| Number<br>1 | Recommendation That the North East Strategic Health Authority working with its public health partners and local authorities, build on the work of local initiatives to develop a campaign to reduce alcohol consumption.   | Responsibility<br>ES/PK | Date / Anticipated Completition Date Ongoing |
|-------------|--|-------------------------|--|
| 2           | That Stockton-on-Tees Borough Council and North Tees<br>Primary Care Trust support the establishment by the SHA<br>of a regional office for the Safe Consumption of Alcohol<br>(OSCA) in future budget-setting processes   | ES                      | Complete                                     |
| 3           | That a multi-agency group identified by the Director of Public Health use the process of updating the "Alcohol: A digest for Stockton" published following the publication of the National Alcohol Strategy 2004 to inform the drafting of an alcohol strategy to determine the current extent of problems caused by alcohol consumption and identify commissioning needs. | ES                      | Spring 2009                                  |
| 4           | That the alcohol strategy group develop a 3 - year strategy through multi-agency representation, in keeping with the business planning process, to be costed and taken through the usual PCT/LA (as appropriate) financial approval processes.   | ES                      |  |
| 5           | That the multi-agency alcohol group undertake a gap analysis that includes needs assessment matched with current service provision. An action plan to address identified gaps would result in the strengthening and development of care pathways.  | ES                      | Autumn 2008 -<br>Spring 2009                 |
| 6           | That the appropriateness of widening the DAT agenda to include alcohol (DAAT) should be examined as a matter of priority in accordance the Alcohol Harm Reduction Strategy for England 2004 – Action 20  | EC                      | Autumn 2008                                  |

| 7  | That ongoing alcohol screening is provided at the University Hospital of North Tees, subject to the pilot project findings, in order to provide signposting to support services.  | ES    | Spring 2009 |
|----|---|-------|-------------|
| 8  | That a clinical service specialist be identified to investigate and determine the scale and infrastructure required to provide the appropriate in-patient detoxification services to be commissioned from a range of providers.   | ES    | Autumn 2008 |
| 9  | That, subject to positive results of a pilot project in Middlesbrough, the Safer Stockton partnership considers the suitability of introducing alcohol referrals for arrested individuals.  | MB    | Autumn 2008 |
| 10 | That North Tees PCT strengthens its alcohol services commissioning process by identifying a lead officer with responsibility for determining/coordinating service provision through appropriate multi-agency partnership arrangements.  | ES    | Ongoing     |
| 11 | That Stockton-on-Tees Borough Council's PIC (Participation, Involvement and Consultation) Network is consulted to determine how best to deliver services for alcohol reduction/cessation.   | KA/CW | Dec-08      |
| 12 | That the Leader of the Council write to Stockton Borough MP's highlighting the concerns identified during this review and request that appropriate representation supporting sensible and responsible alcohol licensing and retailing is made to Government Ministers and departments | KL    |             |
|    |   |       |             |
|    |   |       |             |

| Evidence of Progress - 16/06/08  National campaign progressed (Think B4U Drink & Units). Regional Advisory Group establishes and links made with local representation.  The PCT has contrubuted £48,000 to the NE Regioanal Alcohol Office.  | Evidence of Progress 06/04/09  Think BU drink continues to promote safe, sensible alcohol consumption. There has been interest from other regions to purchase the campaign.  The P.C.T has committed finance, Regional office launched 11th February 2009.  | Assessment of<br>Progress<br>(Categories 1 -4)<br>16/06/08 |
|--|---|--|
| Muti Agency Group has been set up and is meeting to update the strategy. An external consultant is to be emplyed to undertake the strategy update/ refresh and mapping requirements. Will connect with existing groups and leads to maximise efffectiveness and value of review. Oversight will be maintained via the Muti Agency Group. | Alcohol strategy group meets on a monthly basis. Modernisation manager employed who will lead on the strategy development, gap analysis and needs assessment. Needs assessment to be completed by Summer 2009. Following completion of the needs assessment and gap analysis the strategy will be further up-dated, Winter 2009 |  |
| The PCT has invested via AOP in a range of alocohol services (in excess of £284,000). The mapping exercise from the strategy will identify specific actions. PBC alcohol group will undertake work to map alchohol pathways and make recommendations for future commissioning of services.   | Needs assessment and gap analysis to<br>be completed Spring 2009. Pathway<br>between and into alcohol services<br>developed dissemination via P.B.C from<br>April 2009.   |  |
| Initial scoping of the DAAT will be undertaken as part of the employment of the external consultant.   | Paper proposing and outlining the benefits of the development into a D.A.A.T presented at D.A.T steering group Feb 2009 and will be present at C.M.T on 24th March 2009.  |  |

| Assessment if workload via PADs has                               | Following completion of the pilot study, it                             |  |
|---|---|--|
| been undertaken with A&E / NT&H on                                | was identified that there was no capacity                               |  |
| approach. Alcohol is a priority                                   | within A&E to mainstream the pilot. It                                  |  |
| workstream. A Practice Based                                      | has also been idetified that there would                                |  |
| Commissioning alcohol sub group has                               | be a risk with exceeding capacity within                                |  |
| been set up which will support the roll                           | treatment services if the need for                                      |  |
| out of alcohol screening and brief                                | treatment increased through increased                                   |  |
| interventions. This group will also                               | identification.   |  |
| connect with other parts of the system                            |   |  |
| e.g. public health practitioners to look at                       |   |  |
| primary care pathways, increase uptake                            |   |  |
| of the alocohol enhanced serevice and                             |   |  |
| screening, working with Pubilc Health practitioners in Practices. |   |  |
| practitioners in Practices.                                       |   |  |
|   |   |  |
| Community detoxification schemes were                             | Currently no funding available for the                                  |  |
|   | provision of tier 4 services. The needs                                 |  |
| ,                           | assessment will identify actual number                                  |  |
|   | of provision required and associated                                    |  |
|   | cost.   |  |
| Awaiting results from pilot.                                      | Pilot currently in progress, . On                                       |  |
|   | completion of the pilot in 2010 (April) if                              |  |
|   | successful potential funding available                                  |  |
|   | via home office to role out.  |  |
| Interim arrangement for commissioning                             | Modernisation manager for alcohol                                       |  |
|   | appointed, a joint appointment between                                  |  |
| agreed. Lead officer for PBC elements                             | P.C.T and S.B.C. S.B.C have also  |  |
| in place. Bid via AOP not agreed.                                 |   |  |
| ,   | appointed a modernisation manager for                                   |  |
|   | appointed a modernisation manager for YP substance misuse services.     |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
| Work to progress through this group.                              |   |  |
| Work to progress through this group.                              | YP substance misuse services.   |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |
| Work to progress through this group.                              | YP substance misuse services.  This will be considered within the needs |  |

Assessment of Progress (Categories 1 -4) 06/04/09