

**SOCIAL CONSEQUENCES OF ALCOHOL ABUSE
(Report of the Overview and Scrutiny (Service Support))**

1. INTRODUCTION

- 1.1 At its meeting held on 9th September 2008, the Overview and Scrutiny Panel (Service Support) considered a briefing paper prepared by the Head of Administration on the night time economy in Huntingdonshire in the context of the Licensing Act 2003. The issue had been raised at a previous meeting as a possible area for the Panel to undertake a detailed investigation and the paper provided details of the provisions of the Act, together with information on its impact at both a national and local level.
- 1.2 From the information provided, the Panel concluded that the majority of establishments within the District in the main appeared to be well managed and there was little that could be achieved in undertaking a review of the implications of the Act and its practical application by the Council. However Members felt that there were sufficient issues in relation to the social consequences of alcohol abuse to merit an investigation. In particular, the Panel was aware of concerns in some quarters over the number of people congregating in St Ives town centre on Thursday, Friday and Saturday evenings. With this in mind Councillors J T Bell, P M D Godfrey and Ms S L Kemp were appointed to a working group to address the situation.
- 1.3 At the request of Councillor L W McGuire, the Working Group was also asked to explore the Council's position with regard to the adoption and implementation of the Countywide Alcohol Harm Reduction Strategy 2008 -2011.

2. METHODOLOGY

- 2.1 At the outset of the review, the Working Group agreed that the specific purpose of their study should be to investigate the impact of excessive alcohol consumption on levels of anti-social behaviour and alcohol related crime within the District. Councillor Ms S L Kemp was appointed as the Group's rapporteur and to assist Members in their review, the following background information was obtained:-

- Cambridgeshire Alcohol Harm Reduction Strategy 2008 – 11;

- Details of a presentation to all Members on 21st October 2008 by the Cambridgeshire Drug and Alcohol Advisory Team Co-ordinator;
- Huntingdonshire Community Safety Plan 2008 – 2011;
- Bassetlaw District Council: Review of Alcohol Related Anti Social Behaviour;
- Hospital admissions for alcohol related harm;
- the Local Authority Profile of Alcohol Related Harm; and
- the Alcohol Harm Reduction Newsletter – East of England

2.2 As part of its investigations, the Working Group met the District Council's Community Safety Team Leader and received information on several ongoing initiatives being undertaken by the Community Safety Partnership to address the negative impact that behaviour related to alcohol consumption can have on the community. Details are attached at Appendix A.

2.3 In doing so, the Working Group has noted the inclusion of targets within the Community Safety Plan 2008 – 11 to address alcohol related anti-social behaviour and that the Partnership's contribution towards the Countywide Alcohol Strategy will enable actions to be put in place to address the consequences of alcohol misuse. The Working Group has particularly commended the work which the Partnership is undertaking with young people and has welcomed the introduction of a "Nightwatch" initiative in St Ives which is designed to tackle the issues of crime and disorder associated with the district based night time economy in the town centre to ensure a co-ordinated response is taken when dealing with the problem individuals.

2.4 Members also heard evidence from representatives of Cambridgeshire Constabulary and received detailed statistical information on alcohol related anti-social behaviour and crime in Huntingdonshire during 2007/08. Details of the way in which the Constabulary seeks to deal with these problems in both the town centres and villages was also provided. These included the use of additional patrols, changes in shift patterns, meetings with appropriate agencies and the use of Designated Public Place Orders to prevent the congregation of young people drinking alcohol. The Working Group has noted the Police's opinion that there is no particular problem in Huntingdonshire which is not reflected elsewhere in the country.

2.5 The Group was advised of the extensive range of powers available to enforcement agencies, which included the District Council's Licensing Section and the County Council's Trading Standards Service as well as the Police, to deal with alcohol related crime and disorder. Recent legislation also provides a new power for a police constable to direct a person aged 16 or above to leave a locality for up to 48 hours which

should provide an additional measure for the Constabulary to tackle the problems on the ground.

3. DELIBERATIONS

3.1 The Working Group received information on the number of instances of alcohol-related anti- social behaviour in Huntingdonshire which had been obtained from the County Council's Research Group. These are reproduced below:-

	St Ives		Huntingdon		St Neots		Huntingdonshire	
	No. of incidents	% of all ASB incs	No.of incidents	% of all ASB incs	No.of incidents	% of all ASB incs	No.of incidents	% of all ASB incs
Q1 (April – June 2007/8	122	19.5%	153	14.9%	103	14.7%	378	16.1%
Q2 (July – Sept 2007/08	156	21.1%	183	16.3%	129	14.1%	468	16.8%
Q3 (Oct – Dec 2007/08	135	22.4%	115	13.4%	94	12.8%	344	15.7%
Q4 (Jan – Mar 2007/08	92	16.5%	169	19.2%	82	12.2%	343	16.3%
Q1 (Apr – June 2008/09	139	18.6%	201	17.2%	106	15.3%	446	17.1%

3.2 It was clear to the Group that there are problems being experienced within the District in terms of alcohol related crime and anti-social behaviour and that these are primarily concentrated in the 3 main town centres of Huntingdon, St Ives and St Neots. What is less clear however is the extent to which this is a national phenomenon and how Huntingdonshire compares with the picture nationally.

3.3 The information supplied by the Police suggests that, while there are particular problem areas in Huntingdonshire, the situation is better than elsewhere in the country. This is further demonstrated by health statistics relating to hospital admissions:-

2002-2004, Deaths and Months of Life Lost from Alcohol Related Conditions

Male:	UK Average 9.55	Hunts 6.85
Female:	UK Average 5.14	Hunts 4.90

2004 – 05 Hospital Admissions for Alcohol Specific Conditions, per 100,000

Male: Uk Average 305.81 Hunts 169.25

Female: UK Average 144.62 Hunts 78.07

Hospital Admissions for alcohol specific conditions (aged under 18) 2002 -2005 per 100,000

Male: UK Average 48.97 Hunts 37.02

Female: UK Average:58.51 Hunts 41.5

- 3.4 No information is available for emergency admissions as Hinchingsbrooke Hospital does not currently record alcohol related Accident and Emergency treatment but the hospital is hoping to start a recording scheme similar to that adopted by Addenbrookes Hospital where a lead officer has been identified for this purpose.
- 3.5 While each of the market towns has its own characteristics in terms of the night time economy, St Ives is currently the busiest in terms of the number of people attracted to the town. Although this has meant that there are flourishing pub and club based entertainments in the town, it is apparent that this has also presented some adverse effects. The Police are sufficiently concerned to seek to obtain additional funding to direct two additional officers specifically to deal with the town centre at weekends and both the Community Safety Team and the Police objected to a planning application for a night club expansion earlier in the year on the grounds of the impact on crime and disorder and the capacity of the town centre to cope with additional late night outlets. Moreover the Overview and Scrutiny Panel (Service Delivery) has recommended Cabinet to review the street cleansing regimes to overcome the problems of litter on Sundays caused by Saturday evening entertainment.
- 3.6 Notwithstanding those concerns, the Group has been informed that the Council has not been asked to review its Statement of Licensing Policy which states that there is no problems in terms of the cumulative impact of licensed premises in the District, nor has any responsible authorities or interested persons in the form of residents and businesses asked the Council to review an existing premises licence on the grounds of crime and disorder or public nuisance in the town centres, or indeed elsewhere in the District.
- 3.7 The Working Group noted that the other primary aspect of concern in relation to anti-social behaviour is under-age drinking in public places which is not restricted to the towns and is an unfortunate practice in many of Huntingdonshire's villages. Clearly this is not restricted to the

District alone and is common throughout the country. The Trading Standards service has recently completed an exercise to target sales to under 18s in St Neots and the District Council's own Licensing Section issues guidance and advice, especially to small retailers concerning alcohol sales to the under 18s.

3.8 To address these issues, the Working Group has been informed that a Countywide Alcohol Harm Reduction Strategy was approved by Cambridgeshire Together in September 2008. The Strategy is designed to bring together relevant organisations in a multi-agency approach to reduce the harm caused by alcohol to individuals, families and communities. Supporting action plans set out a number of key tasks for the next three years to tackle the problems which include community safety, crime and anti-social behaviour and children and young people. The details of which are set out in Appendix B with several specifically targeting the control of violence and anti-social behaviour, i.e

- the implementation and support of neighbourhood policing and neighbourhood level working;
- appropriate use of enforcement measures such as Dispersal Orders and Designated Public Place Orders;
- Effectively dealing with alcohol related anti-social behaviour; and
- Developing and implementing targeted local action plans.

There are also proposals for diversionary and educational work with young people.

3.9 The Group welcomed the preparation of the Strategy as a way of reducing the harm that alcohol currently causes across Cambridgeshire. There is a plethora of organisations currently engaged in this field and Members acknowledged the potential problems of effective co-ordination. The actions are wide ranging and the Working Group was unable to suggest any proposals that had not already been identified and included. The action plans do contain performance indicators and milestones and the Working Group felt that it would be helpful for information on achievements against the targets to be made available more widely as they develop.

3.10 The Group considered the District Council's position with regard to the adoption and implementation of the Countywide Alcohol Harm Reduction Strategy in the light of the remarks in paragraph 1.3 above. In doing so, the Group has noted that both the District Council and the Local Strategic Partnership are supportive of the Strategy. However the latter decided not to support funding of the strategy implementations as an investment proposal for reward monies from the Local Public

Service Agreement given the high demand for this funding and concerns as to whether this would produce any added value in Huntingdonshire over and above the practical initiatives clearly being implemented by the Police, District Council and other partners.

- 3.11 The Group has received information on the wide range of enforcement powers available to the Police and other responsible authorities to deal with crime, disorder and public nuisance associated with alcohol consumption. Details are available at <http://drugs.homeoffice.gov.uk/publication-search/drug-strategy/alcoholguide?view=Binary>. Parliament has added to those powers recently in further legislation in a reaction to the perception that longer opening hours have led to greater violence and anti-social behaviour in town centres and other communities. This has included the designation of alcohol disorder zones, the use of which has been considered recently by the Licensing Committee and Cabinet and discounted.
- 3.12 One of the more helpful powers available to the Council is the use of Designated Public Place Orders which prevents alcohol consumption in a public place. Only one Order has been made to date by the Council which has designated an area in St Ives where problems were occurring but it is open to local communities to ask for other areas to be designated if documentary evidence of problems can be provided. The Police also can seize alcohol from a person under 18 years of age under the Confiscation of Alcohol (Young Persons) Act 1997. It appeared to the Group that there were adequate powers available to the Police and other agencies but there was some doubt as to whether a sufficiently proactive approach was being taken by enforcement agencies, possibly as a result of limited resources.
- 3.13 With regard to the impact of licensed premises in town centres and elsewhere, the Group has noted that the Licensing Act 2003 provides an opportunity for members of the public and responsible authorities to initiate a review of a premises licence or club premises certificate if they have concerns that one or more of the licensing objectives such as the prevention of crime and disorder and public nuisance are not being met. Unless a review is triggered a licence or certificate will continue in perpetuity unless amended or surrendered by the licence or certificate holder and the Licensing Authority has no discretion to act itself under the legislation other than to enforce the provisions of the Act and ensure compliance with licence conditions. However since implementation of the Licensing Act 2003 in November 2005, only 2 applications for reviews have been received, both of which were made

by the Police because of the evidence of drug dealing in licensed premises.

- 3.14 As no reviews have been initiated by the public, the Group has emphasised a need to ensure that members of the public are aware of their ability to challenge existing licences and the mechanism by which they can do so. Huntingdonshire is not unique in this respect as research has shown that the freedoms introduced by the Act are being well used but that the powers to tackle problems are not sufficiently well known and taken advantage of.

4. CONCLUSION AND RECOMMENDATIONS

- 4.1 The Working Group has acknowledged that problems with alcohol related anti-social behaviour and criminal activity are evident within the District. However from the evidence available, the Group is satisfied that the situation in Huntingdonshire is less problematic than in many parts of the country.
- 4.2 The powers available to the Police and other enforcement agencies are wider ranging and there is a plethora of organisations involved in tackling the impact and implications of excessive alcohol consumption. The Group has commended the initiatives which are being undertaken by the Community Safety Partnership and is interested in the results of the "Nightwatch" initiative in St Ives if the Police can obtain the funding for the additional resources. The Group has also welcomed the development of the Countywide Alcohol Strategy and the associated action plan for tackling a host of specific issues. However the sheer scale of the action plan with its multitude of actions and targets is ambitious and the Working Group is concerned that there is sufficient co-ordination among the various enforcement and voluntary agencies. To that extent the Working Group shared the reservations of the Huntingdonshire Local Strategic Partnership about the use of LPSA reward grant in implementation of the Strategy.
- 4.3 The Group recognise that there is little in the way of additional initiatives that they can identify to add to those that are already in place. Nevertheless there is some concern as to whether effective use is being made of the full extent of the enforcement available and whether enforcement agencies should adopt a more proactive approach by using those powers to tackle the effects of alcohol misuse and public disorder. This is coupled with a need to ensure that members of the public are aware of their ability to initiate a review of an existing licence if they have concerns that the licensing objectives are not being met.

- 4.4 Having considered the Working Group's report, the Overview and Scrutiny Panel concurred with the outcome of their deliberations. However, the Panel suggested that the original recommendation c) should be strengthened to emphasise the importance of enforcement agencies making full use of the powers available to them to tackle the effects of alcohol misuse and resultant public disorder. This has been incorporated into the recommendations below.
- 4.5 During the Panel's discussions, Councillor L W McGuire, outlined his continuing concerns at the Local Strategic Partnership's decision not to support funding of the implementation of the countywide strategy as an investment proposal for reward monies from the Local Public Service Agreement (see paragraph 3.10). He expressed the view that supporting the initiative would help the various enforcement and voluntary agencies in developing a co-ordinated approach to tackling the problems associated with alcohol assumption.
- 4.6 The Panel has agreed to revisit the study towards the end of the year to review progress made towards the achievement of the Countywide action plan, the Nightwatch project and the availability of statistics from Hinchingsbrooke Hospital on alcohol related accident and emergency treatment.
- 4.7 The Panel therefore agreed that the Cabinet be

RECOMMENDED

- a) to welcome and encourage the actions being taken by the various agencies in an attempt to reduce the impact of excessive alcohol consumption on levels of anti-social behaviour and alcohol related crime within the District;**
- b) to endorse the Cambridgeshire Alcohol Strategy 2008 – 2011 and request that Cambridgeshire Together be commissioned to prepare regular reports on progress towards achievements of the action plan;**
- c) to instruct the Head of Administration to liaise formally with enforcement agencies to encourage them to make full use of the powers available to them to tackle the effects of alcohol misuse and resultant public and to carry out this work in a more co-ordinated way; and**
- d) to request that the District Council's Licensing Section ensure that local residents are aware of the opportunities available to them under the Licensing Act 2003 to initiate reviews of premises licences and club**

premises certificates where they are experiencing problems caused by public disorder emanating from these premises.

BACKGROUND DOCUMENTS

Minutes of the Overview & Scrutiny Panel (Service Support) on 9th September 2008 and 13th January 2009.

Notes of the meetings of the Working Group held on 14th October, 3rd November and 24th November 2008.

Cambridgeshire Alcohol Harm Reduction Strategy 2008-11

Presentation to Council Members by Cambridgeshire DAAT Co-ordinator

Alcohol Related Anti-Social Behaviour and Crime in Huntingdonshire January 2007 to January 2008.

Briefing Paper by the Community Safety Team Leader

Huntingdonshire Community Safety Plan 2008 -2011

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Appendix A

The following alcohol related projects have been put in place by the Community Safety Partnership over the period 2008-09:-

- Project to work with young people at risk of using or under the influence of alcohol and those young people that are committing acts of anti-social behaviour whilst under the influence of alcohol. Focused in identified hotspots, these being Yaxley, St Neots and Ramsey. The project will also receive referrals for young people living anywhere in Huntingdonshire. This project will focus on offering education, advice and support to young people using or at risk of using.
- Commissioned from **DrinkSense** at a cost of £11k funded by the Safer Stronger Communities Fund (SSCF) and a contribution in kind of officer time – **total £11k invested + DrinkSense Officer Time** in 2008/9.
- Targeting young people using both drugs and alcohol. Also targets young people at risk, e.g. family members with a history of alcohol usage and associated offending. Targeted hotspots are Yaxley, St Neots (including Eynesbury) and St Ives. This project will enable experienced staff to carry out detached projects in the identified areas in partnership with the Locality Teams as well as providing training for those working with young people to enable them to recognise the signs of drug/ alcohol use. This project welcomes referrals for young people living anywhere in Huntingdonshire. This project will focus on offering education, advice and support to young people using or at risk of using.
- Commissioned from **DIAL DRUG LINK** at a cost of £18k match funded by the Safer Stronger Communities Fund (SSCF) – **total £36k invested** in 2008/9.
- A pilot scheme that pubs and clubs in St Ives can sign up to, that will enable them to work together with key agencies to address incidents of alcohol related crime, disorder and anti-social behaviour. As part of the scheme an exclusion policy will be introduced, this will involve issuing 'yellow cards' to offenders; two yellow cards will result in a ban from licensed premises throughout St Ives. Members of the scheme will be issued with radios so that they have direct contact to each other as well as the Police and the District Council CCTV Control Room.
- Commissioned from **HBAC (Nightwatch)** - £11,760 Safer Stronger Communities Fund (SSCF) and £10k the Basic Command Unit (BCU) Fund (Cambridgeshire Constabulary) – **total £21,670 invested** in 2008/9.

- Anti-Social Behaviour Orders (ASBO) are also being used to minimise the impact of nuisance street (alcohol) drinkers.
- The HDC CCTV vehicle is being used on a weekly basis to patrol identified urban and rural hotspots within the District where young people are known to be congregating and consuming alcohol, this work is carried out in partnership with the police to enable the confiscation of alcohol to take place. At this time, where appropriate Guardian Awareness Programme (GAP) letters are issued and on some occasions, young people are escorted home to their parents.
- Targeted policing operation known as Operation Kyllachy that will fund additional police officer hours to enable them to patrol specific/ identified areas/ licensed premises at key times to tackle alcohol related anti-social behaviour and violent crime.
- Identified by Central Division and supported by the Huntingdonshire Community Safety Partnership and funded by the Basic Command Unit (BCU) Fund - £5k – **total £5k invested** in 2008/ 09.
- A number of divisionary activity schemes to be held at times when young people may be susceptible to trying / using alcohol. Fusion holiday scheme - £10k – Basic Command Unit (BCU) Fund – Street Sports Project in Yaxley - £2,800 – Basic Command Unit (BCU) Fund – The Buzz Project - £2k – Basic Command Unit (BCU) Fund – **total £14,800 invested** in 2008/ 09.

APPENDIX B

No	County Action	Performance Indicator/ Milestone	Lead	Date by
Community Safety, Crime and Anti Social Behaviour				
2.1	Target irresponsible promotion and sales	<p>Work with OfCOM and the Advertising Standards Authority; industry self-regulation bodies such as the Portman Group; and the alcohol industry itself through a range of codes and standards</p> <p>Develop intelligence by working in partnership with local agencies</p> <p>Work with businesses to provide education and training in the area of underage sales</p> <p>Following educational work, undertake test purchasing activities and prosecute persistent offenders</p> <p>Evaluate and improve the effectiveness of these bodies and take action and tackle the irresponsible sale and promotion of alcohol. Where appropriate, action can be taken at a local level by Licensing Authorities on a case by case basis where there is evidence of a causal link between irresponsible retailing in an individual premises and threats to licensing objectives such as crime and disorder</p> <p>Reduce the number of premises illegally selling alcohol to young people under 18 to 25% by 2009/10 (Benchmark 40%, 35% - 07/08, 30% - 08/09)</p> <p>Maintain sales of alcohol to minors at randomly sampled premises below 15%</p>	<p>All District CDRPs</p> <p>Trading Standards</p> <p>Police</p> <p>CDAAT</p>	<p>Sept 2010</p> <p>Sept 2010</p> <p>“</p> <p>“</p> <p>On going</p> <p>Sept 2010</p> <p>“</p>
2.2	Monitor and assess the performance in policing and community safety and the services delivered by the police working on their own or in partnership, as part of overall performance management arrangements being developed by other	<p>Align local frameworks (e.g. criminal justice, local authorities and transport) to Home Office frameworks</p> <p>Develop a data capture system (i.e. Cardiff Model) to establish accurate linked picture of victim (age/gender), date/time, location, weapon, injury, assailant (age/gender), ?repeat offender, relationship between victim/assailant and police report</p> <p>Integrate APACS vision with policy, delivery and support functions plus</p>	<p>Police</p>	<p>April 2010</p> <p>“</p> <p>Sept 2010</p>

	partners	<p>associated regimes related to good practice, inspection and audit</p> <p>Support a balanced regime of accountability, building on the roles – including any collaborative arrangements – of partners locally, regionally and nationally</p> <p>Cover policing and community safety issues in a balanced way which reflects relative seriousness and which minimises data demands on partners</p> <p>Make best use of performance data, diagnostic data and professional judgements in producing analysis and assessments which:</p> <p>(a) show whether services are effective, equitable and provide value-for-money and whether they are perceived as such</p> <p>(b) reflect relevant Public Service Agreements (PSAs) and other strategic priorities, standards and targets as well as performance against priorities for improvement selected locally</p> <p>(c) use data focused on results (outcomes) but with the capability to use data on inputs, processes or outputs and</p> <p>(d) can monitor implementation of key operational strategies such as neighbourhood policing, alcohol misuse enforcement</p> <p>Communicate data and assessments in a timely manner and in a way which:</p> <p>(a) demonstrate service delivery to citizens, communities and opinion-formers so as to promote visibility, accountability and responsiveness and</p> <p>(b) describe performance to service providers so as to support day-to-day management.</p>		<p>On going</p> <p>“</p> <p>“</p> <p>April 2011</p>
2.3	Reduce the percentage of the public who perceive alcohol use or drunk and rowdy behaviour to be a problem in their area	Develop questionnaire/crime audits/Placed Survey relating to public perception of alcohol related crime and disorder	CDRP Police	Sept 2010
2.4	Make communities safer	<p>Tackle crime and the key drivers of offending, reducing the disorder and anti-social behaviour associated with alcohol</p> <p>Tackle the irresponsible sale or promotion of alcohol</p>	CDRP Police	<p>On going</p> <p>“</p>
2.5	Reducing the harms caused to the community as a result of associated crime, disorder and	Focus prevention, information and support, and where appropriate the criminal justice system at the minority of drinkers who cause or experience the most harm to themselves, their communities and their families. These are: 18–24	Police Probation CJS	On going

	anti-social behaviour	<p>year-old binge drinkers; young people under 18 who drink alcohol; and harmful drinkers</p> <p>Measurably reduce violence against the person offences committed in the town/city centres, recognised and identified 'hop spots' relating to the consumption of alcohol at night, particularly on Friday and Saturdays</p>	A+E	Annually
2.6	Sharpen criminal justice for crime and anti-social behaviour	<p>Develop a combination of penalties and health and education interventions to drive home messages about risks associated with alcohol and to promote behavioural change</p> <p>Measure the indicators for reducing violent crime and disorder, especially assault with injury</p> <p>Measure the indicator for reducing the percentage of the public who perceive drunk and rowdy behaviour to be a problem in their area</p> <p>Joint work with police to ensure relevant indicators are embedded within their plans</p> <p>Develop systems for data collection and analysis from a range of multi-agency sources within the criminal justice system</p> <p>Pilot screening and brief interventions in criminal justice settings</p>	Police Probation CJS A+E CDAAT	<p>Sept 2010</p> <p>“</p> <p>“</p> <p>“</p> <p>“</p> <p>April 2010</p>
2.7	Implement routine identification when people are arrested and in custody, or in other criminal justice settings, and provide brief advice to those identified	<p>Reduce alcohol consumption for all those given brief advice in custody, at 3-month follow-up</p> <p>Measurably reduce offending rate</p>	Police Probation CJS A+E CDAAT	<p>Sept 2011</p> <p>Annually</p>
2.8	Implement conditional cautioning for low-level and persistent alcohol related offences	<p>Liaise with the relevant local authority Community Safety Officer/ASB Officer to monitor cautions and ensure relevant information for consideration Anti Social Behaviour Orders (ASBOs) for individuals.</p> <p>Agree protocols between police, Crown Prosecution Service and treatment provider</p> <p>Develop a systematic and criteria based approach to increase the number of conditional cautions given and Alcohol Treatment Requirements (ATR)</p>	Police Probation CJS A+E CDAAT	<p>April 2010</p> <p>“</p>

		Reduce offences		
2.9	Agree and implement a multi-agency approach to tackling street drinking	Implement multi agency tailored approach to tackling street drinking to the needs of the area in which it occurs.	CDRP ALL	April 2011

	Local Action	Performance Indicator/ Milestone	Lead	Date by
Children, Young People and Families				
3.1	All young people to have access to appropriate alcohol misuse interventions across Cambridgeshire	<p>Ensure a countywide joined-up approach to alcohol services for young people</p> <p>Implement robust care planning and co-ordination of care pathways across the treatment systems agencies to improve client transfers between agencies and reduce unplanned discharges from the treatment/intervention system</p> <p>Increase the capacity of Alcohol Outreach Workers for young people ensuring equity and parity across the county</p>	YOUS CAMHS Drinksens e PCT Primary Care Acute Trusts	Sept 2010 " Sept 2011
3.2	Young people actively engaged in the planning and commissioning of alcohol services	Actively engage with specialist and non- specialist providers/agencies who come into contact with children and young people	ALL	On going
	Tackle underage alcohol consumption town/city centres and reduce those negative effects of underage drinking such as harm to young people and society (including anti-social behaviour and crime and disorder)	<p>Support and develop the network: Community Alcohol Partnership (CAP)</p> <p>Increase joint working, partnership membership and liaison with key agencies to ensure comprehensive sign up and sustainability (particularly around re</p> <p>Build on and take 'lessons learnt' from the Huntingdonshire Pilot to roll programme out across the county. Use this joint approach to work within its three core themes addressing; Education, Enforcement and Public Perception</p>	ALL	On going
3.3	Improve the health and safety of children and young people in relation to alcohol misuse	<p>Year on year measurable percentage increase of schools achieving 'Healthy Schools' status (50% at 2006/07)</p> <p>All schools to be 'working towards' the standards' by 2009</p> <p>Reduce the number of young people who have had an alcoholic drink in past</p>	ALL	Annually April 2009 "

		<p>week to 35% by 2009 (38% at 2006/07)</p> <p>Reduce the number of young people whose intake of units in past week was over 14 to 4% by 2009 (5% at 2006/07)</p>		“
3.4	Specialist alcohol services to support delivery of the PSHE curriculum in schools and other educational settings	<p>Support the on going delivery and development of the Cambridgeshire Community Drug and Alcohol Programme</p> <ul style="list-style-type: none"> • The parents and community drug and alcohol awareness evenings • The PSHE Schemes of Work for PSHE (Primary Schools) • Personal Development (Secondary Schools, Special; Schools and PRUs) • The Life Education programme in primary schools <p>Each district to measurably increase the number of schools receiving PSHE sessions, including delivery of STAY campaign and links to wider risk taking e.g. sexual health</p> <p>Each district to measurably increase the year on year number of PSHE sessions delivered in schools</p> <p>Each district to measurably increase the number of Pupil Referral Units receiving PSHE/ number of sessions delivered</p>	ALL	<p>On going</p> <p>Annually</p> <p>“</p> <p>“</p>
3.5	Improve provision of Young Users and Child and Adolescent Mental Health Services to vulnerable children, particularly in vulnerable circumstances and for those placed out of county	<p>All stakeholders to work with YOUS and CAMHS to continue work through service transformation to improve waiting times to assessment and treatment for children with mental health problems, so that the national target for referral to treatment of 18 weeks is fully achieved for all children</p> <p>All partner agencies to consider how they can contribute through their mainstream activity and resources towards sustaining and developing preventive work with young people over a longer time scale</p> <p>Training programme for frontline workers to be amalgamated with a wider OCYPS programme for young people’s workers. This will be a staged process that should eventually be mapped against job descriptions.</p>	ALL	<p>Sept 2010</p> <p>April 2010</p> <p>April 2011</p>
3.6	Provide a consistent, high quality universal entitlement programme of alcohol education for all young people aged 4-18 years	<p>Identify those young people most at risk of failing to reach their potential because of alcohol misuse and provide tailored support for them</p> <p>Focus prevention, information and support, and where appropriate the criminal justice system at the minority of drinkers who cause or experience the most</p>	ALL	<p>On going</p> <p>“</p>

		<p>harm to themselves, their communities and their families. These are: 18–24 year-old binge drinkers; young people under 18 who drink alcohol; and harmful drinkers</p> <p>Deliver information on alcohol at an appropriate level to ensure a consistent, county-wide approach to delivering messages on substance misuse, in particular cannabis and alcohol</p>		“
3.7	Young travellers not in mainstream school to have access to alcohol education	<p>Sustain and deliver targeted PSHE sessions with young travellers where required</p> <p>Achieve 25 young travellers engaged in project work by 2009</p> <p>Proactive encouragement of parents to attend to ensure opportunities for family based learning</p>	ALL	<p>On going</p> <p>April 2009</p> <p>On going</p>
3.8	Follow guidance for social care staff on appropriate information resources	All staff responsible for ‘Looked After’ children to be offered information and support on alcohol as part of screening for substance misuse	ALL	April 2010
3.9	Reduce by 45% (by 2009) the teenage conception rate (under 18 year olds) per 1,000 population aged 15-17 years	<p>Address risk-taking behaviour related to alcohol use through sexual health programme</p> <p>Establish referral baseline to treatment services for under 18s based upon current definitions and guidance</p>	ALL	<p>April 2010</p> <p>“</p>
3.10	Increase the number of children and young people on the path to success	Support and train Tier 1 services in the identification of levels of alcohol use in children and adolescents who are presenting overtly for help	ALL	April 2011
3.11	reduce the harms caused to the development, achievement and well-being of young people and families	<p>Address alcohol misuse amongst young people through early intervention with those we know to be most vulnerable</p> <p>Identify and support the most at risk families who are experiencing multiple problems, where parental alcohol misuse is often a key factor</p>	ALL	<p>On going</p> <p>“</p>
3.12	Reduce harms to children of alcohol misusing parents	<p>Increase annually number of schools offering alcohol awareness sessions for parents and carers</p> <p>Measurably increase number of parents receiving information about the effects of substance misuse and where they can get help, support and advice</p>	ALL	<p>Annually</p> <p>“</p>
3.13	Children and young people are supported to make healthier choices	Alcohol and sexual health services to measurably reduce the link between alcohol and unprotected sex leading to teenage pregnancy and sexually transmitted diseases	ALL	Annually

		<p>Intensive Assertive Outreach worker to work with young people to explore options around pregnancy and where appropriate prevent second pregnancies</p> <p>Alcohol Young People Service to promote awareness of the risks associated with alcohol use to allow young people and their parents to make informed choices</p>		<p>On going</p> <p>“</p>
3.14	Children and Young People have the Best Possible Emotional Health	<p>Intensive Assertive Outreach project to work with young people to measurably improve emotional health. Accessible specialist services recognising the diverse needs of those presenting are delivered and address</p> <ul style="list-style-type: none"> • Waiting times for referral and treatment • Crisis assessment for those who self harm • Services for those with learning disabilities • Services for those in care • Specialist services for 16-17 year olds 	ALL	On going
3.15	Vulnerable Children and Young People and their parents are supported to achieve the best possible outcomes	<p>Education, Prevention and Engagement Workers to work in Children's Homes and develop links with the Travelling Communities to measurably increase the numbers of engaged hard to reach groups.</p> <p>Targeted groups</p> <ul style="list-style-type: none"> • Looked after children • Children with disabilities • LGBT young people • Children from Gypsy and Travelling Communities • Young Carers <p>Ensure outreach is adequately resourced; making best use of the preventive role of youth services; strengthening support for young carers, young people referred to PRUs, care leavers and children of substance misusing parents</p>	ALL	<p>Annually</p> <p>Annually</p>
3.16	Improve the Education and Information on Drug and Alcohol Issues for Young People aged 11-18	Adopt the recommendations of the Cambridgeshire County Council Health and Adult Social Care Scrutiny Committee: December 2007	All	2011

