

TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 18th January 2023
Report for: Information
Report of: Director of Public Health

Report Title

Update on local response to trends in alcohol consumption and harm

Summary

This report provides an update to the report to Health Scrutiny in November 2021, addressing the question of alcohol as a risk factor, the consequences of the national increase in alcohol consumption, and how Trafford services are responding to changes in demand.

Recommendation(s)

Health Scrutiny are asked to note the content of this report and progress to date.

Contact person for access to background papers and further information:

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Background

A report on Alcohol was considered by Trafford's Health Scrutiny Committee in November 2021. This report provides an update to that report.

Alcohol misuse is the biggest risk factor for death, ill-health and disability among 15-49 year olds in the UK, and the fifth biggest risk factor across all ages. Alcohol is a causal factor in more than 60 medical conditions, including: mouth, throat, stomach, liver and breast cancers, high blood pressure, cirrhosis of the liver, and depression¹. As well as having an impact on physical health, investing in alcohol treatment and prevention can contribute to making improvements to wider societal public health matters such as child poverty and social isolationⁱ.

An estimated 308,000 children currently live with at least one adult who drinks at a high- risk level in England, and the UK has the fourth highest level of prenatal alcohol consumption in the worldⁱⁱ.

Changes in alcohol consumption during the COVID-19 pandemic are likely to lead to thousands of additional cases of disease, premature deaths and hospital admissions. Moderate drinkers consumed less alcohol during the pandemic, whereas heavy drinkers consumed more. Alcohol harm, both in terms of health and crime impacts disproportionately on the poorest, worsening existing inequalities in society.

In 2021 there were 9,641 deaths (14.8 per 100,000 people) from alcohol specific causes registered in the UK, a 7.4% increase from the previous year. This is the highest number of alcohol deaths on record, as pre-pandemic between 2012 and 2019 the rates of alcohol-specific deaths in the UK had remained stable, with no statistically significant changes in age-standardised rateⁱⁱⁱ.

Statistics on alcohol harm in Trafford

Trafford had an alcohol-related mortality rate of 35.9 per 100,000 in 2020 (more recent data have not yet been published); this rate is similar to the England rate of 37.8 and increased from a rate of 32 in 2019^{iv}.

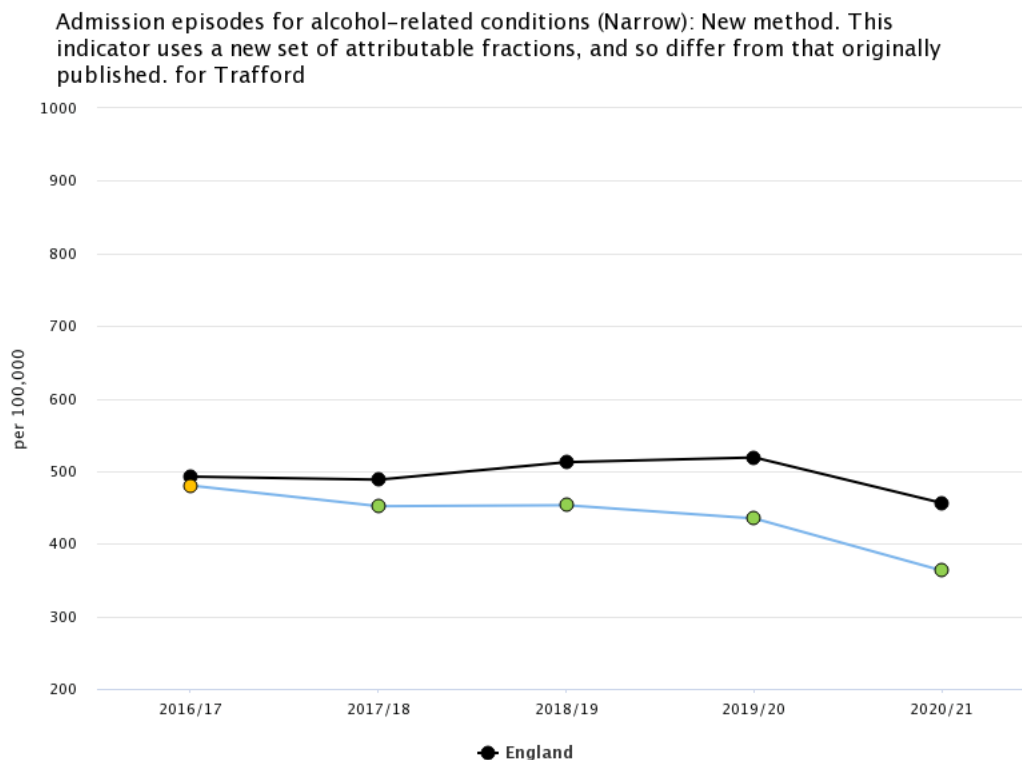
Anecdotal data tell us that alcohol attributable conditions increase as the levels of deprivations increases in Trafford. The highest number of specialist alcohol treatment referrals are for areas including Sale, Stretford, and Urmston.

The spine chart below displays the latest hospital alcohol admissions data for Trafford. These data have been updated since the last Health Scrutiny report on alcohol, and we can see an improving trajectory across the majority of indicators, with three indicators showing a stable position. The only indicator which is statistically significantly worse than the England average is alcohol specific hospital admissions for under 18s, on this measure Trafford is in line with the regional average.

Trafford Health Scrutiny Committee January 2023 - Alcohol

Indicator	Period	Trafford		Region England			England			Best
		Recent Trend	Count	Value	Value	Value	Worst	Range		
Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Persons)	2020/21	↓	821	363	500	456	805			251
Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Male)	2020/21	↓	559	519	689	603	1,063			316
Admission episodes for alcohol-related conditions (Narrow): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Female)	2020/21	↓	262	223	326	322	597			141
Admission episodes for alcohol-related conditions (Broad): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Persons)	2020/21	→	3,227	1,441	1,738	1,500	3,459			962
Admission episodes for alcohol-related conditions (Broad): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Male)	2020/21	↓	2,393	2,303	2,638	2,290	5,192			1,464
Admission episodes for alcohol-related conditions (Broad): New method. This indicator uses a new set of attributable fractions, and so differ from that originally published. (Female)	2020/21	→	834	704	936	805	1,923			445
Admission episodes for alcohol-specific conditions (Persons)	2020/21	↓	1,300	576	795	587	2,276			298
Admission episodes for alcohol-specific conditions (Male)	2020/21	↓	865	796	1,070	806	3,350			344
Admission episodes for alcohol-specific conditions (Female)	2020/21	→	440	373	535	380	1,286			138
Admission episodes for alcohol-specific conditions - Under 18s	2018/19 - 20/21	-	70	41.4	40.1	29.3	83.8			7.7

Looking at the number of hospital admissions which are primarily due to alcohol consumption, this gives us a good indication of trends in alcohol-related hospital admissions. For Trafford this has been declining since 2016/17 as shown in the graph below.



Alcohol Strategy and Services in Trafford


At the end of 2021, the UK's national drug strategy 'From Harm to Hope: a 10-year drugs plan to cut crime and save lives' was published. This was largely based on findings from the Dame Carol Black review at a time where drug-related deaths were highest on record. While the review focused on drugs, many of its recommendations apply equally to alcohol treatment and support services. However, the last UK Government alcohol strategy is now over 10 years old.



Given the alarming rise in alcohol related deaths, MP's, Lords and over 50 organisations of experts in the field wrote to the prime minister in November 2022 calling for an independent review on alcohol harm, with the hope that alcohol harm will be treated in line with substance misuse⁹.

Trafford's Health & Wellbeing Strategy identifies alcohol harm as one of its five priorities for reducing health inequalities across the borough. The Health & Wellbeing Board undertook a Deep Dive exercise on the topic of alcohol in November 2022. A range of professionals came together to discuss alcohol harm in Trafford and collectively identified actions both for the Health and Wellbeing Board members and for partner organisations supporting children, adults and families affected by alcohol. These actions are currently in the process of being agreed by the Health and Wellbeing Board and this is estimated to be confirmed at their next meeting on 7th February 2023.

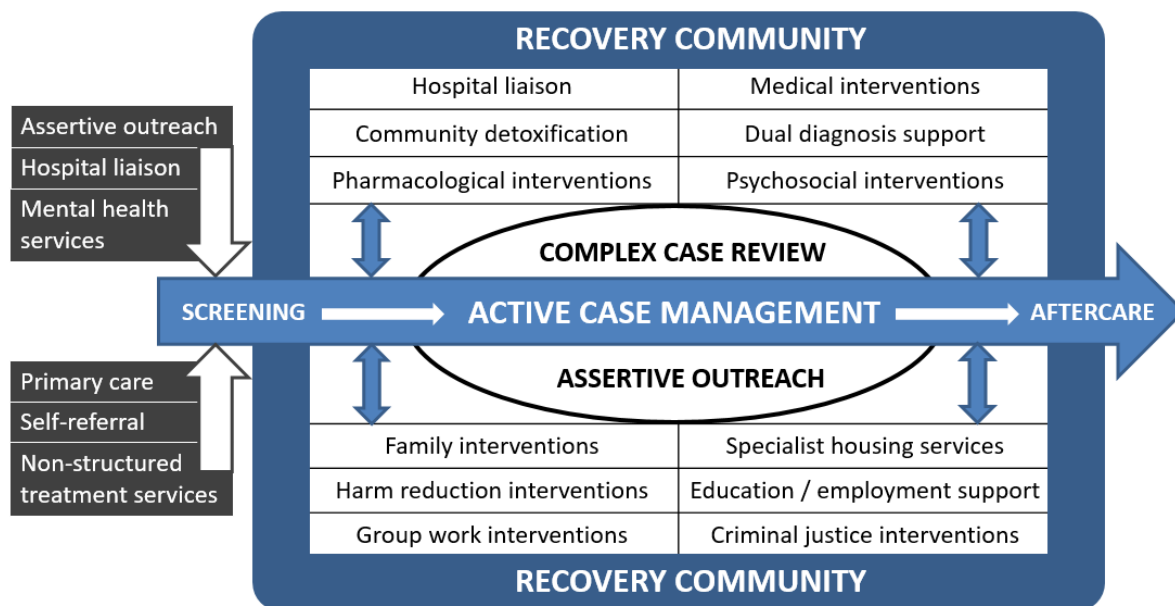
Achieve Trafford provide bespoke drug and alcohol treatment offers based upon individual needs of the residents of Trafford. The service focuses on those who engage in harmful drug and alcohol use and there has been a significant increase in referrals for alcohol interventions, particularly in the period of emergence from pandemic associated social restrictions and lockdown.

The service receives a significantly higher number of referrals for alcohol compared to other substances, opiates for example, and they have seen this continue through the pandemic.

Service & Work Programmes	
<ul style="list-style-type: none"> Achieve Trafford <p>Achieve is the substance misuse partnership across Bury, Bolton, Salford & Trafford that composes different organisations to support individuals and families around their own drug and/or alcohol use including:</p>	
	<p><u>Greater Manchester Mental Health (GMMH)</u> GMMH is the lead provider in the partnership. They are commissioned by Trafford Council to support adults over 21 years old wishing to make changes to their alcohol use. An assessment of each adult referred into service is undertaken. Individuals accepted into structured treatment will be allocated to a case manager who will co-ordinate their journey through the service. The case managers will work with the service users to develop a personalised care plan including pharmacological and psychosocial interventions.</p>
	<p><u>Early Break Young People & Family Service</u> Early Break is sub-contracted by GMMH to deliver the young people and family aspect of the partnership. They support under 21year olds wishing to make changes to their alcohol use. They also offer their Holding Families programme which aims to give the whole family the opportunity to talk about any problems caused by alcohol and to allow the children's voices to be heard by the family. They also deliver Holding Families Plus to families in the criminal justice system affected by alcohol. Ultimately, the programmes aim to empower families to make positive decisions on the changes they would like to make to help improve family life.</p>
	<p><u>The Big Life Group</u> The Big Life Group is sub-contracted by GMMH to offer assertive outreach to people who are facing problems with alcohol. They support those who are experiencing barriers to accessing treatment along with those who may be at risk, or who have disengaged from structured treatment by going out to service user's home, supporting them to appointments and so on. They will then support and motivate this group to actively engage in/ re-engage with the structured treatment element at Achieve.</p>
	<p><u>Intuitive Thinking Skills</u> Intuitive Thinking Skills, also sub-contracted by GMMH, offer their accredited abstinence educational programme called Intuitive Recovery. This programme is peer-led and teaches the basic science of addiction and understanding addictive desire. It provides people with the skills, knowledge, and tools to recognise the consequences of their alcohol behaviour, therefore encouraging full responsibility for their own choices whilst also removing the fear of change. This helps people in the development of a personalised and meaning treatment plan.</p>
	<p><u>Great Places Housing Group</u> Great Places Housing Group are sub-contracted by GMMH to offer housing support to those misusing alcohol. They can provide advice and guidance to help individuals who are at risk of losing their home, who need help to settle into a new home or to help find a new home.</p>
	<p><u>Those On The Margins of Society (THOMAS)</u> THOMAS is sub-contracted by GMMH to offer separate in-community residential alcohol rehabilitation support for both men and women. THOMAS provides a community in which residents play an essential, leading part by actively contributing to the running of the house, including cleaning and cooking, as part of the therapeutic programme.</p>



	<p><u>Salford Royal NHS Foundation Trust</u> Salford Royal Foundation Trust (SRFT) has an existing Alcohol Care Team in addition to a High Impact User service (Alcohol Assertive Outreach Team) to support people who present at Salford Royal with alcohol related need.</p>
	<p><u>Voluntary Community Action Trafford</u> The Achieve Recovery Asset fund is a grant scheme of up to £5,000 to provide support services for those recovering from alcohol addiction. Applications can be made for example to fund regular alcohol-free social activities, fostering, education, training and employment opportunities, social enterprise opportunities to enhance personal growth and development of community members and so on.</p>

Trafford Achieve, has a model which works with those drinking at all levels. The below covers both drug and alcohol misuse (substance misuse model) ways of working:




On coming into treatment, the client is screened, and individual needs identified. The links to other parts of the system and recognises that a person needs to be treated in a holistic way, so also includes Housing, Education, Criminal Justice, and Family domains. There is an opportunity to join local mutual aid groups (such as Alcoholics Anonymous or SMART recovery), to sustain recovery within the community.

• **Detox Services**

	<p><u>Chapman Barker Unit (GMMH)</u> Chapman Barker Unit, managed by GMMH, supports adults with an alcohol dependence who require a medically managed admission to a 36-inpatient unit. Medical staff are on site at all times. The usual length of stay varies between 7 to 21 days, depending on individual need. Trafford Council commission several bed nights a year for the service.</p>
	<p><u>Smithfield Unit (Turning Point)</u> The Smithfield Unit, managed by Turning Point, supports adults with an alcohol dependence who require a medically supported inpatient detox. Medical staff are not on site at all times, but available if required. The usual length of stay varies between 7 to 21 days, depending on individual need. Trafford Council commission several bed nights a year for the service.</p>

• **Primary Care**

	<p>Primary Care Our GPs ensure that screening, brief and extended brief interventions are available for people at risk of an alcohol-related problem (hazardous drinkers) and those whose health is being damaged by alcohol (harmful drinkers) in line with NICE guidance related to alcohol-use disorders. As part of their intervention, they will also signpost to specialist treatment services.</p>
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Trafford Performance Data

Performance of the Achieve substance misuse service is good and consistently above the national average. GMMH have a CQC rating of 'outstanding' for its substance misuse service. Trafford continues to be a high performing drug and alcohol system within GM, as evidenced by the data metrics available in the National Drug Treatment Monitoring System (NDTMS).

The data below includes information shared from the Achieve service in relation to their service users affected by alcohol. This information was collated in October 2022 as part of the Health and Wellbeing Board deep dive.

Adults

The Trafford Achieve caseload per substance as of 20th October 2022:

Row Labels	Count of Sub Cat
Opiate	302
Alcohol	181
Alcohol & Non-Opiate	54
Non-Opiate	11
Grand Total	548

The treatment stats broken down by substance category from January to October 2022:

Count of 2022 Episode starts per month

Count of Sub Cat	Column Labels										
Row Labels	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Grand Total
Alcohol	17	24	20	14	27	15	34	26	23	18	218
Opiates	13	10	5	9	8	4	9	11	10	4	83
Alc & Non Opiate	7	9	8	7	8	9	3	5	7	3	66
Non Opiate	-	2	2	6	3	-	2	1	3	2	21
Grand Total	37	45	35	36	46	28	48	43	43	27	388

This evidences that the highest number of treatment starts are in the alcohol category, with the highest number of starts in July and the lowest in April.

There are a higher number of service users accessing support for alcohol from the Sale, Stretford & Urmston areas of Trafford. This mirrors what the Big Life Assertive Outreach Team anecdotally tell us that Sale, Stretford and Urmston appear to be their most targeted areas with a few clients across Altrincham, but rarely Hale, Hale Barns or Bowdon for both drugs and/or alcohol. Alcohol remains their primary substance of support need across Trafford.

When we look at the commissioned service from Primary Care, data from 2021/22 tells us they completed the following number of interventions were complete:

Brief interventions: 683

Extended interventions: 70

Onward referrals: 21.

Young People (Under 21 years)

This information provides an overview of the work carried out by Early Break in relation to alcohol use. The service tells us the pandemic has impacted on pathways into service and 2022 has been a process of strengthening partnership working and referral pathways in Trafford.

Here we have a breakdown of the number of referrals into service for all substances and where alcohol is a feature up to October 2022:

Referrals in total (all substances)

2021: 192

2022: 177

Alcohol as either primary or secondary/tertiary substance

2021: 83 YP – 43% of referrals

2022: 69 YP - 39% of referrals

Here we have a breakdown of alcohol use by age:

Ages:

Ages (Alcohol users)	2021	2022
Up to 13	5 (6%)	5 (7%)
14 - 16	41 (49%)	30 (43%)
17-19	28 (34%)	25 (36%)
20+	9 (11%)	9 (13%)

As you can see for both years, the highest age group for alcohol support was 14-16 years followed by 17-19 years.

Referral Sources for those using alcohol: All Hospital referrals involved Alcohol use.

Referral Sources (Alcohol users)	2021		2022	
Hospital	24	29%	18	26%
C&F Services	17	20%	14	20%
Universal Education	11	13%	9	13%
MH Services	8	10%	9	13%
YP Treatment Provider	6	8%	7	11%
GP	4	5%	4	6%
YOT	5	6%	2	3%
Self	4	5%	1	1%
Relative	2	2%	1	1%
Adult Treatment provider	0	0%	2	3%
Targeted Youth Support	2	2%	2	3%

This table also tells us that most of the referrals to Early Break to support young people with their alcohol use come from the hospital.

It is also worth noting that Early Break chair the Greater Manchester Substance Misuse Operational Group (SMOG) meeting to discuss pathways, emerging trends or new themes. The meeting is represented by colleagues from young people's drug and alcohol treatment services across Greater Manchester and Health Professionals from emergency departments and School Nurses. The SMOG is reports back to the North West Children, Young People and Families Substance Misuse Partnership Group. This is a strategic group that reports to the Greater Manchester Strategic Lead for Drugs and Alcohol.

Conclusion

The COVID-19 pandemic has caused an unprecedented acceleration in alcohol-related deaths, at a time where there is currently no national strategy to tackling this public health issue. At a Greater Manchester Level, the Greater Manchester Combatting Drugs Partnership is currently in the process of finalising their delivery plan for 2023-2024. Though this focuses primarily on drugs, actions will also help address alcohol harm.

Locally, work is being done with the Health & Wellbeing Board to address alcohol harm in Trafford. The Public Health Team are currently in the process of setting up a substance misuse partnership, as a subgroup of Safer Trafford Partnership, where emerging themes and pathways can be discussed with a range of organisations working with children, adults and families affected by alcohol in Trafford. We are also in the process of commissioning an early intervention and prevention outreach service for under 18s in the hope this will reduce the harm affected by alcohol with this group and reduce the likelihood of them presenting at A&E in crisis.

ⁱ [Local Alcohol Profiles for England - OHID \(phe.org.uk\)](https://www.phe.org.uk/publications/local-alcohol-profiles-for-england)

ⁱⁱ [‘It’s everywhere’ – alcohol’s public face and private harm: The report of the Commission on Alcohol Harm - Alcohol Health Alliance \(ahauk.org\)](https://www.ahauk.org/its-everywhere-alcohol-public-face-private-harm)

ⁱⁱⁱ [Alcohol-specific deaths in the UK - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/people-population/health-and-life-expectancy/alcohol-specific-deaths-in-the-uk)

^{iv} [Public health profiles - OHID \(phe.org.uk\)](https://www.phe.org.uk/publications/public-health-profiles)

^v [MPs, Lords and over 50 organisations and experts write to the Prime Minister calling for an independent review on alcohol harm - Alcohol Health Alliance \(ahauk.org\)](https://www.ahauk.org/mps-lords-and-over-50-organisations-and-experts-write-to-the-prime-minister-calling-for-an-independent-review-on-alcohol-harm)