

Alcohol-related admissions to hospital

i) Alcohol-related conditions (broad)

Definition

Admission episodes for alcohol-related conditions (primary diagnosis or any secondary diagnosis) all ages, directly age-standardised rate per 100,000 population. Does not include attendance at Emergency Departments that do not lead to hospital admission.

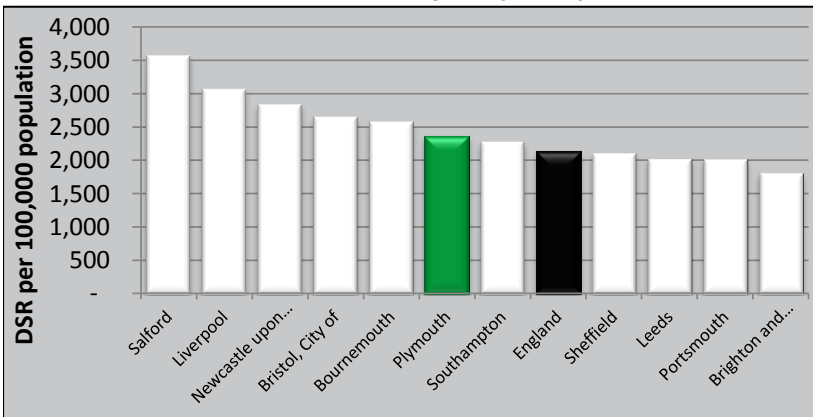
Description

Alcohol-related hospital admission episodes are used to understand and illustrate the impact of alcohol on the health of a population.

Admission episodes are calculated by applying alcohol-attributable fractions (AAF) to all admissions. AAFs calculate what proportion of a health condition is alcohol related. There are 20 conditions that are wholly attributable and have an AAF of 1 such as alcoholic liver disease. There are 32 conditions that are partially attributable - that have an AAF of less than 1. These include cardiac arrhythmias, a number of cancers, falls and self-harm.

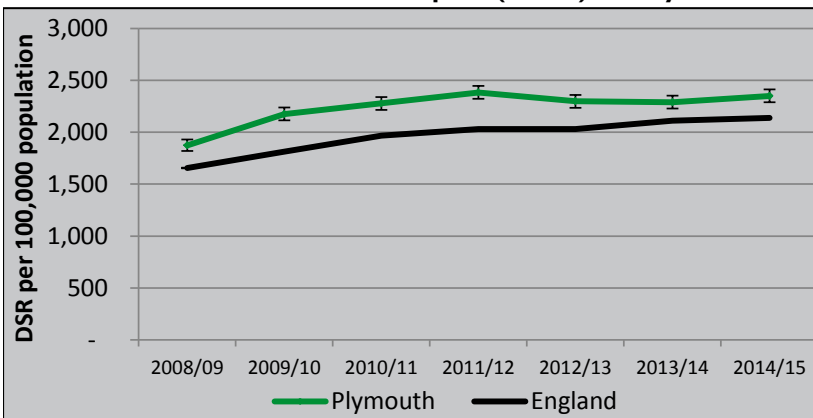
In this way the indicator is not a number of actual people or a number of actual admissions but an estimated number of admissions calculated by adding up all of the alcohol attributable fractions that have been identified.

Alcohol-related admissions to hospital (broad) - 2014/15



The 2014/15 rate of admission episodes (broad) was 2,351 per 100,000 population, a slight increase from 2013/14 when the rate was 2,290. This follows the national trend of an increasing rate. The rate in Plymouth is higher than the England average, and Plymouth sits in the middle of its ONS comparator group areas.

Alcohol-related admissions to hospital (broad) for Plymouth



Over the last seven years admission episodes to hospital (broad) have been higher than the England average. The gap between England and Plymouth has narrowed over the last 7 years.

Interpretation

As far as possible this tells that whole story of hospital admission episodes and goes some way to describe the total burden of alcohol health harms. People are admitted to hospital for the more obvious reasons such as alcoholic liver disease and pancreatitis but also for a range of other conditions where alcohol has played a part such as cancer of the oesophagus, high blood pressure, self-harm and assault. For 2014/15 this equates to 5,644 admission episodes in Plymouth although by definition we know that the number of people admitted is higher than the number of admission episodes.

Alcohol-related admissions to hospital

ii) Alcohol-related conditions (narrow)

Definition

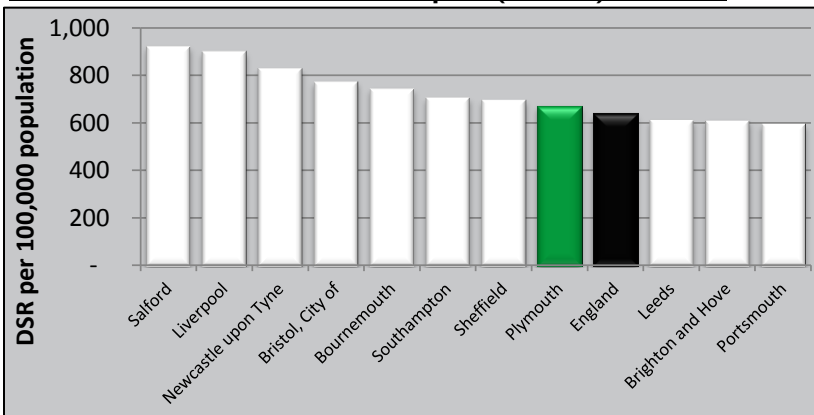
Admission episodes for alcohol-related conditions (primary diagnosis or any secondary diagnosis with an external cause) all ages, directly age-standardised rate per 100,000 population. Does not include attendance at Emergency Departments that do not lead to hospital admission.

Description

This is a subset of alcohol related admissions (broad) measure.

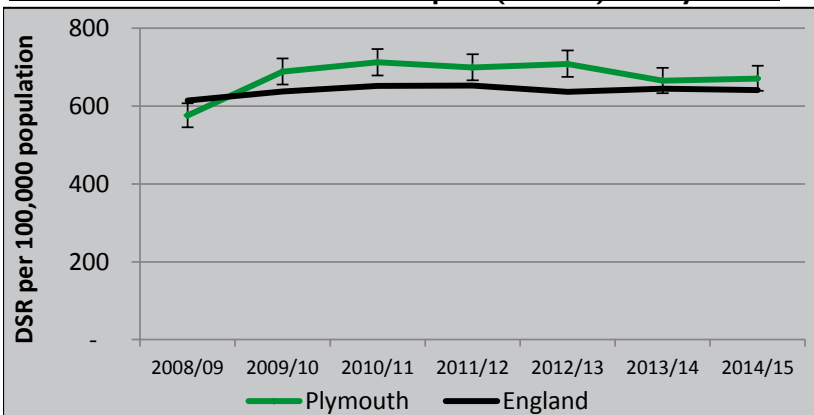
The same methodology using the alcohol attributable fractions is applied but only to admissions where the primary diagnosis has an alcohol attributable fraction and admissions where the primary diagnosis does not have an alcohol attributable fraction but the secondary diagnosis does and is an external cause – such as alcoholic poisoning, assaults and falls.

Alcohol-related admissions to hospital (narrow) - 2014/15



The 2014/15 admission rate (narrow) was 671 per 100,000 a slight increase from the 2013/14 rate of 665 per 100,000. The Plymouth rate is slightly higher than the England average but the difference is not statistically significant. Compared to ONS comparator group local authorities Plymouth is the fourth lowest out of eleven areas.

Alcohol-related admissions to hospital (narrow) for Plymouth



Over the last five years admission episodes to hospital (narrow) have been higher than the England average. The gap between the England and Plymouth rates has narrowed over time.

Interpretation

This provides a narrower measure of alcohol harm and contains a larger proportion of acute conditions.

It is easier to achieve a notable impact with these more acute conditions in a short period of time than it is to achieve a similar impact on chronic conditions which may take several years.

For 2014/15 this equates to 1,666 admission episodes in Plymouth although by definition we know that the number of people admitted is higher than the admission episodes.

Consumption levels

Levels of harmful drinking

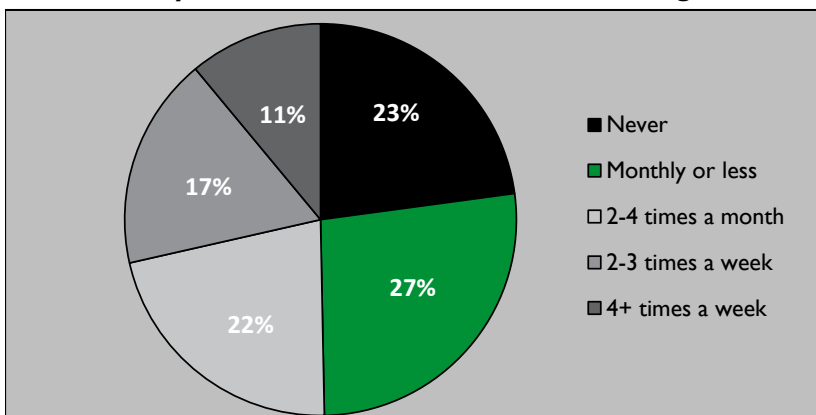
Definition

It is notoriously difficult to accurately report alcohol consumption. There is evidence that people frequently report lower levels of use than data for alcohol sales indicates.

Description

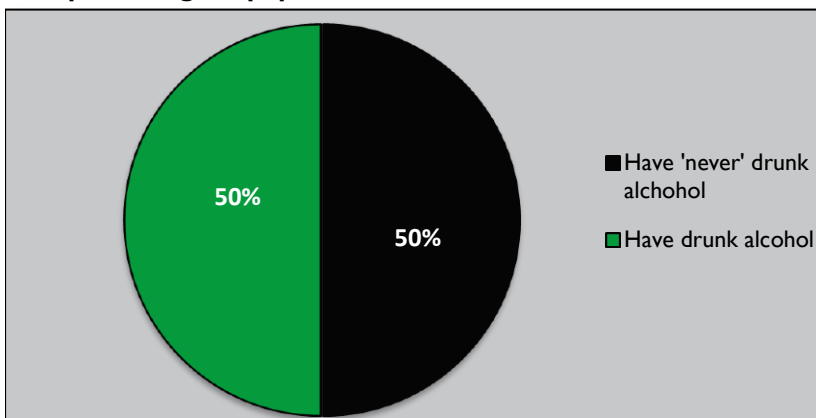
The 2014 Health Survey for England monitors trends in the nations health. In 2014 a total of 8,077 adults were interviewed as part of the survey that included questions about drinking behaviours and patterns.
The 2014 Wellbeing Survey was sent to 6,327 people (r.1,647) and asked a series of questions about drinking behaviours
The Schools Health Related Behaviour Survey 2016 was carried out in 18 secondary schools with responses from 4,342 pupils in Year 8 (12/13 years) and Year 10 (ages 14-15)

How often Plymouth residents have a drink containing alcohol



The Plymouth 2014 Health and Wellbeing Survey shows that 23% of respondents reported that they have never drunk alcohol. A further 27% reported that they drink monthly or less. 11% of respondents reported that they drink alcohol on 4 or more occasions a week.

The percentage of pupils that have tried alcohol



The 2016 Schools Health Related Behaviour Survey
 50% of pupils responding to the survey have never drunk alcohol. This compares to 45% in 2014.
 16% reported that they had an alcoholic drink in the last 7 days. This compares to 22% in 2014.
 5% of pupils reported that they got drunk on at least one day in the last 7 days. This compares to 8% in 2014.

Interpretation

The 2014 Health Survey for England reported that
 15% of men and 22% of women did not drink any alcohol in the last year
 63% of men and 62% of women drank at levels indicating lower risk of harm (*up to 21 units per week for men and up to 14 units a week for women*). **This equates to an estimated 135,469 people in Plymouth**
 17% of men and 12% of women drank at an increased risk of harm (*between 21 and 50 units per week for men and 14-35 units per week for women*). **This equates to an estimated 17,855 people in Plymouth.**
 5% of men and 4% of women drank at higher risk levels (*more than 50 units per week for men and more than 35 units per week for women*). **This equates to an estimated 9,765 people in Plymouth**
The Plymouth 2014 Wellbeing Survey (1,647 respondents) indicated that over 50% of respondents either never drink or drink monthly or less. 11% drink on four or more occasions. Further editions of the survey will allow recording of trends in consumption over time and provide a measure of progress in this area.
The Schools Health Related Behaviour Survey 2016 indicates that a higher percentage of young people in years 8 and 10 have never used alcohol when compared to responses in 2014. In 2016 16% reported drinking an alcoholic drink in the last 7 days compared to 22% in 2014 and a lower percentage reported getting drunk in the last 7 days. These results appear to indicate that fewer young people are drinking and fewer are getting drunk.

Alcohol related violence

i) Assaults not reported to the police

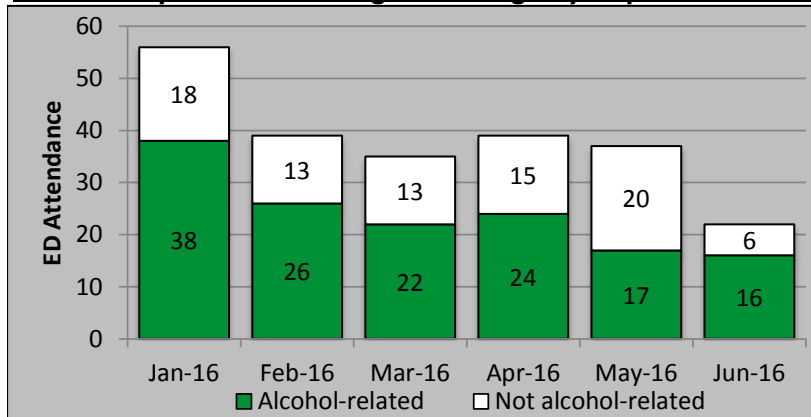
Definition

Hospital Emergency Department assault data - this is sometimes referred to as the Cardiff Model or ARID data. The College of Emergency Medicine recommends a minimum dataset to include time of assault, assault type and location of assault.

Description

Emergency Departments (EDs) can contribute to violence prevention by working with local partners to collect anonymised data about precise location of violence, weapon use, assailants and day/time of violence. A significant number of violent offences which result in hospital treatment are not reported to the police. Information about location and time of assaults, which can easily be collected in EDs can help police and local authorities target their resources much more effectively.

Number of patients attending the Emergency Department because of assaults recorded



Between January 2016 and June 2016 the Emergency Department at Derriford Hospital saw an average of 38 assaults a month of which a average of 24 were alcohol related. During this short trend incidents peaked in January with 56 attendances.

Interpretation

The ARID database has recently been at Derriford Hospital Emergency Department. This has led to a more systematic approach to reporting and analysis of alcohol related assaults. This allows comparison with data collected at other Emergency Departments and Minor Injuries Units across the Peninsula and provides a police-force wide intelligence. The ARID system has generated improved intelligence around the location of assaults facilitating more targeting policing and licensing responses.

Alcohol related violence

ii) Alcohol-related violence (local measure)

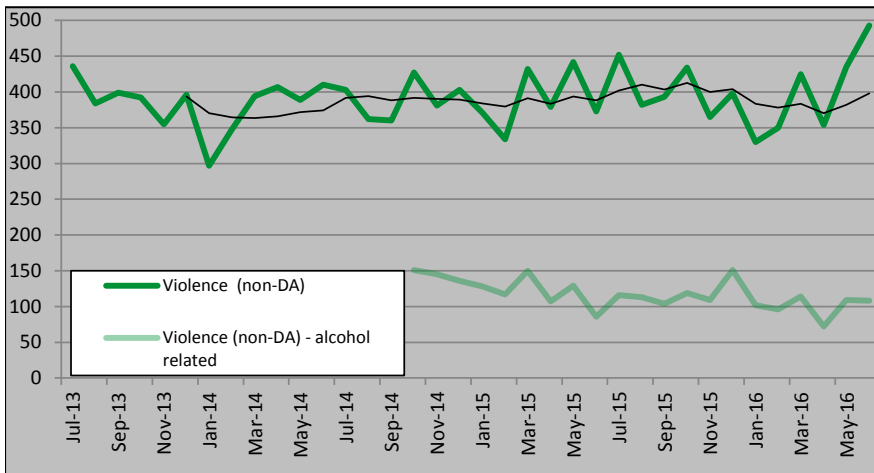
Definition

This measure is based on violence offences recorded by the police, excluding any domestic abuse offences. It includes 3 offence groups: violence with injury, violence without injury and public order offences. A new 'alcohol related flag' has been recorded for violent crimes since April 2014 and there is a high level of confidence in the data from Oct 2014.

Description

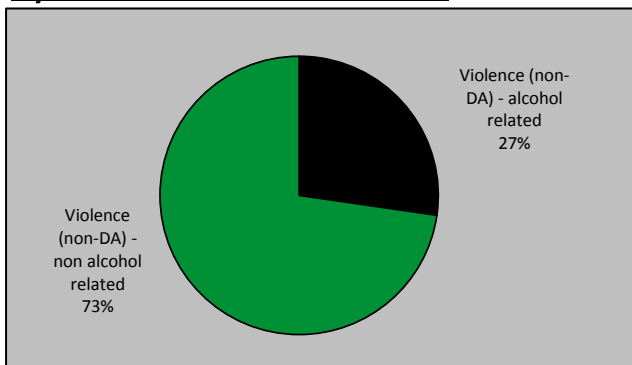
To provide context the overall violence offences (non-DA) trend has been provided for last three years. The graph shows the monthly levels which tend to vary and then the rolling 6 month trend line. The graph also shows 21 months of alcohol related violence. The pie charts below show the % of violence which is recorded as alcohol related and the types of offences making up the alcohol related violence.

Plymouth Violence offences (excl. domestic abuse) monthly trend July 2013 to June 2016

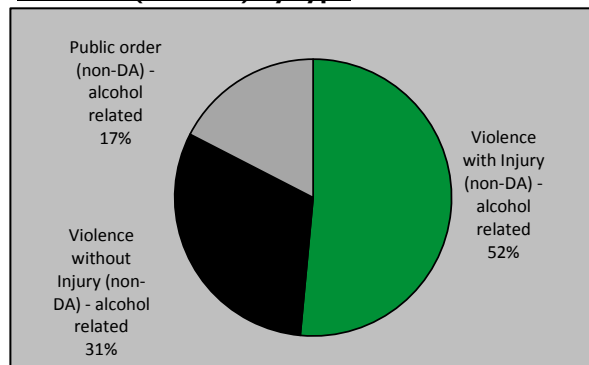


The level of all violence offences (non-DA) recorded by the police has remained around the 400 per month level for the last 2 years. Within this the categories of violence showing increases are harassment offences and youth/family related offences. This is in line with national data and that seen in cities comparable to Plymouth. Between June 2015 and June 2016 there were an average of 109 incidents a month with the most incidents reported in December 2015 when there were 151 incidents.

July 2015 to June 2016 Violence (non-DA) by alcohol and non-alcohol related



July 2015 to June 2016 Alcohol related Violence (non-DA) by type



Interpretation

The first pie chart shows that for the year to June 2016 27% of all reported violence offences (non-DA) were recorded as alcohol related, which is down slightly from 32% in the previous year. The second pie chart shows the breakdown of alcohol related violence for same year, where 52% were violence with injury, 31% violence without injury and 17% public order offences.

Alcohol related Anti-Social Behaviour

Alcohol related ASB

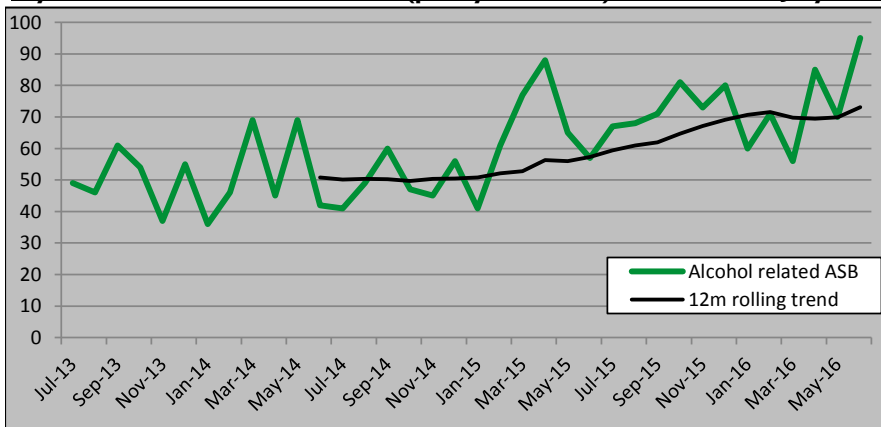
Definition

This is a proxy measure being used until fuller alcohol-related ASB information is available. Two data sets are combined to give these figures – ASB incidents recorded by the police as street drinking (either with or without rowdy behaviour) and non-notifiable offences¹ recorded by the police which are relating to drunk behaviour, failure to comply with police direction/designated area and breaches of drink banning order.

Description

This proxy measure provides a city trend and highlights which neighbourhoods have higher rates of alcohol-related ASB or increasing trend. The aim is to move towards a fuller measure which would cover all alcohol-related ASB recorded by the police and other agencies.

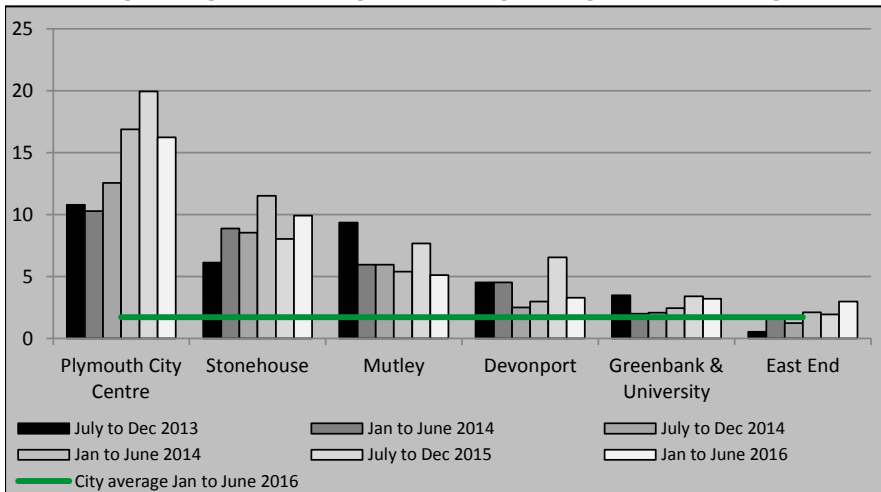
Plymouth Alcohol related ASB (proxy measure) - trend from July 2013 to June 2016



Alcohol related ASB (proxy measure) has seen gradual trend of increasing incidence over last year from an average of 50 incidents a month in 2014 to 70 a month for 2015/16. This proxy measure is likely to be only part of the actual alcohol related ASB for the city but gives an indication of longer term trends.

Plymouth Alcohol related ASB (proxy measure) per 1,000 population

6 monthly change for last 3 years for top 6 neighbourhoods against City average



Alcohol related ASB (proxy measure) has risen from a city wide rate of 1.2 per 1,000 population as at December 2013 to 1.7 for year to June 2016. The top 6 neighbourhoods are all above the city average rate.

Interpretation

The trend for recorded alcohol related anti-social behaviour incidents (proxy measure) has increased over the last 12 months. Rates of alcohol related anti-social behaviour are highest in the City Centre, Stonehouse and Mutley areas.

¹ Non-notifiable crimes are crimes that are recorded by the police but do not have to be notified to the Home Office and therefore do not get included in the national crime statistics

Children affected by parental alcohol misuse

Parent(s) alcohol misuse

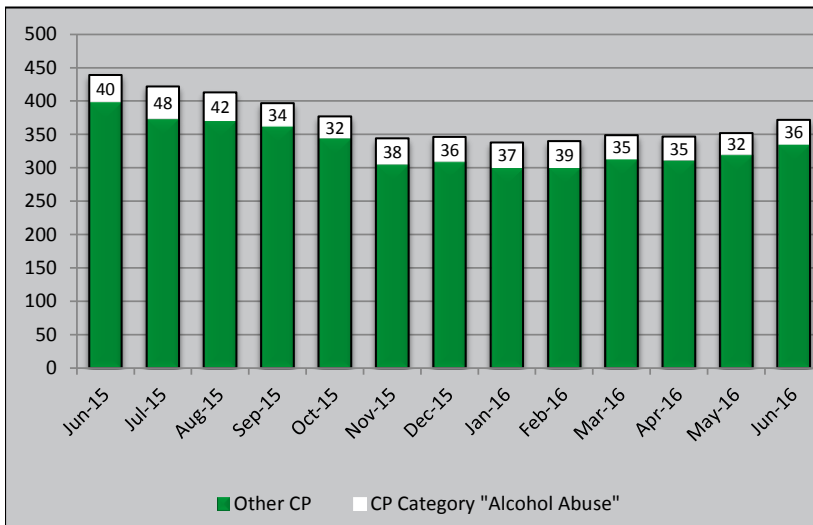
Definition

The number of children with a Child Protection Plan where parental alcohol misuse has been identified as one of the parental classifications presented as a proportion of the total number child protection cases.

Description

Parental alcohol misuse can lead to poor outcomes for children. The prevalence of parental alcohol misuse is not widely understood. There is currently no national recording or reporting of parental alcohol misuse.

Number of children with a CP plan with parental alcohol misuse



The number of children with a child protection plan due to parental alcohol misuse has decreased over the last 3 years (54 in 2013/14 to 35 in 2015/16). This follows the trend of the number of children with a child protection plan (380 in 2013/14 to 349 in 2015/16).

Interpretation

Parental alcohol misuse was a classification in 10% of child protection cases between July 2015 and June 2016. For the first quarter of 2016/17 there was on average 34.3 child protection cases where alcohol misuse is present which is around 8 less cases per month compared to the first quarter of 2015/16.

A further indicator is currently being developed. This will record the number of cases where parental alcohol misuse is identified through continuing assessment for families that are below the level of child protection.

Additionally the Health Visitor Caseload Survey is undertaken every two years and records a series of health need factors from over 12,000 families with children under 5 years across Plymouth. In 2016 parental alcohol misuse was recorded in 240 families. This compares to the survey in 2014 when 13,000 families were surveyed and parental alcohol misuse was recorded in 262 families.