11th JANUARY 2011

COMMUNITY AND SAFER CITY SCRUTINY COMMITTEE

HOW NORTHUMBRIA PROBATION TRUST WORKS WITH HIGH RISK DRINKERS WHO COMMIT VIOLENT OFFIENCES IN SUNDERLAND

REPORT OF NORTHUMBRIA PROBATION TRUST, HEAD OF OFFENDER MANAGEMENT, SUNDERLAND LOCAL DELIVERY UNIT

STRATEGIC PRIORITIES: SP3 SAFE CITY CORPORATE IMPROVEMENT OBJECTIVES: CI01: Delivering Customer Focussed Services, Cl04: Improving partnership working to deliver 'One City'

1. Purpose of the Report

- 1.1 To illustrate the work of the Northumbria Probation Trust and its partners in Sunderland in:
 - a) Identifying violent offenders who are high risk drinkers.
 - b) Addressing their alcohol use and offending behaviour to protect the public from further offending and prevent the creation of new victims of violent crime.

2. Background

- 2.1 Over 50% of all violent crime in the North East is alcohol related.
- 2.2 In 2008-09, the Police in the North East dealt with 6,468 reported incidents of domestic abuse involving alcohol use.
- 2.3 Research in 2006 by NOMS North East revealed that approx 68% of offenders in the NE had an alcohol use disorder, as identified using the World Health Organisation Audit screening tool
- 2.4 More recently evidence from the Probation Trust's OASys risk assessment tool in the period January to February 2009 revealed that over 56% of male offenders and 43% of female offenders in Sunderland had a significant problem associated with their alcohol use
- 2.5 The estimated cost of alcohol linked offending to NPT, its Criminal Justice partners and the Licensing Agencies in the North East is between £232 £385 million per annum.
- 2.6 Research shows that alcohol is 75% more affordable than it was 20 years ago.

2.7 A survey by Balance -the **North East** of England's alcohol office - revealed that alcohol is available for as little as 12p per unit. Some typical low cost products cost:-

Cider £1.21 for 2 Litres Vodka £6.98 per Litre Lager/Bitter 22p per can

- 2.8 Within this context, the Safer Sunderland Partnership provided funding from April 2009 for Probation and treatment staff to establish an Alcohol Treatment Requirement Team in Sunderland, working in conjunction with Turning Point.
- 2.9 Two Probation Offender Managers were co-located at Bridge House in central Sunderland with 3 DISC treatment staff. The team's initial target was to work with a minimum 70 offenders per year to address their alcohol misuse where their offending was violent and alcohol was a major contributory factor in their offending.
- 2.10 This group of staff has since become part of the larger IOM (Integrated Offender Management) Team.

3. Current position

- 3.1 Referrals to the team come from our colleagues in the Turning Point team based at Gillbridge Police Station and probation colleagues in Sunderland. Offenders are approached at various stages prior to sentencing. They areasked to work through a short (20 questions) screening tool called AudiT (attached as appendix 1). Audit is a World Health Organisation devised screening tool.
- 3.2 Those who score under the Alcohol Treatment Requirement threshold of 20 points fall into the categories of "hazardous" (score of 8—15) or harmful (score 16—19) drinkers: They will typically be referred into contact with NECA, NERAF, Turning Point etc. either on a voluntary basis, or as part of a Court Order supervised by probation staff working from Hendon, Pennywell/Southwick or Houghton le Spring teams.
- 3.3 Offenders who have committed a violent offence and score 20+ points on the Audit screening are "flagged up" for the more intensive Alcohol Treatment Requirement. Close collaboration with Turning Point staff and colleagues in Probation teams allows us to identify and assess such individuals at various stages prior to sentencing. DISC and probation staff jointly assess offenders to gauge their suitability for an ATR and to put forward a comprehensive package of treatment and support.
- 3.4 Most ATR's are made for an initial period of 6 months but the intervention can be made for up to 3 years. The ATR forms part of an over-arching Court Order and obliges the offender to:-

- (a) "Submit to treatment by or under the direction of a specified person......with a view to the reduction or elimination of the offender's dependence on alcohol.
- (b) Each offender has to consent to the making of the ATR and to agree to the treatment plan which the team puts before the Court.
- 3.5 Typically the Court Order will combine a Supervision requirement with an Alcohol Treatment Requirement and an Accredited Programme Requirement (for example, ASRO Addressing Substance Related Offending). Some offenders have committed offences of domestic abuse and they would be expected to attend the Community Domestic Violence accredited programme.
- 3.6 These elements of the Order are all supervised and compliance is rigorously enforced by probation staff working jointly with the Courts.
- 3.7 DISC staff add value to this process through the delivery of the treatment plan. Typically this begins with one to one brief intervention sessions to help the offender begin to safely reduce their drinking to less harmful levels. Work continues to stabilise their drinking and to help them establish a greater degree of equilibrium in their day to day life.
- 3.8 Each client is assessed for either community based or residential alcohol detoxification; our partner agency Counted 4 takes the clinical lead in this part of the process and the community-based detoxifications. A small number of bed spaces are funded at the Huntercombe Centre for residential detoxifications; the adult Drug and Alcohol team take responsibility for allocating funding for this resource, following a comprehensive assessment.
- 3.9 When a point of stability is reached, clients begin work with DISC and the Structured Day care Programme. One to one work and group work sessions based on evidence- based therapeutic models aim to rebuild the persons ability to manage their life with reduced alcohol use or abstinence.
- 3.10 The focus is on understanding what triggers their alcohol misuse and on learning to manage these factors. Offenders work on strengthening their own innate personal resources to overcome the personal, social and lifestyle factors that have led to the imbalance in their use of alcohol. Counselling and support run alongside this work, as do sessions on relapse prevention and a programme of community reintegration. Links are also made to community facilities that can provide ongoing support in developing a more "mainstream" lifestyle once the intensive period of the ATR is complete.
- 3.11 The Unit is in its second year of operation and has observed a positive level of compliance with the ATRs. It is difficult to extrapolate meaningful arrest / conviction data over such a short period of time, but

initial data from the police on a limited cohort shows a steady reduction in arrest data. Some offenders who might otherwise have served prison sentences have been successfully engaged in this disposal and very few of our clients have been seen again due to further offending.

4. Recommendations

4.1 Members are asked to note the contents of this report for the policy review.

5 Background Papers

n/a

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<u>AUDIT</u>

Appendix 1.

Questions	Scoring system					Your
	0	1	2	3	4	score
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many units of alcohol do you drink on a typical day when you are drinking?	1 -2	3 - 4	5 - 6	7 - 8	10+	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you failed to do what was normally expected from you because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Have you or somebody else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down?	No		Yes, but not in the last year		Yes, during the last year	

Scoring: 0-7 Lower risk, 8-15 Increasing risk, 16-19 Higher risk, 20+ Possible dependence

