

Improvement Priority – Improve lives by reducing the harm caused by substance misuse (Alcohol)

Overall Progress



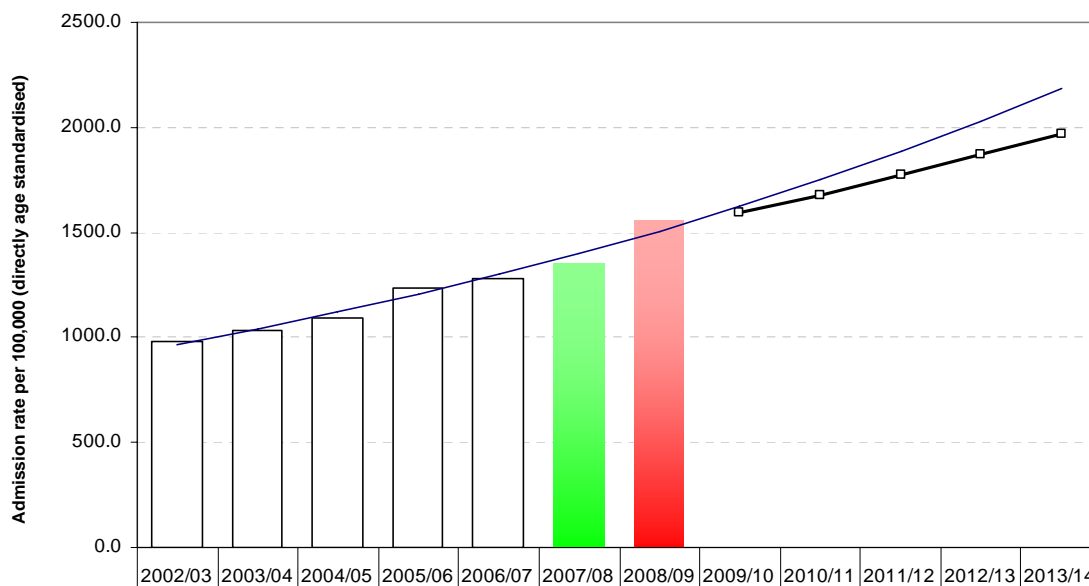
Lead Officer – Brenda Fullard

Why is this a priority

Alcohol is a legal drug but it is also the most widely misused drug in the country. Alcohol misuse can lead to violent and other crime. The British Crime Survey estimates that 40% of all violent crime is alcohol related. Long-term use of alcohol in excessive quantities is capable of damaging nearly every organ and system in the body. The developing adolescent brain is particularly vulnerable to the toxic effects of alcohol.

Alcohol Related Hospital Admissions - Regional Comparison

Alcohol Related Hospital admissions in Leeds - Target vs Actual



Leeds Actual	982.9	1035.5	1090.9	1234.8	1277.3	1356.2	1560.6					
Trajectory (WCC Year 2 b)								1591.7	1679.7	1771.9	1868.2	1968.9
re-forecast (2002/03 to 2008/09 data)	964.4	1039.0	1119.3	1205.8	1299.0	1399.5	1507.6	1624.2	1749.7	1885.0	2030.7	2187.6

Overall progress to date and outcomes achieved 1 October 2009 to 31 March 2010

Overall Summary

Alcohol harm is a significant issue for Leeds both environmentally and socially. The Joint Strategic Needs Assessment identified alcohol related hospital admissions as increasing and is set to continue to increase. In response the partnership is reviewing the Alcohol Strategy and will revise the Action Plan to ensure the most appropriate interventions are being used. Demand for alcohol support services has also increased significantly and the PCT is seeking additional resources to better meet this need.

Achievements

A research study on the Alcohol Screening and Brief interventions in Primary care in Leeds was completed and an action plan has been developed based on the recommendations in this report.

A study of University and sixth form students was commissioned from the University of Leeds. The study revealed patterns of drinking behaviour, how alcohol is accessed, young people's perception of others' drinking and the effectiveness of the national web based intervention aimed at young people – Unit Check. The results of the survey were reported in the local press and are being used in taking forward alcohol harm reduction in young people.

Radio Aire was commissioned to promote and manage an online Alcohol Research campaign. A series of adverts were played on Radio Aire and Magic FM for one month. People were encouraged to take an online test at www.radioaire.com/drink that will help them work out whether their drinking habits were potentially dangerous or within recommended limits. Over 1,500 completed the survey and the data was analysed by locality and provided additional insight into social marketing intelligence.

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NHS Leeds Board agreed in February 2010 to support the Core Cities campaign to advocate for a minimum price of 50 pence per unit of alcohol.

A social marketing focused review of local data and ‘soft’ intelligence has been completed. This built on the new national alcohol and social marketing campaign strategy and segmentation tool for the NHS. A report was presented in March 2010 to partners and this will provide the foundation of new forward plan for Leeds.

Leeds has been awarded a substantial grant from the European Union to provide a city-wide alcohol arrest referral programme for the next three years. This programme will initially be based at the Leeds Bridewell police station and there will be planned rolled out at all custody suites over the next 36 months. The initiative will focus on all persons arrested in Leeds by West Yorkshire Police for offences of violence and/or disorder where alcohol is deemed to be the causal factor.

A fixed penalty notice scheme commenced which reduces the “fine” following attendance at 2 alcohol treatment sessions.

Additional commissioning investment has been made by Leeds City Council to alcohol treatment services.

During 2009-10 the Addiction Dependency Service and the Primary Care Brief Intervention Service were reviewed and changes made to delivery systems to ensure those most in need get the quickest access to alcohol treatment.

Eighty Six percent of patients completed their alcohol detoxification and were discharged from alcohol treatment in a planned way across a range of community and residential services. This compares to 51% nationally and 52% in Yorkshire and the Humber.

The Leeds Addiction Unit (LAU) has had 1028 primary alcohol users in treatment in the first 3 quarters of 2009/10. The LAU is commissioned to provide alcohol treatment for highly complex patients. The 60.8% care planned discharge rate (significantly higher than the national average) is particularly impressive with this difficult to treat client group.

In total 2000 dependent drinkers have had at least one contact with dependent drinking treatment services in 2009/10

Leeds Partnership Foundation Trust has been commissioned to provide an alcohol hospital liaison scheme. Two nurses have identified patients with alcohol related conditions who are admitted to hospital with the aim of moving them into community treatment. Three additional alcohol treatment nurses have now been recruited.

Challenges/Risks

- The number of dependent drinkers in treatment in Leeds rose by nearly 100% between 2006/7 and 2008/9 .
- Department of Health recommends that there should be treatment places available for 15% of the dependent drinking population - Leeds currently has about 8% of dependent drinkers in treatment.
- Action to increase identification and skilled brief advice in primary care has not yet commenced.
- The St Anne’s residential alcohol detoxification service has now reached 100% bed occupancy rates and waiting times remain high

<u>Approved by Accountable Officer</u>	Jim Willson Brenda Fullard	<u>Date</u>	28/4/10 22/4/10
<u>Approved by Accountable Director</u>	Neil Evans		
<u>Approved by Accountable Director</u>	Ian Cameron		

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Action	Lead Officer	Milestone	Timescale
An Alcohol Management Board has been formed with senior level representation from key partners to review progress on the 2008-2010 Leeds Alcohol Strategy, agree a revised action plan for 2010 – 2013, focusing on joint commissioning of alcohol treatment services; Social marketing and primary care IBA to change public attitudes and behaviour; Reducing alcohol related violent crime and disorder. They will steer the following activity.	Jim Willson, Brenda Fullard, John England	Leeds Alcohol Harm Reduction Strategy, agree a revised action plan for 2010 – 2013	October 2010
Develop and take forward a social marketing plan to build on the national campaign resources and the recommendations from the social marketing review carried out in 2009-10.	Jim Willson, Brenda Fullard, John England	Plan commenced	October 2010
Preparations for the re-tendering the residential alcohol detoxification and rehabilitation service to be completed in 2011/12.	Luke Turnbull		March 2011
Increase the number of people admitted to hospital with alcohol related hospital admissions who are identified and offered treatment through the newly increased staffing of the hospital alcohol treatment nurse scheme	Luke Turnbull	Increase in referrals and treatment identified	March 2011
Increase in capacity of treatment places for dependent drinkers from current 8.4% to 9.6% (Subject to investment approval)	Luke Turnbull	Additional treatment places commissioned	March 2011
Complete an Alcohol Health Needs Assessment to inform the forward plan	Brenda Fullard	Alcohol Health Needs Assessment completed	End of April 2010
Increase the profile and rationale for investment in alcohol harm reduction using the findings of a study that has been commissioned to report on the financial impact, including the costs and benefits of alcohol to Leeds.	Brenda Fullard/Jim Willson	Report findings disseminated to key stakeholders and senior level endorsement of the revised Leeds Alcohol harm reduction strategy	September 2010

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Reference	Title	Service	Frequency & Measure	Rise or Fall	Baseline	Last Year Result	Target	Predicted Full Year Result	Data Quality
NI39 VSC 26 WCC 6	Reduce the rate of increase of alcohol related hospital admissions		Quarterly – rate of alcohol related hospital admissions per 100,000 population	Rise	1,277	1,561	1,433	Not available	No Concerns with data