

<b>Item No.</b>	<b>Classification:</b> Open	<b>Date:</b> 23 March 2010	<b>Meeting Name:</b> Executive
<b>Report title:</b>		Southwark's Alcohol Strategy 2009-2012	
<b>Ward(s) or groups affected:</b>		All wards	
<b>From:</b>		Strategic Director of Environment and Housing	

## RECOMMENDATION

1. That the Executive considers the priorities and recommendations set out in the proposed Safer Southwark Partnership Alcohol Strategy 2010/12 (See Appendix 1).
2. The draft Alcohol Strategy proposes key priority areas as follows:
  - Children and Young People (CYP): Recommendations include: Young people having access to a specialist substance misuse service and raising the profile of substance misuse treatment, training and education.
  - Health and Social Care Recommendations include: Ensuring that Southwark's "Health and Inequalities Strategy 2009-20" and the Safer "Southwark Partnership Alcohol Strategy 2010-12" have a joined up approach to identify where alcohol has a significant impact on the health priorities for Southwark.
  - Crime and Community Safety: Recommendations include: Improving the information on the extent to which alcohol is a cause of crime and anti social behaviour and using the full range of new and existing powers to address alcohol related crime and anti social behaviour while ensuring that particular groups are not targeted inappropriately.

## BACKGROUND

### National Background

3. Most people in the UK who drink alcohol do so in moderation, without causing harm to themselves or others. However, we know that, when consumed in excess, alcohol can have a significant affect on individuals, families and the wider community. Alcohol misuse places a huge burden on health and social care services and the criminal justice system.
4. Over the last decade the affects of alcohol use on health, quality of life, social issues and crime have been well researched and documented. National statistics tell us that:
  - In 2006/07 it was estimated that the cost of alcohol related harm to the National Health Service in England was £2.6 billion
  - In 2007 6,541 deaths in England were directly related to alcohol consumption

- In 2007/08 there were 863,300 alcohol related hospital admissions an increase of 69% since 2002/03.
5. In June 2007 the Government published the next steps in the National Alcohol Strategy: '*Safe. Sensible. Social.*' This document reviewed progress since the publication of the Alcohol Harm Reduction Strategy for England (2004) and outlined further national and local actions to achieve long-term reductions in alcohol-related ill health and crime. For the first time the strategy makes it a priority to protect young people from alcohol related harm.
  6. The strategy also highlights the needs of eighteen-twenty four year old binge drinkers and young people under eighteen who drink alcohol and cause or experience harm to themselves their communities and their families. The strategy states clearly that it is essential that cultural attitudes towards binge drinking change and it identifies a number of ways to tackle the effects of alcohol-related crime.

### **Local Background**

7. Recorded figures tell us that alcohol is having an impact on the health and well being of residents, young and old, families and communities in Southwark and this reflects the national trend of rising rates of alcohol-related hospital admissions. Southwark has the seventh highest rate of alcohol-related ambulance callouts in the UK. Also alcohol is linked to high levels of domestic violence and other violent crime in the borough as well as to anti-social behaviour including street drinking.
8. An alcohol "Harm Reduction Framework for Southwark" was written in 2006 to identify key priorities and the work strands for this new strategy.
9. The attached strategy was presented to the Safer Southwark Partnership, Southwark Alliance and Healthy Southwark during 2009 where feedback was received and incorporated into the development of the strategy.

### **KEY ISSUES FOR CONSIDERATION**

10. There is a statutory duty on Crime and Disorder Reduction Partnerships to have a strategy that addresses alcohol-related crime and disorder. Government guidance in line with the national alcohol strategy '*Safe. Sensible. Social.*', calls for strategies that go beyond a crime focus and also address health harms and the impact of alcohol on children and families.
11. The Safer Southwark Partnership Alcohol Strategy 2010/12 identified three priority areas:
  - Children and Young People
  - Health and Social Care
  - Crime and disorder.
12. A delivery action plan (Appendix 3) has been produced as part of the strategy. The action plan sets out the key areas of improvement for each of the above priorities with a specific focus on:
  - Data / information gathering

- Prevention /education
- Treatment
- Enforcement.

13. The action plan covers the following:

- Ensuring the use of the full range of new and existing legal powers while ensuring that particular groups are not targeted inappropriately
- Improving the collection of a wider range of data and intelligence on alcohol related crime and anti social behaviour in Southwark
- Raising awareness of the links between alcohol misuse and sexual offences
- Commissioning a new Young people's specialist substance misuse service
- Ensuring that the annual substance misuse needs assessment includes information relating to alcohol misuse
- Raising the profile of substance misuse treatment, training and education
  - a. Increasing user involvement in the planning and review or provision, including young people, carers and parents
  - b. Establishing a Health and Social Care working group that will look at expenditure and prevalence relating to alcohol misuse.

Initial consultation and research indicates that needs assessment data relating to alcohol misuse is currently very limited. However national research shows specific issues faced by particular equality groups when it comes to alcohol misuse.

14. Strengthening the collection of alcohol related information to identify areas of greatest inequality will be critical to the successful delivery of the Safer Southwark Partnership Alcohol Strategy.
15. The Safer Southwark Partnership has set up an alcohol strategy implementation group to performance manage delivery of the action plan and the recommendations from the Equality Impact Assessment.

### **Policy Implications**

16. The strategy is driven by government policy and legislation.
17. The strategy has been prepared under the Police and Justice Act 2006. This statutory framework required the responsible authorities in local areas to have formulated a strategy to tackle crime, disorder and Anti Social Behaviour (ASB), as well as a strategy to tackle substance misuse including alcohol by 2008. This is one of the key commitments of the programme of local partnership work outlined in the National Alcohol Strategy (Safe Sensible Social).
18. Alcohol misuse has an extensive impact across society. Consequently Southwark's alcohol strategy seeks to address all the equality, diversity and social cohesion areas impacted by alcohol and its misuse.

## **Community Impact Statement**

19. A full equalities impact assessment has been conducted as part of this strategy . The key findings from the equalities impact assessment are:
  - Specific financial support is not as clearly available for alcohol treatment services unlike substance misuse.
  - Data relating to the harm caused by alcohol is fairly poor across the borough but national research shows different specific attitudes across different cultures towards alcohol misuse.
  - The population of Southwark is growing by as much as 4,000 per year with a younger age structure and a diverse multi ethnic population.
20. The Equality Impact Assessment will be published along with the strategy once it has been approved
21. Within the strategy we will consider targeted and innovative partnership approaches required to respond to groups such as new migrant communities who have limited access to health care services and benefits.
22. The Council's alcohol strategy advocates the use of coordinated approach across all stakeholders and agencies including the police, health and social care authorities in order to adequately address local and national concerns on the effect of anti social behaviour and related crime connected with alcohol misuse. (A coordinated approach is necessary to effectively address local concerns around crime and anti-social behaviour and to reduce negative perceptions of anti-social behaviour including drunk or rowdy behaviour and to make communities safer.)
23. Action taken particularly in relation to enforcement will be lawful, legitimate, necessary, proportionate and within the ambits of Regulation of Investigatory Powers Act, Human Rights Act and Data Protection Legislation. This coordinated approach has been adopted to prevent crime and disorder.
24. This strategy is in accordance with the objectives in the Council's Equality and Human Rights Scheme as it aims to improve services for disadvantaged groups. The needs assessment being conducted over the next eighteen months will involve consulting with members of the Southwark community from the six equalities strands as well as travellers and refugees and asylum seekers to develop local knowledge of the impact of alcohol on these communities. We will also assess the impact of alcohol on both our older and vulnerable residents within our community.

## **Resource implications**

25. At this stage there are no funding implications for the action plan beyond officer time to undertake the development activity outlined in the action plan.
26. Further resources may be required as each of the areas for action identified in the plan move forward.

27. The implementation of the proposed strategy as outlined in the action plan will be contained within the existing resources of the Safer Southwark Partnership.
28. However if implementing any of the subsequent action plans requires additional resources a further report setting out costs and funding sources must be submitted before committing any Council resources.

### **Consultation**

29. The action plan and the strategy has been circulated to key statutory and voluntary sector partners including the following boards Safer Southwark Partnership, Southwark Alliance and Healthy Southwark.
30. A stakeholder's conference was held on February 24<sup>th</sup> after ongoing consultation with key statutory and voluntary sector partners.
31. Following the ongoing consultation with key stakeholders a public consultation was held during July on the PCT website.
32. All comments were taken into consideration and helped to shape the development of writing the 2010-12 alcohol strategy.
33. Irene Ahern, London Fire Brigade: "The Borough Commander Andrew Snazell and I were involved in consultations held with key stakeholders in the development of the Southwark Alcohol Strategy. As members of the steering group we were kept well informed of progress throughout and both attended a conference to launch the draft strategy in February 2009. We fully support the strategy and implementation plan."
34. Strategic Director of Health and Community Services and Chief Executive of NHS Southwark: "Southwark Health and Social Care have been involved in the development of this strategy and fully support the recommendations and implementation plan."
35. The MPS Southwark Borough Commander has been consulted and key officers have been involved in the development of this strategy

### **SUPPLEMENTARY ADVICE FROM OTHER OFFICERS**

#### **Strategic Director of Communities, Law & Governance (Env/GG/211209)**

36. Part 3 of the constitution delegates the agreement of policy in relation to the social, environmental and economic needs of the area. As this matter affects more than one portfolio it is a decision for the full executive.
37. The Council has a range of powers that may be applicable to this report such as the Police and Justice Act 2006 the Licensing Act 2003 [concerning harm to under 18's] and the Crime and Disorder Act 1998. In addition, under section 2 of the Local Government Act 2000 the council may do anything which it considers is likely to achieve the promotion or improvement of the economic, social and environmental well being of its area.
38. The Executive are asked to consider the recommendations contained in paragraph 1 & 2 of this report and in doing so, to have regard to the

objectives set within it and ensure that it supports the local and national targets in relation to alcohol harm reduction, community safety and protection of children from harm so as to increase the number of Children and young people on the path to success.

39. All measures taken must be adopted in accordance with the Human Rights Act 1998. Article 8 the right to respect for private and family life is a qualified right interference and can be justified if it is.
- (a) lawful ( i.e. there is legal basis for the action)
  - (b) legitimate ( for example the prevention of crime)
  - (c) proportionate)
  - (d) necessary
  - (e) non discriminatory.

It is our view that the measures proposed are a justified interference.

40. Under the Data Protection Act 1998 and relevant guidance in relation to information sharing the council must also demonstrate that as a public authority it is satisfied that information sharing and gathering is lawful, legitimate, reasonable and proportionate for the purpose of achieving the objectives set out in this report. It is our view that if carried out in accordance with the legislation, guidance and the council's own protocols the purpose would be lawful, legitimate, reasonable and proportionate for the purpose of achieving the objectives

#### **Finance Director (Env/ET/181209)**

41. The implementation of the proposed strategy mainly entails development activities, as outlined in the action plan, will be contained within the existing resources of the division. However, if implementing any of the subsequent action plans requires additional resources, a further report setting out costs and funding sources must be submitted, before committing any Council resources.

#### **BACKGROUND DOCUMENTS**

<b>Background Papers</b>	<b>Held At</b>	<b>Contact</b>
Full Alcohol Strategy EqIA report 2009 Southwark's alcohol misuse scoping review 2009-2012 Alcohol Strategy and Action Plan Minutes of the equalities and diversity panel	Community Safety Unit, 160 Tooley Street, London, SE1 2TZ	Dionne Cameron Alcohol Strategy Co-ordinator Tel: 020 7525 7101

## APPENDICES

No.	Title
1	Safer Southwark Partnership Alcohol Strategy 2010/12
2	Safer Southwark Partnership Alcohol Strategy 2010/12 Implementation plan

## AUDIT TRAIL

<b>Lead Officer</b>	Gill Davies, Strategic Director Environment and Housing	
<b>Report Author</b>	Jonathon Toy, Head of Community Safety and Enforcement	
<b>Version</b>	Final	
<b>Dated</b>	March 2010	
<b>Key Decision?</b>	Yes	
<b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / EXECUTIVE MEMBER</b>		
<b>Officer Title</b>	<b>Comments Sought</b>	<b>Comments included</b>
Strategic Director of Communities, Law & Governance	Yes	Yes
Finance Director	Yes	Yes
Chief Executive Southwark Primary Care Trust	Yes	Yes
<b>Executive Member</b>	Yes	Yes
<b>Date final report sent to Constitutional/Community Council/Scrutiny Team</b>	12 March 2010	

## **Southwark's Alcohol Strategy 2009-2012**

### **Appendix 1**

#### **SAFER SOUTHWARK PARTNERSHIP ALCOHOL STRATEGY 2010-12**

##### **Executive Summary**

Most people in the UK who drink alcohol do so in moderation, without causing harm to themselves and/or others. However we know that, when consumed in excess, alcohol can have a significant affect on individuals, families and the wider community. Alcohol misuse places a huge burden on health and social care services and the criminal justice system.

In Southwark, recorded figures tell us that alcohol is having an impact on the health and well being of families and communities in the borough; this reflects the national trend of rising rates of alcohol-related hospital admissions. Southwark has the seventh highest rate of alcohol-related ambulance callouts in the UK. Alcohol is also linked to high level of domestic violence and other violent crime in the borough, as well as high levels of anti-social behaviour such as street drinking.

Over £3m is also currently invested in specialist alcohol treatment services that offering interventions ranging from advice to in-patient detoxification and to residential rehabilitation.

Whilst it is difficult to quantify, true cost in dealing with the harm caused by alcohol in Southwark, in young people, the health impact and crime and disorder is estimated around £10m

There is a statutory duty on Crime and Disorder Reduction Partnerships to have a strategy that addresses alcohol related crime and disorder. Government guidance, in line with the national alcohol strategy '*Safe Sensible Social*', calls for strategies that go beyond a crime focus and also address health harms and the impact of alcohol on children and families.

The direction of the strategy has been determined by building on '*Tackling the impact of alcohol: Southwark priorities*<sup>1</sup>' and the '*Southwark's alcohol misuse scoping review 2008-2011*<sup>2</sup>' compiled by Ranzetta Consulting. Both of these documents have highlighted the need to address alcohol-related harm by improving our understanding of the issues, further developing the coordination of activity and developing new responses to problems.

The recommendations of the alcohol strategy will be implemented using current resources. However, a significant focus of the action plan is to increase the amount, and improve the quality of, the alcohol related needs assessment information that is currently gathered. We are, therefore, going to work with key partner agencies to ensure that we have robust data to inform and direct future priorities. This will enable a more ambitious 2010/12 strategy to be used as a platform for the 2012-2015 strategy.

The strategy sets out 3 priority areas, these are:

1. Children and young people



2. Health and social care
3. Crime and community safety

To identify the challenges within each of the three priority areas, we looked at four specific categories:

- Data / information gathering
- Prevention / intervention / education
- Treatment
- Enforcement

These categories are reflected in the strategy action plan.

Southwark's Public Health Strategy "to reduce health and inequalities within Southwark 2009-2020" has five priority themes to tackle health inequalities in Southwark. All five priorities have been chosen on the basis of their impact on health inequalities and their potential to create public health improvements. Alcohol is highlighted within the theme of 'Lifestyles'.

The alcohol strategy is linked to this wider public health strategy and public health services are represented on the Safer Southwark Partnership's (SSP) alcohol strategy implementation steering group.

The actions in the alcohol strategy involve many different people and agencies across all sectors of Southwark's community. The SSP alcohol strategy implementation steering group will be the multi agency mechanism to ensure effective implementation and ownership of the strategy.

The SSP is required to produce a three year rolling action plan. Each year the plan is reviewed through a strategic assessment using a combination of crime and anti social behaviour intelligence, as well as partnership information, consultation and community based information. Both the strategic assessment and SSP rolling action plan 2009-12 highlight tackling alcohol misuse as a key priority.

## **Introduction to Southwark**

Alongside the City of London, Southwark is one of the oldest areas of London, with a history stretching back to Roman times. Southwark's population reached 274,000 in 2007 and is believed to be growing by as much as 4,000 per year. The population has a young demographic profile and demonstrates rich ethnic and cultural diversity, with around one-third (90,600) of the population from black or ethnic minority communities. With this figure set to rise to 38% by 2011 Southwark is arguably one of the most diverse areas in the capital.

Southwark is made up of eight very distinctive urban neighbourhoods that extend along the river Thames and down into South East London. The borough also encompasses some of London's top attractions, creative hotspots, scenic villages and acclaimed green spaces.

Southwark has around 1,200 licensed premises and venues, which combine to provide a wide-range of leisure and cultural opportunities; and make a significant economic and employment contribution to the local community. These businesses have also contributed to making Southwark one of London's fastest growing tourist quarters and a thriving business location.

Alongside the borough's rich vibrancy, Southwark has its fair share of challenges. The Index of Multiple Deprivation (IMD) 2007 shows Southwark as the 27th most deprived local authority nationally and 60% of the borough's wards are among the 10% most deprived in the country. Consequently, the borough faces many challenges associated with meeting the complex health and social needs of an inner-city population, including a range of alcohol related harms.

To meet our challenges, Southwark has a large number of physical regeneration programmes across the borough, alongside a wide range of initiatives aimed at improving educational standards, reducing crime and improving health, housing, social care and the environment.

## Alcohol – National Picture

Over the last decade the affects of alcohol use on national health, quality of life, social issues and crime have been well researched and documented. National statistics<sup>3</sup> tell us that:

- In 2006/07 the cost of alcohol related harm to the National Health Service in England was £2.6 billion
- In 2007, 6,541 deaths in England were directly attributed to alcohol consumption
- In 2007/08 there were 863,300 alcohol related hospital admissions, a rise of 69% since 2002/03.

In June 2007, the Government published the next steps in the National Alcohol Strategy<sup>4</sup>: 'Safe Sensible Social. This reviewed progress since the publication of the Alcohol Harm Reduction Strategy for England (2004) and outlined further national and local actions to achieve long-term reductions in alcohol-related ill health and crime. For the first time the strategy made it a priority to protect young people from alcohol related harm. It also highlights the needs of 18-24 year old binge drinkers and of young people under 18 who drink alcohol and cause or experience harm to themselves, their communities and their families. The national strategy states clearly that cultural attitudes towards binge drinking must change. The strategy also identifies a number of ways of tackling the effects of alcohol-related crime.

There is also a new Public Service Agreement (PSA) for alcohol - PSA 25, which defines the need for local authorities "*to reduce the harm caused by alcohol and drugs*". Associated with this PSA is a new statutory duty for Crime and Disorder Reduction Partnerships to have a strategy for tackling alcohol-related crime and antisocial behaviour.

There are now a further range of national targets relating to tackling alcohol misuse, which are set out in the table that follows.

## Alcohol – Local Picture

Over £3m is also currently invested in specialist alcohol treatment services that offering interventions ranging from advice to in-patient detoxification and to residential rehabilitation.

Whilst it is difficult to quantify, true cost in dealing with the harm caused by alcohol in Southwark, in young people, the health impact and crime and disorder is estimated around £10m.

The Southwark Health and Social Care Strategy for the provision of treatment for drugs and alcohol misuse in Southwark states: “Whilst the national alcohol strategy for England does not provide additional funds for the management of alcohol related issues, Southwark’s Primary Care Trust spends approximately £650,000 (14%) of the substance misuse budget on alcohol services and Southwark’s Community Safety Department allocates a budget of £75,000”.

National Indicator	PSA	Measured/ Monitored
NI 20 Reducing assault with injury crime rate	PSA 25	Measured through crime reports
NI 39 Reducing alcohol-harm related hospital admission rates	PSA 25	Hospital Episodes Data
NI 41 Reducing perceptions of drunk or rowdy behaviour as a problem	PSA 25	LGUSS data; being replaced by the CLG Place Based Survey
NI 115 Reducing substance misuse by young people	PSA 14	Ofsted Tellus One data from Oct 2009

The North West Public Health Observatory (NWPHO) highlights that Southwark faces specific challenges around:

- Southwark has had 63 death from chronic liver disease in for the period 2005-07
- Alcohol related crime, including violent crimes and sexual offences

However Southwark is performing significantly better than the national average in relation to binge drinking, hazardous drinkers and alcohol related hospital admissions for under 18s.

A 2004 survey of Southwark pupils between the ages of 12 and 15 found that 19% had drunk alcohol in the previous seven days (22% of boys, 17% of girls).

Local agency data reflects national findings that show alcohol use as the second most common drug choice after cannabis and Southwark ranks 48th within the Home Office top 50 alcohol priority boroughs.

The 2008/9 strategic assessment for Southwark shows that approximately 5% (almost 1000 offences) of crime in the borough is alcohol related and of those alcohol related crimes, 50% are considered violent crime and a further 20% linked to theft and criminal damage offences.

Southwark also has high rates of alcohol related domestic violence incidents, which has been highlighted through monthly multi agency risk assessment conferences (MARAC). Between November 2008 and January 2010, MARAC discussed 85 victims and 53 perpetrators; 44 of these perpetrators were misusing alcohol.

In addition, Probation caseload information tells us that out of the 1698 offender assessments completed between October 2008 to September 2009, 538 (32%) offenders identified alcohol as a problem. Approximately 10% of the **prolific** and **priority offenders** (PPOs) in Southwark report a problem with alcohol. Also, the newly formed Diamond team, supporting offenders on short term sentences returning to the community, estimate that as many as 50% of the offenders they work with have misused alcohol.

Southwark, like its neighbouring inner city boroughs has high levels of street drinking.

Consequently, the overarching aim of the work undertaken in partnership by agencies in Southwark can be broadly described as:

*“To protect individuals, families and our communities from the harm caused by alcohol misuse”*

This strategy sets out how we intend to achieve this.

### **Aim of the 2010/12 SSP Alcohol Strategy**

Southwark's 2010/12 alcohol strategy recognises the need to have a full understanding of how alcohol harm impacts across communities in Southwark. The strategy sets out how partner agencies can work better together to address the causes and impacts of alcohol misuse.

The alcohol strategy implementation group, with representation from all key statutory and voluntary sector partners, will oversee the completion of a comprehensive borough-wide alcohol needs assessment over the next 18 months. The steering group will have responsibility for positively ensuring services share knowledge and resources and identify ways resources can be combined for the maximum benefit of communities affected by alcohol misuse.

The 2010/12 Alcohol Strategy also explicitly focuses work and attention on long term planning in order to make best use of our resources. Our vision for the future aims to *effectively meet a broad range of alcohol-related health, social care and community safety needs across Southwark.*

### **Structure of the 2010/12 Strategy**

As previously described, the SSP alcohol strategy 2010/12 is split into the following priority areas:

- Children and young people
- Health and social care
- Crime and community safety

Each priority area then has a work plan which focuses on 4 key themes:

- Data / information gathering
- Prevention/intervention/ education
- Treatment
- Enforcement

The rest of this document outlines briefly the profile of alcohol need in the borough, current activity undertaken in each of the divisional work areas and describes the actions that will be taken to meet the objectives of the strategy.

## Children and Young People

### National Picture

Alcohol misuse regularly features in inter-family conflicts, domestic abuse and violence and can have particularly damaging effects on children<sup>5</sup>. National research also suggests that alcohol plays a part in around a quarter to a third of known cases of child abuse. In addition, it is estimated that between 780,000 and 1.3m children are broadly affected within the UK by parental alcohol problems. Key risks to children associated with parental alcohol misuse include<sup>6</sup>:

- Neglect of parental responsibilities, leading to physical, emotional or psychological harm;
- Exposing children to unsuitable care givers or visitors;
- Use of the family resources to finance the parents' drinking;
- Uninhibited behaviours of adults, parents and carers e.g. inappropriate display of sexual and/or aggressive behaviour and reduced parental vigilance;
- Unsafe storage of alcohol, giving children ease of access;
- Adverse impacts on the growth and development of unborn children.

Alcohol misuse by young people not only has a significantly negative impact on their health but is also strongly linked to a range of risk-taking behaviours. The 2008 Government '*Youth Alcohol Action Plan*' states that:

- Alcohol can contribute to unacceptable anti-social and criminal behaviour among young people, which can be a significant problem for families and communities.
- Drinking at an early age can cause serious short and long-term health problems. For example, new evidence demonstrates that drinking too much alcohol can impair adolescent brain development.
- Drinking too much alcohol is strongly associated with a wide range of other problems affecting the welfare of teenagers, including: unprotected sex, teenage pregnancy, educational under-achievement, disengagement, and can lead to alcohol and drug misuse.

Recent studies commissioned from the Department for Children, Schools and Families<sup>7</sup> have also shown that alcohol use amongst young people is rooted in complex societal issues. Therefore, robust, evidenced and well-thought out approaches must be adopted to ensure that young people are able to make safe informed decisions.

### Local Picture

Information from Young Southwark, Southwark Primary Care Trust, and a range of other key council and partners agencies, highlights that:

- The number of Southwark pupils excluded for drug or alcohol use has greatly reduced since 2005-06.
- However, ambulance data shows an increase of 7.6% in drug and alcohol calls for young people from 2007/8 to 2008/9, with females being over-represented in these figures.

In Southwark, agencies report that young people are not as concerned with the health risks of alcohol misuse but do make changes to behaviour to improve their personal safety. This reflects the issues that young people face in inner London boroughs, where the perceived risks of victimisation and crime are high. In addition, these issues increase the influence of other factors like low-self-esteem and peer pressure in shaping risk-taking behaviour of young people in Southwark.

### **Current activities**

Substance misuse interventions, including alcohol treatment, have traditionally been delivered through substance misuse workers in the Youth Offending Service; the Children Looked After (CLA) Social Services' team; the Child and Adolescent Mental Health Service; and the Community Drugs Education Project. However, this year Southwark decided to commission a young people's specialist substance misuse treatment service. The new service will open in early 2010 and offer drugs and alcohol education and treatment for young people in schools, youth services and a dedicated drop-in centre.

A training programme is also planned for professionals across children and young people's services, to ensure that they are able to identify, screen and refer on young people at risk of substance misuse problems.

Additionally, alcohol education is provided in schools as part of Personal Social & Health Education (PSHE) in the Healthy Schools Programme. Teenage pregnancy is a key priority for the borough and work to ensure the inclusion of drug and alcohol awareness as part of sexual health and teenage pregnancy prevention is currently being developed.

Trading Standards are responsible for the enforcement of under-age sales and carry out an annual programme of test-purchasing and a comprehensive 'age-check' scheme to support and monitor licensed premises to ensure they are acting within their responsibilities. Trading Standards also administers Southwark's PASS approved proof of age card (SPA Card) which is provided free through schools and by individual application to 16-25 year olds. This supports licensed premises in their efforts to remain compliant with the law.

Southwark's Safeguarding Children Board has produced a joint service protocol relating parents and carers who have substance misuse problems. In addition, adult substance misuse services across the borough train all workers in Safeguarding procedures.

### **National Recommendations**

There are a number of national recommendations around tackling issues around young problems and alcohol misuse including:

- Enforcing more strongly the existing rules on under-age drinking
- Providing useful, evidenced guidance for parents and young people
- Changing cultural attitudes towards binge drinking

The Department of Children, Schools and Families (DCSF) is planning a new social marketing campaign aimed at Young People and their parents. This campaign will



take account of responses to the recent *Young People and Alcohol Consultation*. The Chief Medical Officers *Guidance on Consumption of Alcohol by Children and Young People* forms part of this consultation and will be reflected in the DCSF's plans for the campaign.

**Local Recommendations for the 2010/12 Alcohol Strategy include:**

- Young people have access to a specialist substance misuse service
- Raising the profile of substance misuse treatment, training and education

**Actions for the Alcohol Strategy 2010/12 include:**

- The commissioning of a new young people's specialist substance misuse service
- Increasing the involvement of service users including young people, carers and parents to help shape our services
- Delivering a communications campaign for parents / carers and front line workers highlighting the risks associated with parental alcohol misuse.
- Assessing in greater detail the needs of young people in relation to alcohol misuse in Southwark.
- Providing health information in relation to alcohol and treatment services for young people, parents and carers.
- Training professionals working in children's services to identify, screen and refer on young people in need of interventions for alcohol misuse.
- Continuing to work with the licensed trade and enforcement agencies to prevent underage sales of alcohol.

## Health and Social Care

### National Picture

Alcohol leads to a range of public health problems. These can include acute conditions, such as alcohol poisoning, impacts of violence and accidents as well as the more chronic effects, such as alcohol-induced pancreatitis, chronic liver disease and stomach cancer.

The *Statistics on Alcohol: England 2009* document shows that:

- In 2008 there were over 134,000 prescription items for drugs for the treatment of alcohol misuse prescribed in primary care settings and NHS hospitals in England at a cost of over £2.4 million to the NHS
- In 2007, a quarter of adults aged 16 and over in England (24%) were classified as hazardous drinkers. Men were twice as likely as women to be hazardous drinkers (33% of men compared to 16% of women). Younger men and women were more likely to be hazardous drinkers than older adults. A similar pattern was seen for harmful drinking. 6% of men and 2% of women were classified as harmful drinkers and the proportions were lower in older age groups
- Overall, in 2007/08 there were around 863,300 hospital admissions where an alcohol-related disease, injury or condition was the primary reason for hospital admission or gave a secondary diagnosis. This represents a 69% increase since 2002/03 when the figure stood at 510,200.
- The most common primary diagnosis for alcohol-specific hospital admissions is mental and behavioural disorders
- In 2007, 6,541 deaths in England were directly related to alcohol consumption. This figure increased by 19% between 2001 and 2007. The main cause of this increase is liver disease, which has risen by 31% from 3,236 in 2001 to 4,249 in 2007.

### Local Picture

While alcohol misuse is a concern in Southwark, it is clear that other factors affecting people's long term health, such as smoking and obesity, are also key priorities for improving the health and well being of local communities.

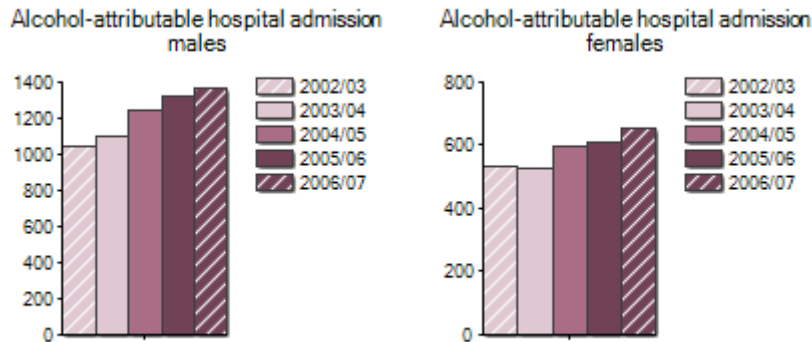
According to data collated by the North West Public Health Observatory (NWPHO) in 2009, Southwark is estimated to have 30,381 binge drinkers, 30,595 hazardous drinkers and 9,817 harmful drinkers.

<b>Definition of drinking levels:</b>
Binge drinking: 8 or more units of alcohol for men and 6 or more units for women on their heaviest drinking day in the past week.
Hazardous drinking: drinking above recognised 'sensible' levels but not yet experiencing harm.

Harmful drinking: drinking above sensible levels and experiencing harm

The NWPHO data also shows that Southwark has a significantly higher mortality rate for alcohol-attributable hospital admissions than the English average. Southwark also has high alcohol-specific hospital admission rates, particularly for males, with the borough ranking 28<sup>th</sup> highest nationally.

**Alcohol-attributable hospital admissions (source: NWPHO)**



Hospital admissions for alcohol-related conditions have more than doubled from 2002/03 to 2006/07 nationally.

The current rate of admissions for Southwark is higher than the average rate for London and the rest of England.

**Rate of alcohol-related admissions per 100,000 population (EASR):  
Southwark**



Source: NWPHO revised data Dec 2008.

Other key alcohol-related health harms in Southwark include:

- Southwark has had 63 death from chronic liver disease in for the period 2005-07
- Southwark has the seventh highest rate of alcohol-related ambulance call outs in the UK.
- Young women are more likely to require an ambulance service than young men.
- There is a concern amongst health providers in relation to alcohol consumption in some pats of our more elderly population, particularly vulnerable people living alone

**Current activities:**

Over £3m is also currently invested in specialist alcohol treatment services that offering interventions ranging from advice to in-patient detoxification and to residential rehabilitation.

The table in Annex 1 sets out the current alcohol services in Southwark.

Health advice relating to the use of alcohol has been included in many health promotions in the borough. Also, a GP scheme to screen newly registered patients for alcohol misuse began during 2008.

**National Recommendations**

*Safe Sensible Social* recommends a number of ways to tackle the problem of alcohol misuse, those for health include:

- Providing more help for people who want to drink less and those most at risk
- Putting a sensible drinking message on alcohol bottles

- Changing cultural attitudes towards binge drinking.
- Developing a medical training programme for undergraduates to help all new doctors identify and handle alcohol misuse problems.
- An e-learning programme for GPs who wish to offer 'brief interventions' for patients.
- Developing a new indicator for the NHS to measure change in the rate of hospital admissions for alcohol related conditions is currently being undertaken.

### **Local Recommendations for the 2010/12 Alcohol Strategy include:**

- Ensuring that Southwark's "Health and Inequalities Strategy 2009-20" and the SSP alcohol strategy 2010-12" work in a joined up way to meet health issues related to alcohol use.

### **Actions for the Alcohol Strategy 2010/12 include:**

- Establishing a health and social care working group to identify how we can make best use of treatment and support resources
- Establishing better ways of bringing together data to inform the future planning of prevention, treatment and support services
- Publishing information about local treatment and support services
- Delivering a targeted alcohol health campaign aimed at young people and adults
- Meeting the needs of continuing drinkers with disabilities and amongst the older population
- Increasing access to alcohol treatment services for the most problematic drinkers

### ***Crime and Community Safety***

### **National Picture**

The 'Statistics on Alcohol: England 2009<sup>8</sup>' estimated that the costs associated with alcohol-related crime and anti-social behaviour was £7.3 billion each year. The Cabinet Office Strategy Unit<sup>ix</sup> identified these costs as including:

- £1.8bn criminal justice system (post arrest) costs
- £3.5bn costs as consequence of actual alcohol-related crime
- £1.5bn costs in anticipation of alcohol-related crime
- £0.5bn costs relating to drink driving

The 2008/09 British Crime Survey (BCS) shows that victims believed offender(s) to be under the influence of alcohol in nearly half (47%) of all violent incidents, similar to the level in the 2007/08 survey (46%).

Victims also believed the offender(s) to be under the influence of alcohol most frequently in incidents of stranger violence (62% of incidents). The 2008/09 BCS shows 973,000 violent incidents where the victim believed the offender(s) to be under the influence of alcohol.

While alcohol-related violent incidents are similar to the levels in 2007/08 (the apparent differences are not statistically significant), longer-term trends show there have been significant decreases since 1995 in the number of violent incidents believed by victims to involve offender(s) under the influence of either alcohol or drugs.

However, a number of other crime types are associated with alcohol use. For example, more than half of those arrested for breach of the peace and nearly half of those arrested for criminal damage are under the influence of alcohol. Much of this crime and disorder is highly concentrated in town and city centres.

## Local Picture

Recording alcohol related crime is difficult but approximately 12% (close to 1000 offences in 2008/9) of violence against the person offences in Southwark is considered alcohol related.

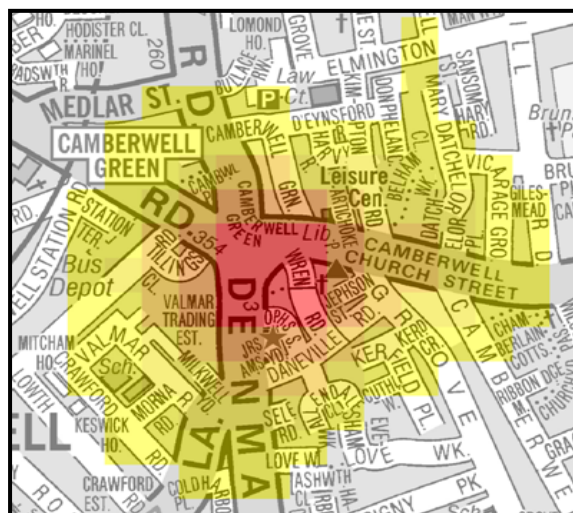
One third of our alcohol related crimes were flagged as being linked to domestic violence.

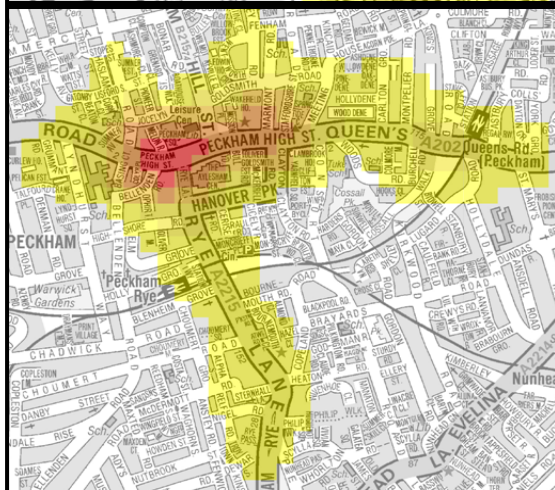
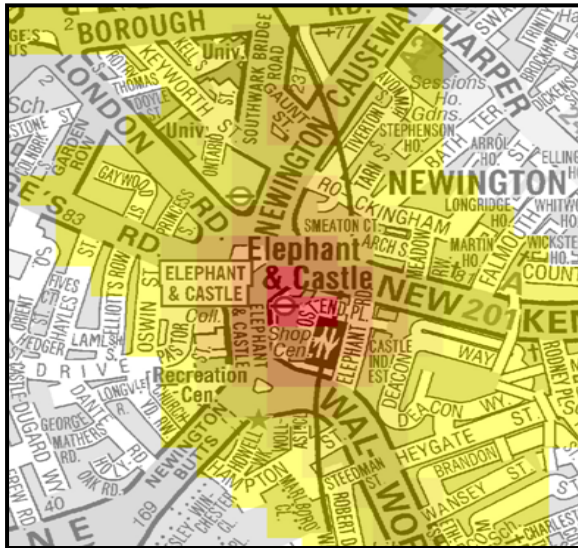
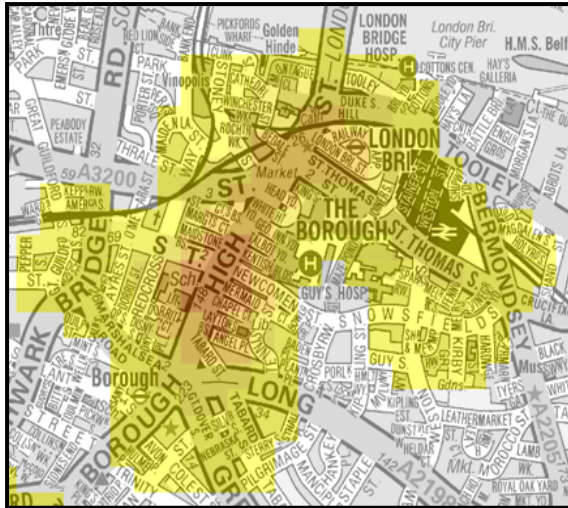
Using Home Office calculations relating to the costs of crime in 2008/9, local alcohol related violence cost somewhere in the region of £4m. This is calculated on the understanding that alcohol related violence accounts for approximately 12% of violent crime.

Over a third of alcohol related violent offences in Southwark are concerned with 'harassment' (typically public order offences), with a further third relating to 'assault with injury' (formerly ABH). 8% are related to serious wounding. However, many people, for differing reasons, opt not to report crime, especially violent crime.

As the maps on the following page show, most of the alcohol-related violence in the borough is located in and around Southwark's transport hubs and town centres, as well as the routes which link them.

These are recurrent 'hotspots' and have an abundance of bars/restaurants and nightclubs, all of which are traditional generators for alcohol related violence.





## Current Activities

The Police 'Safer Neighbourhood Teams' and Southwark's community wardens now work across almost all of the borough's wards to enforce a borough-wide 'alcohol control zone'. (East Dulwich, Village and College wards chose not to have an 'alcohol control zone').

'Alcohol control zones' have reduced levels of street drinking and associated anti-social behaviour by 27% (based on pre and post DPPO audits) since 2006. In addition, Southwark's community wardens obtained powers from the police to confiscate alcohol from individuals who are drinking in public and causing a nuisance. The powers were granted in April 2009 and to December 2009 the wardens have carried out 404 confiscations.

Southwark Anti-Social Behaviour Unit (SASBU) is a specialist team set up to tackle and reduce anti social behaviour, including ASB related to alcohol use. SASBU can use a range of legal powers, including anti social behaviour orders (ASBOs) and anti social behaviour contracts (ABCs) to address problems. However, there has been a significant reduction in ASBOs and ABCs issued this year because anti-social behaviour has lessened (see table below).

	2008/09		2009/10 (to 31/01/10)	
	Street drinking	Total	Street drinking	Total
ABCs	6	03	1	4
ASBOs		4		

Southwark Council's licensing team leads the way on the proactive use of legislation under the Licensing Act 2003. The team has also implemented two saturation policies in Camberwell and Peckham, to limit uncontrolled growth of licensed premises in those areas. In addition, the team has positively engaged with premises across the borough to develop best practice and social responsibility in licensing, through working with independent premises and most often residents to discuss issues identified.

Other proactive work in the borough that is being undertaken includes Southwark's assertive outreach service, who work with people who are street drinking. In 2008/09, the service worked with 80 clients to address a range of generic health and social care needs and to assist them to access treatment services, thereby assisting to address street drinking problems.

## National Recommendations

One of the key national priorities is to reduce public perceptions of drunk or rowdy behaviour. Reducing perceptions of drunk or rowdy behaviour is an important target because it is a quality of life measure, capturing the public's concern about alcohol related crime and antisocial behaviour (ASB)

*Safe Sensible Social* recommends a number of ways to crime and safety actions to tackle problems associated with alcohol misuse, including:

- Greater use of fixed penalty fines ABB / nuisance behaviour
- Changing cultural attitudes towards binge drinking
- Putting in place a mandatory code of practice to target the most irresponsible retail practices
- Powers to create mandatory national license conditions; these are expected to cover:
  - A ban on irresponsible drinks promotions



- Ensuring tap water is free
- Compulsory ID checks where purchaser appears under 18
- Ensuring establishments provide half pints and small measures.

All of these powers are now backed by law and will significantly assist with tackling alcohol-related crime and the anti-social aspects of excess drinking.

### **Local Recommendations for the 2010/12 Alcohol Strategy include:**

- Improving information on the extent to which alcohol is a cause of crime and anti social behaviour.
- Using the full range of new and existing powers to address alcohol related crime and anti social behaviour, while ensuring that particular groups are not targeted inappropriately
- Develop a central mechanism to collect data about alcohol-related domestic violence and sexual offences
- Continuing to work with the licensed trade to ensure compliance with the Licensing Act, to promote best practice and to implement the new Code of Practice for alcohol retailers when it becomes law

### **Actions for the Alcohol Strategy 2010/12 include:**

- Continuing to work with the licensed trade to ensure compliance with the Licensing Act and best practice, as well as to implement the new Code of Practice for alcohol retailers when it becomes law
- Raising awareness of the links between alcohol misuse and sexual offences
- Working with licensed premises to raise awareness of the links between the irresponsible supply / use of alcohol and sexual offences.
- Working with key agencies and vulnerable people to raise awareness of alcohol-related fire
- Developing mechanisms, processes and a database to enable the collection of a wide range of data and intelligence on alcohol related crime and anti social behaviour in Southwark
  
- Working with our multi-agency operational groups to plan and monitor street drinking service responses.
- Developing the assertive outreach service to effectively target, task and coordinate work with people who are street drinking
- Developing protocols across domestic violence and substance misuse services to better inform work with domestic violence victims and perpetrators who misuse alcohol.

### **Financial implications**

The strategy will help to ensure that funding spent to reduce alcohol misuse is put to best use, thereby securing better value for money across services responding to alcohol related issues.

As part of strategy's implementation, we will review current services and use the resources at our disposal to deliver the recommendations. In addition, we will explore mainstream and external funding sources where there are significant service gaps with a view to addressing these in the 2112-15 strategy.

## ANNEX 1: Summary of alcohol support services in Southwark

<b>Tier 1</b> Non, substance misuse specific services	Social Services	Universal
	GP / Primary Care / Community Mental Health Teams	Universal
	Housing / Employment	Universal
	Accident & Emergency Units	Universal
	Criminal Justice System	Universal
<b>Tier 2</b> Services offering drop, in harm reduction interventions	Foundation 66 Elephant & Castle Shop front	Primary Alcohol Users with or without any other substance use – including BAME Primary Alcohol Users
	Blenheim CDP Outreach Bus	Any drug user; poly/single use with or without Alcohol as non, primary drug
	St Mungos Outreach Service	Any DIP drug user (poly or single use including Alcohol) or any primary alcohol user (with or without any other substance use)
	Three Boroughs Drug & Alcohol Team	Blood borne virus test and vaccination for clients within drug alcohol services
<b>Tier 3</b> Services offering community, based specialised substance misuse assessment & treatment	SLaM Marina House Community Drug & Alcohol Team	Any drug user; poly or single use including Alcohol
	SLaM Blackfriars Community Drug & Alcohol Team	Any drug user; poly or single use including Alcohol
	SLaM Primary Care Community Liaison Service	Any drug user; poly or single use including Alcohol
	SLaM Dual Diagnosis Service	Any drug user with mental health, morbidity; poly or single use including Alcohol
	Blenheim CDP KAPPA Service	Any drug user; poly or single use including non, primary Alcohol
	Foundation 66 Day Programme	Primary Alcohol Users
	Blenheim CDP Rise Day Programme	Any drug user; poly or single use including Alcohol
	CRI REACH Day Programme	Drug users under a DRR order; poly or single use including Alcohol
	Blenheim CDP Evolve Crack Service	Any stimulant user; poly or single use including non, primary Alcohol
	Southwark Alcohol Direct Enhanced Service (DES) GPs	Alcohol users (with or without other drugs)
<b>Tier 4</b> Services offering residential substance misuse treatment	Equinox Brook Drive	Any drug user; poly or single use including Alcohol
	SLaM Inpatient Service	Any drug user; poly or single use including Alcohol
	Social Services Care Management Team	Any drug user; poly or single use including Alcohol
<b>Other Services</b>	Thames Reach Treatment Focussed Accommodation Based Service	Any drug user; poly or single use including Alcohol
	Service User Council	Any drug user with experience of the Treatment system
	CRI Peer Advocacy Service	Any drug user with experience of the Treatment system

## Southwark's Alcohol Strategy 2009-2012

### Appendix 2

### 2010 – 2012 ALCOHOL STRATEGY IMPLEMENTATION PLAN

#### WORKING TOWARDS THE 2012/15 ALCOHOL STRATEGY

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
1.	Ensure that the Alcohol Steering Group is a fully representative, senior strategic group spanning Police, Health, Social Care and Enforcement and that the group is able to effectively lead the development and implementation of both this Alcohol Strategy and the 2012-2015 Strategy.		Full partnership agreement and support of an Alcohol Strategy Steering Group.	Fully functioning strategic steering partnership group	Attendance and compliance against the ToRs of the steering group	Jan – Mar 2010	Steering Group	Alcohol Coordinator
2.	Establish Alcohol Needs Assessment plan and working party to ensure that all necessary needs assessment information is gathered over the next 12 months to inform the 2012-2015 Alcohol Strategy.		Partner's agreement and support of the Needs Assessment plan and the working party	Local knowledge of the impact of alcohol on these communities.  A plan that meets all the needs of all equality strands across Southwark		Jan – Mar 2010	Steering Group	Alcohol Coordinator
3.	Ensure that Needs Assessment process and the detail of the 2012-2015 Alcohol Strategy are informed by and fully compliant with Southwark's Equalities Impact Assessment Framework (Stage 2 + 3).	All the Equality Strands:	Improving individual life chances for all  Promoting equality of opportunity  Eliminating unlawful discrimination  Promoting good relations between members of different groups	Stronger Communities where people are involved, engaged and play a part in making local decisions  <i>This can be monitored via performance on the following NI's:</i>	Sign off of the EqIA	Apr – Jun 2010	Alcohol Coordinator	EQIA leads

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
			<p>Making Southwark a better place for all people</p> <p>Delivering high quality public services for all</p>	<p>NI2 % of people who feel that they belong to their neighbourhood</p> <p>NI3 Civic participation in the local area</p> <p>NI4 % of people who feel they can influence decisions in their locality</p>				
4.	Ensure that a comprehensive and fully informed Alcohol Strategy is written for 2012-2015 and that all necessary statutory partners are committed to meeting resource challenges associated with implementing that Strategy.	<p>General Public</p> <p>Stakeholders</p>	<p>Promoting equality of opportunity</p> <p>Eliminating unlawful discrimination</p> <p>Promoting good relations between members of different groups</p> <p>Delivering high quality public services for all</p> <p>Improving individual life chances for all</p>	<p>Stronger Communities where people are involved, engaged and play a part in making local decisions</p> <p>NI2 % of people who feel that they belong to their neighbourhood</p> <p>NI3 Civic participation in the local area</p> <p>NI4 % of people who feel they can influence decisions in their locality</p>	Completed 2012-2015 Alcohol Strategy	Jan – Mar 2012	Steering Group	Alcohol Coordinator
5.	Ensure that the 2012-2015 Alcohol Strategy is aligned with all other strategies in the borough	Steering Group	Making Southwark a better place for all people	NI23 Make communities safer	Completed 2012-2015 Alcohol Strategy	Jan – Mar 2012	Steering Group	
6.	Invite the Department of Health		Reduction in adverse	NI23 Make	Completed	Ongoing	PCT	(SMCT)

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
	National Support Team for Health Inequalities to work with and advise the Alcohol Steering Group around the 2010-2012 strategy and the forthcoming 2012-2015 strategy.		outcomes	communities safer	Alcohol Strategies			
7.	Identify designated Alcohol Strategy champions (senior clinicians, primary and acute care, elected members or/and senior officers) to help raise the profile of Alcohol Strategy work.		Appointing a Alcohol Champion	Help to raise the profile of the need to address Alcohol Misuse within the borough, which will in turn help positively contribute to NIs relating to alcohol misuse		Apr – Jun 2010	Steering Group	

## **CHILDREN & YOUNG PEOPLE**

### **Information Gathering:**

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
8.	Ensure that the Young Persons Substance Misuse (YPSM) Needs Assessment process for 2009 effectively gathers information about alcohol use among young people and that this information is fed into both the Southwark Alcohol Needs Assessment 2010 and Children's Services Strategic Needs Assessment.	Young People	Needs assessment completed and submitted to the National Treatment Agency (NTA)	NI115 Substance misuse by young people  Gaps and target groups identified, priority groups established for new service	NTA feedback and sign off	Jan – Mar 2010	Y.P Subs Mis Coordinator	Alcohol Coordinator YPSMJCG
9.	Ensure that Young People are consulted for the writing of both the YPSM Needs Assessment and the Alcohol Strategy 2012-2015.	Young People	At least 1 stakeholder event regarding substance misuse, including alcohol, to be held each year.  Promoting good relations between	NI115 Substance misuse by young people  Stronger Communities where people are involved,	Sign off of the Needs Assessment	Oct – Dec 2010	Y.P Subs Mis Coordinator	Alcohol Coordinator

			<p>members of different groups</p> <p>Delivering high quality public services for all</p> <p>Improving individual life chances for all</p>	<p>engaged and play a part in making local decisions</p> <p>NI2 % of people who feel that they belong to their neighbourhood</p> <p>NI3 Civic participation in the local area</p> <p>NI4 % of people who feel they can influence decisions in their locality</p>				
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**Prevention / Education:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
10.	Plan and deliver a communications campaign for parents / carers and front line workers highlighting the risks associated with parental alcohol misuse.	Parents Frontline Staff Carers	Improving individual life chances for all	Improved Health outcomes  NI115 Substance misuse by young people	Campaign evaluation	Jul- Dec 2010	Steering group	Alcohol Coordinator + Parenting Board
11.	Plan and deliver Health campaign (using social marketing principles) programme around young people and alcohol use – to include messages for young people and messages for parents / carers in schools and non-school settings	Young People in Schools and non school settings  Parents  Carers  PSHE curriculum	Improving individual life chances for all  X schools deliver lessons during alcohol awareness week	Improved Health outcomes  Improved chances for vulnerable individuals and families  NI115 Substance misuse by young people	Campaign evaluation	Jul- Dec 2010	Steering Group	Public Health + PSHE Coordinator
12.	Ensure young people have easy access to a well	Young People	Improving individual life chances for all	Improved Health outcomes	Service evaluation forms	Ongoing	YPSMJC Group	

	advertised specialist young person's substance misuse service that can deliver targeted harm minimisation education around alcohol use.			NI115 Substance misuse by young people	Performance monitoring (NDTMS)			
13.	Devise and implement a training programme to ensure that professionals across universal and targeted young people's services are able to identify, screen and refer on young people in need of a specialist intervention for alcohol use.		Deliver training to identified key group in YPSM treatment plan	Improved Health outcomes  Referrals/Use of DUST  Improved chances for vulnerable individuals and families  NI115 Substance misuse by young people	Training evaluation  NTDMS	Apr - Jun 2010	YPSMJC Group	Keith Bootle
14.	Carry out a programme of education for licensed businesses to improve compliance with licensing laws including 'Think 25' , 'Age Check' due diligence measures and SPA proof of age.	Licensed premises	X retailers visited  X retailers signed up to 'Think 25'	Target compliance X%		Ongoing	Trading Standards	
15.	Ensure all licensed alcohol retailers have a range of materials relating to 'Think 25', 'Age Check' and SPA proof of age	Licensed premises	X retailers visited  X retailers signed up to 'Think 25'	Target compliance X%  Increase in retailers requesting proof of age before selling – base line to be established in 09/10		Ongoing	Trading Standards	
16.	Promote take up of Southwark's SPA proof of age card in all Southwark schools and through individual applications	Young People	Programme of education/ awareness work around the SPA proof of age card in X youth and community settings	NI115 Substance misuse by young people	Monitoring applications	Ongoing	Trading Standards	



			Dissemination of applications to X number of Schools					
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**Treatment:**

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
17.	Ensure that young people have easy access to specialist treatment for young people with alcohol related problems.	Young people	Increase the numbers into treatment	NI115 Substance misuse by young people	Service evaluation forms, Service Users feedback, NTDMS contract monitoring	Ongoing	YPSMJC Group	
18.	To offer effective and integrated care co-ordination of young people with alcohol treatment needs across universal, targeted and specialist children's services.	Young People	100% of Young People in treatment to have a care plan and 75% leave treatment	NI115 Substance misuse by young people	Service evaluation forms, Service Users feedback, NTDMS contract monitoring	Ongoing	YPSMJC Group	

**Enforcement:**

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
19.	Carry out a planned programme of test purchasing for the underage sale of alcohol based on targeting problem traders, intelligence, and sampling.	Licensed premises	X test purchase operations carried out.	NI23 Make communities safer  NI115 Substance misuse by young people  X Compliance rate Reduction in retailers selling to under 21s Improved health outcomes for young people living in southwark	Responses to intelligence.	Ongoing	Trading Standards	Police
20.	Take formal enforcement action consisting of license reviews, prosecutions, simple cautions, fixed penalty notices, warnings	Licensed premises	Programme of work agreed for all problematic premises	NI23 Make communities safer	Data	Ongoing	Trading Standards	Police

	as required from test purchasing outcomes.		X reviews	NI115 Substance misuse by young people  X Compliance rate Reduction in retailers selling to under 21s  Improved Health outcomes				
21.	Devise protocol for the Street Wardens continued use of current legislative powers to tackle alcohol related disorder and underage drinking.	Wardens	Protocols to be set	Gaps identified and new/better ways of working established.  NI23 Make communities safer  NI20 – Assault with injury crime  NI 39 Reducing alcohol-harm related hospital admission rates	Protocol agreed and signed off	Mar – Jun 2010	Alcohol Coordinator	Wardens + Key partners

## **HEALTH & SOCIAL CARE**

### **Information gathering:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
22.	Ensure that all necessary Health needs assessment information is gathered to inform the 2012/15 Alcohol Strategy. Information to include: <ul style="list-style-type: none"> <li>• monitoring and assessing levels of alcohol treatment and retention through NDTMS figures</li> <li>• assessing diversity profile of people using alcohol</li> </ul>		Timely and accurate data collected	Links and gaps identified  NI 39 Reducing alcohol-harm related hospital admission rates  NI119 Self reported measures for		Ongoing	Steering Group	expert help from PCT Substance Misuse Commissioning Team (SMCT)

	<p>treatment services through contract monitoring information</p> <ul style="list-style-type: none"> <li>• data from A&amp;E, Maternity and other necessary secondary healthy care services</li> <li>• the health and social needs of 'frequent flyers' create a local database, pulling together existing local and national data to inform the needs assessment, commissioning and performance management.</li> <li>• Collect and analyse data that examines the link between mental health difficulties and alcohol misuse</li> </ul>			people's overall health				
23.	Establish framework of all national performance indicators relevant to alcohol provision to provide a baseline assessment of current performance and to enable the setting of key targets in the 2012/15 Alcohol Strategy			Baseline data			DAAT Manager	Alcohol Coordinator
24.	Continue work with Guys and St Thomas and Kings College Foundation Trust to review and deliver services for people presenting with alcohol misuse to A&E	Patients presenting to Southwark Acute Hospital Trust	Improved partnership working	<p>Improved patients experience in A&amp;E</p> <p>NI23 Make communities safer</p> <p>NI 39 Reducing alcohol-harm related hospital admission rates</p>	Better knowledge of feed into future strategies	Ongoing	PCT	Alcohol Coordinator

**Treatment:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
25.	Monitor the effectiveness of treatment and support for	Dependent drinkers	Promoting good relations between	NI 39 Reducing alcohol-harm		Ongoing	Alcohol Steering	

	dependent drinkers and make recommendations for ongoing services.		members of different groups	related hospital admission rates  NI120 All age all caused mortality rate			Group	
26.	Set up a Health specific sub group of the Steering Group to take forward Health actions nominated by the steering group and to explore further opportunities for Health partners to work together to address alcohol need.	Health and Social Care commissioning  Public health, Health and Social Care Performance Team, Health and Social Care service providers	Full engagement of stakeholders	Fully functioning steering group, robust information and analysis, preparations for 2012 strategy	Compliance and reference of the group	Steering Group Jan – Mar 2010		PCT (SMCT), Health and Social Care performance management, Public Health
27.	Expand the current remit of the Assertive Outreach service to ensure that the two Alcohol Workers can provide effective targeted work and service coordination response to the health, social care and alcohol treatment needs of people drinking on the streets.	Street Drinkers	Cohesion across settings in approach to alcohol misuse.  Promoting good relations between members of different groups	Increase outreach team	Outreach team's case load	Jan - Mar 2010	Alcohol Coordinator + PCT (SMCT)	

## **CRIME & COMMUNITY SAFETY: DOMESTIC VIOLENCE AND SEXUAL OFFENCES**

### **Information Gathering:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
28.	Work with the Sexual Offences and Domestic Abuse (SODA) group to devise mechanisms for collecting robust and comprehensive data relating to sexual offences, domestic violence and alcohol misuse. Information to be gathered from the Domestic Violence and Sexual Offences	Domestic Violence and Sexual Offences response agencies  Police  MARAC	Timely and accurate data  Promoting good relations between members of different groups	Local knowledge of the impact of alcohol on this community  NI23 Make communities safer	Bi monthly to SODA and alcohol steering group	Ongoing	Alcohol Coordinator	SODA + LBS Data Analyst

	<p>response agencies, as well as Southwark Police (Safer Neighbourhood Teams, MARAC and Sapphire Teams). Findings from data to inform 2012-2015 Alcohol Strategy. (SODA will be implementing a programme of mapping and reaching out to diversity groups and BAME communities in 09/10, so SODA / alcohol information gathering to be requested as part of this work.)</p>	Sapphire Teams.						
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**Prevention / Education:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
29.	<p>Raise awareness among door and bar staff in licensed premises about the links between alcohol misuse and sexual offences; and ensure that know what to do in the event of a sexual assault, including how to respond to and support victims and how to preserve evidence.</p>	Licensed premises door staff	X of premises will take part in the awareness sessions	<p>Increased knowledge in this area by bar staff</p> <p>NI23 Make communities safer</p>	Evaluation feedback from license premise staff	Note: This needs to be tied in with next two proposals. Planning needs to be discussed	Police, Licensing,	SODA + Alcohol Coordinator
30.	<p>Plan and deliver an awareness raising campaign aimed and educating young women about their vulnerability to sexual assault when they have been drinking.</p>	Young Women	Campaign monitoring process	<p>Increased knowledge in this area by young women</p> <p>NI23 Make communities safer</p>	Feedback from young women	Ongoing	Alcohol Coordinator	SODA
31.	<p>Plan and deliver an awareness raising campaign aimed at educating young men about the importance of getting active consent to sex, particularly where either partner has been drinking alcohol.</p>	Young Men	Campaign monitoring process	<p>Increased knowledge in this area by young men</p> <p>NI23 Make communities safer</p>	Feedback from young men	Ongoing	Alcohol Coordinator	SODA

				NI20 – Assault with injury crime				
32.	Support above awareness raising campaigns by promoting a 'safe journey home' campaign with licensed club, pub and bar operators	All drinkers	X licensed premise to take part in the event	NI23 Make communities safer  This can be monitored via performance on the following NI's:  NI20 – Assault with injury crime  NI 39 Reducing alcohol-harm related hospital admission rates	Was the programme successful?  Are more people using a taxi service?  Have assaults and drink driving incidents reduced?	Note: This needs to be tied in with above two proposals. Planning needs to be discussed	Licensing	Police
33.	Work with alcohol retailers to ensure licensees understand the responsibilities they have associated with selling or supplying alcohol to intoxicated persons.	Licensees	Reduction in alcohol related incidents		Data and intelligence	Ongoing	Licensing	Police Wardens
34.	Work with DV services to create a protocol document guiding work with victims and perpetrators who misuse alcohol.		Reduction in adverse outcomes	Quality of service received	Feedback/evaluation from victims interviews	Apr- Sep 2010	SODA	Alcohol Coordinator
35.	Ensure that all SODA services are given Models of Care Integrated Care Pathways information and are confidently able to refer individuals for substance misuse interventions.	SODA Stakeholders	Models of care pathways issued to xx services	Workers are able to refer individuals for substance misuse interventions.	Feedback/evaluation from victims interviews	Apr- Sep 2010	Alcohol Coordinator	SODA

**Treatment:**

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
36.	Ensure alcohol specialist services are represented appropriately at MARAC.	Service workers	Reduction in adverse outcomes	Representation at the MARAC	Feedback from MARAC	Ongoing	MARAC Coordinator	
37.	Ensure that a Routine Enquiry (DV) programme is	Service workers	Action plan for Routine Enquiry roll out	Quality of service received	Routine Enquiry has been rolled	Planning – Apr – June	SODA + Alcohol	

	planned and implemented across Southwark's substance misuse services.				out across services  Feedback/evaluation from victims interviews	2010	Coordinator	
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## **COMMUNITY SAFETY, ANTI-SOCIAL BEHAVIOUR AND DISORDER**

### **Information Gathering:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
38.	<p>Plan and implement mechanisms for gathering and analysing comprehensive data about alcohol-related night-time economy disorder and crime including:</p> <ul style="list-style-type: none"> <li>Collecting alcohol related ambulance pick up data, for analysis and hotspot area mapping exercise every six months.</li> <li>Collecting data on Alcohol related Violence against a person, disorder and rowdiness associated with licensed premises.</li> <li>Reviewing the data that licensees may be able to share – e.g. refusals data and disorder calls – and decide on the merit of gathering such data.</li> <li>Ensure that data gathering also seeks to establish an understanding of the experiences of vulnerable diversity groups in relation to alcohol related disorder and violence.</li> </ul> <p>Data to be gathered to inform the development of the 2012-2015 Alcohol Strategy, as well</p>	Alcohol steering group POG Licensing	<p>Timely and accurate data</p> <p>Inform development of 2012-2015 Alcohol Strategy, as well as the 2012-2015 Southwark Statement of Licensing Policy</p> <p>Data gathered by community desk will not be able to establish understanding of experiences of vulnerable groups. If want to do this will need to review how you will do this.</p>	<p>Targeted resources</p> <p>Safer communities</p>		<p>Jan – Mar 2010</p> <p>Bi weekly to POG</p> <p>Jan – Mar 2010</p>	LSB Data Analyst	Licensing + Alcohol Coordinator

	as the 2012-2015 Southwark Statement of Licensing Policy; and to identify areas that require an immediate partnership response.							
39.	Analysis of above data to be provided on six-monthly basis to be reported to Licensing Committee for consideration and development of saturation policies dealing with cumulative impact of alcohol licensed venues.		Reduction in alcohol related VAP and disorder and rowdiness within saturation zones	Member-level decisions made on introduction, continuation and cessation of saturation zones as appropriate	Effectiveness of saturation zones borne out by analysis of alcohol related VAP and disorder and rowdiness,	Reports Licensing Committee in Jan Mar 2010. Reported onto Council Assembly as appropriate	Licensing	Partnership Analyst Police EPT Legal Services Corporate Support
40.	Consideration to be given to the extent of data that can be published and circulated to licensees, together with consideration of protocols for sharing information within trade on refusals.	Alcohol licence holders	Regular information provided to licensees on alcohol related harm	Licensees become more informed	Formal information sharing process established.	Jan -Mar 2010	Licensing	LBS Data Analyst
41.	Review outcomes of Home Office 'Safe, Sensible & Social: Selling Alcohol Responsibly' consultation and take necessary steps to implement proposed code of practice around socially responsible alcohol retail.	Alcohol licence holders	Mandatory licence conditions introduced.  Process for discretionary conditions established.  Unit alcohol / health information requirements distributed	Compliance with conditions / requirements achieved  Cessation of irresponsible alcohol promotions  Greater information for consumers	Objective assessment by inspecting officers	Jan - Mar 2010	Licensing	Trading Standards  Food Safety
42.	Develop and promote good practice guide for licensees incorporating social responsibility issues.	Licence holders	Good practice guidance established	Improved management of licensed premises	Level of incidents relating to alcohol licensed premises recorded	Apr - Jun 2010	Licensing	Police  Trading Standards  SIA
43.	Seek to establish a Licensing Partnership Forum.	Licensees	Partnership established	Improved level of communication between	Fact	Jan -Mar 2010	Licensing	Police  Trading



				agencies & licensees				Standards
44.	Identify key alcohol-related ASB issues e.g. street drinking and late night disorder to enable alcohol control zones to be monitored for improvement.	Street Drinkers and Individuals committing crime and disorder	Programme of interventions agreed for problematic individuals	<p>Reduce incidents of alcohol related rowdy, inconsiderate and violent behaviour</p> <p>This can be monitored via performance on the following NI's:</p> <p>NI20 – Assault with injury crime</p> <p>NI 39 Reducing alcohol-harm related hospital admission rates</p> <p>NI 41 Reducing perceptions of drunk or rowdy behaviour as a problem</p>	<p>Feedback on problematic individuals</p> <p>Everywhere in Southwark will be a Safe and attractive place to live, visit and work.</p>	Ongoing	Alcohol Coordinator	
45.	Review data requirements for monitoring problems associated with street drinking and establish best mechanisms for collecting data to inform strategic planning, as well as intelligence gathering for immediate operational responses to need.		Programme of work agreed	<p>Local knowledge of the impact of alcohol on this community</p> <p>NI23 Make communities safer</p> <p>NI20 – Assault with injury crime</p> <p>NI 39 Reducing alcohol-harm related hospital admission rates</p> <p>NI 41 Reducing</p>	Feedback/evaluation from wardens	Jul - Sep 2010	Alcohol Coordinator	Wardens + St Mungos

				perceptions of drunk or rowdy behaviour as a problem				
46.	London Fire Brigade (LFB) to continue monitoring data relating to fires where alcohol intoxication is implicated and to make this information available for the 2010 Alcohol Needs Assessment.	LFB workers	Timely and accurate data	Targeted resources to inform the development of 2012-2015 Strategy  NI23 Make communities safer		Ongoing	LFB	
47.	Monitor alcohol-related community safety and disorder data to highlight any areas of immediate urgent concern.	Alcohol strategy group  POG		Reduced alcohol related disorder  NI23 Make communities safer  Targeted resources		Bi- weekly to POG	Data Analyst	Alcohol Coordinator

#### Prevention / Education:

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
48.	Continue to support new licensees with induction training around their responsibilities under the Licensing Act	New (alcohol) licence holders	Level of licence compliance among target group upon next inspection	Improved premises management	Objective assessment by officers conducting inspections	Ongoing	Licensing	Police
49.	Develop and deliver to partner agencies a rolling programme of training around raising fire safety awareness (linked to alcohol misuse) for staff working directly with service users, e.g. key workers, carers, frontline housing staff; including information about risks and referral information relating to free Home Fire Safety Visits.		Series of performance measures within LFB strategy	NI49 Number of primary fires and related fatalities/ non-fatal casualties, excluding precautionary checks  NI33 Arson incidents	Performance management framework will be used to monitor progress	Ongoing	LFB	
50.	Devise an action plan to		Series of performance	NI49 Number of	Performance		LFB	

	ensure that information about LFB services is disseminated to key local agencies.		measures within LFB strategy	primary fires and related fatalities/ non-fatal casualties, excluding precautionary checks	management framework will be used to monitor progress			
51.	Where appropriate and possible within resources, deliver alcohol and fire awareness sessions visits and / or talks to service users at community based projects.		Series of performance measures within LFB strategy		Performance management framework will be used to monitor progress	Ongoing	LFB	
52.	Run an awareness campaign on alcohol-related fires and include information in council tenant induction packs		Series of performance measures within LFB strategy	NI49 Number of primary fires and related fatalities/ non-fatal casualties, excluding precautionary checks  NI33 Arson incidents	Campaign evaluation form	Ongoing	LFB	Alcohol Coordinator
53.	Continue to support and enable Pubwatch schemes.	Alcohol licence holders	Annual growth in pub watches established.  Regular attendance at meetings achieved	Licensee support networks established and maintained	Formal records	Ongoing	Licensing	Police,
54.	Provide prevention and education information to communities around key sporting and seasonal events.		Reduction in adverse outcomes, alcohol related disorder	NI23 Make communities safer		Ongoing	Street Wardens	

**Treatment:**

	<b>Action</b>	<b>Target Group</b>	<b>Critical Success Measures</b>	<b>Outcomes</b>	<b>Evaluation Methods</b>	<b>Timescales</b>	<b>Lead Officer</b>	<b>Supporting Officers</b>
55.	Ensure Street Wardens are provided with information about alcohol services available within the borough and supported to sign-post individuals who are street drinking to those services.		Reduction in adverse outcomes, alcohol related disorder	NI23 Make communities safer  Targeted resources		Ongoing	Street Wardens	

56.	Ensure that St Mungos Assertive Outreach service becomes a central point for targeting and tasking work with individuals who are street drinking and can respond with key partners to hot spot street drinking areas as they arise.		Reduced alcohol related disorder	NI23 Make communities safer  Targeted resources		Ongoing	Alcohol Coordinator and St Mungos	
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**Enforcement:**

	Action	Target Group	Critical Success Measures	Outcomes	Evaluation Methods	Timescales	Lead Officer	Supporting Officers
57.	Run awareness and training campaign for licensed premises about their responsibilities around safe and sensible drinking.	licensed premises	X licensed premises to take part in awareness raising  Reduction in rowdy, inconsiderate and violent behaviour resulting from alcohol misuse	Help licensees maintain a safe, secure and relaxing environment for your customers  NI20 – Assault with injury crime  NI 39 Reducing alcohol-harm related hospital admission rates  NI 41 Reducing perceptions of drunk or rowdy behaviour as a problem	Everywhere in Southwark will be a Safe and Attractive place to live, visit and work.  Training course feedback	Ongoing	Licensing	Police  Trading Standards
58.	Continue to use current legislative powers to tackle alcohol-related disorder and plan the appropriate application of the range of new legislative provisions that relate to alcohol related crime and disorder including: • Drinking Banning Orders (from 09/10) • Direction to leave powers under section 27 Violent	Individuals committing crime and disorder	Programme of interventions agreed for problematic individuals	Reduce incidents of public based alcohol related disorder (rowdy, inconsiderate and violent behaviour)  This can be monitored via performance on the following NI's:	Feedback on programme of interventions for problematic individual  Everywhere in Southwark will be a Safe and Attractive place to live, visit and work.	Ongoing	Alcohol Steering Group	

	<p>Crime Reduction Act (VCRA)</p> <ul style="list-style-type: none"> <li>• DPPO (Southwark evaluation)</li> </ul>			<p>NI20 – Assault with injury crime</p> <p>NI 39 Reducing alcohol-harm related hospital admission rates</p> <p>NI 41 Reducing perceptions of drunk or rowdy behaviour as a problem</p>				
59.	Improve signage relating to controlled drinking zone	Community including problematic street drinkers	Increase signage in identified areas	Signs are located in all known problematic and surrounding areas	Visible signage in problematic and surrounding areas	Ongoing	Alcohol Coordinator	
60.	Carry out programme of during operation inspections of licensed premises to check for compliance with terms conditions and restrictions of licences and licensing law, with frequency of inspection determined on risk-assessed basis.	Alcohol licence holders / DPS	<p>Percentage of planned inspections undertaken</p> <p>Level of compliance achieved</p>	Improved management of alcohol licensed premises	Objective assessment by inspecting officers	Ongoing to year end	Alcohol licence holders / DPS	
61.	Enforce the current and any forthcoming provisions of consumer protection legislation with regard to fake / substituted alcohol, ensuring correctly marked alcohol strength and correct alcohol measures.		Reduce availability of fake /substituted alcohol	NI182 Satisfaction of business with local authority regulatory services		Ongoing	Trading Standards	

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<sup>1</sup> Tackling the Impact of Alcohol: Southwark priorities

<sup>2</sup> Southwark's alcohol misuse scoping review 2008-2011

<sup>3</sup> The Statistic's on Alcohol: England 2009

<http://www.ic.nhs.uk/webfiles/publications/alcoholeng2009/Final%20Format%20draft%202009%20v7.pdf>

<sup>4</sup> "Safe. Sensible. Social. The next steps in the National Alcohol Strategy", 2007, Department of Health, Home Office, Department for Education and Skills, Department for Culture, Media and Sport

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_075218?IdcService=GET\\_FILE&dID=141302&Rendition=Web](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_075218?IdcService=GET_FILE&dID=141302&Rendition=Web)

<sup>5</sup> Alcohol and the family: a position paper from Alcohol Concern

[www.alcoholandfamilies.org.uk](http://www.alcoholandfamilies.org.uk)

<sup>6</sup> 6 Understanding Alcohol Issues for Professionals working with Parents,

[www.alcoholandfamilies.org.uk](http://www.alcoholandfamilies.org.uk)

<sup>7</sup> 'Use of alcohol among Children and Young people' DCSF 2008

<sup>8</sup> National Statistics on Alcohol: England 2009

<http://www.ic.nhs.uk/webfiles/publications/alcoholeng2009/Final%20Format%20draft%202009%20v7.pdf>

<sup>ix</sup> Cabinet Office – Strategy Unit's Alcohol Misuse, Interim Analytical Report

[http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/su%20interim\\_report2.pdf](http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/su%20interim_report2.pdf)