

**Intelligent Commissioning Pilots:  
Notes of OSC Workshop on Alcohol-Related Harm**

Monday 21 March Hove Town Hall CR1 3.30pm

Councillors Present: Gill Mitchell, Denise Cobb, Garry Peltzer Dunn, Anne Meadows, Warren Morgan, and Vicky Wakefield-Jarrett

Apologies: Emma Daniel (CVSF rep)

**INTRODUCTION**

1. The Chairman Councillor Gill Mitchell introduced the Workshop on the Intelligent Commissioning Pilots. This third of three dealt with Alcohol-related Harm, arranged as agreed following the first workshop for OSC on 7 December. This was an opportunity for Scrutiny input into each of the pilots' commissioning recommendations and additionally, into the overall Commissioning Framework to be used by other service areas.
2. The Commissioner, Community Safety, reminded Members that the steering group for this pilot had been chaired by the former PCT and comprised senior officer representatives of a wide range of relevant local services.
3. She said it was clear that the increased availability of alcohol and a rise in the number of licences was indeed having an effect that was 'not benign.' This applied especially to off-sales (alcohol sold for consumption off the premises) and where alcohol was sold very cheaply.
4. The Commissioner, Community Safety gave a presentation including a narrative that had been circulated earlier to OSC Members. She also handed around an updated draft alcohol action plan, 21 March.
5. Brighton & Hove has almost double the regional rate of alcohol-related crime. The financial cost to the City of more than £100million was based on local information, not an extrapolation of national data. The analysis would be sent around to Councillors.
6. The Commissioner detailed the high-risk groups identified from the needs analysis and some illustrative examples. Working with families was key.
7. She summarised some existing services and interventions such as the substance misuse service, Safe Spaces, Street Pastors, Operation Park, The City Centre Cumulative Impact Area introduced in 2008, test purchases and Beacon award for handling the night-time economy. Nationally, Brighton had the first City-wide Designated Public Places Order.

8. Many more 'Consequences' could have been included in the presentation slides.
9. The Director of Public Health has called for more urgent attention to tackle alcohol problems (2009) and the City faced difficult choices in doing this.
10. Members were concerned at the reported 75% of A&E attendances on Friday and Saturday nights being related to alcohol or substance misuse. Members were incredulous that as many as 57% of adults in the City are estimated to binge drink or be hazardous or harmful drinkers.
11. The workshop heard the wide range of organisations that are represented on the Alcohol Programme Board and asked how actions were proposed and agreed.
12. In view of the extent of alcohol-related issues for the City, it was suggested that there should be Member involvement in the APB.
13. Answering questions the Commissioner said in the peak tourist season, 30% of alcohol-related attendances at A&E were by people not resident in the City. A relatively new recording system was being used by both clinical and administrative A&E staff.
14. Members discussed the key objectives:

**1. Addressing the Drinking Culture**

- a) The workshop considered what could be underlying reasons for people being drunk, binge-drinking or 'front-loading' and suggested high pressure lifestyles; less open spaces; anxiety, depression, bullying (though there was no direct evidence of the latter.) Young executives might have a 'work hard/play hard' attitude, seeing alcohol as a way of relaxing. An improved work-life balance or 4-day week might be beneficial.
- b) The Commissioner pointed out a link with domestic violence and sexual abuse.
- c) The top TV programmes were based around alcohol. Drinking was perceived to be 'the norm,' now arguably replacing smoking.
- d) Focussing on children and younger people, Members asked for more data and detail to understand any identified distinctions in the alcohol-related behaviours between girls and boys in terms of harmful use, and the levels of self-reporting.
- e) The workshop questioned where 16-17 year-olds were being referred from. This was largely through Operation Park and also via schools. The Commissioner would provide information on young people referrals.

- f) Operation Park was commissioned from Crime Reduction Initiatives and funded by the PCT and seen as a crucial early intervention. A young person (or adult) can be reported; the effects of alcohol and the services available can be explained to him/her or where necessary the individual can be referred early to clinical interventions.
- g) Public health evidence shows people are not generally aware that they drink over safe limits. Promoting the message 'take water with alcohol' can make a difference.
- h) Some high risk families need particular understanding and persuasion.
- i) Members were very keen to support education initiatives to help stop harmful alcohol behaviour patterns at young age; including for example helping reduce the numbers drinking at home.
- j) As alcohol-related admissions to A&E and crime and disorder rise in October, the workshop questioned whether changes were needed as to how the City's Universities and colleges introduce fresher students to licensed venues, for example in 'led' parties.

**2. Availability of Alcohol**

- a) The Commissioner told the workshop there was close working with the licensed trade.
- b) Members remarked that local convenience stores or other local shops, may well sell alcohol only to remain economically viable or to compete with larger store to survive. The pricing of alcohol also had an impact. It was generally felt that despite test purchases, people aged 18+ were still buying alcohol for the young and there was a trend towards stronger spirits which could be a 'time bomb' in health terms.
- c) It was noted that reduction in harm from smoking had been achieved by increased taxation on tobacco and similar action for alcohol at a government level should be recommended.
- d) The workshop asked about the potential for a legislative change such that a licence-holder could sell beer and wine but not spirits.

**3. Night Time Economy**

- a) Suggestions for alternatives especially for young people included: promoting healthier lifestyles; free/ low cost alternative activities; cheaper membership of gyms; low cost access to arts/creative venues; other ways to increase social interaction; meeting places such as coffee bar or cafes' opening in the early evenings; music licences for cafes; lower-cost soft drinks; encouraging 'white nights-type events;' and potential lessons to be learned about young people and alcohol from other cultures

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- b) The workshop called for action at a national level on serving wine; arguing that beer and spirits were served in measures whereas a glass of wine could be 125ml, 250ml or even 375ml.

**4. Early Identification, Treatment and Care**

- a) Members noted that 'A skilled workforce' appears in all the pilots. This is to identify, risk-assess and provide a holistic response commensurate with the level of local demand.

**COMMENT FROM CVSF**

Representative of CVSF, Emma Daniel gave comments in writing. She welcomed the emphasis on moving investment to prevention.

She commented that the engagement for alcohol pilot was poor during the needs assessment phase and, given the impact on so many budgets, felt that the scope of the pilot might have been too wide.

**NEXT STEPS**

Notes of the IC pilots would be reported to 5 April OSC.

Domestic Violence Intelligent Commissioning Outcomes and Priorities were being reported to 7 April 2011 Cabinet. Alcohol-Related Harm and Drug-related deaths would be considered at future Cabinet meetings