

YHIP Alcohol & Offenders Project - Commissioners Feedback

Section 1: About the person completing the survey

1. Date survey completed (DD/MM/YY):

2. Please complete the following information for the individual completing the survey:

Name:

Job title:

Organisation:

Relevant PCT Area:

Email Address:

Phone Number:

3. Please clarify your job role / budget responsibility in relation to commissioning of alcohol services for offenders

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Section 2: Key Recommendations from YH NHS Healthy Ambitions (2008)

4. Please indicate the extent to which key recommendations from the Healthy Ambitions Report have been actioned within the locality:

	No action	Substantial further action needed	Minor further action needed	Fully actioned	Not known
4.1 Improved screening & identification of people with alcohol misuse problems (by the NHS)	jn	jn	jn	jn	jn
4.2 PCT has commissioned the systematic use of Brief Interventions across NHS services	jn	jn	jn	jn	jn
4.3 PCT has commissioned (a) a range of tiered services for people with different levels of dependency, &	jn	jn	jn	jn	jn
4.4 (b) there are simple referral routes from screening points in place	jn	jn	jn	jn	jn
4.5 PCT has commissioned alcohol services separately from drug services	jn	jn	jn	jn	jn
4.6 NHS is working with other organisations to reduce the accessibility of alcohol, including an increase in price	jn	jn	jn	jn	jn

4.7 Please comment on the scope to further action any of the above (future plans etc):

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Section 3: Key Recommendations from 'Reducing Alcohol Related Harm', Nation...

Please indicate the extent to which key recommendations from the NAO Report have been actioned within the locality to date by responding to the following questions/statements:

5. The PSA performance indicator on alcohol-related hospital admissions is included in:

	Yes	No
5.1 PCT operating plan	jn	jn
5.2 Local Area Agreement	jn	jn

6. The PCT's planning & commissioning of health services to reduce alcohol harm has been tailored to local needs

jn Not at all jn Partly jn Fully

6.1 If it has, describe how local needs were determined (eg. local needs assessment):

7. The SHA has assessed the PCT's progress against the PSA alcohol indicator (at the end of the first year of the PSA)

jn Yes jn No jn Don't know jn N/A

8. Which sources of available data does the PCT use, to assist mapping of needs & planning of services?

	Yes	No	Not aware of this information
8.1 national datasets on local patterns of alcohol misuse	jn	jn	jn
8.2 information from local partners	jn	jn	jn
8.3 frameworks provided by DH to allow comparisons to be made against other PCTs	jn	jn	jn
8.4 toolkits provided by DH to assess costs & benefits of different services to tackle alcohol harm	jn	jn	jn

8.5 If the data sources are not used, what information is used to assist planning?

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9. Has the DH provided the PCT with evidence to assist in the prioritising & commissioning of services, on

	Yes	No	Don't know
9.1 causes & forecast trends of alcohol-related hospital admissions & health costs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9.2 links between the PSA alcohol indicator & early interventions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Have new codes to record alcohol related activity in primary care (identification, screening & brief advice) been introduced ?

Yes

No

Don't know

11. In order to record the level & cost of alcohol services locally, does the PCT follow the guidance in the NHS costing manual?

Yes

No

11.1 If no, please state recording method:

12. Where the PCT provide funding to the DAAT to commission specialist alcohol services, how does the PCT avoid alcohol treatment being overlooked by substance misuse treatment? (eg. clear specification re purpose of funding). Please describe process:

13. Please describe how the PCT measures the quality of the services commissioned (against MoCAM, WCC guidance):

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14. Which public bodies are the PCT working with, to identify & help people misusing alcohol who may not come into contact with health services?

	Yes	No	Planned for future
14.1 Police	jn	jn	jn
14.2 Prison	jn	jn	jn
14.3 Probation	jn	jn	jn
14.4 Social Services	jn	jn	jn

14.5 Other (please specify)

15. How is local evidence-based practice on alcohol harm promoted accross PCTs?

	Yes	No	Don't know
15.1 Regional network (PCTs, DAATs, health professionals)	jn	jn	jn
15.2 Regional practices recorded on HubCAPP	jn	jn	jn

15.3 Other (please specify)

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Section 4: Key Recommendations from the YHIP Alcohol & Offenders Report...

Please indicate the extent to which recommendations from the Alcohol & Offenders Report have been actioned since April 2009 (not all recommendations are referred to as some are covered elsewhere in the survey).

16. Please describe any services commissioned (recently or planned) specifically targeted at the alcohol users identified as priority groups in the regional report, ie:

women offenders

young male offenders (18-25)

offenders on remand or serving under 12 months

17. Describe briefly any recent increase in commissioned services for offenders, specifically in relation to:

17.1 Alcohol Treatment Requirements

17.2 Other Probation Programmes

17.3 Interventions for offenders on licence

17.4 Alcohol Arrest Referral schemes

17.5 Interventions for alcohol users in prison

17.6 Services in prisons to meet the DH Alcohol PHI

17.7 Capacity in health services

17.8 Identification & Brief Advice across wider settings

18. Describe any examples of recent partnership work to reduce alcohol related crime & health problems (eg. between police, fire, YAS, A&E, CDRPs etc).

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19. Please describe any training / workforce development commissioned for those professionals working with offenders with alcohol misuse problems:

20. Describe any recent service user involvement with offenders with alcohol misuse problems, aimed at informing service planning:

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Section 5: Key Recommendations from the Lord Bradley Report (2009)

The Bradley Report includes four recommendations specific to offenders with dual alcohol & mental health problems.

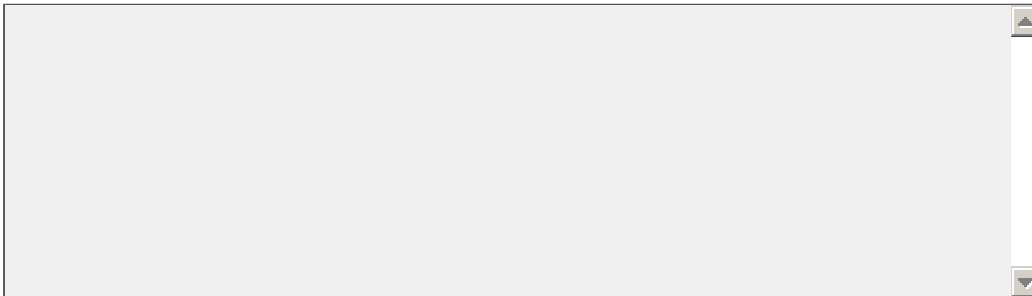
21. Please comment on any commissioned services (or other services you are aware of) in the locality, that provide for this particular group of offenders, specifically:

(a) the treatment/services provided for those in the CJ system with dual diagnosis

(b) services provided specifically for prisoners with dual diagnosis

(c) whether joint care planning takes place between mental health & alcohol services take for prisoners on release

(d) how defendants with dual diagnosis are served by the courts



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Section 6: Local commissioning arrangements

In order to determine a best practice health & justice commissioning model for the treatment of offenders with alcohol misuse problems, we need to explore further the local arrangements in each area. Some of this information will have been provided in the earlier part of the survey, but for additional information please describe the following, in as much detail as possible:

22. An overview of joint health & justice arrangements for offenders with alcohol problems (strategies, resources, contracts, structures, service specifications, commissioning etc).

23. Any recent initiatives / pilots involving interventions for alcohol using offenders (duration, outcomes etc):

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Section 7: FINAL SECTION

Please use the space below to write any additional comments that may be of relevance to the survey or the project, or if additional space is needed in relation to any of the earlier questions (please reference the question number):

24. Additional Information:

