the increase and is demonstrated by the rapid increase in alcohol related hospital admissions over recent years (109% between 2002/3 and 2008/9); this increase has consistently remained higher than the East Midlands or England Average (EMPHO, 2009). For 20-24 year olds the percentage change for alcohol related hospital admissions was 144% between 2002/03 to 2007/08. At present, it is estimated that approximately one adult in three in Northamptonshire regularly drinks at above the recommended safe levels (Department of Health estimate). In addition around 1,200 people are arrested every year in Northamptonshire for exceeding the prescribed limit and nationally/locally around 11% of all road deaths are excess alcohol related.

While Northamptonshire is a safe place in which to live, by understanding the risks and effects of alcohol we can make it safer. In addition, we can reduce the harm to ourselves by drinking responsibly. This will benefit not only our personal health but also strengthen our relationships and employability. We believe that we all should have the right to enjoy drinking alcohol responsibly, in a way which does not affect our health or the health and wellbeing of others. As part of the culture change people should feel confident to challenge those who are misusing alcohol and not see it as a mitigating factor. To do this we need to minimise the risks we take when drinking alcohol and understand the consequences of abusing the recommended safe limits.

There will be a wide range of activities that will support the achievement of the strategy’s objectives, and it is important that these are both responsive and designed to deal with bespoke and countywide problems. It will be important that each locality examine the extent of its alcohol problems to identify gaps in provision of information and treatment. Community Safety Partnerships (CSPs) and/or Local Strategic Partnerships will produce localised action plans to respond to the specific issues within their geographical area. It is also clear that the strategy will need to be supported by strong partnerships to attract diverse resources to support mutually beneficial outcomes.

For interventions or treatment to be successful, it is important that the individual recognises the need to change their drinking behaviour. In many cases those exhibiting unacceptable drinking behaviours (such as binge drinking) do not understand the risks to themselves or to others, nor do they believe that they have a drinking problem. As public awareness and understanding increases it is essential that we have the ability to provide interventions and, where necessary, treatment without long waiting times.

Nearly all children and young people will experiment with alcohol at some time during their passage to adulthood and we need to provide them with the appropriate advice and guidance. About one in three young people will begin to regularly drink above the recommended levels once they have left school. The Young People’s Specialist Substance Misuse Treatment Needs Assessment 2009 indicates an estimated 22,000 young people aged 11-15 in Northamptonshire have drunk alcohol. It also highlights the likelihood of a young person using alcohol increases with age, from 20% of 11 year olds (1,700 young people in Northamptonshire)
to 81% of 15 year olds (7,000 young people in Northamptonshire)

In addition, young drivers under the age of 25 represent around 10% of all licence holders but account for 30% of all drink drive arrests. It is important that these young people have a full appreciation of the risks so that they do not become problematic or harmful drinkers as young adults.

Alongside the development of increased personal understanding of the risks associated with drinking above the recommended limits we need to support a responsible drinking culture in Northamptonshire by ensuring that those who sell alcohol support the same standard. We will continue to carry out a cooperative programme of retailer education but where suppliers consistently fail to meet these standards we need to ensure that they are vigorously challenged and held to account for their actions. If they fail to comply with legal requirements, we will ensure that appropriate enforcement action is taken.

1.2 Alcohol-related harm: local profile

Two-thirds of Northamptonshire’s population are either low risk (those drinking within the national recommended daily limits) or non-drinkers. This estimate is based on a needs assessment which incorporates local consultation and survey responses with national ones to provide an estimate of drinking levels. This working model accurately predicts the numbers of people requiring treatment.

The Government sponsored North West Public Health Observatory provides seventeen statistical indicators of alcohol related harm broken down by local authority area. The seven borough and district areas display diverse profiles with Corby showing some of the highest rates of alcohol related harm in the East Midlands and South Northamptonshire some of the lowest. There are indications that other areas of the county are approaching the levels of Corby in terms of alcohol related harm. Each area needs to develop robust structures to tackle the issues related to alcohol harm in their locality.

The figures below are based on the 2007 estimated adult population of Northamptonshire. Of the people drinking above the recommended limits 61% are adult males and 39% are adult females.

- **Increasing risk drinkers:**
  Over 84,000 men are drinking over 3-4 units/day; and, 56,000 women over 2-3 units/day (which adds up to women drinking more than 14 units and up to 35 units of alcohol per week and men drinking more than 21 units and up to 50 units of alcohol per week). These drinkers may have avoided significant alcohol related problems so far but they will still benefit from brief advice about their alcohol use.

- **Higher Risk Drinkers:**
  Nearly 22,000 men are drinking over 8 units/day; and, over 14,000 women over 6 units/day (which equates to women drinking over 35 units and men drinking over 50 units of alcohol per week). They will show clear evidence of some alcohol-related harm, which may be physical or mental.

- **Dependent drinkers:**
  These are people who have a definite problem with drinking and in severe cases may be physically dependent. Usually, they are men drinking over 100 units/week; or women over 70 units/
week. In Northamptonshire we estimate about 2,000 men and 1,500 women are dependent drinkers. (Northamptonshire Adult Alcohol Needs Assessment 2009)

Binge drinking is a recognised and concerning problem in Northamptonshire. The latest synthetic estimate (2003-05) of binge drinking (aged 16 years or over) in Northamptonshire is 18% (The Information Centre for Health and Social Care 2009). Binge drinkers exhibit a varied type of drinking behaviour which often results in crime, antisocial behaviour and minor injury. This can have a significant impact on the numbers attending Accident and Emergency Departments at local hospitals. This behaviour can also impact upon family breakdown, domestic violence, and impact on the ability to function effectively at work or in learning environments.

There is growing evidence in Northamptonshire, reflecting other trends across the country, that middle aged drinkers are increasingly drinking above safe limits, indeed the greatest contribution to the increase in alcohol related hospital admissions between 2002/3 and 2008/9 was from individuals who were aged 60-69 (East Midlands Public Health Observatory, 2010), who accounted for 22% of the increase. Therefore there is a need to ensure that awareness raising interventions and appropriate support and treatment are made available to middle aged drinkers as part of this strategy.

The 2009 Northamptonshire Place Survey indicated that across the county 24.1% of the respondents stated that drunk and rowdy behaviour was a problem in their local area a fall of 3.3% on the previous year. However, within the data there are significant local variances with Corby and East Northamptonshire having a much higher perception of this issue as a problem than other localities, and rural areas having considerable lower rates.

The Department of Health’s National Support Team for Alcohol visited Northamptonshire in May 2010 to assess our response to alcohol harm. The report from the visit highlighted the strong partnership buy-in to addressing the problem, and the commitment to putting resources behind this. The report also identified challenges which will need to be addressed, such as ensuring we have the correct structure to deliver improvements, we have robust local arrangements to deal with geographically specific issues and concerns around the rate of increase in alcohol-related hospital admissions. The recommendations from the report have been fed into the action plan that is supporting this strategy.
2.0 LOCAL PRIORITIES IN TACKLING ALCOHOL-RELATED HARM

there is a need for engagement with Local Strategic Partnerships, Community Safety Partnerships and local licensing authorities to develop local plans for local issues
2.1 Identified Gaps

The 2009 CAA for Northamptonshire identified a number of gaps in relation to the provision of services regarding alcohol-related matters as follows:

- “Alcohol consumption causes a high number of health problems and accidents in Northamptonshire. It is also a significant reason for the high levels of violent crime. Public bodies are not coordinating their activities well enough to deal with this.”

- “Local services have not had a concerted effective focus on alcohol harm. Although the Drug and Alcohol Action Team (DAAT) Plan for 2008/09 recognises the close link between drug and alcohol misuse it makes no reference to the Strategy. Despite action plans for children and young people making a link between drugs and alcohol action plans for adults do not say what should be done.”

- “Although local services have projects on alcohol awareness and the consequences of drinking too much, they have not sorted out what else they need to do jointly to reduce all the different problems that drinking alcohol is causing for many local people.”

The November 2009 Northamptonshire Public Service Board Conference identified that we rely on police data to analyse and understand alcohol related violence issues in terms of locality. Alcohol related violence linked to the night time economy is not solely focussed on urban centres and further temporal and geographical analysis is required as people access and exit town centres at varying times of night.

A further outcome from the conference was the recognition of the need to more fully engage with a wide range of young people to better understand the causes of their drinking and what could be done that would change their behaviour. In so doing we will give them a stronger voice around the management of alcohol misuse. We will, in addition, develop a specific route into treatment for people with dual diagnosis of alcohol misuse and mental health problems.

Across the county and agencies there are inconsistent referral pathways into treatment services. All agencies need to ensure that their referral pathways are designed to be the most effective and are clear and well sign posted for both staff and clients.

Currently within Emergency departments there is a need to develop practises that recognise and treat all levels of alcohol abuse. We need to provide appropriate services within Emergency Departments to ensure at-risk patients are identified, correct advice is offered, and follow-up treatment is available if appropriate.

Analysis has shown that in Northamptonshire we have patterns of problematic drinking which vary between the Boroughs and Districts. Problematic drinking can manifest itself in a number of ways such as alcohol related health issues, domestic abuse, challenges related to the night time economy and alcohol fuelled violence and anti social behaviour. In addition some areas suffer with high levels of perception of anti social behaviour.
much of which can be associated with alcohol. In summary, the drinking economy is not consistent within areas and there is a need for engagement with Local Strategic Partnerships, Community Safety Partnerships and local licensing authorities to develop local plans for local issues supported by countywide infrastructure and the countywide statement of licensing policy.

Economic impacts are changing the night time economy, with more people drinking a larger proportion at home. This has the potential for a growth in alcohol related harm to local communities caused by new social networks meeting and drinking outside of licensed establishments.

2.2 Strategic Themes and Priorities

Three strong themes focusing on changing behaviour underpin what we want to achieve in the strategy, and how we will deliver this in the county:

- The promotion of a culture of safe and responsible drinking in Northamptonshire where people do not cause harm to themselves or others through the quantity of alcohol that they are drinking or the manner in which they are drinking it.

- Increasing public awareness and understanding of alcohol, safe drinking limits, and the risks of drinking at higher levels. Providing advice, interventions and treatment to those people who are exhibiting harmful behaviours, illness or criminal behaviour through excessive alcohol consumption.

- Developing a robust policy for enforcement of responsible retailing for those who supply alcohol and where problematic drinking leads to criminal or anti-social behaviour to ensure that individuals are processed in a way that leads to a change in their behaviour.

Sustainability will be ensured through having a community-based focus to all the activities that are undertaken.

Key activity will focus on four strategic priorities:

- Providing education and awareness
- Managing the supply and pricing of alcohol
- Delivering health and treatment services
- Reducing alcohol-related crime and disorder

I. Providing education and awareness

A co-ordinated approach is needed across agencies on alcohol related issues and we need to develop a communications strategy for the county that ensures consistent messages are used to create the maximum impact. This strategy will exploit all media opportunities and tools that currently exist such as drinkaware and MOSAIC to ensure well targeted messages.

A programme of activity is underway in Northamptonshire to address the increase in alcohol related hospital admissions and to reduce alcohol related harms across the county in collaboration with partner organisations. The work will include the development of a social marketing campaign around alcohol in 2010/11 to raise awareness and understanding of alcohol related harms building on the work already developed in
2009/10. The target audiences identified are the 18-25 and 35-50 age groups.

The objectives of this campaign will contribute to stopping the rise and then reducing the number of alcohol related hospital admissions within Northamptonshire in line with the PCT targets. In support of the local economy, alcohol awareness programmes and training will be made available to local employers and organisations with the aim of reducing the amount of alcohol-related sickness absence taken by staff. Alongside this we need to ensure frontline staff from public service providers have the necessary training and information to identify alcohol issues and react accordingly.

In addition work will be undertaken to examine and tackle the links between alcohol misuse and unemployment through establishing partnerships between Job Centre plus and alcohol treatment providers.

We will explore opportunities to change the culture and behaviour of communities through social influence using cultural groups and positive role models. We will involve hard-to-reach communities when developing education and awareness schemes, to ensure that they are accessible to these communities. This is a requirement of the Equalities Act 2010.

There is a need to ensure that all young people receive appropriate, evidence based education about alcohol. It is essential that awareness is raised around safe and sensible alcohol consumption. Personal, Social and Health Education (PSHE) lessons in school are the core of this and we need to regularly test that these are fit for purpose. PSHE accreditation for both teachers and school nurses will be supported. Feedback from young people should shape the delivery of information to ensure all young people understand the risks.

Formal education will be reinforced by the provision of information and advice to parents, carers and others who look after young and vulnerable people about keeping and supplying alcohol in the home. We have to enable parents to carry out their responsibility to educate their children in relation to responsible behaviour around alcohol.

The culture of binge drinking in young people is well documented nationally and we will undertake research to better understand problematic drinking in Northamptonshire, including the reasons behind the behaviour and what might change the behaviour of young people in order to enable us to design appropriate strategies.

II. Managing the supply and pricing of alcohol

Licensing powers, environmental health legislation and planning provisions provide opportunities to promote a safe and sensible drinking culture which supports a safe and vibrant evening and night-time economy across the county. Northamptonshire would support any move towards having a minimum price per unit for alcohol. We will use available mechanisms to influence this, locally, regionally and nationally including revisiting the work recently undertaken by Kettering Borough Council under the Sustainable Communities Act with regards to minimum pricing. In a similar vein, we would support moves to have stricter guidelines around
“product placement” of alcohol on mainstream television.

The supply and pricing of alcohol is undertaken by the licensed trade as part of their business plans and dictated by market forces. There is a need to work closely with the trade in order that they understand and support the concept of having a mixed vibrant night time economy within Northamptonshire and to formulate their plans accordingly. Local areas need to consider this strategy when making planning decisions and ensure an appropriate mix of available evening/night time activities including restaurants, theatre, culture and licensed premises and local licensing committees must recognise this.

Licensing activity is currently governed by the county ‘Statement of Licensing Policy’ which needs to be reviewed to ensure it provides an overarching policy that reflects this strategy but allows for areas to develop their own local policies that reflect local need and issues. In order to assist this process we will undertake a review of the number, location and operating periods of licensed premises across the county.

Organisations must support licensees through forums such as Pubwatch and other trade groups by encouraging good practice with schemes such as Best Bar None and Challenge 21 or 25. At the same time as promoting good practice there needs to be compliance checking and monitoring of activity that will be delivered through structured multi-agency intelligence led visits to licensed premises. Where offences or poor practise is identified there will be robust action to tackle the issues raised either through remedial action or enforcement as appropriate.

In order to ensure enforcement action is best prioritised there is a need to improve data sharing between agencies to assist in identifying licensed premises and other locations that have significant issues associated with alcohol.

III. Delivering health and treatment services

NHS Northamptonshire has approved funding of £1.15m to reduce alcohol-related hospital admissions through treating patients more effectively in the community. This investment, which will cover 30 months from October 2009 – March 2012, is for additional Alcohol Treatment Services. These will increase community based treatment and so reduce existing waiting lists and the risk of relapse.

All treatment will be provided in line with the national quality standard. There will be a need to analyse the data and the impact of the structured treatment services on reducing alcohol related admissions.

A key priority will be the introduction of identification and brief advice for increasing and high risk drinkers in primary care, Emergency Department and criminal justice settings. The range of services will be monitored and evaluated.

We will continue to develop aftercare including a range of wraparound services. Support will also be provided for those recovering from alcohol addiction particularly those discharged from hospitals,
prisons and residential rehabilitation in order to prevent relapse.

Specialist treatment interventions for young people will recognise that they often have multiple needs which require on-going support and co-ordination in their communities. We need to identify and address gaps in support, this will involve consultation with hard-to-reach communities. This will ensure that future services are designed around the needs of diverse communities in Northamptonshire, so that the support effectively tackles alcohol misuse.

If the young person is not involved in Anti Social Behaviour or at risk of offending behaviour then the national Common Assessment Framework (CAF) will provide an assessment tool for young people with identified needs. We will be working towards having a system wherein the CAF identifies difficulties related to alcohol leading to appropriate responses.

Those young people identified as involved in Anti Social Behaviour or at risk of offending behaviour will be referred to the Prevention Through Learning Programme (PTLP) for ONSET assessment. Onset is a Youth Justice Board tool to measure risk of offending in relation to 12 Risk and Protective Factors, including substance misuse/use of alcohol. PTLP will link young people into CAF or safeguarding processes as appropriate.

The Youth Alcohol Action Plan outlines a range of criminal justice interventions designed to stop young people from using alcohol in public places. This provides an opportunity to develop appropriate interventions prior to them entering the criminal justice system as a result of problematic drinking.

Work will be undertaken to monitor the transition from young people’s services to adult services.

IV. Reducing alcohol related crime and disorder

It is a priority to tackle crime and antisocial behaviour linked to alcohol and we will ensure that there are pathways from the criminal justice system to treatment services for both persistent drunken offenders and those who are first experiencing problems due to alcohol.

An ongoing priority will be to manage alcohol misuse effectively within the night-time economy thereby reducing the levels of violent crime and making our town centres safe places for all to visit and enjoy. The 2008/09 British Crime Survey indicated that 47% of victims of violent crime believed the offender was under the influence of alcohol. Under the banner of Operation Nightsafe we will ensure there is a highly visible policing style within our town centres, that incorporates early interventions at key locations and the intelligence led targeting of resources at identified violence hotspots.

We will continue to work with stakeholders to ensure the development of a planned and balanced night-time economy using all relevant legislation. We will encourage and support towns to consider pursuing accreditation for safe environments. An emerging focus will be to look at the implications of home drinking and its relationship to the night-time economy.
The Alcohol Strategy will link into domestic abuse strategies. Alcohol is a contributing factor to domestic abuse. Problem drinkers will be made aware of domestic abuse initiatives and where appropriate alcohol interventions will be part of programmes targeting perpetrators, and possibly victims, of domestic violence. Alcohol as well as being a coping mechanism for victims of domestic abuse can also be a defining factor in a victim not leaving the perpetrator. Improving the approach to partnership working around domestic abuse and alcohol misuse could decrease repeat victimisation and the escalation into categories of high risk for many victims.

There is a significant relationship between alcohol and rape and other sexual offences. Consumption of alcohol prior to an offence can have an impact on the behaviour and perceptions of both offenders and victims. People may be specifically targeted by perpetrators because they are drunk and therefore more vulnerable, and less likely to remember details of the attack and the identity of the attacker, or to be believed. Through creating a safer environment and encouraging people to drink more responsibly we can reduce the risk of people becoming victims of such crimes.

Working with PTLP, Safer Community Teams and Anti-Social Behaviour Units, Alcohol Outreach workers will target children and young people demonstrating emerging alcohol issues and work with them to change their behaviour. This work will look for opportunities to engage with young people who are experimenting with alcohol in public places. These groups will seek to utilise the range of anti-social behaviour legislation and powers available where necessary.

We will be trialling Community Alcohol Partnerships in Daventry and Brackley in partnership with the Community Safety Partnerships. Working with the Retail of Alcohol Standards group (RASG) these are multi-agency initiatives that combine enforcement, education and community involvement to reduce under-age drinking and offending and can be adapted to fit local needs.
3.0 IMPLEMENTATION OF THE STRATEGY

The Strategy will be reviewed annually by the DAAT Chief Officer Group, taking into account national, regional and local policy and other developments.
The Alcohol Strategy will be a key contributor to achieving Northamptonshire’s aspiration to be the ‘Fittest County in the Country’. This will include all partner organisations making commitments to addressing alcohol through the proposed ‘declaration of Health and well Being’ for Northamptonshire.

3.1 Outcomes

Delivery of the strategy will ensure we achieve the following outcomes (Table 1):

Table 1. A number of high level outcomes have been identified from the strategy and these are cross cutting in relation to the strategic priorities as demonstrated in the table below.

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<th>Outcomes</th>
<th>Providing education and awareness</th>
<th>Reducing alcohol related crime and disorder</th>
<th>Managing the supply and pricing of alcohol</th>
<th>Delivering health and treatment services</th>
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<td>Increased awareness of alcohol effects and consequences among target groups</td>
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<td>Everyone has access to appropriate information</td>
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<td>Reduced accessibility to cheap alcohol</td>
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<td>A safe and vibrant night-time economy</td>
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<td>Reduction in alcohol related violence and anti social behaviour</td>
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<td>Consistent licensing practice &amp; review</td>
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<td>Earlier identification of individuals with alcohol misuse behaviours</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
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<tr>
<td>Reduced perception of ASB (Single Confidence measure)</td>
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<tr>
<td>Reduce the risk and impact of Alcohol related fire injuries and fatalities</td>
<td></td>
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<td>✓</td>
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<tr>
<td>Improving understanding of young peoples attitudes towards alcohol</td>
<td></td>
<td></td>
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<td>✓</td>
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<tr>
<td>Reduction in the number of road casualties</td>
<td></td>
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</table>
3.2 Strategic delivery framework

The DAAT Chief Officer Group will own the Northamptonshire Alcohol Harm Reduction Strategy reporting into the Chief Executives group as required. The Chief Executives group in turn will be accountable to the Public Service Board.

The strategy will be delivered by the Alcohol Co-ordination Group, either through direct action or through its sub-groups, the DAAT or individual agencies. The Alcohol Co-ordination Group will focus the direction of the strategy and will work with the Local Strategic Partnerships (LSPs) and Community Safety Partnerships (CSPs) in each area to implement and deliver supporting activities identified through local profiles.

The chair of the Alcohol Co-ordination Group will be a member of the DAAT Chief Officer Group.

A broad and co-ordinated approach of all those involved with alcohol and related services at both County and local level, including voluntary and community organisations, will considerably increase the effectiveness of the strategy so that there is:

- A shared understanding of the issues and of the outcomes that need to be achieved
- Information sharing to ensure that the appropriate activities can be designed and delivered
- Cooperation and coordination between statutory, voluntary and community organisations as well as the licensed trade
- A consistent approach to reducing the harm caused by alcohol
- Consistent messages to the public and to those seeking help

- Arrangements to ensure that work on alcohol is integrated into the plans of The Local Area Agreement, Local Strategic Partnerships and Crime Reduction Partnerships as well as the strategic plans of partner organisations.


The Children’s Trust will provide the means through which issues around alcohol relating to children and young people can be fully integrated into those of the wider community. The Children’s Trust Board will be engaged in the planning to inform and influence the strategy as it relates to children, young people and families, and to identify and champion children and young people’s interests as part of the process of agreeing and implementing targets. We will work with the Children’s Trust to ensure that the Alcohol Harm Reduction Strategy and its action plans are consistent with the Children and Young People’s Plan and help drive its delivery.

3.3 Monitoring, evaluation and review

The DAAT Chief Officers Group will monitor the action plan with quarterly performance reports. The quarterly reports will be forwarded from the DAAT COG to the Chief Executives Group with supporting comments.

An annual report on the effectiveness of the strategy and delivery plan will be presented to the Chief Executives group.

The Strategy will be reviewed annually by the DAAT Chief Officer Group, taking into account national, regional and local policy and other developments.

Contact details

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