

# **Crime and Disorder Scrutiny Panel**

Thursday, 20 January 2011

## **MINUTES**

### **Present:**

Councillor Bill Hartnett (Chair), and Councillors Simon Chalk, M Collins, Roger Hill and Brenda Quinney

### **Also Present:**

Ms Kate Ray (Worcestershire Drug and Alcohol Action Team)  
Mr Michael Collins (Vice Chair of the Standards Committee)

### **Officers:**

A Heighway

### **Committee Services Officer:**

J Bayley and M Craggs

## **27. APOLOGIES AND NAMED SUBSTITUTES**

Apologies for absence were received on behalf of Councillor Anita Clayton. Councillor Brenda Quinney was named as her substitute.

Apologies for absence were also received from Ken Hazeldine (Redditch Anti-Harassment Partnership).

## **28. DECLARATIONS OF INTEREST AND PARTY WHIP**

There were no declarations of interest or any party whip.

## **29. MINUTES**

### **RESOLVED that**

**the minutes of the meeting of the Panel held on 21st October 2010 be confirmed as a correct record and signed by the Chair.**

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Chair

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## 30. ALCOHOL RELATED ADMISSIONS TO HOSPITAL - PRESENTATION

The Panel welcomed Kate Ray, Programme Lead for Alcohol, Worcestershire Drug & Alcohol Action Team, to deliver a presentation on alcohol related hospital admissions.

The Panel was informed that the Drug & Alcohol Action Team (DAAT) was a partnership of agencies that worked closely with Worcestershire PCT to have a positive impact on drug and alcohol related harm by implementing actions from local and national strategies. The DAAT also formed part of the Community Safety Team.

The Panel was initially referred to the key national issues regarding alcohol consumption. In particular, the Panel heard that the UK has some of the highest drinking levels in Europe and that average consumption had almost doubled in the UK over the last fifty years.

In terms of alcohol consumption in relation to crime and disorder on a national level, the Panel was informed that around one third of all domestic violence incidents in the UK are linked to alcohol misuse (according to Department of Health figures, 2004); over 415,000 recorded crimes were linked to alcohol in 2009/10; the number of people admitted to hospital over the five years up to 2008/09 due to alcohol abuse had increase by around 65%; and that chronic liver disease was now affecting men at a much younger age.

The Panel were also informed of the key issues within Redditch and Worcestershire. Alcohol consumption in Redditch exceeded the average across the county and also nationally. However, whereas alcohol consumption had increased both across the county and, sharply, nationally since 2008/09, it had decreased within Redditch.

Alcohol related hospital admissions had more than doubled in Redditch between 2002/03 and 2009/10. In particular, the Panel heard that Redditch experiences significantly higher rates of alcohol related admissions for under-18 year olds and also females compared to that nationally. Furthermore, Redditch and Worcestershire was found to have some of the highest rates of alcohol related hospital admissions for under-18s in the West Midlands region. It was added, however, that the numbers involved were small (326 admissions between 2005/06 and 2007/08).

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DAAT suggested that there were a number of factors that explained Redditch's high rate of under-18 alcohol related hospital admissions. These included: the close proximity of the Alexandra Hospital to areas where young people congregated; Redditch's strict admissions policy for young people that are intoxicated; the tendency of young people to call an ambulance rather than a parent when a friend/s are intoxicated; and also that the town is regarded by many residing parents as a sufficiently safe place for their teenage children to congregate without supervision.

DAAT had introduced a range of interventions in the hospital setting as a consequence to tackle the alcohol abuse. These interventions included: introducing a service whereby skilled professionals offered tactful advice to clients about alcohol consumption; communicating appropriate messages to young people and parents regarding alcohol; and improving specialist treatment for high risk and dependent drinkers. DAAT was also committed to supporting the victims of alcohol related abuse.

The work of the DAAT in tackling alcohol abuse had resulted in a number of subsequent success stories. This included: the recruitment of an alcohol liaison nurse to work in A&E at Alexandra Hospital; the development of a new training programme for any frontline professional working with clients who misuse alcohol; and achieving a third successful year of the Alcohol Arrest Referral Programme.

DAAT was focused on helping to reintegrate serial perpetrators of alcohol abuse into society; integrating alcohol provision; responding effectively to changes to the Licensing Act; and helping people to more fully understand the dangers of excessive alcohol consumption.

It was requested that the Panel help DAAT in a number of ways, including: helping them to further develop links with local communities; meet the opportunities provided by the Big Society Project; inform other members of the key messages; and to identify Councillors to champion the work of the DAAT.

Following the presentation, the Panel responded with comments and posed a series of questions. The Panel was subsequently advised that DAAT welcomed Government placing a minimum price on alcoholic products and regarded it as a step in the right direction, however suggested it that more could be done to make society aware of the dangers involved with alcohol abuse. It was also

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reiterated that DAAT were starting to place greater attention on the recovery from alcohol abuse in addition to treatment.

Members were also advised that DAAT had been working with the Redditch Community Safety Team and the Police to identify venues that were too often admitting intoxicated members of the public.

A suggestion was raised by a professional expert that the licensing expert that the 24 hour licensing law had exacerbated the problems around alcohol abuse. DAAT sympathised with this view.

The Chair thanked Kate Ray on behalf of the Panel on a very helpful presentation and proposed that a member of the DAAT would be invited back to the Panel in approximately twelve months time to deliver an update presentation. The Chair also commented that it was important that the issue of alcohol abuse should continue to be raised in the public domain.

## **31. NOTES FROM THE REDDITCH COMMUNITY SAFETY PARTNERSHIP MEETING - 8TH SEPTEMBER 2010**

The Panel received the notes from the Redditch Community Safety Partnership meeting on 8th September 2010 and considered whether there were any issues suitable for further scrutiny.

The discussion formed the basis of the questions to be submitted to the Chair of the Community Safety Partnership as detailed in the next item.

## **32. QUESTIONS TO CHAIR OF COMMUNITY SAFETY PARTNERSHIP**

The Panel considered appropriate questions to be submitted to the Chair of the Redditch Community Safety Partnership in advance of her attendance at the next meeting. The questions were part influenced by the notes of the Partnership meeting of 18th September 2010 that were considered for the previous item.

Members agreed the following questions:

- 1) Following confirmation of Government's Grant Settlement, how are the budget cuts expected to impact upon the Redditch Community Safety Partnership?

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- 2) How is the Partnership performing in relation to its agreed targets?
  - 3) What are your aspirations, as Chair, for the Partnership for 2011?
  - 4) What is the latest situation regarding the possible establishment of a Sexual Assault Referral Centre in the West Mercia Police Area?
  - 5) Is there anything you would like to raise in relation to the Partnership's relationship with the Crime and Disorder Scrutiny Panel, and how you see this progressing?

**RESOLVED that**

**the questions as noted above be sent to the Chair of the Redditch Community Safety Partnership prior to her attendance at the following meeting of the Panel.**

**33. WORK PROGRAMME**

It was confirmed that the next Panel meeting on 14th April 2011 would commence at 6.30pm.

**RESOLVED that**

**the contents of the Panel's Work Programme be noted**

The Meeting commenced at 6.30 pm  
and closed at 7.45 pm