

Evaluating the Diversion of Alcohol-Related Attendances

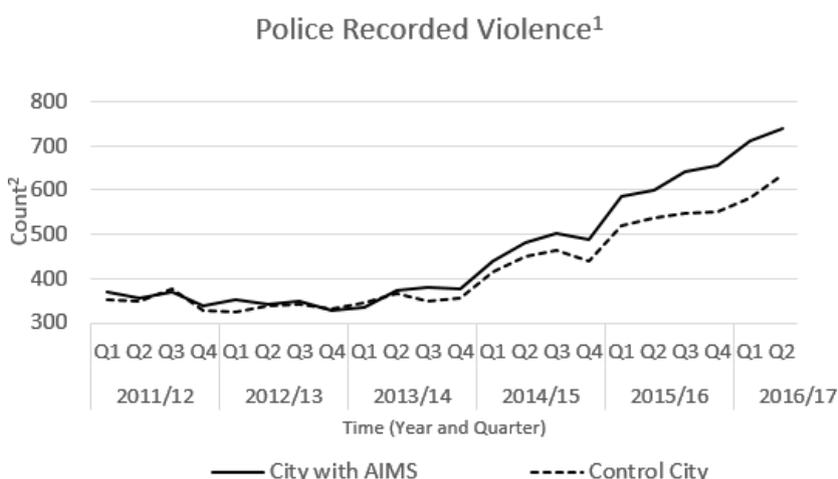
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Do Alcohol Intoxication Management Services Free Up Police Resources?

Professor Simon Moore, Professor of Public Health Research

The truth about violent crime is that it will only be recorded if it is observed or reported. It is therefore no surprise that when interventions effect police resources we often see a change in the number of violent offences that are recorded.

In one project in Australia, for example, more officers were brought into a city to target alcohol-related crime. When the police-recorded violence was compared across cities that were subject to an increase of officers to control cities where no increase occurred, researchers found recorded violence dramatically increased in the city with the additional resources. This and similar effects from around the world motivates our interest in the effect of Alcohol Intoxication



Notes:

- 1 - Violence without injury; violence with injury; sexual offenses
- 2 - Recording processes and counting rules for Violence Against the Person changed substantially from 2012 onwards and is the reason for the upward trend seen here.

Management Services (AIMS) on police activity.

The graph shows police recorded violence in cities that have AIMS, and similar cities that do not. Recording processes introduced from 2012 onwards have meant that more violent crime has been recorded, as intended. But also striking, is in cities

with AIMS, the police record more violent crime compared to cities that do not have AIMS. We suggest that this effect is due to police officers not being held up caring for those who have become vulnerable due to their use of alcohol.

We will continue to look at this area. Our ethnographic work involves talking to police officers about their experiences. We will also look at hospital assault-related injury data to see whether there is a reduction in the number of those needing emergency care. It may be that freeing officers up in city centres means they are more likely to intervene early and stop incidents escalating to the point of serious injury.

Public and Patient Involvement – an independent perspective

Henry Yeomans, a member of the Involving People Network; gives us his thoughts on his visit to the Alcohol Treatment Centre in February, and being a member of the Study Steering Committee.

I have been involved in several different research studies but the EDARA project is more complex, as it involves a fair number of stakeholders across different centres. Early personal contact via a call with Sheffield based Andy Irving, put some flesh on the extensive background materials I had been sent. My main involvement has been through the Study Steering Committee which has met in Cardiff in June 2016 and February 2017 to check that the project is on track to achieve the aims for which it was set up. The meetings involve participants all representing different aspects of the project, and I represent the public involvement and engagement perspective. The smooth running of the sessions leave me happy



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Inside the Cardiff Alcohol Treatment Centre

to contribute questions at appropriate points about how the different strands of the research are progressing.

My visit to Cardiff Alcohol Treatment Centre let me see for myself the kind of operation which is at the centre of this study. I was very impressed with the spacious and well equipped premises which was run with friendly efficiency by emergency nursing staff, an ambulance crew on standby and a female police officer.

I witnessed one situation involving a young woman who had been injured in an alcohol related incident. The nursing staff were able to treat her injury and a police officer was able to take a statement – all in a warm, bright and calm

environment, very different from dealing with this out on the street. The senior emergency nurse in charge the night I visited, explained that the key factors for him were being able to make a medical judgement on when to discharge clients and also to detect cases such as diabetic coma in addition to any intoxication. The close radio links the Centre has with the door staff at various clubs enable a quick and targeted response and are a further example of an operation which is a well-established, coordinated and cooperative feature of Cardiff night life each weekend.

Hail the Hero of the Hour!

Let's take a moment to reflect on Marc Chattle lovingly preparing the dispatch of almost 5000 surveys!

Survey forms hoping to gain insights into patients' most recent visits to their local Emergency Departments were deployed this month, and the team eagerly await the responses. The full time task lasted 3-4 weeks (in between other activities), before the survey forms were whizzed off to 10 ED sites across Britain:

University Hospital of Wales (360), Morriston Hospital (360), Royal Gwent Hospital (400), Manchester Royal Infirmary (600), Birmingham City Hospital (400), The James Cook University Hospital (360), Queens Medical Centre (600), Sunderland Royal Hospital (550), Hull Royal Infirmary (600), Northampton General Hospital (400). Making for a whopping total of **4630!**

All the ED departments have been amazing with providing invaluable help with the smooth running of this part of the project. Thank you all for your hard work! *Marc gave us a peek into his frame of mind while ploughing through this laborious task:*

"It was a typical late January day and the boxes of envelopes and EDARA survey forms were sitting in piles in the office. Boxes look quite benign when they're unopened, neat, tidy, silent." "Then they're opened and the task reveals itself – nearly 5000 envelopes to fill with forms and return envelopes to be sent to 10 ED departments. It's surprisingly therapeutic stuffing the envelopes, calming." "Then week two comes along and the process starts all over again. February arrives with the



Marc Chattle's base of operations

cold weather and we're over half way there. Need to start thinking about shipping them out, so begin packing the first batch in various sized boxes that previously had the empty envelopes in them. More boxes. Three quarters through February and the last batch is shipped to the last ED on the list. The job's done and the office is empty of boxes. Until the reminders need to go out. Storm Doris is beating against the building while we await the delivery of more boxes...." Good on you Marc. (Rather you than me!)

Joanne Blake: ethnographer at large in the Night-Time Economy!

The EDARA ethnography team visit the AIMS sites, interviewing those involved in the NTE. Their qualitative research is invaluable in discovering how AIMS effect users, staff and volunteers alike.



Joanne with frontline staff in Sheffield City Centre

I have been working as a research associate since January 2016. Most of my previous experience has been in research, and my PhD was an ethnographic study of a third sector mental health garden project. I've completed research for the Welsh Government on Religion and Organ Donation, and also for the Australian Government on the development of 'green skills' in de-industrialised regions.

My role mostly involves shadowing and speaking with those individuals who work in the night-time economy,

managing and providing care for intoxicated individuals. Amongst these are the individuals who were instrumental in setting up AIMS services, in order to get an understanding of the AIMS story, and the broader context in which these services operate. At present, I am conducting fieldwork in Sheffield, where there is currently no AIMS intervention.

What I like best about my job is the fieldwork – although it can be tiring, it's interesting!

I hope to gain a good understanding of how intoxication, and Alcohol Management Services impact on the daily working lives of those agents involved in managing and caring for intoxicated individuals. I also want to establish how such services come into existence and some of the challenges they have faced and are likely to face in the future.

If you would like to help, get involved, or know anyone who you think it may be good for the ethnography team to speak with; please get in touch, Joanne would love to hear from you.

Joanne is contactable via email at - BlakeJ@cardiff.ac.uk



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Meet the EDARA team

EDARA is a joint project between Cardiff and Sheffield universities. Here are a few of its co-investigators.



Davina Allen

Davina is a Professor of Healthcare Delivery and Organisation in the School of Healthcare Sciences at Cardiff University. She is a nurse and a medical sociologist and over a twenty year career has undertaken a programme of research on everyday healthcare work and how this impacts on quality and safety of care. She has particular expertise in observational methods and is leading the ethnographic component of the EDARA study. She is currently Deputy Head of School (Research & Innovation), Health Foundation Improvement Science Fellow, Professor II (Care Centre NTNU, Gjøvik, University of Trondheim, Norway) and Editor of *Sociology of Health & Illness* and Editorial Board member of *Journal of Health Services Research and Policy*. Davina enjoys gardening, running (quite slowly), walking (and sometimes running with) her dog (Hendrix), yoga, reading and cooking (and eating)



Andy Irving

Andy Irving is a Research Associate at the University of Sheffield, Centre for Urgent and Emergency Care Research (CURE). His work background is in drug and alcohol treatment services and he continues his research interests in this field as lead for the Sheffield Addiction Recovery Research Panel ([ShARRP](#)) Patient and Public Involvement (PPI) group and involvement in the Sheffield Addiction Recovery Research Group ([SARRG](#)).

His recent major research projects include the [PhoEBE](#) programme; which is developing new ambulance performance measures, and management of the [EDARA](#) project, which is evaluating the impact of AIMS in UK towns and cities. In his spare time Andy enjoys fishing. Here he is with a whopping 14lb Sturgeon at a local pond.

 @irvingad82



Petra Meier

Petra is Professor of Public Health, Director of the Sheffield Alcohol Research Group at Sheffield University. Her research interests include alcohol interventions and their effectiveness, especially pricing and availability policies; co-occurrence of health behaviours, health inequalities and substance misuse treatment evaluation. She is a Member of the Public Health England Alcohol Leadership Board, scientific advisor to the Institute for Alcohol Studies and Senior Editor of *Addiction*. Weekends are always busy with visits to playgrounds, swimming pools or children's birthday parties.

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