

**Post Scrutiny - Executive Response**

**In Respect of:** Scrutiny Review of Alcohol Related Crime in Tameside  
**Date:** December 2012  
**Executive Member:** Cllr Kevin Welsh (Neighbourhoods)

Recommendations	Accepted/ Rejected	Executive Response	Officer Responsible	Action By (Date)
1) That Tameside Alcohol Harm Reduction Strategy be renewed in line with the New Government Alcohol Strategy.	Accepted	<ul style="list-style-type: none"> <li>To review and update the current strategy to reflect national and local priorities.</li> <li>To undertake a period of consultation across all partners in Tameside</li> <li>To relaunch the strategy in early 2014</li> </ul>	Kate Benson – Public Health	September 2013  December 2013  January/February 2014
2) The effects of alcohol and issues around alcohol consumption are incorporated in the youth marketing campaign.	Accepted	A planned social marketing campaign will be delivered in four phases focusing on raising awareness of the negative health impacts of smoking, <b>alcohol</b> and obesity, and signposting to support services where they exist. Where support services don't exist this campaign will be used to inform service development.  The target audience is young people aged 12 to 19 living in the Tameside and Glossop area.  PHASE 1: Insight with Young People (July 2012 – Dec 2012)  PHASE II: Campaign Development (Dec 2012 - Mar 2013)	Debbie Bishop – Head of Health and Wellbeing	As per response

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		PHASE III: Campaign Delivery (April 2013) PHASE IV: Campaign Evaluation		
3) That use of 'Pulse Policing' is considered as a method to tackle levels of crime within the borough's hotspot areas.	Accepted	The division will continue to use Pulse Policing in identified hotspots. Analysis of crime trends is fundamental to the intelligent deployment of resources.	Nicola Spragg – Partnerships Superintendent	Ongoing as required
4) Operation STAND continues to be implemented within Tameside within problematic areas associated with the night time economy.	Accepted	Operation Stand will continue. It is continually being reviewed to ensure effectiveness, and the use of analysis to ensure the most effective deployment of resources under this operation remains a priority. We see Operation Stand as a crucial tactic in achieving the Violence Reduction Target of 15%- both a GMP target, and one which is within the TAA.	Nicola Spragg – Partnerships Superintendent	Ongoing as required
5) Accident and Emergency departments in partnership with the local authority use the data and intelligence gained from patients to identify problematic licenced premises.	Accepted	<ul style="list-style-type: none"> <li>• Public Health representation on the JLEG to keep members up to date with Trauma, Intelligence and Injury Group data (TIIG)</li> <li>• Gaining senior management commitment at TFT to deliver TIIG operationally in A and E</li> <li>• To ensure that TIIG Data is collected systemically working with relevant people in the A and e</li> <li>• To reconvene the TIIG Group if appropriate</li> </ul>	Kate Benson – Public Health	<p>On – going</p> <p>January 2013</p> <p>On-going</p> <p>February/March 2013</p>

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6) Tameside Council gives consideration to the implementation of the Late Night Levy and Early Morning Restriction Orders	Accepted	Powers to introduce the late night levy & EMROs came into force on 1 November 2012. Consideration to Implement these new powers will be considered in the first half of 2013.	Sharon Smith – Head of Environmental Services TMBC	March 2013
7) A review of licences and reduced opening hours is undertaken within the borough between Greater Manchester Police and Tameside MBC Licensing Team. Consideration will be given to introduce Early Morning Restriction Orders to reduce the impact of the night time economy on Tameside.	Accepted	The Licensing Team and GMP, in their roles as responsible authorities are continually addressing problem premises as and when issues arise. A number of different options are available as part of a staged approach to enforcement, one of which is to seek a reduction in hours through either minor variation or review of the licence. In addition, consideration will be given to implementing EMROs in early 2013.	Sharon Smith – Head of Environmental Services TMBC	March 2013
8) That the Minimum pricing strategy throughout Greater Manchester continues to be supported by Tameside Council.	Accepted	<p>The Health and Well Board and Strategic Alcohol Group have agreed to the following actions :</p> <ul style="list-style-type: none"> <li>• To endorse and support the introduction of a Minimum Unit Price (MUP)</li> <li>• To participate in the consultation of all aspects of the Government's Alcohol Strategy (currently delayed until further notice)</li> </ul>	Kate Benson – Public Health	<p>Awaiting further information</p> <p>On-going</p>

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9) The Personal and Health Services Scrutiny Panel review the impact of alcohol on the health service and its resources.	Accepted	The Personal and Health Panel will be reviewing its work programme early 2013. We will ensure that 'Alcohol and its effects on health' is added to the panel's work programme for that year.	Emma Cohen – Head of Policy, Partnerships and Scrutiny	2013
10) The Health and Wellbeing Board treat alcohol related health issues as a major priority and direct resources to tackle alcohol related problems as appropriate.	Accepted	Tackling alcohol related issues has been identified by the Health and Wellbeing Board through the JSNA as a local priority and therefore forms a strategic focus for action in the new Tameside Joint Health and Wellbeing Strategy.	Debbie Bishop – Head of Health and Wellbeing/ Elaine Michel – Director for Public Health	Ongoing
11) That the Council and partners give consideration to allowing support services providing rehabilitation, access to vacant accommodation as appropriate.	Accepted	Discussions with Supported housing providers and registered social landlords are continuing. The development of 'floating support' should aid the increase of availability to this cohort over time.	Tracey Austin – DAAT Lead	Ongoing
12) The Health and Wellbeing Board ensure more advice and guidance is provided to patients through GP's surgeries around alcohol services available within the borough.	Accepted	<ul style="list-style-type: none"> <li>• Continued delivery, development and evaluation of Alcohol Identification Brief Advice and Brief Intervention training across Primary Care and General Practice</li> <li>• Implementation of the findings of the Make Every Contact Count Insight work to build workforce capacity in Primary Care around Alcohol Advice and Support</li> <li>• Encourage GP'S and Primary Care staff to promote Dry January 2013</li> </ul>	Debbie Bishop/Elaine Michel – Health Improvement & Public Health	<p>Ongoing</p> <p>January 2013 onwards</p> <p>January 2013</p>

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<p>13) Tameside Hospital continues to work towards the integration of an information system connected to GPs surgeries to enable the hospital to extract patient's notes from GP surgeries.</p>	<p>Accepted</p>	<p><b>Primary care sharing data with the Hospital</b>  85% of practices are on the EMIS system and there is a direct link to A&amp;E and MAU desk tops in Tameside Hospital.</p> <p><b>Hospital sharing data with primary care</b>  The prescribing data will flow first, and the Hospital are exploring the opportunities to incrementally ramp up clinical correspondence / discharge summaries via EDT Hub as part of transition from the current MedWay PAS to Lorenzo.</p> <p>Until this is in place hospital discharge letters will be in paper format</p>	<p>Elaine Michel – Public Health</p>	<p><b>In place</b></p> <p>A fully integrated discharge summary &amp; TTO solution will be in place in October 2013</p>