

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker	Executive Member for Public Health
Date:	27 November 2019
Title:	Alcohol Nurse Service Grants
Report From:	Director of Public Health

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Purpose of this Report

1. The purpose of this report is to request approval of grant funding (for one year from 1 April 2020) to continue to contribute towards the provision of Alcohol Nurse Services to Hampshire residents accessing University Hospital Southampton NHS Foundation Trust (UHST), Hampshire Hospitals NHS Foundation Trust (HHFT), Frimley Health NHS Foundation Trust (FPH) and Portsmouth Hospitals NHS Trust (PHT). The maximum amount of grant funding to be made available for 2020 - 21 is £203,000. The Alcohol Nurse Services in Hampshire currently deliver interventions to over 850 (Hampshire) patients a quarter, with over 100 of these resulting in referrals to community substance misuse services.

Recommendation(s)

2. To approve a grant up to a maximum of £35,000 to University Hospital Southampton NHS Foundation Trust (UHST) to contribute towards Alcohol Nurse Services for one year from 1 April 2020.
3. To approve a grant up to a maximum of £59,850 to Portsmouth Hospitals NHS Trust to contribute towards Alcohol Nurse Services for one year from 1 April 2020.
4. To approve a grant up to a maximum of £68,150 to Hampshire Hospitals NHS Foundation Trust to contribute towards Alcohol Nurse Services for one year from 1 April 2020.

5. To approve a grant up to a maximum of £40,000 to Frimley Health NHS Foundation Trust to contribute towards Alcohol Nurse Services for one year from 1 April 2020.
6. To delegate the final decision for specific funding amounts to the Director of Public Health, in consultation with the Executive Member. This will not exceed the maximum amounts stated in recommendations 2,3, 4 and 5 above and will be within the limits of the proposed budget which will be confirmed in February 2020. The maximum amount of grant funding to be made available for 2020 - 21 is £203,000.

Executive Summary

7. This report seeks to request approval of grant funding (for one year from 1 April 2020) to continue to contribute towards the provision of Alcohol Nurse Services to Hampshire residents accessing University Hospital Southampton NHS Foundation Trust (UHST), Hampshire Hospitals NHS Foundation Trust (HHFT), Frimley Health NHS Foundation Trust (FPH) and Portsmouth NHS Hospital Trust (PHT).
8. The aim of Alcohol Nurse Service in acute hospitals is to minimise alcohol related harm, identify and intervene with alcohol problems early and to reduce demand on acute hospital services. The Alcohol Nurse Services in Hampshire delivers interventions to over 850 (Hampshire) patients a quarter, with over 100 of these resulting in referrals to community substance misuse services.
9. Alcohol Nurse Services are currently funded by a range of partners including Hampshire County Council, Portsmouth City Council and Southampton City Council, Clinical Commissioning Groups and Acute Hospital Trusts.
10. This paper seeks authority to award grants to University Hospital Southampton NHS Foundation Trust, Hampshire Hospital's NHS Foundation Trust (HHFT), Frimley Health NHS Foundation Trust (FPH) and Portsmouth Hospital Trust for the continuation of Alcohol Nurse Services from 1 April 2020 for one year until 31 March 2021. The maximum amount of grant funding to be made available for 2020 - 21 is £203,000.
11. The funding for these grants is already included, on a recurring basis within the Public Health budget for 2020/21 and represent maximum levels of funding over a one-year period.

Contextual Information

12. The aim of Alcohol Nurse Service in acute hospitals is to minimise alcohol related harm, identify and intervene with alcohol problems early and to reduce

demand on acute hospital services. This service is evidence-based and delivers on a range of public health outcomes.

13. Hospitals serving the Hampshire residents (University Hospital Southampton NHS Foundation Trust, Frimley Health NHS Foundation Trust, Portsmouth Hospital Trust and Hampshire Hospital Foundation Trust) were commissioned by Hampshire Primary Care Trust and latterly Hampshire County Council to provide Specialist Alcohol Nurse Services since 2009. Hampshire County Council inherited contracts for Specialist Alcohol Nurse Services at each of the hospitals providing emergency medical services for the residents of Hampshire as part of the transfer of public health responsibilities as of April 2013.
14. This paper seeks grant approval for the County Council to contribute towards the established services across Hampshire and enable them to be maintained for the benefit of the residents of Hampshire who are the geographic responsibility of the County Council's public health team.
15. The public health team continue to work in partnership with Hospital Trusts, Local Authorities and Clinical Commissioning Groups (CCG) to jointly commission these services.

Finance

16. Alcohol Nurse Services are currently funded by a range of partners including Hampshire County Council, Portsmouth City Council and Southampton City Council, Clinical Commissioning Groups and Acute Hospital Trusts.
17. The Council grant for Alcohol Nursing Services at University Hospital Southampton NHS Foundation Trust (UHST) is £35,000 per annum.
18. The Council grant for Alcohol Nursing Services at Portsmouth Hospitals Trust (PHT) is £63,175 per annum.
19. The Council grant for Alcohol Nursing Services at Hampshire Hospital's NHS Foundation Trust (HHFT) is £68,150.
20. The Council grant for Alcohol Nursing Services at Frimley Health NHS Foundation Trust (FPH) is £40,000.
21. The total Hampshire County Council grant allocation requested for 2020/21 is up to a maximum of £203,000.
22. The funding for these grants is currently included at the above levels, on a recurring basis within the Public Health budget. Whilst a maximum funding level

for one year has been estimated for this approval the annual spend will need to be monitored and managed within the limits of the proposed budget which will be confirmed in February 2020.

23. There is an expectation that the grant will only be awarded alongside other funding bodies who contribute to the Alcohol Nurse Services in Hampshire (e.g. Clinical Commissioning Groups and NHS Hospital Trusts).
24. The public health team continue to work in partnership with Hospital Trusts, Local Authorities and Clinical Commissioning Groups (CCG) to develop joint commissioning approaches to these services. It was announced in the NHS Long Term Plan¹ that targeted funding will be available to support the development and improvement of Alcohol Nurse Services in hospitals with the highest rates of alcohol dependence-related admissions.

Performance and outcomes

25. Benefits for investment in the ANS are different for each stakeholder: for local authorities, improved treatment of alcohol misusing patients and early intervention with non-dependent patients results in improvement in public health and reduced social care costs; for Clinical Commissioning Groups, the savings are in reduced numbers of hospital admissions; while for NHS trusts, the savings will come from reductions in mortality, re-admissions and in length of stay per admission.
26. Alcohol Nurse Services are evidence based² and have been proven to reduce hospital admissions and improve quality of care. Public Health England have demonstrated the impact and cost effectiveness of these services (refer to annex A). The provision of Alcohol Nurse Services delivers on a broad range of health outcomes, including a reduction in alcohol-related harm. These include:
 - Preventing People from Dying Prematurely
 - Enhancing quality of life for people with long-term conditions
 - Helping people to recover from episodes of ill-health or following injury
 - Ensuring people have a positive experience of care
 - Treating and caring for people in safe environment and protecting them from avoidable harm

27. Locally defined outcomes:

¹ <https://www.longtermplan.nhs.uk/publication/nhs-long-term-plan/>

²

[file:///C:/Users/cxpuic/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempState/Downloads/10_0021r3_Proven_Alcohol+care+teams_1.2%20\(1\).pdf](file:///C:/Users/cxpuic/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempState/Downloads/10_0021r3_Proven_Alcohol+care+teams_1.2%20(1).pdf).

- To reduce alcohol-related admissions and re-admissions and ensure that patients have efficient access to comprehensive alcohol treatment services, which has adequate capacity to reduce waiting times and deliver high-quality outcomes for patients.
- To reduce the health burden and cost of alcohol misuse in Hampshire.
- Provide a prevention, early intervention and behaviour change approach to hospital health care through improving alcohol awareness and education across trust departments and clinical teams.
- To encourage, educate and promote safe and sensible drinking within recommended levels to patients and staff.

28. The Alcohol Nurse Services delivers interventions to over 850 (Hampshire) patients a quarter, with over 100 of these resulting in referrals to community substance misuse services. The table below provides a breakdown by acute trust for Hampshire (2018-2019).

Acute Trust	No. interventions to Hampshire residents	No. referrals to community substance misuse services
HHFT	1321	146
PHT	1332 (2620 in total) ⁱ	215 (413 in total)
FHFT	512 (1900 in total) ⁱⁱ	49 (180 in total)
UHS	295 (1051 in total) ⁱⁱⁱ	71 (244 in total)
Totals	3460 (6832 in total)	481 (983 in total)

ⁱ Totals in brackets include Portsmouth residents

ⁱⁱ Numbers for Hampshire estimated on screening rate. Totals in brackets includes Surrey and Berkshire patients.^{iv}

ⁱⁱⁱ Totals in brackets include Southampton residents

29. Between 2013 -18 the Wessex Academic Health Science Network (WAHSN) lead a project on “Reducing Harm from Alcohol”³ to improve patient outcomes from alcohol related harm in local areas through research, audit and close collaboration and adoption of common pathways. The closing report found that Improved identification and management of patients with Alcohol Related Liver Disease in acute trusts was estimated to result in savings of (at least) £12.9m-£17.2m per year across the nine Wessex acute NHS trusts. Alcohol Nurse Services were regarded as key mechanisms within acute trusts to drive this work forward.

Progress update and way forward

30. The public health team will continue to work with Clinical Commissioning Groups (CCG's) and Acute Trusts to further develop collaborative approaches to commissioning these services and it has been identified as a workstream within Hampshire and the Isle of Wight Sustainability & Transformation

³ <https://wessexahsn.org.uk/projects/256/reducing-harm-from-alcohol-final-report>

Partnership (STP). The NHS Long Term Plan has identified that hospitals with the highest rate of alcohol dependence-related admissions will be supported to fully establish Alcohol Nurse Service using funding from Clinical Commissioning Groups (CCGs) health inequalities funding. In Hampshire the STP has prioritised Alcohol Nurse Services within its local Delivery Plan, with the intention of supporting the future delivery and funding of these services in the future.

Consultation and Equalities

31. NHS Act 2006 Section 2B states that each local authority must take such steps as it considers appropriate for improving the health of the people in its area. The steps that may be taken include providing grants or loans (on such terms as the local authority considers appropriate).
32. If funding is continued there will be a positive impact for the protected characteristics of age and poverty. 40-64 year olds have the highest rate of alcohol related admissions and therefore the Alcohol Nurse Service would have a positive impact on this age group. The impact of harmful and dependent drinking is greatest in deprived communities. Health outcomes such as rates of alcohol related conditions, alcohol related mortality and alcohol related hospital admissions are higher for those living in Gosport, Havant and Rushmoor. Continued investment in the Alcohol Nurse Services will ensure support for those living in these areas to reduce alcohol related harm.
33. If the grant is not approved a reduction in service availability will have an impact upon the identification, harm reduction advice, targeted interventions and onward referral to specialist services provided to the residents of Hampshire accessing acute Hospitals and particularly those with protected characteristics. This could result in continued or increased levels of alcohol consumption amongst increasing / high risk /alcohol dependant drinkers with associated crime, anti-social behaviour, domestic abuse and violence, adult and children's safeguarding issues, housing problems and homelessness, as well as mental and physical ill health.
34. A reduced offer in hospitals is likely to lead to higher demand on health and social care services and may increase health inequalities. It could also impact key stakeholders such as police, probation, ambulance, Emergency Department services and the public.

Conclusions

35. That the Executive Member for Public Health approves the grant funding (for one year from 1 April 2020) to continue to contribute towards the provision of Alcohol Nurse Services to Hampshire residents accessing University Hospital Southampton NHS Foundation Trust (UHST), Hampshire Hospitals NHS Foundation Trust (HHFT), Frimley Health NHS Foundation Trust (FPH) and Portsmouth Hospitals NHS Trust (PHT).

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	No
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	No
People in Hampshire enjoy being part of strong, inclusive communities:	No

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

A full EIA has been completed and attached as Annex B.

Return on Investment and Evidence Review

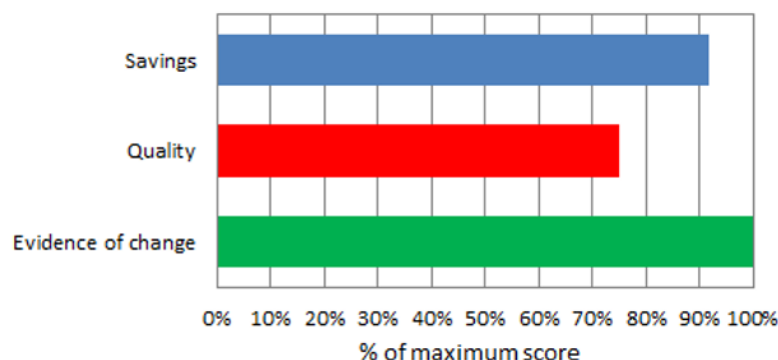
Public Health England (PHE) modelled a return of investment (ROI) of £3.85 for every £1 invested, a year from implementation of an Alcohol Nurse Service in a hospital setting.

[https://www.rcem.ac.uk/docs/External%20Guidance/10d.%20Alcohol%20care%20in%20England%27s%20hospitals%20-%20an%20opportunity%20not%20to%20be%20wasted%20\(PHE,%20Nov%202014\).pdf](https://www.rcem.ac.uk/docs/External%20Guidance/10d.%20Alcohol%20care%20in%20England%27s%20hospitals%20-%20an%20opportunity%20not%20to%20be%20wasted%20(PHE,%20Nov%202014).pdf).

Currently 73% of hospitals in England have an ANS. A 100% national roll-out of ANS could result in net savings to the NHS of c£38m p.a. after implementation. A PHE case study of an Alcohol Care Team saved 2,000 alcohol-related bed days and reduced readmissions by 3%. An external evaluation showed a 43% reduction (3,814 – 2,155) in alcohol-related A&E attendances alone. A team of 4 alcohol specialist nurses providing 7-day ACT service costs c£165,000 p.a. (based on case study). The population served was 263,000. The case study demonstrated net savings of £471,000 p.a. from a 7-day alcohol care team.

The NHS Evidence and the National Institute for Health and Care Excellence (NICE) study on Alcohol Care Teams found that there was a positive impact on reducing hospital admissions, readmissions and mortality. [file:///C:/Users/cxpuic/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempSate/Downloads/10_0021r3_Proven_Alcohol+care+teams_1.2%20\(3\).pdf](file:///C:/Users/cxpuic/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempSate/Downloads/10_0021r3_Proven_Alcohol+care+teams_1.2%20(3).pdf). Table 1 demonstrates the impact on savings, quality and evidence of change after implementing Alcohol Nurse Services in hospitals.

Table 1



Recent research has concluded that Alcohol Nurse Services <https://fg.bmj.com/content/early/2019/08/14/flgastro-2019-101241#F1> are evidence-based and cost-effective, and are enhanced by their person-centred, qualitative and aspirational components. The study identified that Alcohol Nurse Services are also a wise and compassionate investment, with potential, profound, long-lasting financial and humanitarian benefits to individuals and societies. Specialist alcohol

care can pull people back from the brink of the most devastating consequences of alcohol misuse, improve their health and well-being, and restore their dignity.