Report to:	Health and Wellbeing Board
Relevant Officer:	Dr Arif Rajpura, Director of Public Health
Relevant Cabinet Member:	Councillor Amy Cross, Cabinet Member for Adult Safeguarding and Reducing Health Inequalities
Date of Meeting :	8 June 2016

# **BLACKPOOL ALCOHOL STRATEGY 2016-2019**

## 1.0 Purpose of the report:

1.1 To consider the Blackpool Alcohol Strategy 2016-2019.

## 2.0 Recommendation(s):

2.1 To approve the Blackpool Alcohol Strategy 2016-2019 and the delivery of the associated action plan.

### 3.0 Reasons for recommendation(s):

3.1 The importance of alcohol misuse as a public health issue has been highlighted in a number of key policy and strategy papers both locally and nationally. Addressing the harm caused by alcohol has been a Blackpool priority for many years. Indeed, significant investment has been made to tackle alcohol related problems and although progress has been made, alcohol harm indicators in Blackpool remain amongst the highest in the country.

The Blackpool Alcohol Strategy group has developed a new Alcohol Strategy 2016-2019, as a continuation of the work achieved through the previous Alcohol Strategy 2013-2016, on behalf of the Blackpool Health and Wellbeing Board.

The new strategy sets out the strategic priorities for local partners in tackling alcoholrelated harm in Blackpool over the next three years. A robust action plan will support delivery of the strategy by setting out how partners will take responsibility for making it happen.

The alcohol strategy is a key component of the Health and Wellbeing Board's major strategic approach in improving health and wellbeing in Blackpool and as such is highlighted as a strategic priority by the Blackpool Health and Wellbeing Board.

3.2a	Is the recommendation contrary to a plan or strategy adopted or approved by the Council?	No
3.2b	Is the recommendation in accordance with the Council's approved budget?	No

3.3 Other alternative options to be considered:

None

### 4.0 Council Priority:

4.1 The relevant Council Priority is: "Communities: Creating stronger communities and increasing resilience"

#### 5.0 Background Information

- 5.1 Alcohol misuse in the northwest region of England is the worst in the UK, and Blackpool has high levels of alcohol related harm (health, disorder, violence) for the size of the population.
- 5.2 Alcohol related mortality for males in Blackpool is significantly higher than the national average. In 2013, there were 75 alcohol-related deaths of Blackpool residents.
- 5.3 Alcohol related mortality for females in Blackpool, although the rate had seen a decrease, reaching similar rates to the England average in 2011/2012, by 2013 the rate began to rise again. In 2013, there were 37 alcohol-related deaths of Blackpool resident females.
- 5.4 Blackpool has the highest rate of alcohol related hospital admissions of any local authority in England. Alcohol-related hospital admissions can be a result of regular alcohol use above lower-risk levels and are most likely to be found in increasing-risk drinkers, higher-risk drinkers, dependent drinkers and binge drinkers.
- 5.5 Alcohol is too often a pre cursor and catalyst for crime and disorder in Blackpool in addition to creating health and safety issues in the wider community. There is a correlation between Blackpool's areas of deprivation and hotspots for violent crime, domestic abuse and criminal damage all associated with alcohol abuse to some degree.

- 5.6 Blackpool residents are significantly more likely to be victims of alcohol-related sexual crime than England as a whole. There were 41 case of alcohol-related sexual crime in 2012/13 experienced by Blackpool residents.
- 5.7 Blackpool reported rate of alcohol-related violent crimes is more than double the England and north west rate.
- <sup>5.8</sup> Between 2011/2012 and 2013/2014, there were 1,109 assault related injury emergency attendances at Blackpool Victoria Hospital which occurred in the home. Almost three-quarters (73%) resided in Blackpool.

### 5.9 The structure of the strategy; Developing healthy attitudes to alcohol across the life course

The strategy outlines the actions being taken locally to reduce alcohol-related harm across the life course. Actions will focus on;

- Starting well: Reducing alcohol related harm during pre-conception, pregnancy and the early years
- Growing well: Reducing alcohol related harm among school age children in Blackpool
- Living well: Reducing alcohol related harm in working age adults
- Aging well: Reducing alcohol related harm in older adults
- Keeping our local communities safe from alcohol-related harm

# 5.10 Changing the environment and promoting responsible retailing

The strategy aims to ensure alcohol is sold responsibly by developing programmes of work, which support the use of existing laws, regulations and controls available to all the local partners, to minimise alcohol related harm and advocating for national legislation to further reduce alcohol related harm.

# 5.11 Early identification and support for alcohol issues

The strategy aims to ensure that the most effective provision is in place to ensure individuals, identified as having an alcohol misuse problem, can access effective alcohol treatment services and recovery support.

5.12 Does the information submitted include any exempt information? No

### 5.13 List of Appendices:

Appendix 5a: Blackpool Alcohol Strategy 2016-2019

## 6.0 Legal considerations:

- 6.1 None
- 7.0 Human Resources considerations:
- 7.1 None
- 8.0 Equalities considerations:
- 8.1 None
- 9.0 Financial considerations:
- 9.1 The work will be delivered from existing resources.
- 10.0 Risk management considerations:
- 10.1 None
- **11.0** Ethical considerations:
- 11.1 None

### **12.0** Internal/ External Consultation undertaken:

12.1 A stakeholder workshop was held on the 1 February 2016 to ensure the involvement of all relevant stakeholders in the development of the Blackpool Alcohol Strategy 2016-2019 and its associated action plan.

### **13.0** Background papers:

13.1 None