

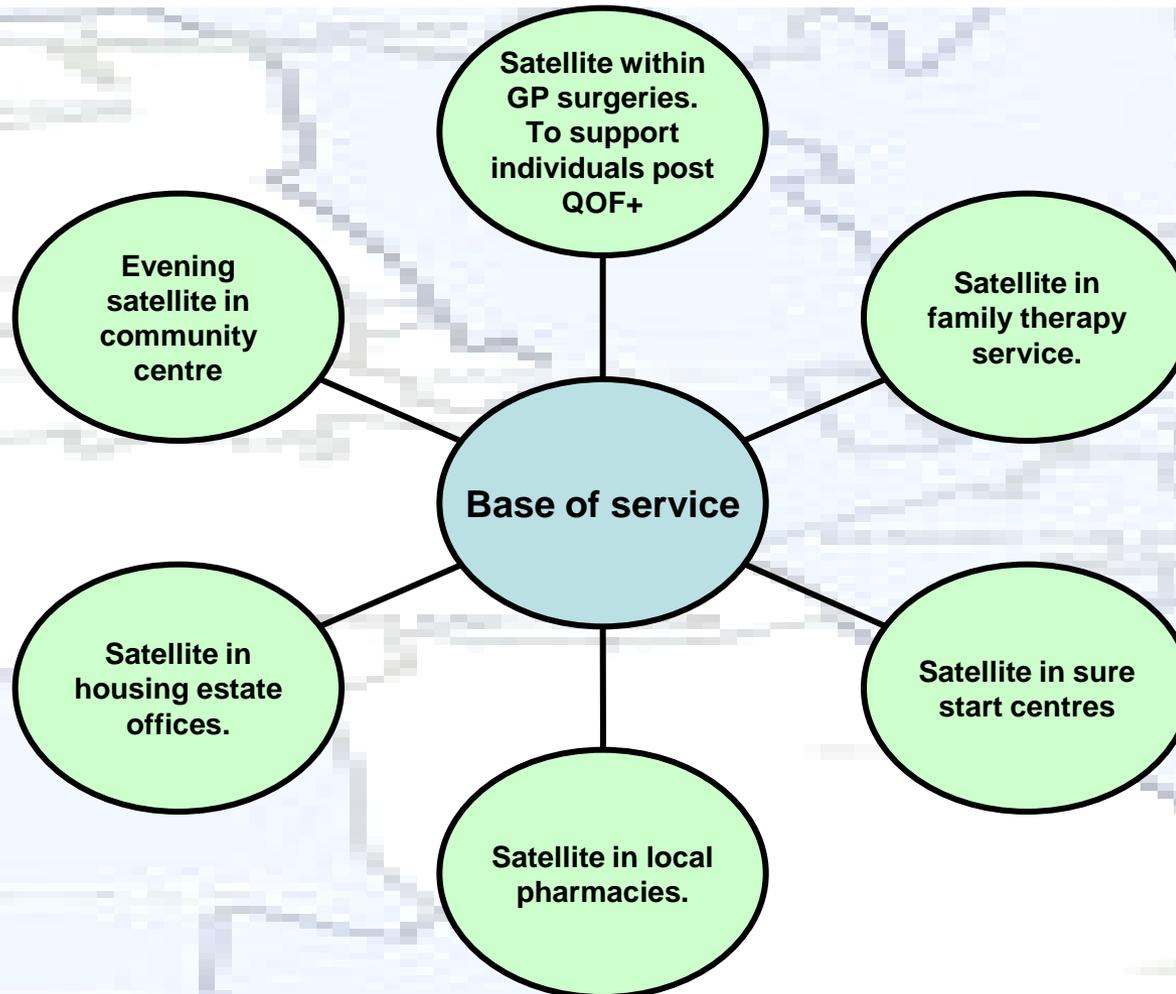
Community based low threshold alcohol intervention service.

OAAS.

Rationale

- DH estimates that H&F has
 - **35,976 Increasing Risk Drinkers,**
 - **9,938 Higher Risk Drinkers,**
 - 5,466 Dependent Drinkers
 - 23,799 Individuals binge drinking.
- Needs assessment and strategy outlined the need for further investment in alcohol services.
- DAAT was able to secure additional funding from NHS H&F in 2009 to expand the ANS role to ward liaison as well as A&E across both hospitals in H&F
 - IBAs in H&F:
 - QOF+ (Dec 08 to Dec 09)
 - 15785 patients screened
 - 2254 recorded as having a brief intervention
 - ANS (2009 Q1,2 and 3)
 - 984 SBIs delivered.
- Further funding in 2009 was agreed to procure for an Open Access Alcohol Service

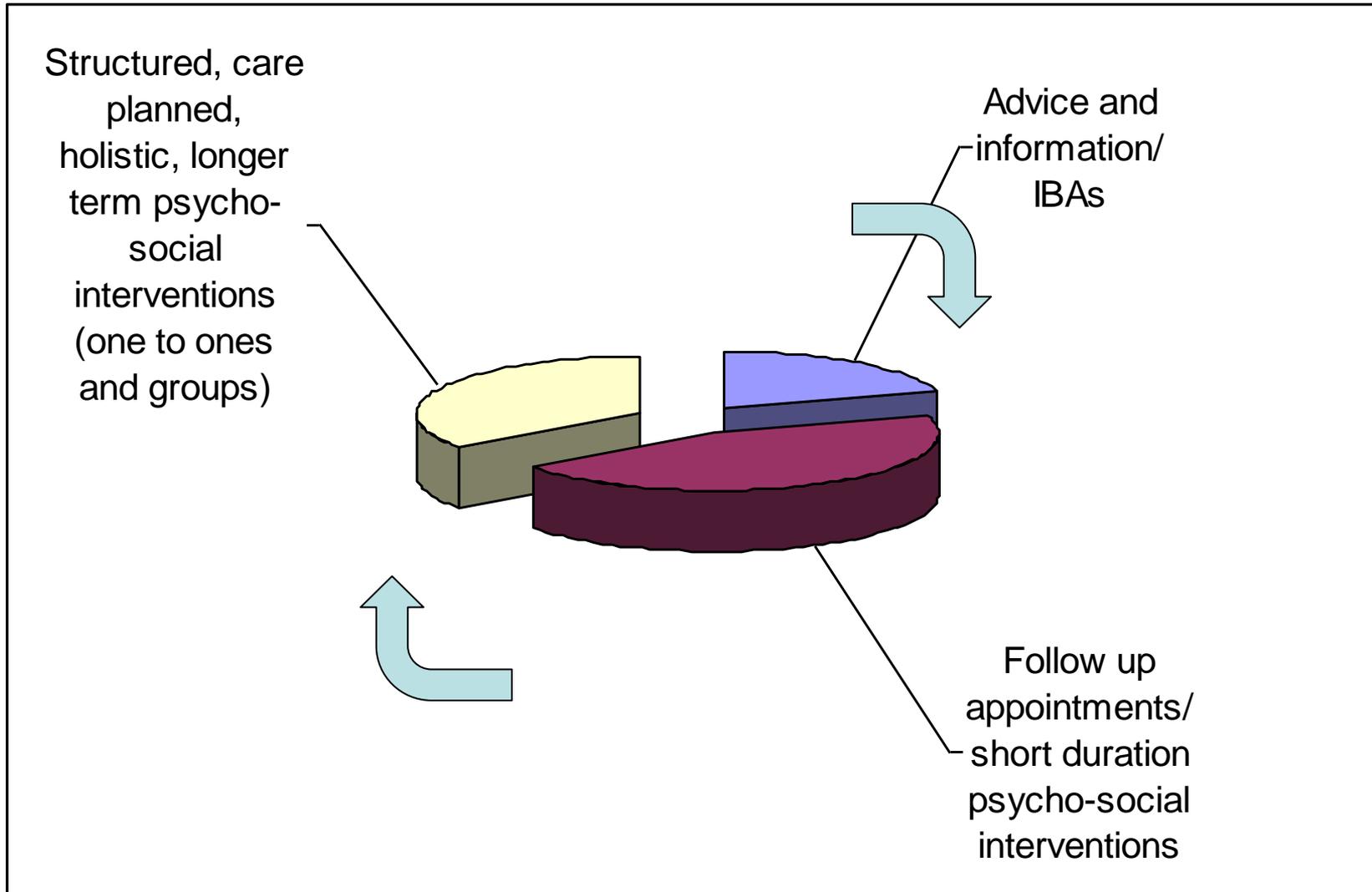
Model



Improved pathways and partnerships.



Interventions



Aspirations and Learning

- OP service has shown that engagement and partnership can be improved through an outreach model.
- Traditional “drop ins” are not an effective way of delivering interventions
- Service offers a degree of “walk-in” advice sessions but predominantly appointment led.
- Need to protect existing resources.
- Promotion of collaborative commissioning arrangements to support the stepped care approach.
- Model a stepped care approach to alcohol treatment.
- Use integrated treatment pathways to ensure the availability of the right treatment option for the service user
- Increasing focus on evidencing outcomes and impacts (outputs are no longer enough.)