

**Meeting:** Safer Communities Executive Board

**Date:** 4 November 2010

**Report Title:** Quarter Two Update on Implementation of Alcohol Action Plan

**Report of:** Marion Morris, Drug and Alcohol Strategy Manager

### **1.Purpose**

1.1. To provide SCEB Board members with an update on implementation of the Alcohol Strategy Action Plan up to Q2. 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 - which is the approach taken by Haringey in the development of its Alcohol Strategy and this Alcohol Action Plan.

### **2.Summary:**

2.1. Since 2004, the detrimental effects of alcohol-use disorders has resulted in several government policy initiatives. In addition, the need to prevent and reduce alcohol-use disorders has been incorporated into several public service agreements (PSAs). Key strategies being: 'Alcohol Harm Reduction Strategy for England' (Prime Minister's Strategy Unit 2004), which was updated in 2007 to 'Safe, Sensible, Social'. Haringey choose to prioritise tackling alcohol related harm through the Local Area Agreement, specifically 'reducing the upward trend in alcohol related hospital admission rates' as one of its (NI39) targets. The work is supported by a Local Alcohol Harm Reduction Strategy 'Dying for a Drink?' 2008-11 and this Action Plan.

2.2. This Action Plan is divided into three areas –

- reducing alcohol related harms (Wellbeing Board)
- reducing alcohol related crime and anti-social behaviour (SCEB)
- reducing alcohol related harm to children and young people (Children & Young Peoples Partnership Board)

As of Q2 good progress has been made against the majority of the actions as can be seen by RAG status. For the purpose of this Board, actions on reducing alcohol related crime and anti-social behaviour are the focus.

### **3.Reducing alcohol-related crime and anti-social behaviour**

3.1. This section of the plan aims to reduce alcohol related violence and anti-

social behaviour along with ensuring that licensed premises are operating within the context of the law and responsibly. There are a number of actions in this part of the plan that are behind schedule or are experiencing problems with implementation.

3.2. Actions **CS1 and CS2** (information sharing protocol with North Middlesex and Whittington re monitoring and analysing alcohol related violence is delayed. This is due to a new IT system being installed. It is unlikely that this will take place now until next year. The Community Safety Team has received some data information from the Whittington and Homerton Hospitals. As soon as the additional information is received (from North Middlesex) the team will provide a breakdown of the violence related to A&E admissions.

3.3 **(CS3)** CCTV Control Room briefs in order to inform and assist in the detection of violent crime (including alcohol related). CST Analyst tasks the team on a periodic basis following outcomes of Haringey Officer Tasking Group, which meets monthly.

3.4. **(CS8)** The development of a responsible licensee scheme has not met with the response from licensee's that was expected, e.g. a mail out asking licensees to get back to licensing to register their interest met with zero response. This was again raised at Pub Watch meetings and again met with no response. Under the financial constraints of the Council licensing will not be mailing out the newsletter again but will continue to put a newsletter on the web pages and will circulate it at Pub Watch.

3.5. A tailored programme of fire prevention/safety is being developed with Fire Brigade Borough Commander to be delivered at alcohol and drug services along with targeted home fire safety visits for problematic alcohol/drug users.

3.6. **CS11** Area based working re picking up ASB/alcohol related disorder issues is not working as well as it could be – this will be remedied by ensuring representation of DAAT/and or HAGA at these meetings as and when necessary.

3.7. **CS16** Development of local reconnections work with Thames Reach and or Barka limited due to financial constraints. Polish worker appointed but post under threat due to possible spending cuts.

3.8 **CS17** Development of Communications Plan linked to street drinking. As Communication is now centralised key messages around alcohol will be delivered via this avenue.

#### **4. Legal/Financial Implications**

4.1. The work to support key parts of this action plan is under threat due to possible reductions to the area based grant in 2011. In particular actions around health and children and young people. The impact of this would be severe and range from increased alcohol related hospital admissions/deaths, increased street drinking and associated anti-social behaviour along with risks to the viability of the boroughs services for children and families affected by

substance misuse (COSMIC).

#### **5. Recommendations**

- i. To note progress against action plan which is largely on track.
- ii. To note serious risks to ability to deliver against this plan in the future and the associated consequences.

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#### **Background**

Whilst we are still unsure of the exact approach the new coalition Government will take to tackling alcohol related harms, there is a strong indication that they wish to see more of a public health stance around alcohol - We will "produce an ambitious public health strategy which will tackle health inequalities and support families with multiple needs". A Substance Misuse Strategy will be launched in December 10, which will put more flesh on these proposals and we understand that money to support this work will be within the new Public Health Service. Given the extent of alcohol related harm in Haringey, the associated risks - from safeguarding to domestic violence then arguably alcohol should remain a local priority.