Public Health Overview Licensing Committee
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National & Local Alcohol Strategies

• Drivers of misuse – cheap alcohol, lack of challenge

• National objectives
  • Reduce the availability of cheap alcohol
  • Work with the industry
  • Local solutions to local problems (HWBB, PCCs, Licensing, CAPs)
  • Support informed choice for healthy and responsible drinking

• Local objectives
  • Prevention, screening and brief intervention
  • Reduce alcohol-related crime and the availability of cheap alcohol
  • Reduce the harm to families and children
The government advises that men should not regularly drink more than 3-4 units of alcohol a day and women 2-3 units of alcohol a day. ‘Regularly’ means drinking every day or most days of the week.

- **3-4 units a day** = **1.5 pints (4% ABV)**
- **2-3 units a day** = **175 ml glass (13% ABV)**

21 units per week (~10 pints)  
14 units per week (~7 glasses of wine)
Alcohol in Doncaster

- 13,708 people drink at high risk (6%)
- 39,917 people drink at increased risk (19%)
- 155,617 people drink at low risk (74%)

Wide range of health effects;
- Heart disease and blood pressure,
- Cancers (mouth, throat, breast, bowel)
- Depression, mental health and wellbeing, memory
- Liver cirrhosis
- Pancreatitis and diabetes
Alcohol-related hospital admissions

2,151 admissions in 2012/13
Alcohol-related hospital admissions
Premature deaths (<75 years) from preventable liver disease

50-60 premature deaths each year
Premature deaths from liver disease considered preventable
Alcohol-related crime

- Alcohol-related recorded crimes: ~1,800 crimes per year
- Alcohol-related violent crimes: ~1,000 crimes per year
- Alcohol-related sexual offences: ~30 crimes per year
Alcohol-related crime

Violent crime
Doncaster Drug & Alcohol Services (DDAS)

- Integrated drug & alcohol service with a recovery focus

- Teams comprise;
  - Single Point Of Access (assessment & triage)
  - Specialist Services (most complex cases)
  - Shared Care (less complex cases) GPs at satellite clinics
  - New Beginnings (Structured Day Programme, detox)
  - Psycho-Social Interventions and the Recovery Team

- Screening, brief intervention, referral through GPs & A&E

- Inpatient detox at DRI (crisis) and St Caths (planned)

- Out of Area residential rehabilitation
Clients in treatment

- Over 900 clients during 2013/14
- 200-300 at a point in time
- Two thirds male, over half aged 40+
- High number of parents
- Good rate of successful exits

Service due for tender

- Service to be tendered next year to start in April 2016
- More integrated, whole system model for drug and alcohol.
Public Health contribution to Licensing

• National guidance
  • Difficulty applying health data to individual premises
  • Examples applying A&E and ambulance data
  • Otherwise largely strategic (SLP, CIPs, consultation)

• Local action
  • Licensing Forum and reviewing applications
  • Improving data from A&E and accessing ambulance data
  • Contributing to the SLP in 2015
  • Link between Licensing/SLP and HWB Board
  • Possible ‘guidance’ to applicants (e.g. South Leeds)
  • Home Office review of Licensing Objectives
Any questions?