



ALCOHOL HARM REDUCTION STRATEGY

2009 – 2012

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1. Executive Summary

This is Newcastle-under-Lyme Borough's first Alcohol Harm Reduction Strategy which is effective from May 2009 to April 2012.

The Strategy explains what its aims and objectives are and the methodology behind them culminating in an action plan. It explains what is transpiring at a national and local level, highlighting key legislation and policy. Statistical information is provided underpinning alcohol-related harm issues across Newcastle Borough and how they link into our four key priorities; domestic violence & drugs, alcohol-related violence, sexual violence, and anti-social behaviour & young people. Areas such as prevention, education, health, treatment, and crime & disorder are covered. Most importantly, the strategy identifies actions which need to be undertaken by all community safety partners to combat alcohol-related harm.

In November 2008 the Crime and Disorder Reduction Partnership went through the strategic assessment process and it was decided by the strategy group that the priorities we need to focus on include young people & anti-social behaviour, domestic violence & sexual violence, drugs and alcohol-related harm. The Local Area Agreement (LAA) recognises that alcohol-related harm is a key priority within the Safer and Stronger Communities block.

This strategy provides a local response to the Government's national strategy entitled Safe.Sensible.Social. The next steps in the National Alcohol Strategy (2007) and is a Local Strategic Partnership (LSP) owned document written with input from partners such as Staffordshire Police, North Staffordshire Primary Care Trust and local substance misuse agencies such as the Drugs & Alcohol Action Team (DAAT) and Crime Reduction Initiatives (CRI).

This localised strategy focuses on delivery, which is why an Alcohol Strategy Priority Action Group has been formed.

Addressing alcohol misuse will not only depend on this strategy but also the delivery of other strategies both locally and nationally (see links to other key strategies). In Newcastle Borough, whilst there is much good work taking place already to tackle alcohol related harm collectively, there is more we can do to further our efforts, build on existing successes and develop new strategies to address this problem.

2. Aims of the Strategy

The main aims of the alcohol strategy are as follows:

- To provide information for low risk, hazardous and harmful drinkers about healthier, lawful ways to consume alcohol which will effect a change in behaviour.
- To ensure the alcohol treatment system is responsive to the needs of hazardous, harmful and dependent drinkers.
- To increase the capacity of alcohol treatment services especially for dependent drinkers.
- To improve outcomes for children and young people regarding their own alcohol use or their families' use.
- To reduce alcohol-related crime, anti-social behaviour, sexual violence and domestic abuse across Newcastle Borough.
- To improve the health of people living in Newcastle-under-Lyme.
- To prevent alcohol-related harm from occurring.
- To educate the public on the consequences of excessive alcohol consumption.
- To tackle the issues of irresponsible alcohol price promotions.

3. Introduction

Alcohol can play an important and positive role in British culture. It is part of our social and family life and can enhance meal times, special occasions and time spent with friends.

However more needs to be done to promote sensible drinking. Excessive alcohol consumption or 'binge drinking' among some sections of the population is a cause for considerable concern. This concern is shared by both the Government and the general public.

Up to 90% of adults consume alcohol and the majority of those do so without any problems. However 70% of people feel that the United Kingdom would be a healthier and better place to live if the amount of alcohol consumed was reduced.

To help people stay safe and healthy, the Department of Health provides advice on sensible drinking guidelines. Drinking above these guidelines, especially when done regularly and over a long period of time, harms health and contributes to crime and disorder. The more alcohol consumed, the greater the risk to health and the increased likelihood of involvement in alcohol-related crime and disorder.

This strategy will look to build on the excellent work already being done by agencies in Newcastle-under-Lyme.

4. Methodology

Our consultation process

We have undertaken a number of pieces of work asking partners what they think the problems and issues are and what they would like to see addressed in this strategy.

During the consultation process:

- An Alcohol Strategy Priority Action Group (ASPAG) was set up which comprises statutory partners including Staffordshire Police, Staffordshire Fire & Rescue Service, Trading Standards, Youth Offending Service, T3 Drug & Alcohol Service, and the Drugs & Alcohol Action Team (DAAT). These partners discussed the aims and objectives of the strategy and will help to monitor and evaluate the strategic action plan.
- A thorough mapping exercise was undertaken to identify what service provision there is in Newcastle Borough.
- A GAP analysis was undertaken to identify any gaps in service provision.
- A consultation event was organised by the Partnership for statutory and voluntary sector agencies to gain their input into the strategy. The event was very productive and a number of useful ideas and suggestions were raised. All comments received by partners were taken into consideration in the production of this document.
- The Newcastle Children's Trust Board and young people gave their valuable input into the strategy.
- We asked the Local Strategic Partnership to adopt the strategy rather than solely the Crime and Disorder Reduction Partnership, as alcohol harm links into the five main blocks of the Local Area Agreement which are: healthier communities and older people, economic development and enterprise, safer stronger communities, children & young people, and sustainable development.

5. Strategic Vision

Our vision is to significantly reduce alcohol-related harm amongst people living in Newcastle Borough so they can live healthy, safe and law-abiding lives.

Priorities

- **Prevention**
- **Education**
- **Health**
- **Treatment**
- **Crime & Disorder**

Underpinning this vision we recognise:

- The impact that excessive alcohol consumption has on young people, their carers, their families, adults and the community.
- That partnership working is vital if our vision is to be realised.
- Children and young people are particularly important to achieving our vision and should be consulted at regular stages.
- Newcastle Borough has issues with anti-social behaviour and alcohol related-harm.

6. Aims and Objectives

- **Prevention**

To prevent alcohol-related harm amongst people across Newcastle Borough.

- **Education**

To educate people across Newcastle Borough of the consequences of excessive alcohol consumption.

- **Health**

To improve the health of young people and adults across Newcastle Borough by reducing the percentage of people experiencing alcohol-related health problems, including alcohol-related injuries and accidents.

- **Treatment**

Ensure that treatment services are available and accessible for all people who are affected by alcohol misuse.

- **Crime and Disorder**

To challenge the culture of alcohol-related crime and disorder including serious violence, and reduce the frequency and fear of alcohol-related crime and disorder.

How these will be achieved

Partners working within Newcastle-under-Lyme operate within clear structures, with clear aims and objectives. These have been developed over time with evidence for the importance of priorities coming from consultations and engagement with local people, through responding to new legislation, Government priorities and by using local information and intelligence.

In particular the following approaches are taken:

- **Partnership working**
It is absolutely vital that both voluntary and statutory organisations work together in a co-ordinated, systematic way in order to fulfil the aims and objectives of this strategy. It is also crucial to ascertain which partners are best placed to take the lead and deliver on certain strategic aims and objectives.

- **Locality working**
Locality working groups will utilise Neighbourhood Policing Areas and will comprise local councillors, community groups, voluntary and statutory organisations. The objective is to build on existing arrangements within each area (Locality Action Partnerships) providing the infrastructure and resources to identify issues, disseminate information and deliver services such as health and education.

- **By setting targets and monitoring performance**
Within the context of this strategy, targets should be realistic and achievable and set within appropriate timescales. It is vitally important that performance is monitored at key stages to ensure that the aims and objectives of this strategy are being met.

- **By working with local communities and people affected by crime**
It is important that the public are consulted on a regular basis to gauge their views on alcohol-related crime in their locality and what should be done about it. The Police frequently liaise with the public regarding these issues and compile Citizen Contact Records (CCRs).

- **By making use of best practice**
Adopting and sharing best practice methods is extremely important if the targets set for this strategy are to be realised. Prior to the formulation of this strategy, various statutory and voluntary agencies

were consulted so we could learn through their experiences about setting and meeting strategic aims and objectives.

7. National Context

Since the 1950s alcohol consumption in the United Kingdom has been steadily rising in comparison to other European countries. This increase is affecting the UK in the following ways:

- It is estimated that alcohol-related crime costs the UK £7.3 billion per annum in terms of policing, prevention services, processing offenders through the criminal justice system not counting the human costs suffered by the victims of crime.
- Around 6% of road casualties and 17% of all deaths on the road occur when someone has been drinking over the legal limit.
- Either on its own or in conjunction with other factors, alcohol is estimated to be responsible for at least 33,000 deaths in the UK each year.
- More than one in 25 adults are dependent on alcohol, and the UK has one of the highest rates of binge drinking in Europe.
- An estimated 17 million working days are lost each year owing to people missing work due to the effects of alcohol.

(Source: Drinkaware.co.uk)

To put the issues concerning alcohol misuse into context, the World Health Organisation (WHO) categorises alcohol-use disorders as follows:

- **Chronic drinkers:** sustained heavy drinking which is causing or likely to lead to risk of harm (weekly consumption above 50 units for men and 35 units for women).
- **Binge drinkers:** drinking too much alcohol over a short period of time, e.g. over an evening leading to intoxication, defined in units as drinking over twice the daily guidelines in one day (more than 8 units for men and 6 for women).
- **Hazardous drinkers:** people drinking above recognised 'sensible' levels - above 21 units in men and 14 units in women a week, or more than 8 units for men or 6 units for women in a single day but not yet experiencing harm.

- **Harmful drinkers:** people drinking above 'sensible' levels and experiencing harm.
- **Dependant drinkers:** people drinking above 'sensible' levels and experiencing symptoms of dependence.

The table below illustrates current government guidelines on what constitutes sensible, hazardous, harmful and dependant levels of alcohol consumption.

	Men	Women
Sensible weekly limits	Up to 21 units	Up to 14 units
Chronic drinking level	50+ units	35+ units
Daily guidelines	Up to 4 units	Up to 3 units
Binge drinking level	8+ units	6+ units

Many people including young people do not understand what an alcohol unit is and have preconceptions regarding safe levels of drinking.

Below are two graphs that illustrate that 38% of men and 16% of women (aged 16-64) have an alcohol-use disorder which is equivalent to approximately 8.2 million people in England. Within this, 32% of men and 15% of women are hazardous or harmful users. This equates to 7.1 million people in England. A total of 21% of men and 9 % of women are binge drinkers. In relation to alcohol dependence, 6% of men and 2% of women meet this criterion nationally.

Figure 1: Percentage of people in England with an alcohol use disorder, broken down by category of problem drinking and gender

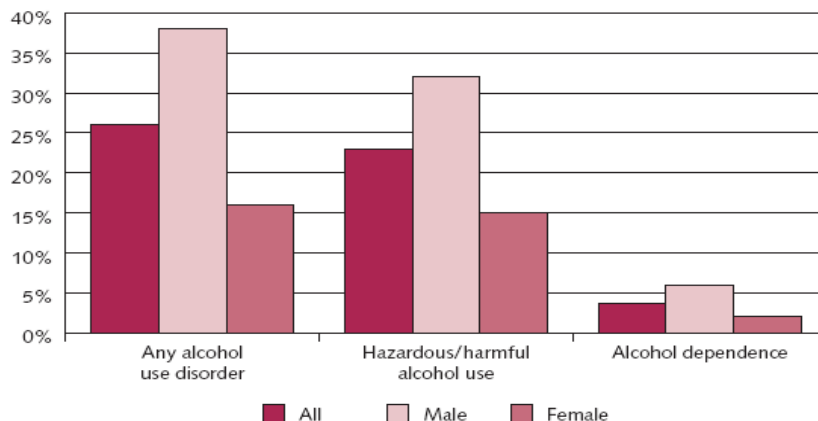
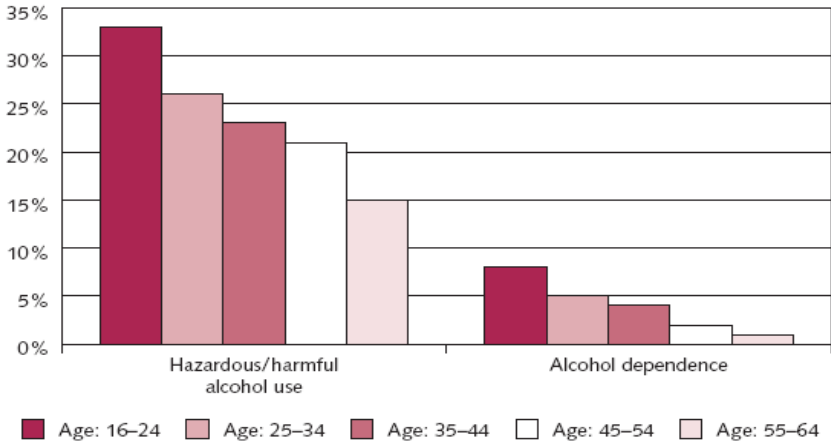


Figure 2: Percentage of people in England with an alcohol use disorder by age



Source: <http://www.nwph.net/alcohol/lape/>

8. National Legislation

Nationally there is a plethora of legislation and policy which seeks to address alcohol-related issues. The main legislation is detailed below.

Crime and Disorder Act (1998)

The Crime and Disorder Act 1998 promotes the practice of partnership working to reduce crime and disorder and places a statutory duty on police and local authorities to develop and implement a strategy to tackle problems in their area. In doing so, the responsible authorities are required to work in partnership with a range of other local public, private, community and voluntary groups and with the community itself.

Licensing Act (2003)

The Licensing Act 2003 came into effect on 24 November 2005 and abolished set licensing laws in England and Wales. The aim was to liberalise a rigid system whilst reducing the problems of drinking and disorder associated with a standard closing time.

The intention was not simply to relax drinking hours, but to provide licensing authorities with new powers and to encourage better partnership working. It was hoped that in the longer term the Act – in combination with national and local alcohol strategies – would also help bring about a ‘sensible drinking’ culture which attracted value to heavy drinking and drunkenness as ends in themselves.

Every Child Matters (2005)

‘Every Child Matters: Change for Children’ addresses the well-being of children and young people from birth up to the age of 19. The Government’s aim is for every child and young person, regardless of their background or circumstances, to have the support they need to:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well being

The organisations and agencies involved with providing services for children and young people will collaborate in new ways, sharing information and working together in partnership in order to protect children and young people from harm and to help them achieve. Children and young people will be

consulted as much as possible regarding issues that affect them. Every Child Matters also aims to make radical improvements to opportunities and outcomes for children by reforming the delivery of children's services. This systematic change will support parents/carers, develop the workforce, change culture and practice, integrate universal and targeted services and integrate services across the age range 0-19.

Violent Crime Reduction Act (2006)

In January 2005 the Government published a consultation paper called 'Drinking Responsibly - The Government's Proposals'. This set out proposals for introducing drinking banning orders, for local authorities and the police to designate alcohol-disorder zones and to charge licensed premises for the costs of dealing with alcohol-related crime and disorder. The Violent Crime Reduction Act 2006 enshrines these proposals in law. The Act introduced drinking banning orders, alcohol disorder zones and allowed the Police to ban those who are likely to commit alcohol related crime. It also amended the Licensing Act 2003 to provide for a fast-track summary review of licensed premises, enable the suspension of a licence and premises to be closed for 48 hours if required.

Safe. Sensible. Social. The next steps in the National Alcohol Strategy (2007)

This document reviews progress since the National Alcohol Strategy (2004) and outlines further national and local action to achieve long term reductions in alcohol-related ill health and crime.

The next steps are:

Toughened enforcement of underage sales

Trusted guidance for young people and their parents/carers

An NHS spending review

Public information campaigns promoting new sensible drinking culture

Public consultation on alcohol pricing and promotions

Further help, support and advice for people who want to drink less alcohol

Sharpened criminal justice for drunken behaviour

Localised alcohol harm reduction strategies

Youth Alcohol Action Plan (2008)

This document sets out the Government's conclusions and actions laid out in the Children's Plan (2007) regarding what more might be done to reduce excessive drinking by young people and children under the age of 18.

9. Local Context

Why does Newcastle Borough need an alcohol harm reduction strategy?

- Within certain localities across Newcastle Borough there are issues with alcohol-related crime and misuse. There is a great deal of work being undertaken by partners, but we realise that we must continually strive to reduce and manage these issues.
- We recognise that alcohol services in Newcastle Borough for hazardous, harmful and dependent drinkers in Newcastle Borough are limited. The action plan within this strategy seeks to address the lack of provision across the Borough.
- Across the five main areas identified in the previous section, i.e. Prevention, Education, Health, Treatment, and Crime & Disorder, there are gaps in service provision. These gaps have been identified through a mapping exercise and this strategy aims to bridge those gaps (please refer to the Action Plan).
- Within the framework of the Local Strategic Partnership, the Alcohol Harm Reduction Strategy must fit within Newcastle-under-Lyme's Sustainable Communities Strategy (NSCS) and the Staffordshire Local Area Agreement (SLAA). It also must have clear links to other strategies both nationally and locally, such as the Youth Alcohol Action Plan, Partnership Plan, Domestic Violence Strategy and the Homelessness Strategy.

Local Policy

The main strategic framework in Newcastle Borough and Staffordshire is as follows:

Local Strategic Partnership (LSP)

A Local Strategic Partnership (LSP) is a single body that brings together at a local level the different parts of the public sector as well as the private, business, community and voluntary sectors so that initiatives and services support can each other and work together. The LSP is a non-statutory, non-executive organisation which operates at a level which enables strategic decisions to be taken and is linked to individual neighbourhoods allowing action to be determined at community level. The core tasks for the LSP include preparing and implementing a Community Strategy for the area, bringing together local plans, partnerships and initiatives, and working with local authorities.

Staffordshire Local Area Agreement (SLAA)

Staffordshire's Local Area Agreement is a three-year agreement comprising priorities which have been agreed by local partners across Staffordshire and by Central Government. The LAA aims to increase the quality of life of people in Staffordshire by improving local services and increasing economic prosperity.

Sustainable Communities Strategy (SCS)

The Newcastle-under-Lyme Borough Sustainable Community Strategy 2008 - 2020 was launched in March 2008 following the identification of community priorities, evidence-based need and organisational priorities. The strategy identifies the priorities for Newcastle-under-Lyme across three areas - People, Places and Prosperity. The next stage is for the Local Strategic Partnership's (LSP) theme groups to develop action plans to achieve these priorities.

National Indicators (Nis)

The key drivers which underpin the work undertaken by crime and disorder reduction partnerships across Staffordshire are known as National Indicators. These directly link in with the five strategic priorities across Newcastle Borough. They are:

- NI 39 – Reduction in the rate of hospital admissions per 100,000 people
- NI 15 – Reduction in serious violent crime
- NI 32 – Reduce repeat incidents of domestic violence
- NI 41 – Reduce perceptions of rowdy and drunk behaviour

Public Service Agreements

Our Partnership must deliver against the national targets set for us by Central Government. These targets are known as Public Service Agreements (PSAs). The most relevant PSA to this strategy is PSA25: Reducing the harm caused by alcohol and drugs.

PSA 25 has three main strands all of which are focused on reducing the harms caused

- To the development, achievement and well-being of young people and families
- To the health and well-being of hazardous drinkers and those using drugs
- To the community as a result of associated crime, disorder and anti-social behaviour

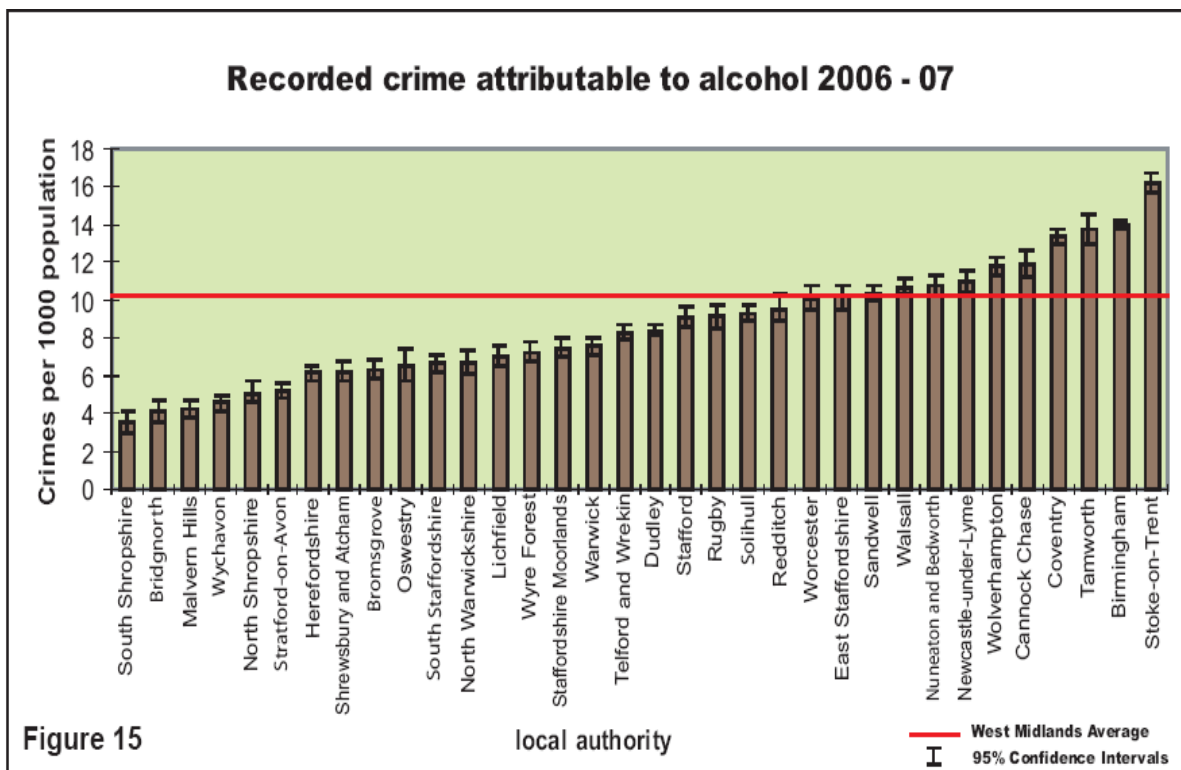
This PSA target forms the basis for the recent National Drugs Strategy and the Safe.Sensible.Social: National Alcohol Harm Reduction Strategy (2007).

The Public Service Agreement targets are monitored locally, regionally and at national level using performance information and numerical targets where relevant. Perception levels are also monitored where applicable.

10. Statistical Information

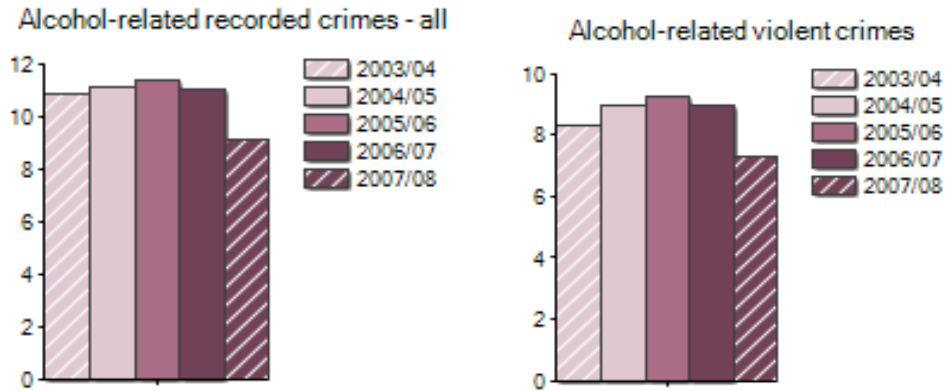
10.1 Crime and Disorder

- Within Newcastle-under-Lyme Borough there are a number of localities which suffer from alcohol related violence. These include Newcastle Town Centre, Wolstanton, Bradwell, Silverdale, Chesterton, Audley, Kidsgrove and Butt Lane. Alcohol-fuelled anti-social behaviour accounts for around 18% of the total calls received by Staffordshire Police for the Newcastle Borough area.
- Newcastle Borough has been shown to suffer with one of the highest levels of alcohol-related crime, not only in Staffordshire, but also in the West Midlands region. This is evidenced in the table below which shows that Newcastle-under-Lyme Borough lies seventh highest in terms of recorded crime attributable to alcohol in 2006-2007.



Source: Alcohol in the West Midlands: 2007 Information and recommendations for local action

Excessive alcohol consumption has a considerable impact on the alcohol-related crime statistics for Newcastle Borough. The number of people committing crime whilst under the influence of alcohol in Newcastle Borough since 2003/2004 has been a constant issue, as illustrated in the graphs below.

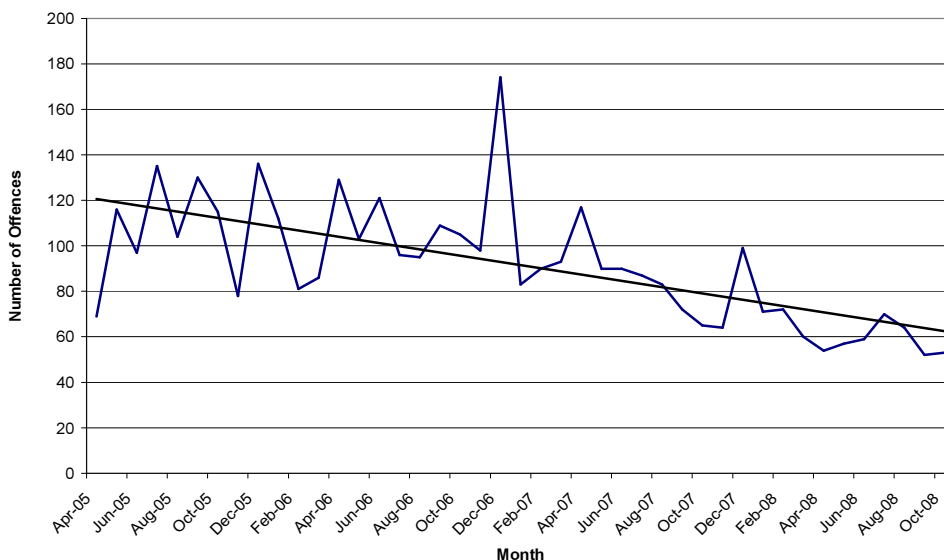


10.2 Alcohol Related Violence

The Home Office Crime Strategy for 2008-2011 lists alcohol misuse as a significant factor in violent crime and disorder. A cross-government alcohol strategy (Safe.Sensible.Social.The next steps in the National Alcohol Strategy 2007) sets out to minimise the violence, anti-social behaviour associated with alcohol and the damage it causes to health.

Although some crimes such as drink driving and anti-social behaviour are caused by excessive alcohol consumption, there are a range of other crimes associated with alcohol where alcohol is not the cause. Alcohol-related crime accounts for around 10% of the total crime occurring across Newcastle Borough.

The graph below shows the current crime figures for alcohol-related violence across Newcastle Borough from 2005 to 2008. The monthly crime figures for this category range between 54 and 174 offences, but average around 91 offences. The trend line indicates that crime figures have decreased from 2005 to 2008, particularly in 2008.



Source: Newcastle Strategic Assessment of Priorities (Summer 2007)

Over the last year, alcohol-related violence has been a key focus for the Partnership. Consequently, there has been a significant amount of activity focused on further reducing the frequency of alcohol-related violence with ongoing campaigns such as Safer Nights providing a multi-agency approach to tackling violence and anti-social behaviour in Newcastle Town Centre.

The main age group affected by alcohol related violence is 18 to 31 year olds. However the majority of offenders are aged 18-24.

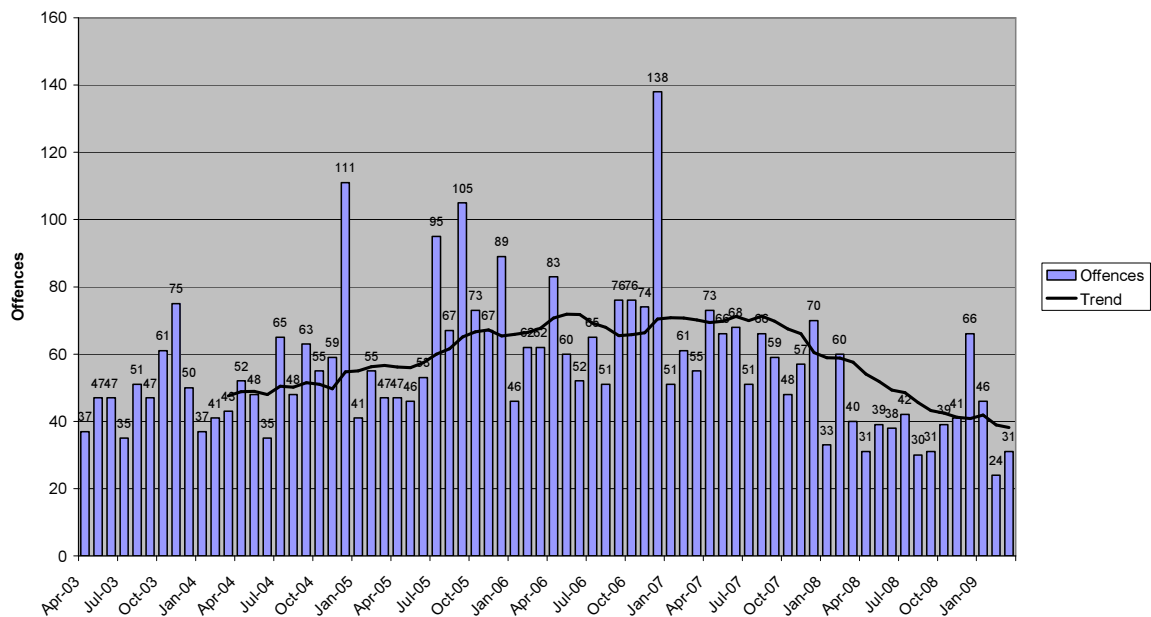
Seasonal trend analysis undertaken by Staffordshire Police shows that there are some significant seasonal peaks in alcohol-related violence particularly

around the Christmas and New Year periods. In previous years there have been seasonal increases in alcohol-related crime from April through until July, in addition to the Christmas peak. However, last year the crime levels did not follow this trend, possibly due to the fact that England were not involved in last year's major football tournament. The weather last summer was also poor which may have meant less people went out on summer evenings. The economic downturn may also have affected people's level of disposable income.

The promotion of Stoke City Football Club to the Premiership has raised the profile of the club considerably. As a result there is increased interest in watching the club both at the ground and within public houses. This has resulted in more people frequenting certain licensed premises on key match days, with the potential for an increase in alcohol-related violence.

Newcastle Town Centre has been consistently identified as the main hotspot location for alcohol-related violence within Newcastle Borough. It is responsible for 27% of all alcohol-related violence. Below is a graph which illustrates the number of violent offences that have occurred from April 2003 to January 2009.

Violent Offences on Newcastle Town Centre by Month



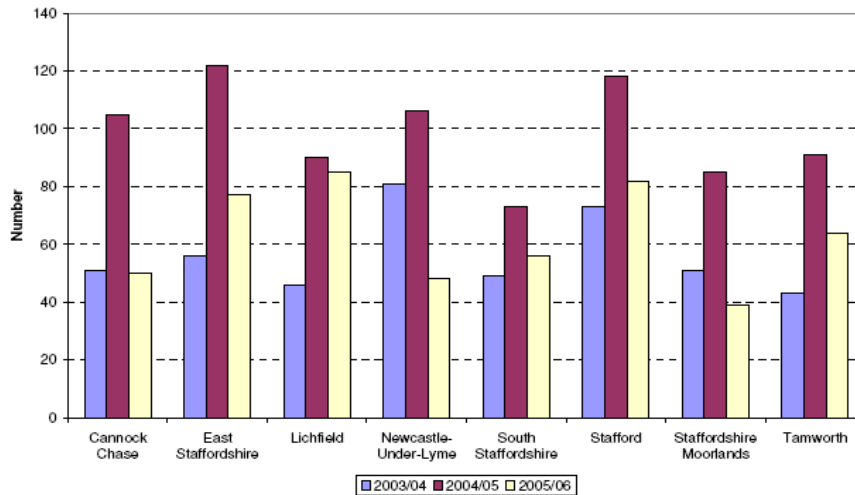
Source: Staffordshire Police

10.3 Drink Driving

Alcohol Misuse also has an impact on drink driving statistics across Newcastle Borough.

From April 2007 to April 2008 in Newcastle Borough, Staffordshire Moorlands and Stoke-on-Trent there were 553 drink-driving arrests. From April 2008 to January 2009 there have been 756. This recent spike in arrests is clearly a cause for concern. Data shows that Newcastle Borough has the third highest number of drink-driving offences in Staffordshire. Historically there is always a spike in arrests at Christmas and the New Year. Community safety initiatives initiated through the Safer Nights campaign are planned in advance to coincide with these periods.

Figure 19 Number of drink driving offences by local authority, 2003/04 to 2005/06



Source: Staffordshire Police

Source: Staffordshire Police

We are aware that alcohol-related harm is linked to other areas such as **domestic violence, sexual violence and anti-social behaviour**. The partnership has strategies for each of these areas. More information can be accessed via the Newcastle Borough Council website: www.newcastle-staffs.gov.uk/community_safety.

The next section explores the relationship between domestic abuse, anti-social behaviour, sexual violence, violent crime and alcohol.

10.4 Domestic Violence and Alcohol

Domestic violence or abuse is defined as ‘any incident of threatening behaviour, violence or abuse between adults who are or have been in a relationship together, or between family members, regardless of gender or sexuality.

This definition includes forced marriage and abuse within same-sex relationships.

Locally over the last 12 months 28% of all violence across the Borough has been domestic violence which is slightly higher than the national average. It should be noted that domestic violence is a recognised under reported crime and research suggests that only 25% of incidents are ever reported to the Police.

The Borough is fortunate to have a comprehensive support service for victims, their families and perpetrators of domestic violence. This service is funded by the Local Authority, Crime and Disorder Reduction Partnership and wider partners. However the challenge is to improve service to victims with dual issues so to improve partnership working across the two sectors both strategically and operationally.

Alcohol as a factor in domestic violence and abuse

There is no doubt that there are links between domestic violence and alcohol use but the exact nature of these links remains complex. Domestic violence is always the responsibility of the perpetrator and it is absolutely important that our communities understand this.

Agencies should be aware that perpetrators misusing alcohol may minimise or excuse their violence on these grounds. It is essential that alcohol abuse is not seen as an excuse for domestic violence, as the Stella Project states: “If someone wishes to feel more powerful and they expect that substance use will facilitate this transformation, more often than not, the substance complies.” Physical aggression is only one part of the pattern of power and control that victims are subjected to by their abusive partners; it cannot explain the psychological, financial and sexual aspects of domination.

Alcohol abuse as a consequence of domestic violence and abuse

Alcohol cannot cause a person to commit domestic violence, however research suggests that being on the receiving end of abuse can cause a victim to turn to alcohol or other substances or to increase their levels of alcohol. Reasons for this can include; self medication, drinking in preparation for abuse to deaden the pain, coping mechanism, as a distraction or forced or coerced by their partner. Perpetrators have been known to use the victim’s alcohol abuse as reasoning for their behaviour. It is important to note here, that it should never be assumed the relationship between a victim’s alcohol

use and their experiences of domestic violence are linked; victims may use for reasons outside of or predating the domestic violence.

Victims with problematic alcohol use who also experience domestic violence are particularly likely to feel isolated and doubly stigmatised. Indeed victims using alcohol are less likely to engage fully with service providers because they feel they are more likely to be blamed for the violence or indeed believed or taken seriously.

Locally we see high numbers of MARAC cases highlighting alcohol as a 'risk factor' for victims facing further serious harm or accelerated risk. This is either as a user themselves or the perpetrator's violence may be increasing in severity with alcohol. This is one of the reasons improved understanding of the dual issues and greater partnership working between the two sectors is so important and so required. It is a cross cutting issue through domestic violence affecting victims and their families and being used by perpetrators and it is an issue that requires careful understanding and partnership working to address.

10.5 Anti-Social Behaviour and Alcohol

Anti-social behaviour is defined as 'acting in an anti-social manner in a manner that caused or was likely to cause harassment, alarm or distress to one or more persons not of the same household as the perpetrator' (Crime and Disorder Act 1998).

Examples include: verbal abuse, graffiti, throwing missiles, vandalism, underage drinking, harassment and excessive noise.

Within Newcastle-under-Lyme Borough there are six main areas in which Newcastle Safer Communities Partnership identified significant anti social behaviour and alcohol related violence. These are Newcastle Town Centre, Wolstanton, Chesterton, Audley, Kidsgrove and Butt Lane.

Anti-Social Behaviour is a large category that accounts for around 18% of the total calls received by Staffordshire Police for the Newcastle Borough area. Newcastle Borough Council's Community Safety office handles approximately 250 individual cases per year.

Underage drinking is widespread across Newcastle Borough as it is in other towns and cities across the United Kingdom. Below are two of the reasons why this occurs.

Proxy alcohol sales

Proxy buying is where a person over the age of 18 purchases alcohol and then gives it to someone underage in return for its cost. It can be strangers approached at the doorway of a shop, friends who are over the age of 18 or from home either with or without the consent or knowledge of parents. Proxy sales of alcohol pose significant problems in Newcastle Borough; however it is not just adults who purchase alcohol for young people which causes problems.

Direct alcohol sales

There are instances where off and on-licensed premises directly supply minors with alcohol. This may be done deliberately or due to staff not being vigilant and serving minors without asking for appropriate identification.

Between 1st April 2008 and 31st March 2009 there were a total of 79 test purchases undertaken by Trading Standards. Of those 79 test purchases there were nine sales of alcohol to minors by both on- and off-licensed premises. This equates to 11.40 % of test purchases conducted during this period resulting in illegal sales of alcohol to young people.

10.6 Sexual Violence and Alcohol

Sexual Violence is defined as any sexual behaviour which has a damaging physical or psychological effect upon a person.

Sexual Violence includes a variety of offences and is a very damaging crime when it occurs.

Alcohol as a factor in sexual violence and abuse

Research indicates that in a significant proportion of rape and sexual assault cases the victim has consumed alcohol prior to the assault. 17% of victims of sexual assault surveyed in the British Crime Survey Interpersonal Violence Module 2001 said that offence took place when they were incapable of consent due to alcohol. Other studies report even higher figures.

The reasons for this association are complex, but may include the fact that people may take more risks when they have been drinking, e.g. walking home alone, going home with someone they do not know. People may have slower and less effective reactions and awareness, making them less able to defend themselves, and they may be specifically targeted by perpetrators because they are drunk and therefore more vulnerable, and less likely to remember details of the attack and the identity of the attacker or to be believed. Alcohol may also be used as part of a grooming process for childhood sexual abuse.

The law on consent in relation to sexual activity states that a person consents if (s) he agrees by choice, and has the freedom and capacity to make that choice. Excessive amounts of alcohol may affect a person's capacity to consent to sexual activity.

Findings from research also suggest that many perpetrators of sexual violence and abuse have drunk alcohol immediately prior to the incident and/or have drinking problems. There is also evidence that alcohol is invoked as a post-offence excuse, and that there is an expectation that people in bars will be receptive to sexual advances.

Sexual violence and abuse is always the responsibility of the perpetrator and it is important that potential perpetrators are aware that alcohol is not an excuse for inappropriate sexual behaviour.

Alcohol abuse as a consequence of sexual violence and abuse

Alcohol and drug abuse can also be consequences of sexual violence and abuse, providing a mechanism for coping with other effects. Wilson (1998) found that 67-90% of women with alcohol and drug addiction problems were survivors of sexual abuse. Adult male victims of childhood sexual abuse are more likely than non-childhood sexual abused counterparts to meet diagnostic criteria for a substance misuse disorder (55.4% versus 26.7% respectively) or for drug abuse/dependence (44.9% versus 7.8%) (Stein et al, 1998). It is crucial, therefore, that appropriate support services are available to those with alcohol abuse issues and that links are made between the organisations that provide support to victims of sexual abuse and those that support those with drug and alcohol misuse issues.

Understanding the relationship between alcohol, sexual violence and creating a safer environment

The relationship between alcohol & sexual violence and abuse is, therefore, a very important one.

Links need to be made between local alcohol and sexual violence strategies if this problem is to be effectively addressed. In particular, raising awareness about the associations between alcohol and sexual violence may influence behaviour significantly enough to reduce the opportunity for assaults to take place.

Communications can be directed towards potential victims, encouraging them to drink sensibly and take appropriate personal safety precautions and also towards potential perpetrators, emphasizing that consumption of alcohol, on their part or on the part of their victim, does not validate sexual activity without consent and affects the ability to give informed consent.

It is important when developing a new sensible drinking message that we include references to personal safety and the links between alcohol and sexual violence.

Although it is important to remember that whilst sexual violence and childhood sexual abuse often takes place behind closed doors, there are improvements that can be made to public places, such as effective use of street lighting, CCTV and security alarms that can help to reduce the opportunity for sexual violence, and other crimes, to take place and make people feel more secure. Section 17 of the Crime and Disorder Act 1998 requires all local authorities to do all they reasonably can to prevent crime and disorder.

Locally, the reports of sexual violence are low, although clearly a high number of offences go unreported every year. However people should realise that there is increased risk of the perpetration of sexual crime where the consumption of alcohol is involved with either party. There is work to be done and the Newcastle Safer Communities Partnership has identified this as a priority for 2009-10.

We are extremely fortunate to have one of only 38 Rape Crisis Centres nationally on our doorstep run by Savana which is based at the Dudson Centre in Hanley, Stoke-on-Trent. An Independent Sexual Violence Adviser is based at the centre alongside a highly skilled counselling and support service.

For more information please visit www.savana.org.uk or www.newcastle-staffs.gov.uk/communitysafety or call Savana on 01782 221000.

Extracts in this section have been sourced from:

The cross-government Sexual Violence and Abuse Action Plan, April 2007.

11. Health and Treatment

Newcastle Borough has a high proportion of harmful, hazardous and dependent drinkers of alcohol as evidenced in the table below. This strategy will aim to tackle the problem of alcohol misuse in a variety of ways (please refer to the strategic action plan).

Estimated numbers of alcohol misusers in Newcastle-under-Lyme 2003 – 2005

	Hazardous drinkers (synthetic estimate 2003-2005)	Harmful drinkers (synthetic estimate 2003 – 2005)	Estimated Hazardous drinkers (2006)	Estimated harmful drinkers (2006)
Newcastle-under-Lyme	19.6%	4.9%	20,028 (18,370-21,686)	4,989 (4,449-5,529)
North Staffordshire Primary Care Trust	19.5%	4.7%	35,304 (32,397-38,210)	8,456 (7,565-9,348)

Source: Adapted from Alcohol Needs Assessment for Staffordshire County January 2008. Prepared by Public Health Department South Staffordshire Primary Care Trust.

Health implications

The high levels of problematic drinking outlined above clearly lead to significant health problems in the district, as outlined in the table and explained in the text below.

Issue	Measure	National rank (of 354)	Regional average
Months lost to life – males	10.8	262	10.9
Months lost to life – females	5.8	304	5.1
Alcohol-specific mortality – males (deaths per 100,000)	14.0	252	15.2
Alcohol-specific mortality – females (deaths per 100,000)	9.2	323	7.2
Alcohol-attributable mortality – males (deaths per 100,000)	41.3	225	45.0
Alcohol-attributable mortality – females (deaths per 100,000)	21.1	316	18.1
Hospital admissions for alcohol-related harm (per 100,000 of the population)	1978	331	1451

Source: North West Public Health Observatory, Local Alcohol Profile for England (LAPE)

The figures outlined in the table above demonstrate a number of alcohol-related health concerns for the people of the district. Perhaps the most significant of these concerns is the rate of hospital admissions (1978/100,000 of the population), which gives Newcastle-under-Lyme the 331st worst record of the 354 local authorities in the country.

The number of admissions relating to conditions generally associated with alcohol is relatively low. Alcoholic liver disease, for example, only accounted for 4% of all alcohol-related hospital admissions in 2006/07 (this figure includes Staffordshire Moorlands district). However, nearly two-thirds (63%) of the admissions were due to heart conditions, such as high blood pressure, which are less obviously associated with alcohol.

This demonstrates the wide-ranging nature of alcohol-related health problems and show that such problems are not only concerns for dependent drinkers.

A further area for concern is alcohol-related health problems among women in the district. On average 5.8 months of female residents' lives are lost due to the effects of alcohol. While this rate is less than for men (10.8 months) in the area, the female rate is one of the worst in the country (304 of 354 local authority areas).

Similarly, the rate (9.2 per 100,000) of deaths specifically caused by alcohol among women in the area is also one of the worst in the country – 323 of 354 local authority districts-as is the rate (21.1 per 100,000) of deaths partially caused by alcohol (316/354).

Treatment

Current service provision

In Newcastle Borough there is limited health and treatment provision to help both harmful, hazardous and dependent drinkers. Below is a table illustrating current alcohol services available to people at various levels of alcohol misuse.

Organisation	Services	Alcohol / Drugs	Location	Young People/Adults
BAC O' Connor Centre	Detoxification Programmes, Rehabilitation, Supported Housing for dependant drinkers	Both	Clayton Road, Newcastle-under-Lyme, Staffordshire	Both
Edward Myers	Outpatient Service, Rehabilitation, Detoxification	Both	Harplands Hospital, Hilton Road, Hartshill, Stoke-on-Trent	Both
ADS (Alcohol and Drugs Services)	Structured day care, Drug Intervention Projects	Both	Fellgate Court, Bridge Street, Newcastle-under-Lyme	Both
T3 (CRI)	Psycho social interventions, group work, one to one work, counselling, relapse prevention and medical services, outward referral to residential rehabilitation.	Both	Suite 7-8, Mill Street, Stafford	Young People up to 19
Addaction Staffordshire	Drop in support, advice & information, one to one support with structured interventions & individual care plans, needle exchange, hepatitis project, referral & signposting into treatment	Both Both	Fellgate Court, Bridge Street, Newcastle-under-Lyme	Both
ADSIS (Alcohol and Drugs Services In Staffordshire)	Brief Interventions	Both	A/E	Adults over the age of 18 years

New developments

In order to address the problems outlined above, NHS North Staffordshire is to commission an expanded range of alcohol treatment interventions. While the precise extent and nature of these interventions are yet to be determined, the new commissioned services are likely to be as follows.

General

- Screening and referral

Staff in a range of settings (health and third-sector organisations etc) will be trained to identify/screen alcohol problems and make referrals to the most appropriate services.

- Awareness campaigns

Awareness-raising campaigns will be developed in order to highlight the dangers of harmful/hazardous drinking and to advertise the services outlined below.

Interventions for harmful and hazardous drinkers

- Opportunistic brief interventions

Staff to be trained in GP practices, pharmacies and other community services (hostels, housing projects etc.) to provide very basic advice, information and support for harmful/hazardous drinkers.

- Tier 2 community-based brief interventions

A specialist service for harmful/hazardous drinkers. Basic cognitive behaviour therapy based brief interventions (3 or 4 sessions) and links into other services – the main evidence-based intervention recommended by the Department of Health.

- Hospital-based brief intervention services

As outlined above, but based at University Hospital North Staffordshire.

Interventions for dependent drinkers

As outlined in the table above, a number of services for dependent drinkers already exists. These are likely to be expanded during 2009/10 and should involve the following interventions.

- Community detoxification

The availability of community detoxification and associated medical services should be expanded during 2009/10.

- Psycho-social interventions and day programmes

Similarly, the capacity and range of psycho-social interventions (such as counselling) are likely to be developed over the coming months.

- Inpatient detoxification and residential rehabilitation

Medical and rehabilitative services in a residential setting will be available for clients with severe problems.

Care pathways

The array of somewhat complex services outlined above is designed to work in conjunction to provide clients with the most appropriate selection of interventions. The diagram below illustrates in a very basic manner how they should link together.

Proposed simplistic alcohol care pathway

Wider community

Self referrals

General community organisations

Generic services

Tier 1 Services

GP practices

- opportunistic brief interventions
- Screen
- Onward referral

Related community Organisations

- opportunistic brief interventions
- Screen
- Onward referral

Hazardous/ harmful drinker services

Tier 2 Services

AnE Brief Interventions

Expanded remit, with possible direct links into both Tier 3 and 4 services for dependent drinkers

Community-based Brief interventions

Specialist service, with close links to services for dependent drinkers

Dependent drinker services

Tier 3 Services

**ADSIS structured
Community
Addiction Team
Edward Myers OP**

Tier 4 services

**Edward Myers IP
BAC O'Connor**

Key

Blue – existing services

Red – proposed services

11.1 Alcohol and Young People

The relationship between alcohol and young people is multi-faceted. There are a number of reasons why young people consume alcohol. These reasons include boredom, rebellion, peer pressure, escapism, learnt behaviour, dependency, experimentation and because alcohol lowers inhibitions. Though it may be perceived by young people to be the norm, excessive drinking can lead to problems such as poor mental and physical health, social problems, financial issues, dependency and even death.

Social attitudes towards drinking have significantly changed over time, with alcohol abuse amongst young people being a significant problem nationally as well as locally. Parental complicity is a significant contributory factor with alcohol being provided to children and young people in greater volumes and frequency than ever before. The risks from alcohol abuse becoming learnt behaviour and being viewed as a social norm from a young age is significant. It is recognised that as a result of the social marketing of major breweries, parental and extended family behaviour and peer group pressure many young people already view alcohol abuse as being a necessary and normal element of enjoying themselves socially, whether it be in a town centre, a playground, outside a row of shops or on a village green.

The young person's substance misuse service in Newcastle Borough is provided by T3 commonly known as Crime Reduction Initiatives (CRI).

T3 works with partners in criminal justice, health services and local authorities to provide individually tailored advice, treatment and specialist prescribing services for young people with serious and complex substance misuse problems in line with National Treatment Agency (NTA) requirements. They assist in helping young people with substance misuse issues move into mainstream provision in education, training and employment.

T3 is a team of qualified, young-person-friendly staff with specialist drug/alcohol knowledge which provides an initial comprehensive assessment, access to specialist prescribing pathways, structured care planning, therapeutic interventions and motivational coaching. Appointments are by referral only, but self referrals are accepted. Referrals are only accepted if the young person is aware of it and wishes to see a practitioner. Young people can be seen at various agreed venues such as school, Connexions offices, other youth facilities and their own home if appropriate.

Within the North Staffordshire area T3 comprises of a team leader and two project workers. T3 reports that currently 65% of Tier 3 referrals and 35% of Tier 2 referrals for their services relate to alcohol misuse. According to data provided from T3, the number of alcohol referrals is secondary to only cannabis referrals.

The Youth Service, in particular the Detached Community Re-Assurance Team does a significant amount of work in terms of alcohol awareness and

advice to young people across the Borough. This includes regular curriculum input, referrals, diversionary activities and school based work.

A survey has been conducted amongst school children within Newcastle Borough regarding alcohol consumption. 815 young people aged 11-15 were surveyed in 2008 and the results showed that 19.1% of them had consumed alcohol within the last seven days. This is a reduction on the results for 2007 which showed that 31% had consumed alcohol within the last 7 days. This is broken into age groups as shown below:

Alcohol Consumption in the last 7 days for young people aged 11-15 in 2007 and 2008

2007	Age					Total
	11	12	13	14	15	
Male	12.7%	16.0%	23.6%	42.7%	47.0%	29.7%
Female	9.2%	11.5%	28.8%	46.9%	55.9%	32.3%
Total	10.9%	13.8%	26.1%	44.8%	51.3%	31.0%
2008	Age					Total
	11	12	13	14	15	
Male	9.1%	17.0%	12.6%	23.9%	40.9%	20.8%
Female	8.5%	9.3%	18.0%	20.4%	37.9%	17.7%
Total	8.7%	12.6%	15.3%	22.1%	39.4%	19.1%

Source: Newcastle Strategic Assessment November 2008

The table shows that there has been a reduction in the percentage of young people consuming alcohol in the lower teens but an increase in those aged 14 and 15. The Safer and Stronger (Communities) Partnership is committed to reducing the total figure.

The average number of units consumed in the last 7 days for these young people is 7.1, which has remained the same as the previous years. This is also broken down by age as shown below.

Amount of Alcohol Consumption in the last 7 days for young people aged 11-15 in 2007 and 2008

2007	Age					Total
	11	12	13	14	15	
Beer units	2.6	2.8	2.5	4.4	5.0	3.9
Wine units	1.0	0.4	0.4	0.6	0.6	0.6
Spirit units	0.9	0.7	1.2	1.3	1.4	1.2
Alcopop units	1.1	1.3	1.5	1.4	1.3	1.4
Total units	5.6	5.2	5.7	7.7	8.3	7.1
2008	Age					Total
	11	12	13	14	15	
Beer units	3.2	2.8	3.1	3.6	6.0	4.1
Wine units	1.1	0.2	0.3	0.4	0.7	0.5
Spirit units	0.7	0.5	0.6	0.9	1.9	1.1
Alcopop units	0.6	1.3	1.1	1.0	2.1	1.4
Total units	5.5	4.7	5.1	5.8	10.7	7.1

Source: Newcastle Strategic Assessment November 2008

The table shows that whilst the percentage of younger teenagers consuming alcohol has remained the same, the amount that older teenagers are drinking has increased, whereas the amount consumed by younger teenagers has reduced.

11.2 Alcohol and Youth Offending

Research has indicated that young people in the youth justice system misuse both alcohol and drugs. Young people may become involved in crime in order to fund their substance misuse or may have offended and then started misusing substances under the influence of peers.

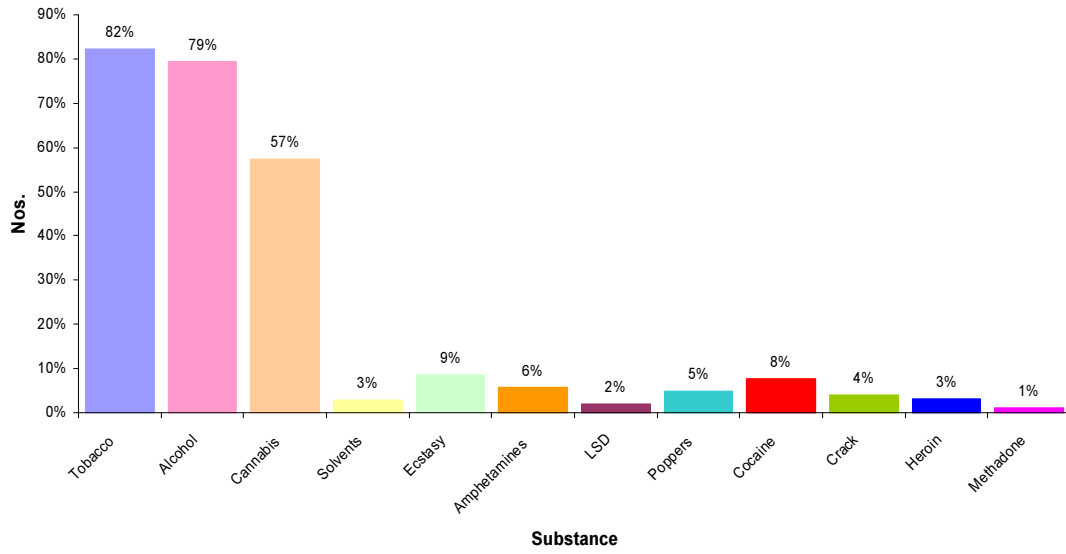
Research has also shown that young people in custody plan to use alcohol or drugs on their release, not realising that their tolerance levels have decreased and their bodies will not react in the same way as before.

Extracts in this section have been taken from:

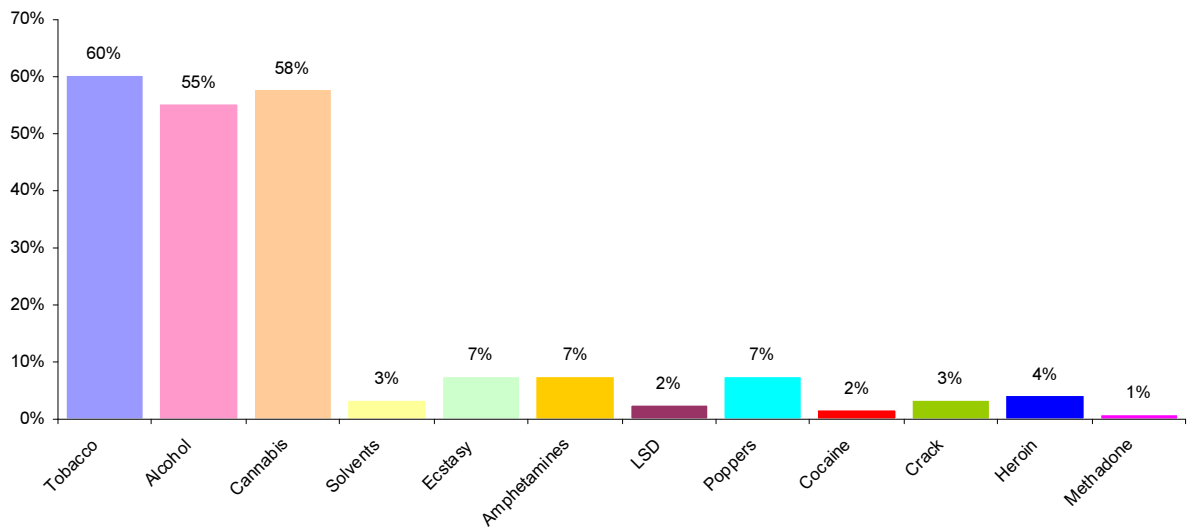
Youth Justice Website www.yjb.co.uk

Below are 3 graphs which illustrate the percentage of young people who have recently used alcohol from April 2008 to December 2008. The graphs illustrate that there is a significant percentage of young people using alcohol when they first enter the criminal justice system.

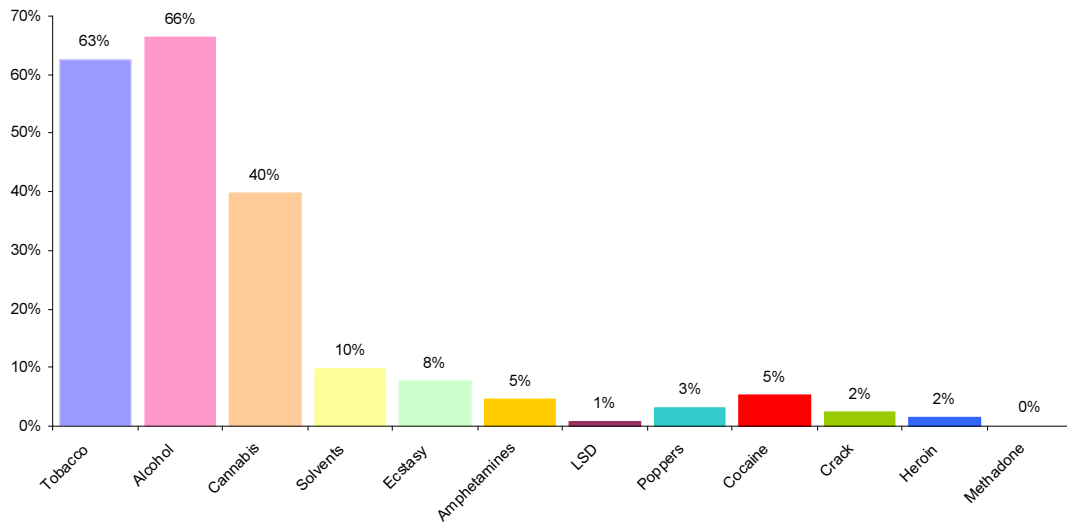
Apr- June 2008: Young People identifying 'recently used' substance on Asset Assessment



July - Sept 08: Young People who have 'recently used' a substance as indicated on Asset Assessment



Oct - Dec 2008: Young people who have 'recently used' a substance as indicated on Asset Assessment

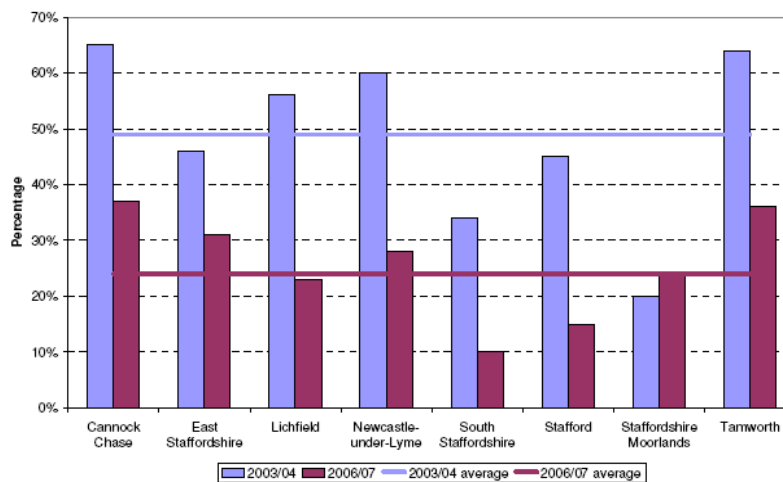


Source: Staffordshire Youth Offending Service

12. Community Perceptions of Alcohol Issues

An important element of alcohol-related crime is the fear of crime and disorder that it gives rise to in communities. Data from the Audit Commission area profiles enable us to see local perceptions of rowdy or drunk behaviour in public places. The chart below shows the proportion of residents who think that being rowdy or drunk in public places was a very big or fairly big problem in their local area in 2003/04 and 2006/07.

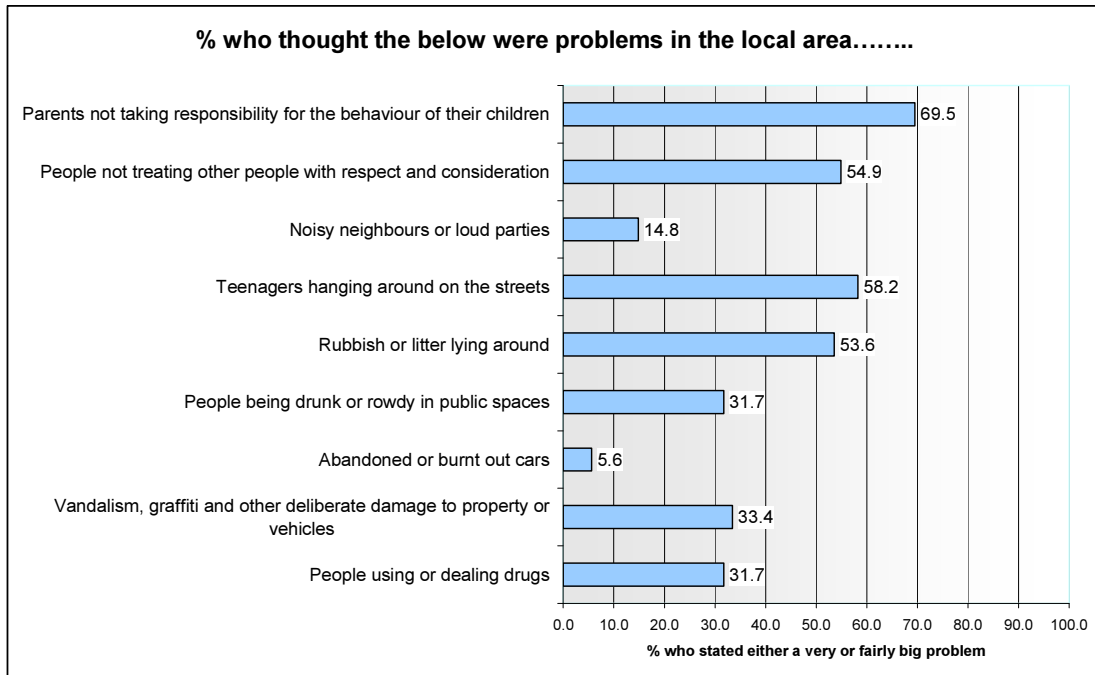
Figure 20 Proportion of residents who think that people being rowdy or drunk in public places is a very big or fairly big problem in their local area



Source: Staffordshire Police - adapted from Audit Commission Area Profiles

It is evident from this graph that 24% of people across Newcastle Borough believe being rowdy and drunk in public places to be a big problem. Newcastle-under-Lyme has a higher proportion than the county average despite having a lower rate than the county average for street drinking. Newcastle-under-Lyme does, however, have the highest rate in the county for offences in which the offender is affected by alcohol.

The general user satisfaction surveys undertaken by Newcastle Borough Council in 2007 and 2008 showed that people across Newcastle Borough thought that people loitering in the streets and being drunk in public spaces causes significant problems. This is illustrated in the graph below.



Source: Newcastle Borough Council - General User Satisfaction Survey

12.1 Alcohol Prohibition Zones

Alcohol Prohibition Zones are designated areas in which alcohol of any description cannot be consumed. Legislation on Alcohol Prohibition Zones in the Criminal Justice Police Act 2001 gives the Police the power to arrest anyone who refuses to stop drinking on the streets or fails to surrender any intoxicating liquor to a Police Officer when asked to do so. The zones have been introduced as part of a range of interventions initiated by the Crime and Disorder Reduction Partnership to help reduce alcohol-related crime and disorder and to also reassure the public.

Across Newcastle Borough there are in excess of 300 Alcohol Prohibition Zones.

12.2 Cumulative Impact Policies

'Cumulative impact' is defined as the potential impact on crime and disorder or public nuisance on a town or city centre of a large concentration of licensed premises. The cumulative impact of licensed premises is stated to be a proper matter for a licensing authority to consider when developing its Licensing Policy statement. The types of problems which are considered to arise where there is a density of premises selling alcohol are queuing at fast-food outlets or for late night transport which leads to conflict, disorder and anti-social behaviour. A cumulative impact policy may be considered where the impact on the surrounding areas of the behaviour of the customers of all premises taken together is greater than the impact of the customers of individual premises.

13. Action Planning

Objective	Actions	Owner	Target Date
To prevent alcohol-related harm amongst people across Newcastle Borough	Work closely with licensees to reduce alcohol-related harm through Pubwatch forums and the newly formed Business Crime Initiative	Trevor Smith (NBC)	March 2010
	Explore running alcohol related projects similar to Operation TAPS (Tackling Alcohol Proxy Sales) to prevent proxy and direct sales of alcohol to minors across the Borough utilising strategies such as covert surveillance and test-purchase operations	Trevor Smith (NBC) Police Licensing Unit	March 2010
	Design and produce alcohol harm reduction and domestic violence posters to be targeted towards young people and adults across Newcastle Borough	Trevor Smith (NBC) Debbie Owen (NBC)	March 2010
	To use alcohol support and treatment agencies in MARAC (multi agency risk assessment conference) case conferences, improving membership of MARAC and ensuring actions agreed are implemented	Debbie Owen (NBC)	March 2010

	To use alcohol support and treatment agencies in ASB case conferences, improving membership of case conferences and ensuring actions agreed are implemented	Catherine Fox (NBC)	March 2010
	Employ street entertainers on key nights in Newcastle Town centre during the year i.e. during the Christmas period as part of Operation Nightsafe	Neil Hulme (Police)	March 2010
	Ensure that diptesters, rape alarms, twizzle sticks, spikeys and lollipops are given out at the end of key nights to revellers in bars and pubs in Newcastle Town centre	Trevor Smith (NBC)	March 2010
	Explore the idea with licensees through the Pubwatch forum of having a 'chilled-out' period at the end of the night in bars and pubs where soft drinks and food is served to revellers	Trevor Smith (NBC)	March 2010
	Challenge and monitor on-off-licence alcohol price promotions to restrict binge drinking	Trevor Smith (NBC) Adrienne Mainwaring (Trading Standards), Police Licensing Unit	March 2010
	Bid for money to undertake subway mural projects on two subways in Newcastle Town Centre and	Trevor Smith (NBC), Tina Ball	March 2010

	organise the project with partnership agencies.	(NBC), Phil McGuinness (NUL College), B-Arts	March 2010
	To adopt, roll out and support the Challenge 25 scheme in pubs, clubs, bars and off licenses in all localities across Newcastle Borough	Adrienne Mainwaring (Trading Standards)	March 2010
	To engage third sector involvement such as Alcoholics Anonymous, and direct people on Behave or Be Banned (BOBB) to these services.	Trevor Smith (NBC)	March 2010
	Circulate information to the local public regarding alcohol sales to under 18s and promote the message 'No ID No sale amongst licensees and Year 11 students	Adrienne Mainwaring (Trading Standards)	March 2010
	Provide all Year 11 students in secondary schools with the PASS proof of age cards and educate them on the scheme	Tom Perry (Citizencards)	March 2010
	Target problematic off-licenses across Newcastle Borough as part of the Community Pride Events	Trevor Smith (NBC), Adrienne Mainwaring (Trading Standards)	March 2010

	<p>To advertise Safer Nights alcohol-related violence messages on the side and rear of First Buses periodically throughout the year</p> <p>Link into the Respect programme in the community and in Schools</p>	<p>Trevor Smith (NBC), Safer Nights Group</p> <p>James Woolgar (NPT), Trevor Smith (NBC)</p>	<p>March 2010</p> <p>March 2012</p>
<p>To educate people living in Newcastle Borough of the health implications and consequences of alcohol misuse.</p>	<p>Identify best practice in relaying alcohol-related information to young people</p> <p>Undertake an anti-binge drinking campaign targeting young people and adults across Newcastle Borough</p> <p>To produce an alcohol-harm reduction DVD to educate young people who are misusing alcohol</p> <p>To commission Borderlines to produce and deliver innovative, impactful alcohol harm reduction plays at the New Victoria Theatre</p> <p>Devise an alcohol and domestic-violence training package for front line professionals working in Newcastle Borough</p> <p>Develop an alcohol, drugs and domestic-violence</p>	<p>Trevor Smith (NBC)</p> <p>Trevor Smith (NBC)</p> <p>Dean Goodwin (Youth Service)</p> <p>Trevor Smith (NBC)</p> <p>Trevor Smith & Debbie Owen (NBC)</p> <p>Trevor Smith &</p>	<p>March 2010</p> <p>March 2010</p> <p>March 2010</p> <p>March 2011</p> <p>March 2010</p> <p>March 2010</p>

	<p>toolkit for front-line professionals</p> <p>Run an alcohol and domestic-violence combined awareness week in Newcastle Borough</p> <p>Ensure inclusion of alcohol in school substance misuse policies by collating current alcohol policies for all primary and secondary schools, and provide targeted support to assist policy development in Schools</p> <p>Ensure that alcohol education is delivered as part of the PHSE curriculum by reviewing schemes of work, providing Schools with resource packs and reviewing schools drug & alcohol curriculum</p> <p>To develop standard alcohol teaching packages in line with the key stages of education that can be utilised by School professionals across the Borough</p> <p>To provide front-line educational staff with appropriate training in relation to the delivery of effective alcohol education and the screening and referral of young people with alcohol needs, including the development of referral pathways between schools and alcohol services</p>	<p>Debbie Owen (NBC)</p> <p>Trevor Smith & Debbie Owen (NBC)</p> <p>Trevor Smith (NBC), Healthy Schools Team</p> <p>Healthy Schools Team</p> <p>Healthy Schools Team</p> <p>Healthy Schools Team</p>	<p>March 2010</p> <p>March 2011</p> <p>March 2011</p> <p>March 2011</p> <p>March 2011</p>
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	To disseminate alcohol-related violence messages to revellers in Newcastle Town Centre via Bluetooth devices	Safer Nights Group	March 2010
Improving the health of young people and adults in Newcastle Borough	To set up a large-scale screening programme to identify and refer problem drinkers into relevant services	Tony Bullock (PCT)	March 2010
	Set up an initial six month pilot juice bar in Newcastle Town Centre and roll the initiative out in other localities across the Borough if successful	Trevor Smith (NBC)	March 2010
	To deliver training programmes to front line staff from a range of sectors to use alcohol/drug screening tools and to refer service users into appropriate services	Tony Bullock (PCT)	March 2010
	To develop an localised alcohol-service directory to be used to signpost people to appropriate alcohol services	Tony Bullock (PCT)	March 2010
	Run a campaign to highlight the consequences of excessive alcohol drinking and promote the new services	Tony Bullock (PCT)	March 2010

<p>To ensure that treatment services are available and accessible for all people who are affected by alcohol misuse</p>	<p>To provide community-based brief interventions including cognitive behavioural therapy (CBT) to hazardous and harmful offering them advice and information</p> <p>To explore the feasibility of setting up a pilot triage project in Newcastle Town Centre which will offer immediate treatment to people lessening the load on A&E departments</p> <p>To pilot the triage project in Newcastle Town Centre</p> <p>To expand the remit of the Accident & Emergency to identify problem drinkers & engage them into community based services when discharged.</p> <p>To employ an Alcohol Arrest Referral Officer in the A&E department</p> <p>To increase the current range and capacity of services for dependant drinkers such as detoxification, counselling and rehabilitation</p>	<p>Tony Bullock (PCT)</p> <p>Tony Bullock (PCT)</p> <p>Tony Bullock (PCT)</p> <p>Tony Bullock (PCT)</p> <p>Tony Bullock (PCT)</p> <p>Tony Bullock (PCT)</p>	<p>March 2011</p> <p>March 2010</p> <p>March 2011</p> <p>March 2011</p> <p>March 2011</p> <p>March 2011</p>

<p>To challenge the culture of alcohol-related crime and disorder including serious violence reducing fear and frequency</p>	<p>To undertake an options appraisal around dispersal to examine transport policy and to form a focus group</p>	<p>Trevor Smith (NBC) Graham Williams (NBC)</p>	<p>March 2011</p>
	<p>To formally review the Safer Nights campaign, broaden its remit and develop it to include drugs and sexual violence</p>	<p>Trevor Smith (NBC), Safer Nights Group</p>	<p>March 2010</p>
	<p>To form and roll out Newcastle Borough's Business Crime Initiative and link it to the nighttime economy through the Pubwatch forum</p>	<p>Business crime committee</p>	<p>March 2011</p>
	<p>To identify funding sources for the Business Crime Initiative</p>	<p>Steve Lovatt (Police), Trevor Smith (NBC), Doug Morris (Chamber of trade)</p>	<p>March 2011</p>
	<p>To set up a Safer Socialising Award scheme in Newcastle Borough in partnership with the CDRP and the BCI</p>	<p>Trevor Smith (NBC)</p>	<p>March 2011</p>
	<p>To promote the collaboration between NBC and Police Licensing Departments and draw up a protocol between the two agencies</p>	<p>Trevor Smith (NBC)</p>	<p>March 2010</p>
	<p>To ensure any issues regarding Temporary Events Notices (TENS) are picked up, and ensure data is shared.</p>	<p>Trevor Smith (NBC)</p>	<p>March 2010</p>

	To support Pubwatch and consider revising its structure and personnel	Trevor Smith (NBC), Dan Maddox (Chair)	March 2011
	Establish Pubwatch forums to oversee Pubwatch schemes across the Borough	Trevor Smith (NBC), Business Crime Initiative committee	March 2011
	Establish terms of reference for these forums ensuring best practice is met	Trevor Smith (NBC), Business Crime Initiative Group	March 2011
	To review the process and structure of the Behave or Be Banned scheme (BOBB)	Dan Maddox (Pubwatch Chair), Trevor Smith (NBC)	March 2010
	To monitor the CCTV system, to look at the three year plan and implement its recommendations	Graham Williams (NBC), Trevor Smith (NBC)	March 2012
	To monitor the development of Alcohol Prohibition Zones and review the application process	Trevor Smith (NBC)	March 2011
	To gate off all problematic 'red routes' in Newcastle Town Centre where alcohol-related ASB occurs in line with the Green Routes project	Trevor Smith (NBC)	March 2011

	<p>To maintain an ongoing focus on underage drinking, looking at both proxy alcohol purchasing and direct alcohol sales</p> <p>Consult relevant agencies about the implementation of a taxi-marshalling scheme in Newcastle Town Centre</p>	<p>Trevor Smith (NBC,) Police Licensing Unit, Adrienne Mainwaring (Trading Standards)</p> <p>Trevor Smith (NBC), Nigel Gardener (NBC), Safer Nights Group</p>	<p>March 2010</p> <p>March 2010</p>
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14. Bibliography

<http://www.drinkaware.co.uk/>

HM Government (2007) Safe. Sensible. Social. The next steps in the National Alcohol Strategy, DH, Home Office, DFES, DCMS. 2007. Available from

<http://www.homeoffice.gov.uk/documents/Alcohol-strategy.pdf?view=Binary>

North West Public Health Observatory, Local Alcohol Profile for England (LAPE). Available from

www.nwph.net/lape

Alcohol in the West Midlands: 2007 Information and recommendations for local action. Available from

www.gos.gov.uk/497745/docs/379127/AlcoholintheWestMidlands2007

The Sexual Violence and Abuse Action Plan (2007). Available from

www.homeoffice.gov.uk/documents/Sexual-violence-action-plan

www.yjb.co.uk

www.who.int/

Newcastle Borough Council Strategic Assessment of Priorities November 2008. Available from

<http://www.newcastle-staffs.gov.uk/communitysafety>

Alcohol Needs Assessment for Staffordshire County (2008). Available from

www.southstaffordshirepct.nhs.uk/YourHealth/profile/alcohol.asp

Newcastle Borough Council

Staffordshire Police

Staffordshire Youth Offending Service

North Staffordshire Primary Care Trust

