

Report of the Safe and Sustainable Communities - Improvement and Scrutiny Committee

‘Reducing Underage Drinking’

April 2009

Derbyshire County Council



Contents	Page
1. Executive Summary	3
2. Background Information	6
2.1 The Derbyshire Picture	8
2.2 Joint Review with Chesterfield Borough Council, Bolsover District Council and North East Derbyshire District Council	9
3. What Derbyshire County Council and its Partners are doing now	13
3.1 The Derbyshire DAAT	13
3.2 Trading Standards Division	17
3.3 Diversionary Activities and Educational Projects	21
4. Best Practice	25
4.1 St Neots Community Alcohol Partnership	25
4.2 Nuneaton and Bedworth Review of Younger People's Consumption of Alcohol	28
5. Recommendations	31
6. Acknowledgements	33
7. Appendix	34
"Joint Scrutiny Review by Bolsover District Council, Chesterfield Borough Council, Derbyshire County Council and North East Derbyshire District Council"	

Reducing Underage Consumption of Alcohol

1. Executive Summary

1.1 Introduction

The review was instigated originally to look at the ways in which the County Council's Trading Standards Division worked to prevent the sale of alcohol to underage consumers. As the review progressed it became apparent that underage drinking was becoming a serious problem, nationally as well as locally, and this raised a number of social issues which should be addressed as part of a wider review.

It was evident that the problems arising from underage drinking crossed many areas of society and numerous agencies and organisations were either affected by these problems, or could work towards resolving them.

During the course of the review, the County Council joined with Chesterfield Borough Council, Bolsover District Council and North East Derbyshire District to scrutinise underage drinking in the north east area of the county. The Chesterfield area had* the highest proportion of alcohol related hospital admissions for under-18s and is a matter of concern for all the Local Authorities in that area.

The outcome of this joint review is detailed later in this report.

Over the last 3 or 4 years the problem of young people drinking alcohol has developed a high profile as local councils, national government and the media have highlighted growing concern for this subject.

At local community level, incidents of young people congregating to obtain and consume alcohol have caused nuisance problems for residents and businesses and have lead to complaints to Councils, Members and Police of littering, anti-social behaviour, intimidation, vandalism and noise nuisance.

Schools have experience of pupils not attending due to the after effects of alcohol, or even attending school in an unfit state due to drink. Educational attainment levels are hampered when young people find themselves in this position which in turn reduces their chances of success in the job market.

As with smoking, peer pressure plays a large part in involving children in taking alcoholic drinks and the potential for addiction, coupled with the almost immediate effect on young people's behaviour, has raised concerns throughout a number of organisations whose role is to protect young people and encourage them to lead healthy and safe lifestyles.

** NB The High Peak area has since overtaken Chesterfield as the information on page 8 shows*

1.2 Review Terms of Reference

To undertake the review a Member Working Group was established. The working group comprised Councillors Bambrick, Allwood, Ford, Southerd and Ratcliffe. Initially asked to look at the ways in which the County Council's Trading Standards Division worked to prevent underage sales of alcohol, the working group soon expanded its remit to look at how its partners, and other County Council's services, worked to tackle the issue.

During the course of the review, the working group has;

- visited a secondary school to witness the "Consequences" Roadshow
- received a presentation from the Alcohol Harm Reduction Strategy Co-ordinator based in the Drugs and Alcohol Action Team (DAAT)
- interviewed the Head of Trading Standards and Trading Standards Officers
- taken part in a wider review with District and Borough Councils in the north east of the county
- attended workshops with representatives from other organisations and agencies including the PCT, Police, DAAT, Licensing Officers, voluntary sector youth workers and voluntary sector community workers

A wealth of research has been done over the last few years by national bodies, such as Alcohol Concern, academic institutions as well as other local authorities, voluntary and charitable organisations. The working group has considered relevant findings in order to determine areas of best practice which could be adopted by the County Council and its partners.

1.3 Summary of Findings

The most compelling outcome of this review is that no agency, organisation or Local Authority can tackle the problem of underage drinking independently.

The reasons why young people consume alcohol are numerous and the implications of underage drinking affect most aspects of society, as well as young people themselves. In the long term the impacts can become more serious, as underage drinkers suffer health problems, engage in anti-social or irresponsible behaviour and/ or petty crime, find it difficult to break from a reliance on alcohol and are potential adult alcoholics. Excess alcohol consumption in young people can lead to many problems including poor educational attainment, inability to find employment, reliance on benefits, ill-health, inability to form lasting social relationships, poor parenting skills and the danger of engaging in crime.

It is evident that, by preventing young people from imbibing in alcohol consumption, authorities can go a long way to preventing the need for costly support services in the future.

However, given that many of the benefits of tackling underage drinking are not realised for several years, there can be a tendency, on the part of some agencies, to consider their own involvement as having a less significant impact and therefore this is not prioritised in their service plans. For example, a local PCT may not have a major concern over local anti-social behaviour problems, but *will* have to deal with drink related health problems as the young people develop into adults in the future.

It will be necessary for local organisations to work in close partnership with each other, particularly when a “rapid response” is required to target areas where underage drinking is identified as a particular and growing problem.

1.4 Conclusion

Derbyshire County Council and its partners must work closely together, be aware of, and use, methods of best practice, and develop working strategies which will enable a swift and sustainable response to underage drinking.

In areas where there is a more prominent problem, a targeted response should be able to be implemented rapidly, bringing together the various agencies and services to address the issue at the same time. An active intelligence network is vital to achieve this, to enable all partners to be involved and target their resources unanimously.

During the course of this review it was noted that a great deal of work is being undertaken to combat underage drinking and its associated problems. New initiatives, projects and funding sources, both nationally and locally, appear with regularity. The effectiveness of these will rely on how the County Council and its partners work together to maximise the potential results.

This report, therefore, should be regarded as a “snapshot” view of the current situation and regard should be given to the work currently being done by the County Council and its partners. The scrutiny review should act as a support to the work currently in place and planned for the near future – with reports being submitted to the Improvement and Scrutiny Committee, at appropriate times, on the outcomes and level of success of the numerous initiatives and projects.

2. Background information

Young people are drinking more and drinking more often. The average amount drunk by 11-15 year olds in 1990 was 0.8 units per week and this rose to 1.6 units in 1998. Amongst 11-15 year olds who drink, the average rose from 5.3 units per week in 1990 to 10.5 units per week in 2001.

Binge drinking is common among young people in the UK. A large European study found that 56% of UK 15-16 year olds reported having drunk more than five drinks on a single occasion in the last 30 days. 30% of this age group reported this behaviour 3 or more times in the last 30 days (Hibell 2000). Comparison with an earlier edition of this study shows that the proportion of young people who binge increased from 22% in 1995 to 30% in 1999.

Young people drink for a variety of reasons, such as the wish to demonstrate their maturity, to have fun and test their limits. Although young people may at times drink in an uncontrolled way, most will not go on to develop serious problems. However, young people's drinking does give rise to a number of concerns relating to the impact of alcohol misuse on their health, behaviour and vulnerability to harm.

Alcohol-related health

Research suggests that the health burden caused by intoxication is particularly heavy among teenagers and young adults. Experimental drinking can lead to severe intoxication, which is more dangerous for children and adolescents than for adults, as they experience coma at lower blood alcohol levels and can develop hypoglycaemia (low levels of blood sugar), hypothermia and breathing difficulties.

Fortunately, deaths from alcohol poisoning in the under-16 age group are rare. However, older teenagers are far more likely to die from the indirect effects of alcohol than from its direct effects. Accidents, suicide and violence are significant causes of death in the 16-25 age group, and alcohol is often implicated in all three.

Alcohol related behaviour

Studies suggest a clear association between drinking alcohol before sexual activity and not using contraception, which has implications for both teenage unwanted pregnancies and for sexually transmitted diseases, including HIV. After drinking alcohol, one in seven 16-24 year olds has had unprotected sex (Health Education Authority 1997). There is also evidence that young people combine alcohol and sex, especially prior to their first sexual experience. Around 40% of 13 and 14 year olds were "drunk or stoned" when they first experienced sexual intercourse (Wright et al 2000).

There is also an association between alcohol and crime. 16% of school attendees who had committed crime stated that they had been under the

influence of drink when committing the crime (Youth Justice Board 2003). According to the Youth Lifestyles Survey 15% of 12-17 year olds surveyed said they had been involved in anti-social behaviour during or after drinking. Getting into a heated argument was the most frequent anti-social behaviour, followed by getting into a fight. Frequent drinkers were more likely to get involved in anti-social behaviour (Harrington 2000).

Alcohol related vulnerability to harm

Drinking impairs judgment, reduces inhibitions and impairs cognitive and motor skills. Young people who are drinking are therefore more susceptible to harm from other people (such as sexual predators) and from risky situations (such as dare-devil stunts).

Source; taken from study by Libby Ranzetta on behalf of Alcohol Concern

2.1 The Derbyshire Picture

The North West Public Health Observatory (NWPHO) has collated data on Local Alcohol Profiles for England. An extract of figures for the East Midlands was updated on 6th January 2009. Local Authorities in the East Midlands have been ranked by the number of times they appear in the bottom quartile for each indicator. The research identifies 23 indicators and covers various aspects of alcohol consumption, for example, months of life lost (males and females), hospital admissions for alcohol-related harm, alcohol-related recorded crime and mortality rates from land transport accidents. However, Indicator 9 measures alcohol-specific hospital admissions for under-18s (*where admission to hospital was due to conditions entirely related to alcohol and where the patient is admitted to hospital – not merely attending A & E*). It should be noted that “alcohol specific” means conditions that are wholly related to alcohol – eg alcohol liver disease or alcohol overdose.

The research results are flagged with a “traffic light” indicator system with Local/Unitary Authorities shown with indicators highlighted according to the following criteria;

Red	LA is significantly higher than England
Amber	LA is not significantly different from England
Green	LA is significantly lower than England

The notable figures for Derbyshire for Indicator 9 (Alcohol-specific hospital admissions for under18s per 100,000) show the following **Red** or **Amber** results;

High Peak	112.3	Red
Chesterfield	104.6	Red
Bolsover	96.4	Amber
North East Derbyshire	91.6	Amber

Of the 40 Local Authority areas included in the research these Districts ranked 2nd, 3rd, 4th and 5th (Bassetlaw in Nottinghamshire being the highest with a result of 114.7)

The number of alcohol-specific hospital admissions is a measure of the most extreme condition relating to underage drinkers. Little, if any, research has been undertaken to date of the extent to which alcohol has contributed to less serious injuries and health conditions – especially young people who attend A & E.

During this review, some professionals, particularly Trading Standards officers who rely on local intelligence to target underage sales, expressed a wish to receive information regarding young people who attend A & E who have apparently been drinking alcohol – and where they obtained the alcohol.

2.2 Joint Review with Chesterfield Borough Council, Bolsover District Council and North East Derbyshire District Council

During the course of the County Council's Scrutiny review of underage drinking, Chesterfield Borough Council, Bolsover District Council and North East Derbyshire District Council commenced a joint scrutiny review of this same issue. It was agreed by the review working group that the County Council should be involved in this joint process to add input and weight to our own review. Cllr Ratcliffe, of the DCC Scrutiny Committee working group and the DCC Improvement and Scrutiny Officer began working with colleagues from the 3 District/Borough Councils to produce a joint scrutiny review on underage drinking in the north east of the county.

This part of the county was particularly appropriate for investigation given the high rate of alcohol related hospital admissions for under18s in the Chesterfield area over recent years.

The review produced a number of joint recommendations which have been approved in principal by the 3 District/Borough Councils. It was accepted that, as many of the services which contributed to reducing underage drinking were provided by the County Council, as well as the large input via services provided by CAYA, the Youth Service and the Trading Standards Division, there was a need for much more research and investigation through the County Council's own Scrutiny review. This was emphasised by the fact that the coordination of the Derbyshire Drug and Alcohol Action Team (DAAT) rested mainly with the County Council. A number of officers from DCC services (eg. Trading Standards and DAAT) attended workshops during the joint review to discuss their input, and some of the barriers they encountered in providing a coordinated approach to preventing underage drinking.

The final report of the joint review process is appended to this report and it shows that there is a high level of consistency across the four Authorities with shared concerns, mutual understanding of the issues and potential for the dangers of underage drinking and their "knock-on" effects to escalate, as well as a keenness to work together to address the problem in the north east of the county.

The outcomes and recommendations of the joint review have been shared with officers of the Community Safety Team and the DAAT and comments have been received as to how the recommendations may be implemented (or, in some cases, are already being addressed).

The general view, however, welcomes the level of importance the joint review places on initiatives to reduce underage drinking and values the suggestion for a more coordinated approach to joint working.

The joint review recommendations are set out below, with comments where applicable;

Recommendation 1

That the Leaders and Executives of all the partners work to strengthen and build on the delivery of the existing joint strategy to reduce the impact of alcohol on young people, to clarify and improve local and county links, roles and responsibilities thereby maximising the impact of their existing individual strategies.

Comment – there needs to be an identified “lead”, recognised by the 4 Authorities to ensure progress is made. The DAAT Alcohol Harm Reduction Strategy, which the DAAT leads on, already exists and should be used as a basis for the joint review outcomes. The Government Office for the East Midlands (GOEM), at a past Safer Communities Board meeting, agreed that areas did not have to develop local strategies because the County one was in place. However, Community Safety Partnerships have to mention their involvement in this strategy in their local partnership plans.

Recommendation 2

For all partners to:

- *Identify their information requirements individually and collectively*
- *Ascertain if that data is or could be available.*
- *Develop a central database to provide a holistic view which is accessible to all partners.*

Comment – again, the DAAT Partnership could coordinate this information source

Recommendation 3

To identify all the activities that are being undertaken to educate different groups by all the partners in order to assess the gaps and any areas that could be improved. Identify how those gaps can be addressed to ensure there is a consistent message.

To promote the delivery of education through the Derbyshire Governors Support Unit – included in the report

Comment – School Improvement should also be included

Recommendation 4

To enhance the partnerships that exist with the retailers and Licensing, Trading Standards, Police and other relevant stakeholders to:

- *Improve communications of the impact on the local community of inappropriate alcohol sales.*

- *Improve understanding of the barriers that the retailers experience in adhering to the law.*
- *Enable the retailers to achieve best practice.*

To further develop the collective prioritisation of issues amongst partner agencies.

Comment – the Trading Standards Division provides information to retailers and has run workshops in the past to offer information and support to retailers selling age restricted products. These should be continued with an emphasis placed on the need to control alcohol sales – including sales by proxy

Recommendation 5

The feasibility of developing or enhancing a method for local people of all ages and employees of the partner organisations to report incidents relating to the supply of alcohol to young people, be investigated.

Comment – The Trading Standards online reporting facility should be more widely promoted. Community Safety Partnerships could be used to promote this.

Recommendation 6

To consider the development, through partner organisations including the PCT, County DAAT and voluntary sector, of a referral system for individuals:

- *once they are discharged from hospital following an alcohol related incident;*
- *who have been identified by any of the partners as abusing alcohol;*

This will facilitate the capture of intelligence and enable early intervention to break the cycle of behaviour.

Recommendation 7

All partners to explore collectively any available funding opportunities (both internally and externally), in order to provide appropriate diversionary activities in targeted areas.

Comment – This should also target “hotspot” times (eg Friday and Saturday nights) and individuals, as well as target areas. Sometimes young people who consume alcohol, which leads to them committing crime or anti-social behaviour, would not attend diversionary activities even if they were available. These young people are difficult to engage and the Community Safety team and the Youth Service are working on projects to target these young people specifically (see “What Derbyshire County Council and its partners are doing now?” – page 21)

Recommendation 8

Review the priorities and resourcing within the District Councils' licensing teams in order to provide a more effective service that is proactive in jointly addressing issues relating to alcohol and young people.

Recommendation 9

Increase Councillors' awareness of the issues surrounding alcohol and young people and the relevance of this report to their ability to deliver corporate targets.

3. What Derbyshire County Council and its Partners are doing now.

3.1 The Derbyshire DAAT*

The Derbyshire Drug and Alcohol Action Team (DAAT) is a partnership of agencies within Derbyshire that work together to reduce harm caused by drug and alcohol misuse throughout the county (excluding Derby City). Derbyshire benefits from strong partnership working amongst its member organisations which include;

- Derbyshire Constabulary
- Derbyshire County Council
- Derbyshire County Primary Care Trust
- National Probation Service
- Her Majesty's Prison Service
- Service User and Carer representatives
- Connexions
- Youth Offending Service

In addition the DAAT has many stakeholders, including those organisations that provide services commissioned by the DAAT, users of those services, Derbyshire residents and the Borough and District Councils of Amber Valley, Bolsover, Chesterfield, Derbyshire Dales, Erewash, High Peak, North East Derbyshire and South Derbyshire.

The primary function of the DAAT partnership is to coordinate activities amongst partners that aim to tackle substance misuse (alcohol and/or illicit drugs) and to ensure that the partnership is delivering on its goals.

Activities it undertakes include:

- Ensuring the partnership has a shared vision and shared priorities around tackling substance misuse, and acting as a driving force on these issues within the county
- Leading strategic planning and ensuring best use of resources
- Providing intelligence and needs assessment to inform commissioning and planning and to identify new trends and needs so that DAAT activity is informed by a continually developing evidence base
- Setting targets and managing performance across the partnership to ensure goals are met
- Commissioning drug and alcohol treatment services and working with all partners to develop a co-ordinated approach of long term prevention activity, for example improved education, health promotion and training around early identification of people at risk
- Challenging harmful cultures around drug and alcohol use, for example binge drinking
- Coordinating and drawing on the work of partners and other stakeholders to ensure maximum impact as well as ensuring consistency in message,

quality, and approaches and to avoid replication of services, training and use of resources

- Ensuring that substance misusers and their families and carers are involved at all levels of activity in order to ensure that partnership work is as effective as possible and meets the needs of those most closely affected by substance misuse
- Promoting awareness of services available.

The partnership's work is coordinated through the following groups:

- DAAT Board
- Joint Commissioning Group – Children and Young People
- Joint Commissioning Group – Adults
- Availability Group
- Alcohol Harm Reduction Strategy Group
- Clinical Reference Group
- Drug Related Deaths Steering Group
- Harm Reduction Implementation Group
- Integrated Drug Treatment System in Prisons Local Management Group
- Treatment Provider Forum.

The DAAT's work is informed by key national policies such as Every Child Matters and key Government stakeholders include the Department of Health, the Home Office and the Department for Children, Schools and Families. Locally the DAAT works within the strategic partnership of the Derbyshire Partnership Forum (Local Area Agreement – LAA) and its constituent blocks.

The DAAT operates within a constantly changing environment, for example, one of the key trends occurring in Derbyshire is a move away from heroin use towards the use of one or more of alcohol, amphetamines, cannabis, cocaine, ecstasy and other drugs (AACCE).

In addition, alcohol consumption nationally is rising, as are attendant harms as seen in increasing alcohol related hospital admissions and alcohol related deaths nationally. Concerns regarding alcohol misuse include binge drinking, A&E attendance, city centre violence, domestic violence, **underage drinking**, and negative health impacts.

The DAAT partnership recognises that, over the next four years, it will need to address the current changing pattern of substance misuse amongst **younger people** away from opiates and towards one or more of **alcohol**, amphetamines, cannabis, cocaine, ecstasy and other drugs (AACCE).

The DAAT has produced its most recent Drug and Alcohol Strategy for 2009-13, taking account of the shift in current trends. The DAAT's vision is expressed through three strategic outcomes and a number of key indicators as set out below;

The strategic outcomes		
Prevention and Education: <i>Fewer people develop drug and alcohol problems</i>	Treatment and support: <i>There will be lower wait times, improved retention and increased planned discharges from high quality, safe and effective drug and alcohol treatment</i>	Community Safety: <i>There will be less drug and alcohol related crime and associated anti-social behaviour, and residents will have increased confidence in partner agencies understanding their concerns</i>
Key performance indicators		
The proportion of young people frequently misusing substances will be reduced The rate of alcohol related hospital admissions will be no more than 1753 per 100,000 population by 2010-11* Specifically, no Derbyshire district will be in the top ten districts from the region for alcohol specific hospital admissions of under 18s	There will be 90% effective treatment rates for those entering Tier 3 adult drug treatment There will be low wait times for drug or alcohol treatment – 95% or more entering treatment within three weeks There will be 1940 adults in effective drug treatment for each year up to 2010-11* There will be 1764 opiate/crack users in effective drug treatment in 2010-11*	Perceptions of the police and local council seeking people's views on anti-social behaviour and crime issues will increase Perceptions of drunk and rowdy behaviour will decrease Perceptions of drug taking and drug dealing will decrease Drug related (Class A) offending rates will decrease

Delivery of the strategy

The delivery of the strategy will be overseen by the DAAT Board, advised by the DAAT's strategic groups. Each year, the DAAT's business plan will link its work to:

- the DAAT strategy
- national strategies and policies
- key performance indicators which at the time of publication are:
 - Adult drug users in effective treatment
 - Alcohol related hospital admission rates
 - Serious acquisitive crime rate
 - Assault with injury crime rate
 - Drug related (Class A) offending rate
 - Opiate/crack users in effective treatment
 - Perceptions of drunk or rowdy behaviour as a problem
 - Perceptions of drug use or drug dealing as a problem

- Substance misuse by young people
- the priorities of interlinked partnerships as outlined above, such as the Local Area Agreement
- learning from needs assessment, national and local surveys and research and stakeholder input, including the Citizens' Panel.

Performance against the DAAT's business plan will be managed by the Joint Commissioning Groups and the Availability Group, supported by the DAAT staff team. Ultimate responsibility for performance lies with the Board.

** taken from draft Derbyshire DAAT Drug and Alcohol Strategy 2009-13 (bold highlights inserted for the purpose of this report)*

The DAAT Drugs and Alcohol Strategy, when approved and implemented, will be the principal mechanism through which the County Council and the other DAAT partners and stakeholders can address the problem of underage drinking. Success in reducing underage drinking could help reduce excessive alcohol consumption in adults and potentially divert young people from turning to other illicit drugs. This would therefore help towards the DAAT achieving its aims and overall vision.

Recommendations

1. **a – that the work of the DAAT Partnership, as detailed in the Drug and Alcohol Strategy 2009-13, be acknowledged and recognised as a practical means to improving partnership working across the county to reduce underage drinking, alcohol related hospital admissions for under18s and associated problems these issues bring**
- b – that the Improvement and Scrutiny – Safe and Sustainable Communities Committee be kept informed of the implementation of the DAAT Drug and Alcohol Strategy, where it impacts on underage drinking, over the lifetime of the strategy, through progress reports by the DAAT Coordinator at appropriate times.**

3.2 Trading Standards Division

Derbyshire County Council has a statutory duty to regulate the sale of alcohol and to prevent young people being able to access alcoholic drinks and other age restricted goods. This function is carried out by the Council's Trading Standards Division within Cultural and Community Services and reports to the Cabinet member, Community Safety.

Under the current licensing process, where each District Council is the Licensing Authority, the County Council, through the Trading Standards Division, is a consultee and may comment on the merits of the issue of any particular licence. Social Services officers within CAYA are also consulted. This has the potential to add weight to the Division's capacity to prevent underage sales by giving more influence over the licensing process and the opportunity to suggest conditions to licenses in certain cases. The Trading Standards Division is therefore consulted by 8 District/Borough Councils on licensing matters and the Police are consulted through the appropriate Divisions. A co-ordinated approach has been achieved through a countywide liaison group which has developed an enforcement protocol. This protocol includes an agreement that the Trading Standards Division should have a lead role on underage sales with regard to off-licensed premises, with the Police leading with regard to on-licence premises (pubs and clubs etc)

In addition to the actual seller – often a sales assistant – the owner of the alcohol (who may also be the premises license holder) is also legally responsible for any sale of alcohol. The new licensing legislation has also introduced other people who could be liable. However, the issue as to whether or not the owner of the business is also legally responsible has yet to be tested in law. Under the old regime the owner of the business was not liable unless he physically sold the alcohol or was also the Licensee. This has become an issue with some supermarket chains where repeat sales took place. Much Trading Standards resource has been taken up by examining supermarket companies' systems and training. Any organisation is only as good as its weakest link, but if a company can demonstrate that it regularly trains its staff to ask to see proof of age when selling age restricted products, has till prompts and signage to remind staff and keep records of refusals, then the company or Licensee may be able to establish a defence if an illegal sale does take place due to the negligence of an individual employee.

Over the last few years, the following initiatives had been employed by the TS Division to combat underage sales;

- **The Home Office “BluePrint” Scheme**
In conjunction with the Education Department, the TS Division had been one of four Authorities who had been part of the Blue Print scheme. The scheme aimed to look at issues of drug and alcohol use by school aged children and take an holistic approach to prevention using a number of initiatives including educating children

and retailers and raising the profile of this issue through publicity campaigns. A spin-off from this scheme was that participating Authorities received grants of up to £50,000 for projects which work towards the aims of the scheme. In Derbyshire the grant was used to develop the “Are You Old Enough?” campaign in partnership with DAAT. This was a high profile and successful campaign which offered advice packs, posters and other promotional material to local traders and encouraged the use of proof of age schemes. Traders were exhorted to ask for proof of age whenever they were in doubt and at the same time young people are advised to carry proof of age wherever possible.

- **Traders’ Seminars**

Beginning in 2003/04, a series of seminars for traders have been held to highlight the issues and implications of selling alcohol to underage children. The advice offered to traders at these events was supported by the introduction, in 2005, of a short film on DVD, aimed at both traders and young people alike. As well as being shown at 16 seminars for traders, the DVD was sent to all of the County’s Secondary Schools to be shown as part of the PHSE curriculum sessions. As a result of these sessions and the distribution of the DVD to schools, the Division noted a significant reduction in underage sales. For example, between March 2005, when the “Are You Old Enough?” campaign was launched, and January 2006, instances of sales to underage children during test purchase sessions dropped by 23%.

- **Targeted Trader Advice**

During 2007/08 it became apparent that local retailers were not supporting trade seminars in sufficient numbers to make them an efficient way of advising them of the requirements of the law, the consequences of making an illegal sale and how best to comply. Using intelligence built up from previous test purchase exercises, complaints from the public and information from partner agencies, the Division identifies those businesses most likely to offend and provided targeted advice on the systems and procedures required. Where appropriate, an informal “Action Plan” is agreed to help prevent illegal sales. This approach has been very successful as, of 60 businesses identified as high risk and which received targeted advice, only 6 (10%) made an illegal sale when subsequently checked. This compares to a failure rate of approximately 275 of test purchases for alcohol from 286 checks carried out during the year ended 31 March 2009.

- **Test Purchasing**

The TS Division regularly (approximately 2 -3 times per month) undertakes test purchase exercises with young volunteers who attempt to buy alcohol and other age restricted products. These

exercises are undertaken with very strict controls in that children volunteering for the role of test purchaser are interviewed, with their parents, in their homes to discuss how the test purchase are carried out. Steps are taken to ensure that the young volunteers do not seek to make test purchases in their home area to avoid the possibility that they might be recognised. Usually three TS Division officers are required for each test purchasing exercise. At least one officer being present in the shop whilst the purchase is attempted and usually surveillance is conducted at the same time using hidden camera equipment. More recently police officers are involved in these exercises and allow for proxy sales (person over 18 buying on behalf of under 18s) to be tackled where these occur.

The children are chosen to look their age – that is, the Division does not try to trick retailers by using children who look old enough to buy restricted goods and, if challenged, the children must give their real age and admit that the alcohol is for their own consumption. Because of the time involved in setting up test purchasing exercises, and the number of officers who have to take part, test purchasing is a costly activity and demand has to be managed by efficient working practices, good organisation and intelligence-led targeting of activity.

The Division may be alerted by the police, local residents or other Council members when there is cause to believe a trader is selling goods to under age children.

Initially, when complaints are received, the retailer concerned will be visited and given an advice pack to alert them to the fact that the TS Division work to prevent underage sales. This acts as a tentative warning and can be followed up by a test purchase exercise to prevent the retailer continuing the practice.

Police officers now participate in these exercises as they are empowered to issue fixed penalties to traders caught in breach of the law. Fixed penalties are used to deter front line sales staff but more serious offences usually result in prosecutions being brought by the Council against the licensee concerned.

- **Surveillance**

When carrying out test purchasing exercises, young trading standards volunteers are instructed to reveal their correct age when seeking to purchase alcohol under the direction of a trading standards officer. It is suspected that some retailers will only sell to “known local” young people or when adults are not present in the store. To gather evidence – in accordance with legal guidelines – trading standards and Police colleagues use covert surveillance techniques. In December 2008, Cabinet ratified a Safer Communities Board recommendation to provide funding for an

additional surveillance resource to help secure evidence of illegal sales.

- **AMEC/TUSAC Scheme**

In 2004/05, the Government introduced the Alcohol Misuse Enforcement Campaign (AMEC) which was intended to reduce alcohol related crime and alcohol misuse. Derbyshire participated in the scheme in 2005/06 and our “Are You Old Enough?” campaign has since been adopted by four other Trading Standards authorities in the East Midlands. In April 2007 the emphasis was slightly changed when the Home Office replaced AMEC with TUSAC (Tackling Underage Sales of Alcohol Campaign). This provided funding for Police lead initiatives to tackle hotspot areas in conjunction with local trading standards services. In Derbyshire, the Trading Standards Division has been working increasingly closely with Derbyshire Constabulary to tackle hotspot areas. Operations Relentless and Endeavour have both involved joint initiatives to tackle the problem.

- **VAL Groups**

One of the recommendations from a report by the Alcohol Harm Reduction Strategy Co-ordinator that was agreed by the Safer Communities Board was the setting up of Violence, Alcohol and Licensing Groups throughout the county to bring together those agencies with a responsibility for reducing alcohol harm. The Trading Standards Division regularly attends these groups and shares with Police, District Council and other partners, information about non-compliant businesses. Joint operations to tackle problem premises – both on and off-licensed – have been undertaken. The Safer Communities Board has also provided three year funding to support an additional trading standards officer to help tackle the problem of underage sales of alcohol.

- **License Reviews**

The sanctions available to the Trading Standards Division following the detection of an illegal sale, range from a warning letter to formal caution and prosecution. The new licensing act introduced fixed penalty notices (£80) and the ability to seek license reviews. The Division uses the full spectrum of enforcement “tools” to bring about compliance. Increasingly, they are using license reviews to either seek to place stricter conditions on businesses that sell alcohol, or in the worst cases to seek a suspension or revocation of the license.

- **Roadshows**

The TS Division, in conjunction with the CAYA Department and other agencies, has run a series of roadshows at a number of Derbyshire Secondary Schools. Held with the theme “Consequences – a lethal mixture”, the roadshows involve the three emergency services and

give the message to young people about the dangers and implications of the misuse of alcohol, fireworks and other items which are subject to restricted sales. The involvement of the emergency services in these events highlights the extent of the nuisance caused by misuse of alcohol and the impact it has on local people and services. During the pilot phase, 3 out of 4 invited schools took part in the roadshow series. For the immediate areas of these three schools, call outs for the emergency services for related incidents showed a reduction of 50%, whereas there was no change for the area of the school which didn't participate.

Whilst the effectiveness of these roadshows is very evident, the resources of the TS Division are not sufficient to roll out a programme to take in the whole county in the near future. As an alternative, the Division has developed, in conjunction with the Schools Advisory Service, a new teaching resource called "Consequences". This includes film clips produced by young people from "Cinehubs" on the potential harmful results of drinking alcohol. It is anticipated that this will be available for all Derbyshire secondary schools during the summer term.

- **Proof of Age Cards**

A "PASS" approved Proof of Age card enables traders to determine the age of any young person attempting to purchase alcohol. The Council's silver b_line card, which is issued to every child in the county on reaching 14 years old, is now PASS accredited and is officially acceptable as a proof of age card.

Recommendations

- a) that the Head of Trading Standards informs the Improvement and Scrutiny Committee of any developments within his services area which impacts on preventing underage drinking, particularly in respect of partnership working with other agencies and authorities.**
- b) that the Trading Standards Division continue to advise local businesses on the requirements of the law when selling alcohol and other age-restricted products and to take appropriate, proportionate action when illegal sales are detected.**

3.3 Diversionary Activities and Educational Projects

3.3.1 Current Youth Service provision

The Derbyshire Youth Service provides facilities to young people between the ages of 11 and 19. All young people have access to preventative programmes – through youth clubs and mobile units – which encourage young people to be

aware of the dangers and problems surrounding excessive alcohol consumption.

The Youth Service and its partners had recently successfully bid for funding to develop youth facilities on Friday and Saturday evenings, when diversionary activities are most needed in some areas. £416,000 has been awarded from the East Midlands Regional Improvement and Efficiency Partnership for this additional work. The project is called **b_safe** and will be overseen by the Youth Support Group that is made up of representatives from many organisations working with vulnerable young people. This group will be expected to initiate and promote joined up support from partner agencies.

Project Description

The funding will enable a new partnership project targeting drunken young people on Friday and Saturday evenings in key hotspot areas, initially Chesterfield town centre, Ripley town centre, Shirebrook and Swadlincote. These areas were selected as they had the highest level of alcohol related offences for young people. As a result of the north-east area of the county, and High Peak having levels of alcohol related admissions to hospital considerably higher than the national average, it is intended that these areas also be included in the project.

The project will provide “safe centres” open at critical times on Friday and Saturday to include one-to-one support for young people, resources to help them sober up, activities to divert them from alcohol and a protocol for informing parents or getting the young people home safely.

A multi-agency staff team will be established which will include a Police officer, District Council Community Safety Officer, 2 detached Youth Workers, 3 centre based Youth Workers, Alcohol Specialist Worker, PCT Sexual Health nurse and a Young People’s Counsellor. The team will engage with and support young people with anti-social behaviour and alcohol issues within their local community. They will also promote responsible drinking, enhance personal safety awareness and reduce high risk behaviour which often leads to unprotected sex, unwanted pregnancy, drug taking, theft or violence.

Programme timescale

The programme will be developed through the following timescale;

October 2008 –March 2009	Consult with young people and partner agencies within the identified communities
July 2009	Identify and resource the Safe Centres and appoint staff to the multi-agency teams

July 2009 –March 2011

Operate the **b_safe** project in the Safe Centres

March 2011

Project evaluation

Potential Threats to the success of the programme

The programme will rely heavily on trained youth workers and other partners' staff engaging with the young people concerned on the occasions when they are most likely to be out in the local area, consuming alcohol and taking part in anti-social or unsafe activities. This will be over Friday and Saturday evenings and it could be difficult to attract sufficient numbers of staff to undertake this work at these times.

In addition, the programme will depend on the goodwill and commitment of a number of partners, each of whom will need to dedicate resources to the programme. Whilst there will be commitment and enthusiasm by those workers directly involved in the programme delivery, the practical support of each partner organisation's executive will be crucial in moving the programme forwards successfully.

For example, the programme may wish to take over part of a local leisure centre to provide activities and care for the targeted young people. This will have resource implications for the District Council providing the accommodation/leisure facilities and will require a commitment from the Authority concerned.

It is this commitment from all partners to providing practical support to the programme which will influence its success. Senior officers from each partner agency – who are empowered to take strategic decisions – should be involved in the project development to assist this process.

The joint scrutiny review, which had recently been completed by Derbyshire County Council, Chesterfield Borough Council, North East Derbyshire District Council and Bolsover District Council, could be used as a catalyst to assist and monitor the development and success of the **b_safe** project.

3.3.2 “Recruit into Coaching”

- ❖ A joint Sport England and Youth Sport trust project being piloted in the 70 most deprived areas in England. In Derbyshire this includes Derby City and Bolsover
- ❖ Derbyshire has been selected as a pilot/trailblazer for Year 1 delivery
- ❖ Funding to date will enable 40 volunteers from Derby and Bolsover to participate in the scheme.
- ❖ The national scheme operates as follows;
 - A small steering group is established in each district
 - Potential volunteers would be recruited, including from Step into Sports Leaders, HE/FE Students, other young people such as

Sporting Futures volunteers, parents, Youth Workers, unemployed and NEET groups etc

- In line with the community safety focus on this project, volunteers will also be recruited from hotspot areas for crime and ASB, as well as from agencies working with young people at risk such as looked after children, YISP and YOT clients
- Each volunteer will receive training in their chosen sport or activity
- Appropriate and supported placements will then be identified
- Training will be offered to those supporting the volunteers, if required
- Volunteers will then attend their placements to deliver the coaching and their progress is monitored

The Council's Cabinet Member for Community Safety recently approved expenditure of £49,000 of Community Safety funding to enable 100 volunteers to be trained and supported throughout the county and to purchase appropriate equipment – including clothing for those young people who do not have access to suitable clothing. This is most important to attract young people from deprived backgrounds who cannot provide their own sports clothing in order to participate as young coaches.

3.3.3 Anti-Social Behaviour Theatre in Education

The Council's Community Safety budget has allocated £25,000 to fund an Anti-Social Behaviour Theatre-in-Education project which will be delivered in 6 targeted secondary schools. Following a tender process, the Brief Candle theatre group was appointed to undertake the delivery of the project which will take place from November 2009 until 22 January 2010, with the schools providing support lessons before, during and after the delivery of the drama project.

The schools will be selected using established indicators which highlight those areas where there is most "need" for the project. The project aims to tackle the wider issue of anti-social behaviour and the misuse of other substances as well as alcohol, although it is expected that the results will impact on young people consuming alcohol and the impact this has on their behaviour.

Recommendation – that the "Recruit into Coaching", the "b-safe" and Anti-Social Behaviour Theatre in Education schemes be monitored as to their effectiveness in reducing underage drinking, particularly in the High Peak and Chesterfield areas, and progress on the schemes be reported to the Improvement and Scrutiny Committee

4. Best Practice

Concerns over underage drinking are, understandably, widespread throughout the country. The problems that alcohol can cause for young people as individuals are joined by a concern for society as a whole - where local communities face anti-social behaviour problems, truancy, poor educational attainment, unemployment and other social problems, towards which underage drinking can lead young people if no action is taken.

There have been many national and local initiatives promoted over the last year or so, aimed at addressing this issue and discouraging under18s from drinking alcohol (as well as promoting sensible alcohol consumption in adults).

A number of examples of good practice are available and warrant further consideration as a possible means to change the course of underage drinking in those areas in Derbyshire where there is cause for concern.

Of particular note is;

4.1 **St Neots Community Alcohol Partnership (CAP)**

St Neots is a typical English market town in the west of Cambridgeshire. It has a number of parks and recreation grounds. The Riverside Park has a car-park, café, skateboard park and children's play area where young people like to gather. There are 20 different off-licence premises in the town ranging from a national superstore on the outskirts, down to several independent retailers.

At the commencement of the CAP pilot project in September 2007, the priorities for the 2 Neighbourhood Policing Teams, as decided by public consultation at Neighbourhood Panel Meetings, centred on youth related anti-social behaviour, criminal damage and youth related disorder, with a number of local "hotspots" being identified.

Clearly there was a perception amongst the Community, Police and Local Authorities that there was a problem with anti-social behaviour and youth related disorder – much of which could be associated with underage alcohol consumption. Adding to this was the negative effects on the health of young people participating in underage drinking, it was clear that something needed to be done.

CAP Pilot

The CAP was launched on 11 September 2007 with these objectives;

- reducing harm to society and victims (including young drinkers)
- delivering cultural change within Cambridgeshire
- challenging and changing public perceptions

CAP Approaches

CAP took three main approaches to tackle the issue of underage drinking in St Neots;

Education

Police and **Trading Standards** provided education to all year groups at **St Neots Community College** and **Longsands College** about the law relating to young people and alcohol and the penalties for committing crime. These sessions were run in assemblies or Every Child Matters lessons.

Informal drop-in sessions at the local **Youth Club** took place.

Drinksense (a locally based charity) facilitated an alcohol awareness workshop at Longsands College. The session was run for **parents** of pupils at both the secondary schools in the area.

Leaflets produced in partnership with **Cambridgeshire County Council**, **Retail of Alcohol Standards Group (RASG)**, **Police** and **Drinksense** for retailers to give to every purchaser of alcohol (explaining the harm of, and the law relating to underage alcohol consumption and proxy purchasing)

Enforcement

Police and **Cambridgeshire County Council** regarding patrols of hotspot areas, confiscating alcohol from under 18s

Retailers provided with telephone numbers of **Trading Standards** and **Police** staff at times of enforcement operations to immediately report alleged offenders.

Trading Standards working with store managers and positioning themselves in retail outlets to advise any offenders (young people or proxy purchasers) of the reason their purchase was refused.

Public Perception

The local newspapers were provided with regular CAP news stories that built **community** confidence and helped alter public perception of underage drinking in St Neots.

Learnings

- Alcohol-related litter counts significantly down in original hotspot areas
- Cambridgeshire Confiscation campaign showed significantly lower levels of alcohol had been confiscated in the St Neots area, compared with other districts of the county
- No shift in problems creating new hotspot problem areas
- Changed enforcement activity has been cost neutral
- Better relationships between retailers and enforcers
- Public perception that public spaces are more pleasant than previously, as they are cleaner and there are fewer incidents of group drinking

Key Outcomes

The benefits of the Cambridgeshire CAP are still being seen. The pilot project is now a permanent fixture. Since its inception (September 2007) the scheme has delivered the following;

- 42% decrease in anti-social behaviour incidents in St Neots area from August 2007 (per project) to February 2008 (post project)
- 94% decrease in underage people being found in possession of alcohol
- 92% decrease in alcohol related litter at one key hotspot area
- amount of alcohol found on young people in St Neots was significantly lower than expected or in comparison with similar locations, such as Huntingdon
- alcohol related litter counts significantly down in original hotspot areas
- significantly lower levels of alcohol had been confiscated in the St Neots area compared with other districts of Cambridgeshire
- no new hotspot areas created (ie no “balloon” effect)
- changed enforcement activity was cost-neutral
- better relationships between retailers and enforcement officers
- public perception that public places were more pleasant than previously

The key element that lead to the success of the Cambridgeshire pilot CAP was that enforcement officers, Police, traders, education staff, and voluntary organisations all were involved in the project, working together to co-ordinate an approach to dealing with the problem in the areas where it was most needed. Once established, and systems are in place, this method of working is easy to maintain and, to date has been cost-neutral.

Towns across England have differing demographic and social problems but the key principals of the Cambridgeshire CAP project are transferable to all towns and city neighbourhoods. A **toolkit** is available to any other interested partnerships who wish to learn from and utilise the project in their area. The toolkit includes suggestions for appropriate partners, methods of working

together and examples of leaflets, letters to traders and other publicity material.

Recommendation – that Derbyshire DAAT and its partners consider using the St Neots CAP pilot toolkit as a method of reducing underage drinking in key areas of the county

4.2 Nuneaton and Bedworth review of Younger Peoples Consumption of Alcohol (published 2007)

Nuneaton and Bedworth's Culture Recreation Environment and Health Overview and Scrutiny Committee identified younger people's consumption of alcohol as an issue to be looked at, following its being highlighted in an earlier review by the Council's Corporate Services and Civic Affairs Overview and Scrutiny Committee into the need for an Alcohol Exclusion Zone. Concern had been raised regarding the numbers of underage alcohol consumers who had attended the George Eliot Hospital Accident and Emergency Department.

George Eliot A & E Data

The Audit Team at the George Eliot Hospital provided data from patients attending A & E regarding admissions where they were related to alcohol consumption. The data was collected for admissions between 01/04/05 to 31/03/06. The results showed that 29% of A & E admissions related to alcohol were below the age of 18. Within that 29%, the mode value (the most frequently occurring value) was 15 years of age and the median time of admission for people under 18 being admitted was 8.38pm – with the earliest time being 10.39am and the latest being 5.08am.

In the review by Nuneaton and Bedworth, this data, supplied by the Hospital Audit Team, gave details of the age of each admitted patient, the method by which they arrived at hospital their presenting complaint and any comments provided by the admitting staff/medical staff.

In total 105 under 18s were admitted. The ages were represented as follows;

10years	1
11years	2
12years	3
13years	9
14years	23
15years	27

16years	22
17years	18

Presenting complaints were listed as:

Overdose (either by alcohol or alcohol mixed with another substance)	4
Accidental ingestion (eg spiked drinks)	3
Feeling “unwell” as a result of drinking alcohol	4
Intoxicated	94

The manner in which the young people arrived at hospital varied as follows:

Self referral	35
Ambulance	67
NHS Direct, Police or other	3

Comments were supplied in only 32 of the 105 cases and these generally gave an idea of the symptoms and how the young people had become intoxicated (whether the information was offered voluntarily or in the opinion of the hospital staff). Of the 32 comments noted, 11 were identified as the result of drinks being “spiked”.

The information gathered and passed on by the Hospital staff and Audit Team was very useful for the service providers who worked to prevent underage drinking in the Nuneaton and Bedworth area. It gave direct access to those children who most needed prevention services and other support and an insight into how young people became intoxicated.

In Derbyshire, Trading Standards Officers, in particular, have expressed a wish for similar information to be collated, at least at those hospitals in the county where there is a high prevalence of underage drinking related admissions.

During the joint review undertaken with **Chesterfield Borough Council, North East Derbyshire District Council and Bolsover District Council**, it became apparent that a better collaboration between Local Authorities and local health providers would be necessary to ensure that appropriate services were targeted efficiently.

The Derbyshire PCT has very recently commissioned A&E research and this should be accessible for partners working to reduce underage drinking

Recommendation – that the PCT partners on the Derbyshire DAAT be asked to provide information on A&E admissions of young people whose condition is alcohol related, similar to that provided by the A&E at George Eliot Hospital, Nuneaton, Warwickshire

Recommendations

1. a) that the work of the DAAT Partnership, as detailed in the Drug and Alcohol Strategy 2009-13, be acknowledged and recognised as a practical means to improving partnership working across the county to reduce underage drinking, alcohol related hospital admissions for under18s and associated problems these issues bring
 - b) that the Improvement and Scrutiny – Safe and Sustainable Communities Committee be kept informed of the implementation of the DAAT Drug and Alcohol Strategy, where it impacts on underage drinking, over the lifetime of the strategy, through progress reports by the DAAT Coordinator at appropriate times.
2. that the Head of Trading Standards informs the Improvement and Scrutiny Committee of any developments within his services area which impacts on preventing underage drinking, particularly in respect of partnership working with other agencies and authorities.
3. that the Trading Standards Division continue to advise local businesses on the requirements of the law when selling alcohol and other age-restricted products and to take appropriate, proportionate action when illegal sales are detected.
4. that the “Recruit into Coaching”, the “b-safe” and Anti-Social Behaviour Theatre in Education schemes be monitored as to their effectiveness in reducing underage drinking, particularly in the High Peak and Chesterfield areas, and progress on the schemes be reported to the Improvement and Scrutiny Committee.
5. that Derbyshire DAAT and its partners consider using the St Neots CAP pilot toolkit as a method of reducing underage drinking in key areas of the county
6. that the PCT partners on the Derbyshire DAAT be asked to provide information on A&E admissions of young people whose condition is alcohol related, similar to that provided by the A&E at George Eliot Hospital, Nuneaton, Warwickshire
7. that the recommendations of this review be submitted to Cabinet for consideration and approval and the Council’s Chief Officers’ Group and the District Chief Executives Group be informed of the outcome of this review to ensure that underage drinking is highlighted as a major concern requiring a coordinated approach at an Executive level.

8. that the Police and local PCTs be made aware of the review outcomes and the intention of the County and District Councils to develop a stronger, more coordinated approach to preventing underage drinking

Cllr Walter Burrows
Chair of Improvement & Scrutiny Committee – Safe and
Sustainable Communities

Acknowledgements

Members of the Safe and Sustainable Communities - Improvement and Scrutiny Committee would like to thank all those who have assisted with the development of this review;

The Scrutiny Committees of Bolsover District Council, Chesterfield Borough Council and North East Derbyshire District Council and representatives from organisations and agencies who took part in the joint review process;

- Derbyshire PCT
- Derbyshire Police
- District Licensing Officers
- Base 111 Young Persons' Drug and Alcohol Service (voluntary sector)
- LINKS
- Community Voluntary Partners (CVP)
- South Normanton & Pinxton Development Project (SNAP)

Derbyshire County Council officers who have been interviewed and/or contribute information to the review from the following Divisions/Teams;

- Trading Standards Division
- DAAT
- Community Safety team
- Youth Service
- CAYA
- The Pingle School, Swadlincote

Other agencies/local authorities

- St Neots Community Alcohol Partnership
- Nuneaton and Bedworth Borough Council

Appendix

Joint Review on Underage Drinking by Bolsover District Council, Chesterfield Borough Council, Derbyshire County Council and North East Derbyshire District Council

Chair's Foreword

When Chesterfield's Scrutiny Board asked me to Chair this review I think it fair to say that we were unsure as to how to begin to tackle the subject that is such a concern to most members of the public. I realised that this inquiry was important in two aspects: firstly to contribute to tackling the growing issue of alcohol and its effect on our young people, and secondly to demonstrate that we need to work together in partnership when faced with a common problem.

Bringing together our neighbouring and partner authorities of Bolsover, North East Derbyshire and Derbyshire County Councils, to work on the review was a challenge - each authority having different circumstances, views and approach to the issue of alcohol and young people. I am grateful to the Members of each authority for their input, enthusiasm, co-operation and perseverance throughout the review work.

Above all it is important to explain that our work was only possible with the help of all the 'witnesses' that co-operated and brought their experiences and problems to the review. All these agencies and representatives are acknowledged in the report and the joint panel's recommendations have only been made possible by the contributions made by everyone who accepted the invitation to be involved in this important piece of scrutiny work.

The Scrutiny Officers from each of the four authorities have also demonstrated the value of partnership working by their expertise, organisational skills and co-operation during the extent of the review and I am particularly grateful to Chesterfield's Scrutiny Officer for her guidance and support throughout.

Councillor Keith Falconer, Review

Chair

Review Panel

Chesterfield Borough Council

Councillor Keith Falconer
Councillor Barbra Butt
Councillor Barry Bingham
Councillor Maureen Davenport
Councillor Margaret Arnold
Councillor Nicholas Redihough
Councillor Stuart Brittain

Derbyshire County Council

Councillor Irene Ratcliffe

District of Bolsover

Councillor Deborah Brindley
Councillor Joan Morley
Councillor Sue Wallis

North East Derbyshire District Council

Councillor John Holmes

Councillor Frank Taylor
Councillor Martin Thacker

The Review Panel was supported by officers from the four Authorities:

Anita Cunningham	– Scrutiny Officer
Jackie Wardle	– Improvement and Scrutiny Officer
Bernadette O'Donnell	– Scrutiny and Policy Officer
Sue Broadhead	– Principal Overview and Scrutiny Advisor

1. RECOMMENDATIONS

The review recognised how much valuable work was currently being undertaken by partners in this area and demonstrated the benefit of those partners working together. The recommendations are intended to be delivered jointly to provide a holistic approach and enhance the existing work.

Recommendation 1

That the Leaders and Executives of all the partners work to strengthen and build on the delivery of the existing joint strategy to reduce the impact of alcohol on young people, to clarify and improve local and county links, roles and responsibilities thereby maximising the impact of their existing individual strategies.

Recommendation 2

For all partners to:

- Identify their information requirements individually and collectively
- Ascertain if that data is or could be available.
- Develop a central database to provide a holistic view which is accessible to all partners.

Recommendation 3

To identify all the activities that are being undertaken to educate different groups by all the partners in order to assess the gaps and any areas that could be improved. Identify how those gaps can be addressed to ensure there is a consistent message.

To promote the delivery of education through the Derbyshire Governors Support Unit – included in the report

Recommendation 4

To enhance the partnerships which exist with the retailers and Licensing, Trading Standards, Police and other relevant stakeholders to:

- Improve communications of the impact on the local community of inappropriate alcohol sales.

- Improve understanding of the barriers that the retailers experience in adhering to the law.
- Enable the retailers to achieve best practice.

To further develop the collective prioritisation of issues amongst partner agencies.

Recommendation 5

To investigate the feasibility of developing or enhancing a method for local people of all ages and employees of the partner organisations to report incidents relating to the of the supply of alcohol to young people.

Recommendation 6

To consider the development, through partner organisations including the PCT, County DAAT and voluntary sector, of a referral system for individuals:

- once they are discharged from hospital following an alcohol related incident;
- who have been identified by any of the partners as abusing alcohol;

This will facilitate the capture of intelligence and enable early intervention to break the cycle of behaviour.

Recommendation 7

For all partners to explore collectively any available funding opportunities (both internally and externally), in order to provide appropriate diversionary activities in targeted areas.

Recommendation 8

Review the priorities and resourcing within the licensing teams in order to provide a more effective service that is proactive in jointly addressing issues relating to alcohol and young people.

Recommendation 9

Increase Councillors' awareness of the issues surrounding alcohol and young people and the relevance of this report to their ability to deliver corporate targets.

This report and its recommendations will be submitted to each of the four Authorities' Scrutiny Committees for consideration before being submitted to each Council's Cabinet/Executive and then to those 'partners' involved in this review.

*Those referred to as 'partners in this report include all those who have a shared responsibility and/or interest in issues around alcohol and young people who have participated in this review work listed on page 10.

INTRODUCTION

Background to the Review

There has been considerable public debate and concern about the inappropriate use of alcohol by young people in our communities. As a result of this public debate and concern it was agreed to undertake a scrutiny review of this issue jointly between Chesterfield Borough Council, District of Bolsover, North East Derbyshire District Council and Derbyshire County Council. It was hoped that by taking a joint approach between the four Authorities improvements at a more strategic local and county level whilst also supporting the national agenda and initiatives, could be achieved.

It was recognised that the impact of inappropriate use of alcohol by young people affected the family, the wider community and all the partner agencies involved in dealing with this issue. In addition to this there were other affects on the health and safety of young people and related issues such as crime and anti-social behaviour.

Local Profiles and National Context

Whilst the focus of this review is to assess the impact of alcohol on the health and behaviours of young people in the three local areas, it should be acknowledged that most, if not all, of the issues are also being experienced across the whole country.

The Government and other national organisations are also developing actions to tackle the problems from a national perspective. For example, one aspect of the approach is to change attitudes to alcohol abuse through educational programmes and media campaigns.

The recommendations of this report are made with this in mind: any actions taken locally can be complementary to national developments in order to achieve maximum impact.

<u>National Trends and Statistics</u>
By the age of 13, the proportion of those who drink exceeds the proportion of teenagers who do not drink;
Accidents are common problems experienced as the result of severe intoxication;
There is an association between alcohol and crime or anti-social behaviour - 16% of school attendees, who had committed a crime, reported that they had been drinking prior to the crime.
<i>(Source: Alcohol Concern Young People's drinking Fact sheet (July 2007)).</i>

The mean consumption of 11 to 15 year olds who drink has doubled from 5 units a week in the early 1990s to 11 units in 2006;
There is an associated increase in 'drinking to get drunk';
Heavy drinking of 5 or more drinks on a single occasion is common amongst young people and is a rising trend;
Young people increasingly favour high strength alcoholic drinks;
Alcohol obtained by young people is increasingly likely to be obtained from the home or given directly by parents;
57% increase in alcohol related deaths of ages 15 to 34 during the period 1991 to 2006.
A sharp increase in liver cirrhosis among people in their 20s linked to heavy alcohol consumption in teenage years.
11-15 year olds who drink on the street, park or an outside public area has increased from 21% in 1999 to 31% in 2006.
There are overall stronger links with accidents, crime, school absence, teenage pregnancies, sexually transmitted infections and long term health.
<u>(Source: Government Youth Alcohol Action Plan 2008)</u>

Profiles for Chesterfield, Bolsover, North East Derbyshire and Derbyshire
Chesterfield, North East Derbyshire and Bolsover are ranked 3 rd , 4 th and 7 th in the East Midlands region for alcohol specific hospital admissions for under 18s.
Chesterfield has 'significantly high rates than England' for all 5 of the national alcohol related hospital admissions indicators;
Bolsover has a 'higher value than England' for all 5 national alcohol related hospital admissions indicators;
North East Derbyshire has a 'higher value than England' for 3 of the national alcohol related hospital admissions indicators;
In 2005/06 the rates of admissions for under 18 females in Chesterfield were two and a half times the national average.
Chesterfield (<i>with High Peak</i>) has the highest rates of alcohol specific hospital admissions for females in the East Midlands region.
For male alcohol specific hospital admissions Chesterfield is ranked 3 rd highest in the East Midlands region.

Profiles for Chesterfield, Bolsover, North East Derbyshire and Derbyshire
Chesterfield has significantly higher rates than England for alcohol related recorded crime.
Chesterfield has significantly higher rates than England for alcohol related violent crime
In Derbyshire the percentage of people using alcohol as primary drug increased from 19% (2005/06) to 29% (2007/08).
<u>Local Area Summary</u>
Derbyshire has comparatively high rates of alcohol associated hospital admissions, including for under 18s, in the north of the County.
The pattern is not (yet) reflected in the mortality data.
Crime rates are high for Chesterfield.
<u>(Source: North West Public Health Observatory – June 2008)</u>

3 SCOPE OF REVIEW

Aims

- To influence the reduction of alcohol related crime and anti social behaviour to improve wellbeing within the communities of Chesterfield, Bolsover and North East Derbyshire.
- To identify and reduce the impact of alcohol consumption by young people in our communities on their health, safety and wellbeing.
- To identify and influence measures in place to raise awareness of the impact of alcohol on young people in our communities.
- To influence policies, strategies and legislation to improve community wellbeing.

For the purpose of this review 'young people' refers to those of 21 years of age or below.

Key Areas for Consideration

Impact on Health (accidents / injuries) and longer term

- To ascertain procedures in place by the police and hospitals to record details of alcohol related crimes, incidents, anti social behaviour, hospital admissions and injuries.
- To investigate the impact of alcohol consumption on teenage pregnancy numbers.

Education / awareness raising on effects of alcohol

- To establish the level of education received by young people in school education, on the effects of alcohol including crime and anti social behaviour, and the impact on their health and safety both short and long term
- To assess the extent of information sharing and proactive working between the health bodies, police, other key partners and the education authority in raising awareness of the effects of alcohol on young people

Licensing enforcement

- To assess the adequacy of licence enforcement arrangements in respect of 'on' and 'off' –licensed premises relation to the sale of and access to alcohol by young people, specifically the under aged
- To consider existing arrangements and ways to develop more pro-active working between partners in respect of the issue and enforcement of licences to sell alcohol
- To investigate and consider actions of the alcohol industry and advertising and ways to influence greater responsibility.

Parenting and parental responsibility;

- To consider the current arrangements for the education and awareness raising of parents on the effects of alcohol including crime and anti social behaviour and the impact on health and safety both short and long term
- To investigate and consider the potential of Parenting Orders and other arrangements to ensure parental responsibility including family intervention measures

Diversiónary Activities

- To investigate existing co-ordinated plans for the provision of diversionary activities for young people

4 METHOD OF REVIEW

The Joint Committee met on four occasions to consider the scope of the review, key issues they wanted to discuss and key partners and organisations they wished to interview.

From the key issues identified as the basis for the review the need to bring together other public service bodies and community representatives was identified. We defined these ‘partners’ as those with shared responsibilities for, and genuine interests in, addressing the main consequences of young people and their alcohol consumption in our communities and are listed below.

These partners and witnesses were invited to attend two workshops to provide evidence and discuss previously circulated questionnaires on the key areas for consideration. A copy of the questionnaire (which also details local targets) is attached to the report at appendix 1 A copy of the outputs from the workshops is attached at appendix 2.

The following Partners, partner agencies and voluntary sector representatives attended the workshop:

Public Sector :	
Derbyshire DAAT	Inspector Steve Fairbrother (County Alcohol Harm Reduction Co-ordinator)
Police	Chief Inspector C I Frohwein, Inspector Steve Fairbrother
Primary Care Trust	Steve Pintus (Associated Director of Public Health) Sandra Johnson
Derbyshire DAAT/Education	Ed Ronayne (Commissioning Manager for Young People, Drugs and Alcohol)
Trading Standards	Graham Morgan (Trading Standards Manager)
Licensing Officers	John Chambers, (Office Manager, North East Derbyshire District Council) John Peck (Service Manager – Environmental Protection and Licensing, Chesterfield Borough Council)
Voluntary Sector:	
Base 111	Matt Gould (Young Persons Drug and Alcohol Service)
Links	Sandra Pinks (Chesterfield & NE Derbyshire Council for Voluntary Service & Action).
CVP	Maria Cox (Community Voluntary Partners)
SNAP	Mandy Mangold (South Normanton and Pinxton Development Project)

5 EVIDENCE AND RESEARCH

The Committee considered the following documents:

Notes from each of the three authorities detailing their key local issues:

A Profile of Alcohol Misuse in Derbyshire County
Derbyshire DAAT Young People's Drug and Alcohol Treatment Needs Assessment
Safe, Sensible, Social National Alcohol Strategy and toolkit
Turning Point research 'Bottling It Up' 2006
Joseph Rowntree Foundation research 2008 'The Next Round'
Youth Alcohol Action Plan National Consultation Document June 2008
Tackling Alcohol in your Local Area Agreement
Report by Inspector Fairbrother on Licensing Enforcement (and Derbyshire DAAT Alcohol Harm Reduction Action Plan 2008) Positive Futures (Binge drinking; young people's attitudes and behaviour)
Alcohol Concern: Young People's Drinking Fact sheets
Completed questionnaires from partners
Workshops with partners

6 FINDINGS

The issue of young people misusing alcohol is important nationally and locally. It affects individuals, their families and the wider community. It can cause serious problems in terms of irreversible health problems for individuals and injuries to and lead to anti social behaviour and crime in our communities.

A high percentage of young person admit to drinking alcohol and many claim this is with the knowledge and consent of their parents. Much of this alcohol it is claimed is obtained from local off licences.

There is a general lack of information sharing and proactive working between the agencies and this area could be improved. Trading standards do not receive any information from the health service about where the young people are accessing the supply of alcohol. There is no identification between partners of what information is available and would be useful to partners involved in tackling this issue.

There are no reporting facilities available for people to raise incidents of concern. There should be an effective whistle blowing mechanism available to the public and young people in schools to raise any areas of concern.

Impact on Health (accidents/injuries) and longer term

Information on the impact on health of alcohol misuse is confusing and sometimes conflicting. There is also no effective mechanism in place to accurately record incidents of accidents and injuries incurred as a result of misuse of alcohol. Hospitals, police and ambulance service do not collect this data when young people attend casualty unless they are admitted overnight. Even then the injury is not always linked to alcohol misuse.

There was no referral system in place to catch early young people with drink related issues before the habit had been established. There was insufficient support available to support young people who drink.

Education/awareness raising on effects of alcohol

There is much good work being undertaken to raise awareness of the impact of alcohol misuse in the County. The current programme being delivered by schools is also trying innovative measures such as theatre events at community venues to engage young people. However, the package being delivered varies from school to school and it was felt that greater emphasis could be placed on this education provision to ensure that it is effective. The programme for education/awareness raising needs to be broadened to involve other agencies. Mechanisms such as influence via the Governors support unit could be utilised to raise its profile.

There needs to be a joined up strategy to cover parents, young people, carers and the general public to ensure consistent measures are delivered on alcohol. The education campaign needs to start at an early age to catch youngsters before they become involved with alcohol. Many have already commenced drinking before they receive information at school which means they are already disengaged.

Licensing enforcement

Priorities of licensing teams seem to be focused on their statutory duties and enforcement was often in response to complaints not always alcohol related. The constraints of budgets and providing self funding services were recognised but it was felt that licensing sections needed to review their priorities. There seemed to be a greater need for more effective licensing compliance checks undertaken in partnership with other agencies. The approach needs to be collaborative to enable targeting of resources and more effective outcomes.

The licensing trade needed more support in their role of enforcing regulations and practices to prevent the sale of alcohol to young people. More work needs to be undertaken to cut off the supply of alcohol to under 18 year olds particularly by licensed premises. There needs to be a greater understanding of the barriers the licensed trade faces so that agencies can target their activities to support them and where appropriate take enforcement action against persistent offenders who fail to fulfil their responsibilities.

Parenting and parental responsibility

More support for parents and carers to provide proper information was needed. Some information and events are organised by schools and youth organisation to raise parent's awareness of the impact of alcohol on young people. However, the feedback provided from the agencies involved suggested that the effect of this was not significant. It was felt that the general attitude to alcohol consumption of parents and the wider community does not help encourage sensible consumption by young people. There was a lack of understanding by parents of the damage alcohol can do compared to their awareness of the dangers of drug use. Far greater engagement was needed to tackle this issue.

Diversiory Activities

The reasons why young people were drinking were complex. However, one issue identified was the lack of diversionary activities being provided. It was felt that further work needed to be done to identify with young people what facilities and activities they would like to see. However, the danger of raising expectations without delivery was also recognised. Work therefore was required to identify funding available that could be targeted at appropriate activities.

7 CONCLUSIONS

The group recognised and acknowledged that there was a considerable amount of existing work being undertaken by the partners to try and address alcohol misuse by young people and the effect that this was having in communities' in terms of anti social behaviour, violence and crime, and the impact on individual's health, safety and life prospects.

However, the committee were of the view that this issue should be given higher priority by the County Council, District Councils and key partners. It was considered that greater strategic leadership and added priority at a strategic decision making level was needed to underpin and support a more effective, better co-ordinated joint effort to address this important community issue.

The Committee were very aware of the complexity of alcohol misuse by young people. In the early stages of the review it was very evident that the Committee in the space of a singular review would not be able to address all the issues that had been highlighted during the evidence gathering process. Therefore they wished to make clear that this report contained initial recommendations which sought to address some of the key findings of the review work so far. Consideration would be given by the group on whether there was further work that they could undertake. This would be informed by the partners' response to this set of initial recommendations.

They especially wanted to express their thanks to the partners who had participated and contributed to this review to further develop improvements to their existing work. Several partners submitted written evidence that was extremely helpful to the review. Additionally many attended both workshops to provide evidence and participated fully in the debate.