

Wirral Childrens Trust Board 15th January 2010

Young People and Alcohol Briefing

Executive Summary

The Government made a commitment in the Children's Plan, published in December 2007, to look at what more might be done to reduce excessive drinking by children and young people under the age of 18. This report provides information and service developments that will address significant issues for Wirral as a consequence of alcohol misuse, particularly for young people.

It has long been recognised that the excessive consumption of alcohol can be damaging. There is compelling evidence about the negative impact of drinking on young people, their families and wider society. Known risks associated with under age drinking can include effects on individual and family welfare, educational under-achievement, illicit drug misuse, teenage conceptions and unintentional injury.

Based within the context of the HM Government's Youth Alcohol Action Plan (2008), the National Drugs Strategy (2008), the Chief Medical Officer's guidance on the consumption of alcohol by children and young people and a Borough specific alcohol needs assessment, Wirral DAAT/NHS have commissioned a wide ranging alcohol programme targeted towards stakeholders to guide their efforts to reduce the harms that alcohol causes young people, their families and the communities in which they live.

The Young Persons Alcohol Plan ensures multi agency, multi disciplinary initiatives are in place across the borough to enhance engagement, screening and prevention activities, increase awareness of parental responsibilities, provide access to specialist support and work towards a reduction in the numbers of alcohol related presentations to the Accident and Emergency Department and hospital admissions.

1 Background

- 1.1 There have been changes in recent years in the levels and frequency of young people's drinking, where and how they drink, and where they obtain alcohol.
- 1.2 Drinking at an early age can cause serious health problems, both in the short and the long-term. There is also new evidence that drinking too much alcohol can impair adolescent brain development.
- 1.3 Drinking too much alcohol is strongly associated with a wide range of other problems which adversely affect the welfare of teenagers, for example, unprotected sex, teenage pregnancy, failing at school and the use of illicit drugs.
- 1.4 Alcohol can contribute to unacceptable behaviour by young people that can be a significant problem for the rest of the community, for example through anti-social behaviour or crime.

1.5 A number of recent government policy initiatives have emphasised the need for local action, including:

- 'Safe, Sensible, Social'. The next steps in the National Alcohol Strategy (2007).
- The National Drugs Strategy (2008).
- Youth Crime Action Plan (2008).
- Youth Alcohol Action Plan (2008).
- Young People's Specialist Substance Misuse Treatment – exploring the evidence Consultation (2008).

2 Service Development Priorities

2.1 A need has been identified to provide additional outreach/community support to address alcohol related antisocial behaviour. This may take the form of a detached outreach work.

2.2 Additional capacity is required in the form of targeted youth worker/substance misuse support to work as part of the young people's alcohol intervention programme to pick up referrals via the criminal justice system and police to offer targeted interventions and specialist support where necessary for young people coming into contact with the scheme.

2.3 There are gaps in provision for children and families of alcohol using parents and carers and siblings (in relation to hazardous, harmful and dependent drinkers).

2.4 Further pathway development is required for children and young people who may be admitted to hospital and/or via the A&E Department as a result of alcohol related and specific conditions.

2.5 Further co-ordination is required to ensure that education and health promotion campaigns are effectively marketed to those with presenting need, together with broad based education for young people and families.

2.6 There is a need for an enhanced program of education prevention and support targeted at school aged children that addresses the wider family needs.

2.7 There is a need for an enhanced program of education, prevention and support targeted at young women.

3. Structure

3.1 The post of a Programme Manager, School Drugs Adviser and admin support ensure programme is delivered and performance managed as prescribed by the Young Peoples Commissioning and Implementation Group

3.2 Staffing includes specialist treatment provision, 5 x wte posts within CAMHS, Response and YOS. Further targeted interventions delivered by 3 x wte posts within

Response and Connexions. Particular preventative work within schools is undertaken by a third sector organisation. One joint funded post is hosted by Regeneration to deliver shared outcomes in line with the positive futures programme.

- 3.3 2 x wte posts are commissioned within Response with a specific Alcohol prevention brief and links to Accident and Emergency Department and the Young Persons Alcohol Intervention Project
- 3.4 1 x wte post has been commissioned within Response to ensure links to Health Services in Schools programme.
- 3.5 Mainstream activity within CYPD has been enhanced with investment in Family Interventions Programme

4. Governance Arrangements

- 4.1 The Young People's Commissioning Implementation Group brings together senior officers from the Local Authority Children and Young People's Department, Connexions, Wirral NHS and the Youth Offending Service. The group is delegated the following tasks by the DAAT executive board:
 - Agree expenditure against the Young People Substance Misuse Partnership Grant funds with key partners, in line with local children and young people's plans.
 - Agree investment and appropriate targets against Key Performance indicators with the Joint Regional Government Office Team.
 - Monitor project performance
 - Agree strategic development and integrated planning.

5. Finance

- 5.1 The Home Office has allocated a Young People Substance Misuse Partnership Grant to local Drug Action Team Partnerships. The Young Peoples Substance Misuse Partnership Grant consists of pooled funding streams from existing DCFS, Home Office, Youth Justice Board and Department of Health grants relating to substance misuse services for young people.
- 5.2 The Young Peoples Substance Misuse Partnership Grant funds contribute to a number of internal and external Alcohol projects. The 2010-11 total grant allocation that Wirral receives from the Home Office is £361,747.
- 5.3 Funding secured from Wirral NHS funds a further programme of activities in order to progress the local Alcohol Harm Reduction Strategy and the Youth Alcohol Action Plan. This investment of £220k a year complements investment of the Young Persons Substance Misuse Planning Grant.

5.4 2008 -2011 Funding Statement

	2008/09	2009/10	2010/11
Young Persons Substance Misuse Planning Grant	209,321	209,321	209,321
Pooled Treatment Budget (NTA Adult Treatment Contribution. Specialist Treatment)	119,697	119,697	152,426
Additional Contribution from Pooled Treatment Budget	98,115	53,000	
Wirral NHS (Alcohol Prevention)			220,000
Shortfall			13,588
Grand Total	427,173	382,018	595,335

6. Performance Management

6.1 The drug strategy and the Public Service Agreements (PSAs) underpinning its delivery are closely related to a number of strategies and PSAs across a broad range of areas.

6.2 Action to meet objectives and targets set out in the drug strategy and its supporting action plans will contribute to the objectives set out in a number of other strategies.

6.3 Performance will be monitored through the National and Local indicators highlighted below:

- PSA 14 (NI 115) A reduction in the proportion of young people frequently using illicit drugs, alcohol or volatile substances (11-15 year old)
- PSA 25 (NI 40) an increase in the number of drug users recorded as being in effective treatment. (16-18 year old)
- PSA 25 (NI 39) A reduction in the rate of hospital admissions for alcohol related harm. (Under 20 year old)
- Local Strategy Indicators, monitored by National Treatment Agency, Home Office, DCSF. These are consistent with and help to monitor progress to achieve the outcomes of 'Every Child Matters' (2005):
 - A reduction of the number of drug and alcohol related exclusions from School
 - Percentage of young people leaving treatment in an agreed and planned way.

6.4 The closest links are between the drug strategy and the alcohol strategy, and the single PSA that informs the content of both strategies sets out the Government's vision to reduce the harms caused by alcohol and drugs.

6.5 All activity will ultimately support children in achieving the overarching key outcomes prioritised in the Children Act 2004 (Every Child Matters), the Wirral Children and Young People's Plan, Youth Alcohol Action Plan, and the local Alcohol Harm Reduction Strategy.

6.6 Specific outcomes in relation to the Youth Alcohol Action Plan addressed by the programme are:

- Stopping young people drinking in public places
- Taking action with industry on young people and alcohol
- Establishing a new partnership with parents
- Supporting young people to make sensible decisions

7 Key Actions

7.1 Review commissioning process

- Ensure commissioning decisions based on value for money, underpinned by a quality and performance framework
- Ensure services are commissioned based on the needs of individual children and their families

7.2 Deliver a package of interventions for families at risk, to improve parenting skills, helping parents

- Development of a pilot project that will ensure early intervention and support for alcohol-misusing parents of 14-17 years olds
- Adopt and deliver appropriate early identification and screening processes between all young people's services
- Ensure information and training is provided to district and area teams as to alcohol misuse issues amongst vulnerable young people.

7.3 Support for the expansion of the Young Persons Alcohol Intervention Programme (YPAIP)

- Additional outreach/community support to address alcohol related antisocial behaviour.
- Provide brief interventions to young people and their parents/carers.

7.4 Increase resources to specialist treatment services reducing the number of alcohol-specific admissions to hospital for underage drinkers.

- Develop a service to provide services and interventions to young people presenting at Accident and emergency with alcohol related issues
- Identification of how existing referral pathway can be utilised more effectively

7.5 Hospital Admissions Reduction

- Support & referral provided within Accident and Emergency

- Promote partnership work between relevant agencies
- Provision of targeted alcohol worker within substance misuse team to facilitate assessment and referral of young people referred from Accident and Emergency.

7.6 To provide targeted education and prevention interventions.

- The HSIS co-ordinator will liaise schools substance misuse lead; attend relevant meetings and events in relation to the delivery of the Young Persons Alcohol plan.
- Offer targeted support to enable full participation and inclusion through planned group work, street work and through brief interventions

7.7 Targeted information campaign to be devised

- Range of approved products produced and disseminated
- Steering group formed to ensure project delivery.
- Ensure specific elements of the campaign are directed towards young female drinkers

8 Recommendations

8.1 That Wirral Children's Trust Board note the report.

9 Background Papers

Reaching Out: Think Family, Cabinet Office, 2007 and Think Family: Improving the life chances of families at risk, Cabinet Office, 2008

Guidance on the consumption of alcohol by children and young people
From Sir Liam Donaldson Chief Medical Officer for England December 2009

Hidden Harm – responding to the needs of children of problem drug users, Advisory Council on the Misuse of Drugs (ACMD), 2003 and Hidden Harm Three Years On, ACMD, 2007

Aiming high for young people: A ten year strategy for positive activities, HM Treasury/DCSF, 2007

Every Child Matters: Change for Children– Young People and Drugs, DfES, 2005

Youth Alcohol Action Plan, DCSF, summer 2008

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