

## Health and Wellbeing Board

6<sup>th</sup> October 2016

### STRATEGY TO REDUCE ALCOHOL RELATED HARM

#### Responsible Officer

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#### 1. Summary

This report provides an overview of the recent refresh of the alcohol strategy for Shropshire. Maintaining the previous outcomes to reduce alcohol related harm, the aim of this strategy is to continue to build on the partnership work that exists and ensure there is a clear mandate for all frontline service providers to recognise and respond to harmful alcohol consumption and prevent further harm.

#### 2. Recommendations

It is recommended the Health and Well Being Board:

- a) Accept the strategy enclosed as the final version.
- b) Support delivery of the strategy by holding members of the HWBB to account for its delivery.
- c) Agree to the co-ordination of the strategy through the Alcohol Strategy Group.
- d) Agree to receive half yearly progress reports.
- e)

### REPORT

#### 3. Risk Assessment and Opportunities Appraisal

Delivery of the strategy will help to reduce the burden of alcohol related harm on individuals, families and communities as well as the public sector in areas such as health, social care and criminal justice. The risk of not delivering the strategy will further increase those harms in later life connected to health and in the shorter term will have an impact on community safety and for children and young people living in a positive family environment.

The strategy does not impact negatively on issues concerned with equality or social inclusion and seeks to ensure those most affected by alcohol issues receive appropriate support.

#### 4. Financial Implications

There are no identified financial implications. The Board are asked to note there will be a resource implication in respect of workforce training for identified brief interventions (IBA) and delivery of the strategy through different ways of working. It is emphasised this should enhance and reduce the call on resources in the future if we are able to prevent people reaching crisis point.

## **5. Background**

Reducing alcohol related harm is a public health priority ranking among the top five risk factors for disease disability and death globally. Alcohol related harm contributes to health inequalities within communities with children, young people and the elderly more vulnerable. Whilst many people use alcohol sensibly, regular and excessive drinking can lead to a number of alcohol related harms. Health can be seriously affected by regular drinking, it can also affect personal relationships, as well as increase the chance of being a victim of crime. Under the influence of alcohol reduced inhibitions and heightened aggression can also increase the likelihood of perpetrating a crime impacting on anti-social behaviour, crime and disorder within communities. The costs to society are wider with alcohol contributing to lost work days and productivity, creating both individual and wider economic financial loss. Regularly drinking can also affect family life and influence young people's own drinking behaviour, compromising parenting and subjecting children to mistreatment, neglect and abuse.

In late 2015 a small stakeholder group 'the alcohol strategy group' was established by the Safer Stronger Communities Board. Maintaining the partnership approach, representatives on the group came from health, licensing, criminal justice, children and family services and adult social care, their task was to review the alcohol strategy, evidence base, local need and provide a refresh of the strategy. A needs assessment was commissioned through public health to inform the work of the group and to support the development of the strategy. The working group held a number of workshops and meetings to review the merits of the previous strategy, the progress made and how future needs would be managed. It was agreed from the outset that the outcomes Shropshire had worked towards in the 2013 – 2016 strategy still held and there should be a continuity going forward.

To widen support for the strategy an engagement process was undertaken during the summer of 2016 and advertised on the council portal. The strategy was also circulated to a number of strategic partners for comment. Responses to the engagement was very positive and resulted in some small amendments, including renaming the strategy to 'reduce alcohol related harm' heightening awareness to its key purpose.

## **6. Additional Information**

The strategy (see appendix A) to reduce alcohol related harm in Shropshire sets out how local organisations and agencies need to respond to alcohol using the evidence base to maximise impact. To realise the ambitions of the strategy the outcomes need to be owned by the relevant strategic group(s) and partnerships. The strategy should underpin other work and not be a document that stands alone. It is therefore proposed the Health and Well Being Board support co-ordination of activity and receive reports on the progress of the strategy as the lead strategic group, whilst the Children's Trust and Safer Stronger Communities Board and other boards and strategic groups are responsible for delivering the strategy through their agenda.

To support the Health and Well-Being Board with co-ordination it is proposed the Alcohol Strategy Group is maintained and membership reviewed to ensure appropriate support delivery of the strategy. It is also suggested organisations/departments should identify a lead who will have responsibility for ensuring the ambitions of the strategy are delivered within their work area.

An action plan to support delivery is currently under development and will be circulated at a later date.

## 7. Conclusions

The emotional and financial cost of alcohol related harm is well understood and there is a wealth of evidence of what works to reduce harm. The strategy developed has been built on the evidence base and the needs of the local population. Reducing alcohol related harm is not a quick fix and requires a cultural shift, although this cannot be achieved at the local level alone, by taking a collective response it can start to make people re-evaluate their relationship with alcohol.

<b>List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)</b>
<b>Cabinet Member (Portfolio Holder)</b>  Karen Calder
<b>Local Member</b>
<b>Appendices</b>  Final Draft Alcohol Strategy