



Results from the survey  
**IBA: Commissioning  
and delivery issues**

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# Survey aim

- Identify challenges and issues in delivering IBA
- Practitioners and alcohol leads/commissioners
- Ask respondents for views and suggestions
- Inform discussion today

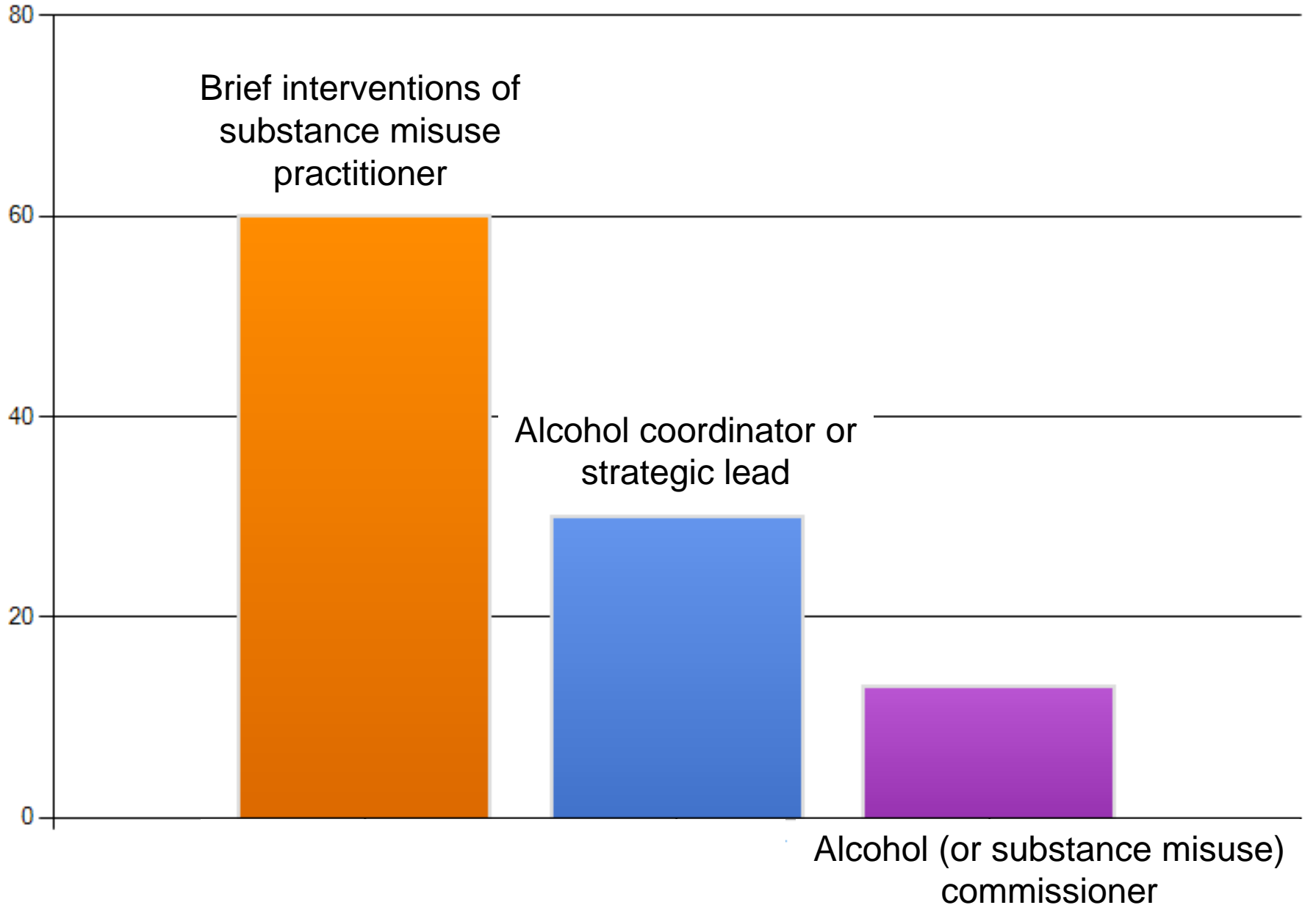


# Method

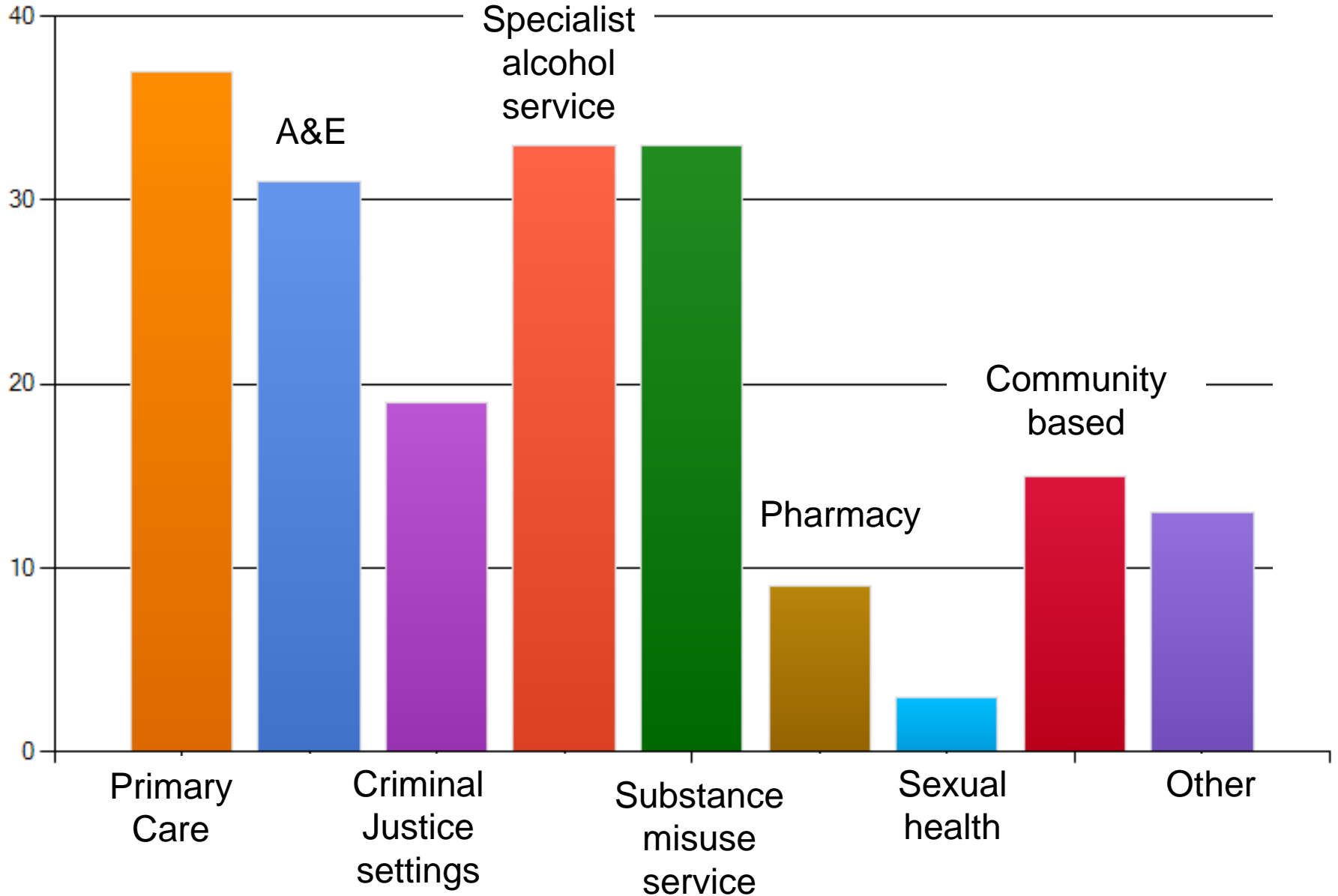
- Online survey
- December 2009 to February 2010
- Distributed via email
- Linked on Alcohol Policy UK and Alcohol Learning Centre
- 102 responses
- Mostly practitioner responses



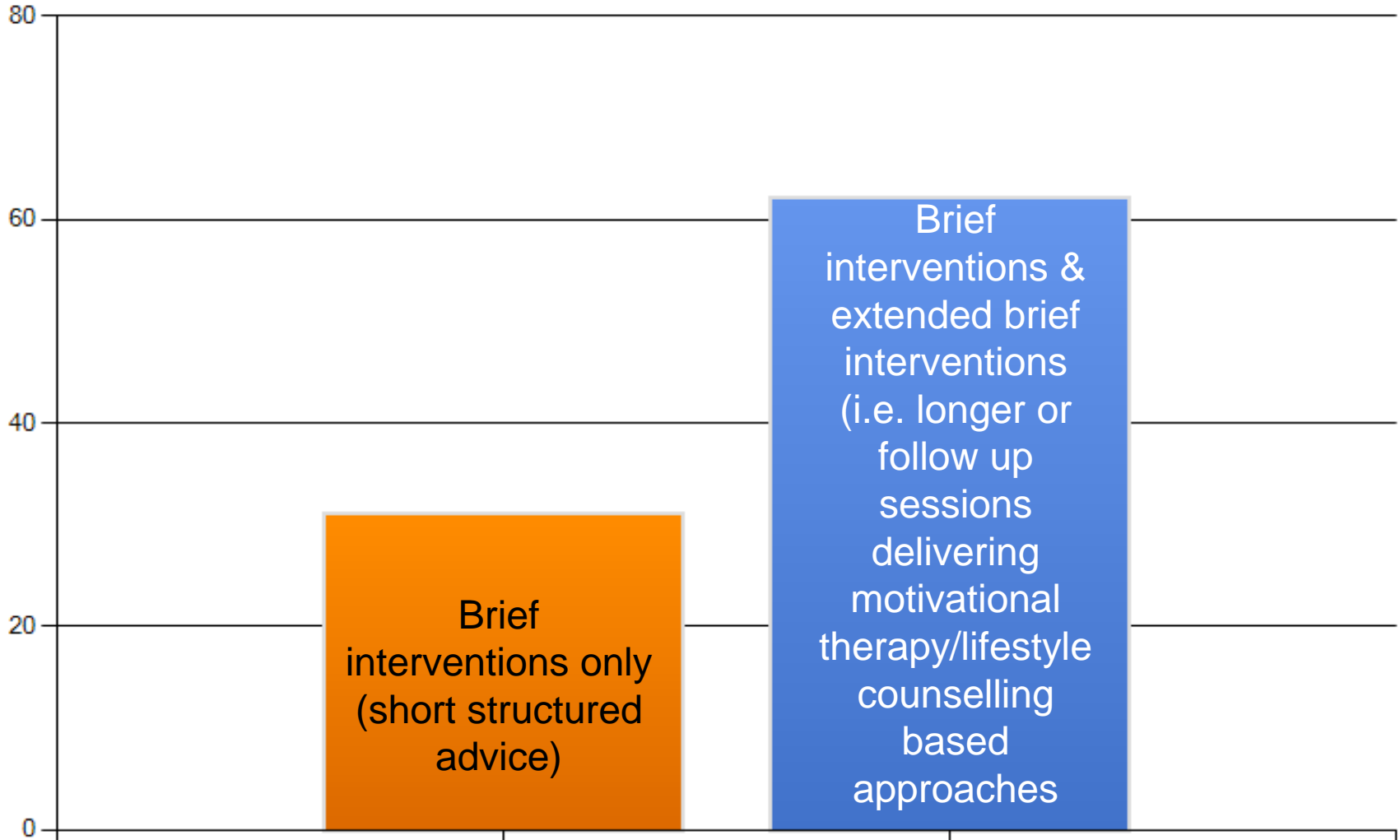
# What is your job role?



**What type of IBA/brief interventions service(s) are you involved in delivering or commissioning:**

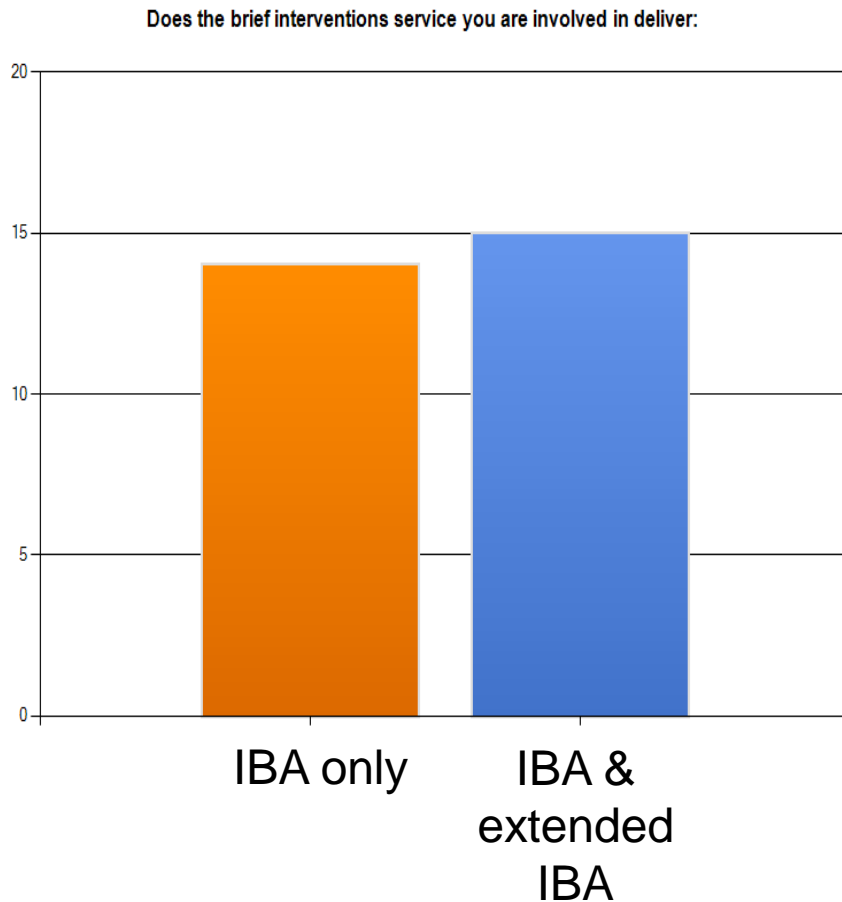


**Does the brief interventions service you are involved in deliver:**

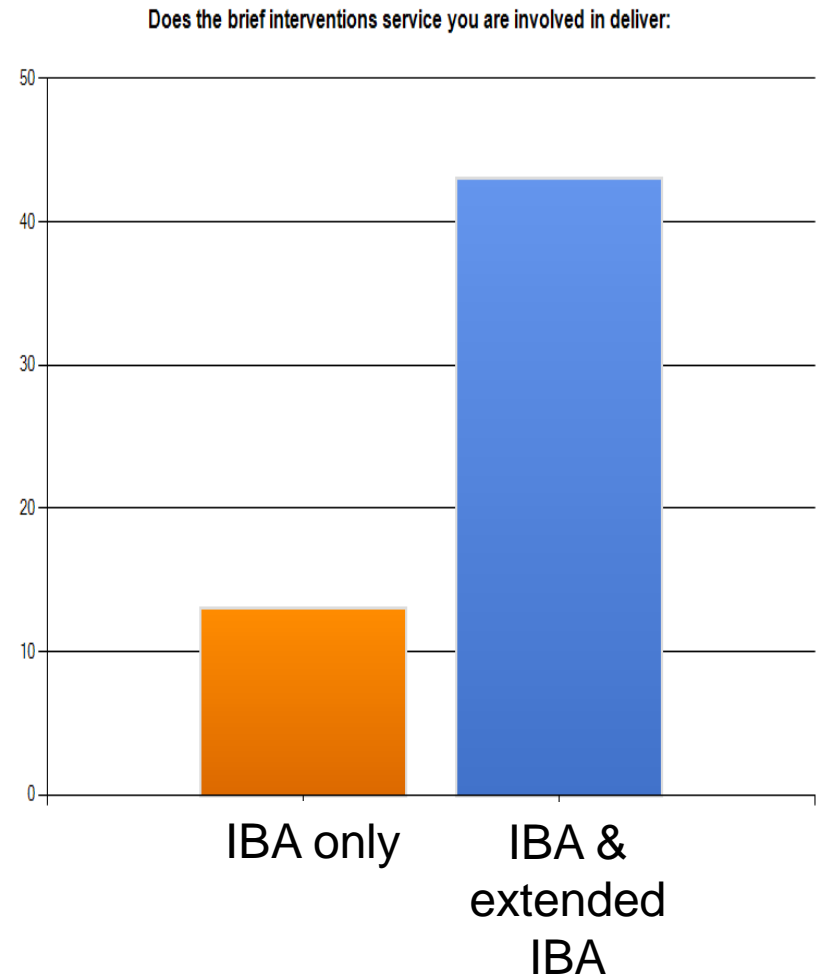


# IBA or extended IBA filter

- Alcohol leads/commissioners



- Practitioners



# Is extended IBA being delivered more than its commissioned?

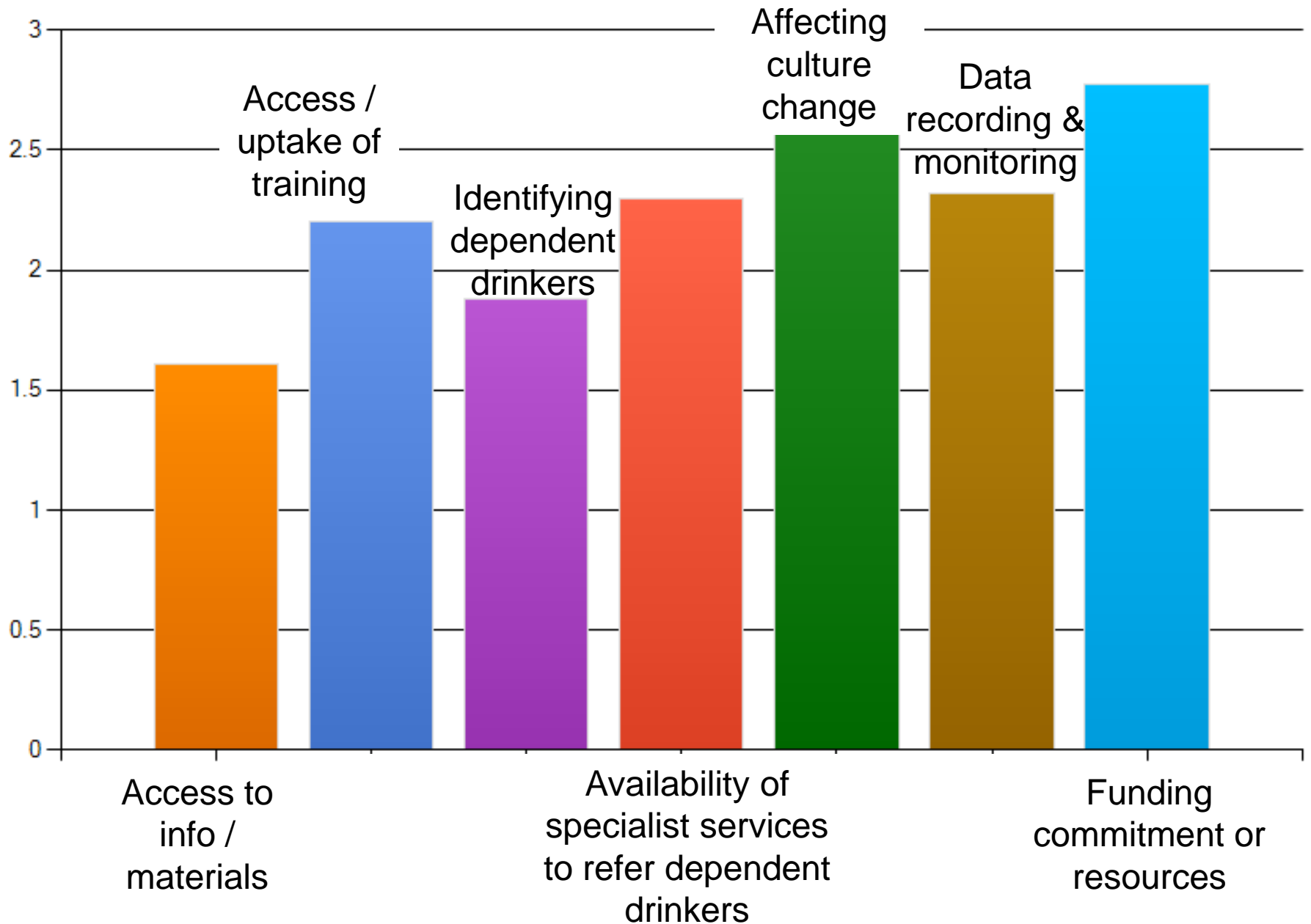
- Maybe – but 69% of practitioners completing the survey were from a drug/alcohol service (therefore probably already delivering ‘extended IBA’)
- However ‘extended brief interventions’ seems to be widely interpreted
  - *‘Extended brief interventions comprise a series of structured interviews (between three and twelve) in general or non-alcohol specialist settings’ MoCAM 2006*
- So, ‘extended IBA’? To be discussed later!



## IBA or Extended - comments/other (n13)

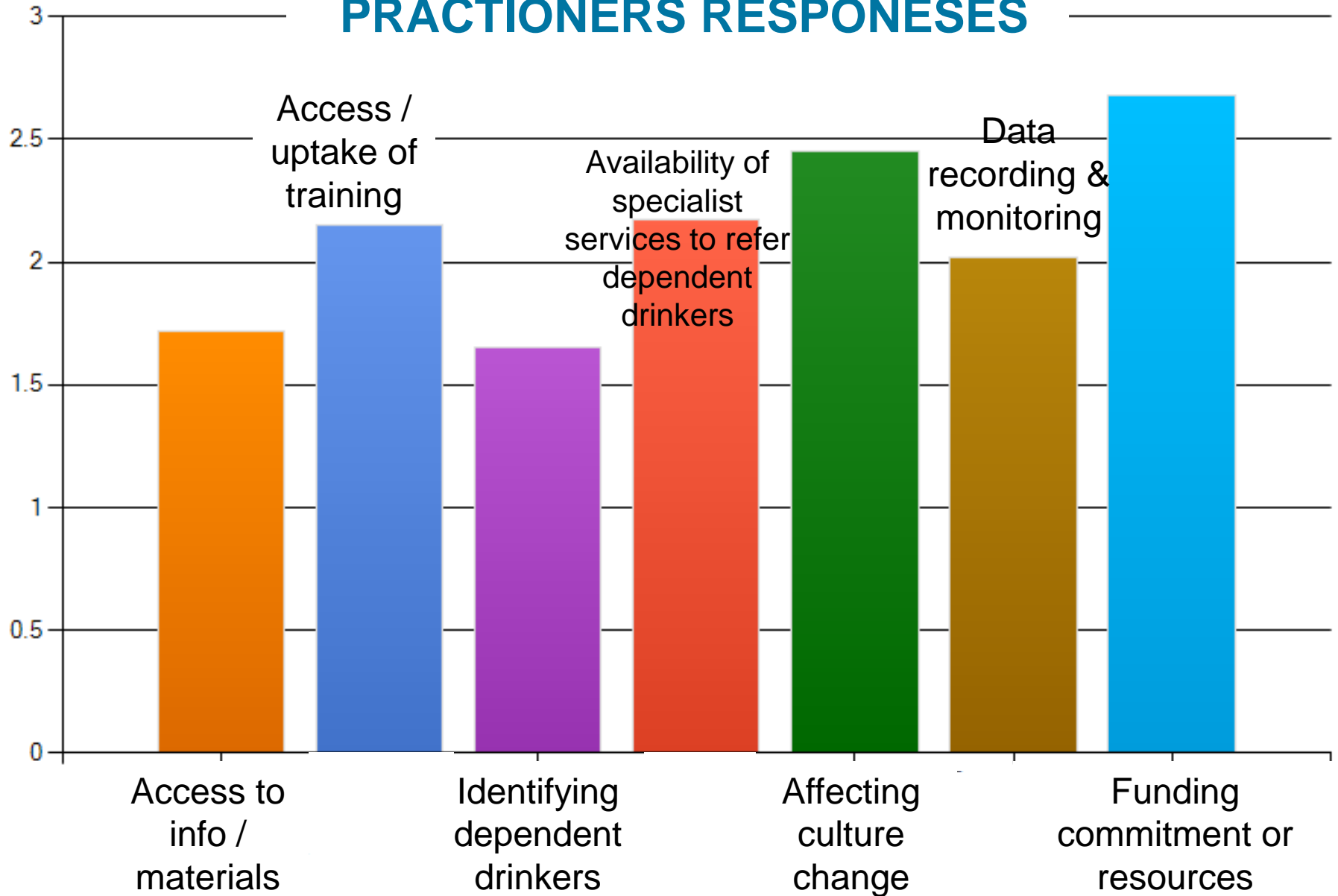
- *Both ...Offender managers experience in delivering screening and advice varies considerably*
- *relapse prevention / CBT*
- *Main role is as alcohol liaison nurse specialist within general hospital. Do detoxes and education*
- *wet hostel for entrenched drinkers with motivation to change*
- *I am involved in the delivery of services which offer both only IBAs and also IBAs plus longer term work*

Please identify any issues or challenges that have arisen in the delivery of your brief interventions service



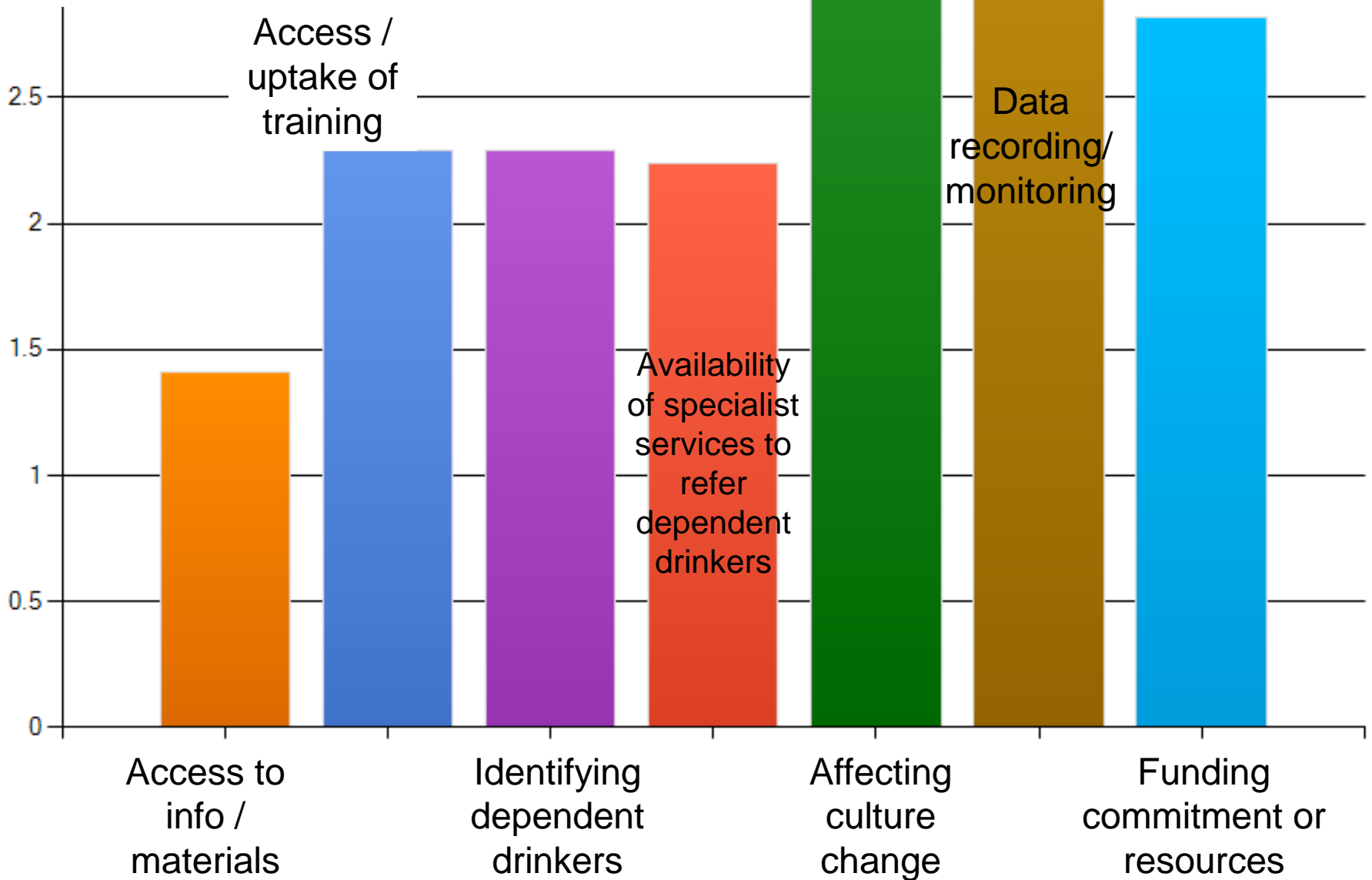
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## PRACTITIONERS RESPONSES



Please identify any issues or challenges that have arisen in the delivery of your brief interventions service

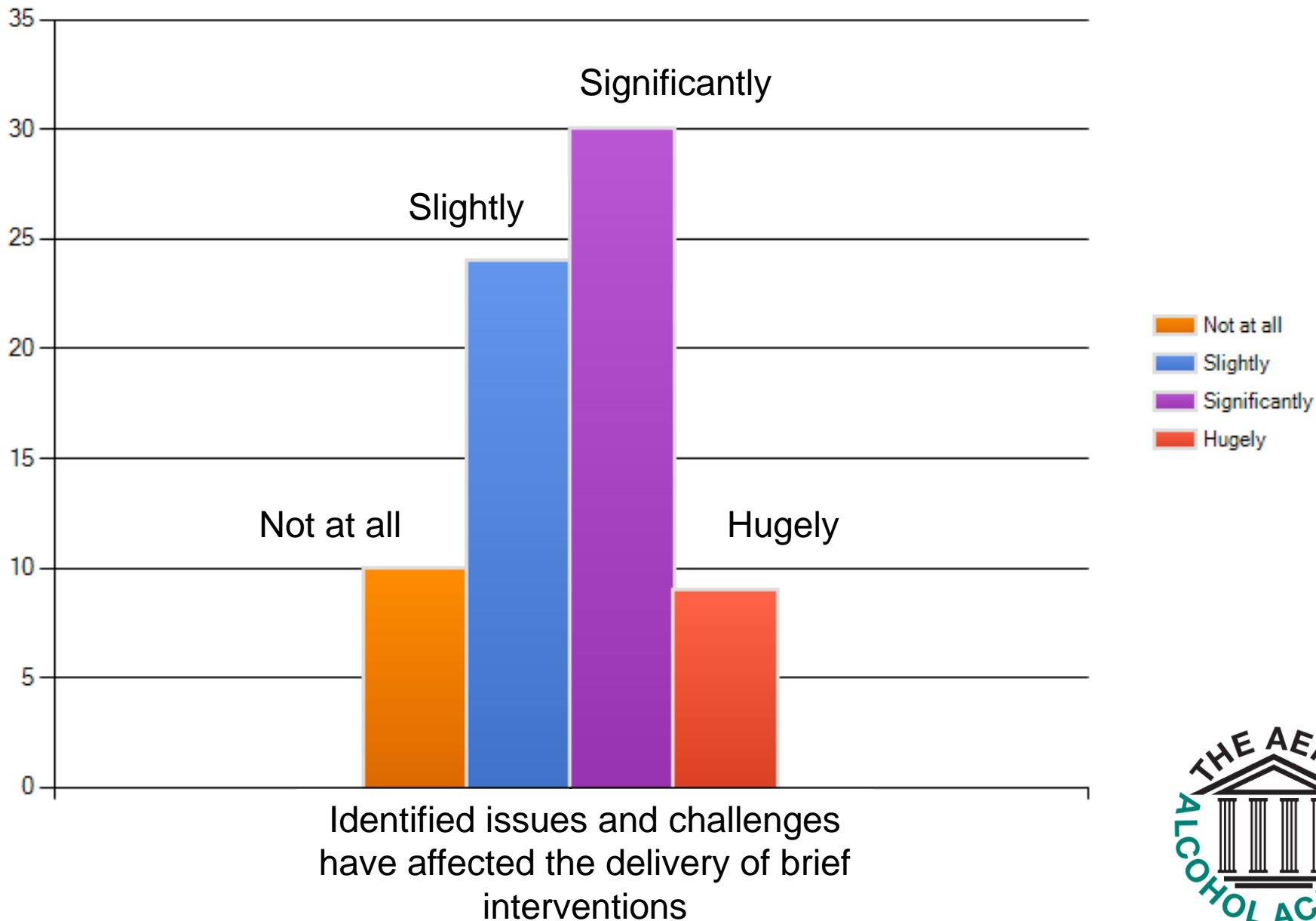
## COORD/COMMR RESPONSES



# Comments/other (n17)

- (Lots about funding!)
- *Lack of referrals from some GP practices*
- *Screening & BI for young people under 16 years*
- *Availability of detox and rehabilitation huge issue, extremely long waiting list*
- *Agreeing/acceptance of responsibility for delivery*
- *GPs misusing the DES (i.e. self complete screening ticks the box)*
- *Lack of integration with other council services*

**Do you feel any of these issues or challenges have compromised the effectiveness of the service(s) in delivering brief interventions to reduce hazardous or harmful drinking?**



# Comments/other (n13)

- *Acute staff in particular may not see the relevance or perceive time commitment too great*
- *Referrals are haphazard*
- *Initial interest is not maintained as its not seen as supported by the organisation i.e Hospital, Police*
- *GPs willingness varies*
- *Availability of staff who are skilled to deliver the training, without taking them away from the day job of delivering services*



# Can you identify anything that would help to address any of these issues? (n44)

- *In primary care - have a LES for Alcohol instead of a DES. Alcohol as part of QOF*
- *Portable private space to interview people!*
- *Make the training mandatory in health care settings*
- *Strategic buy in needed in Acute Care*
- *National directives and targets as used in Scotland*
- *Clearer and better provision of Tier 2 and 3 services*

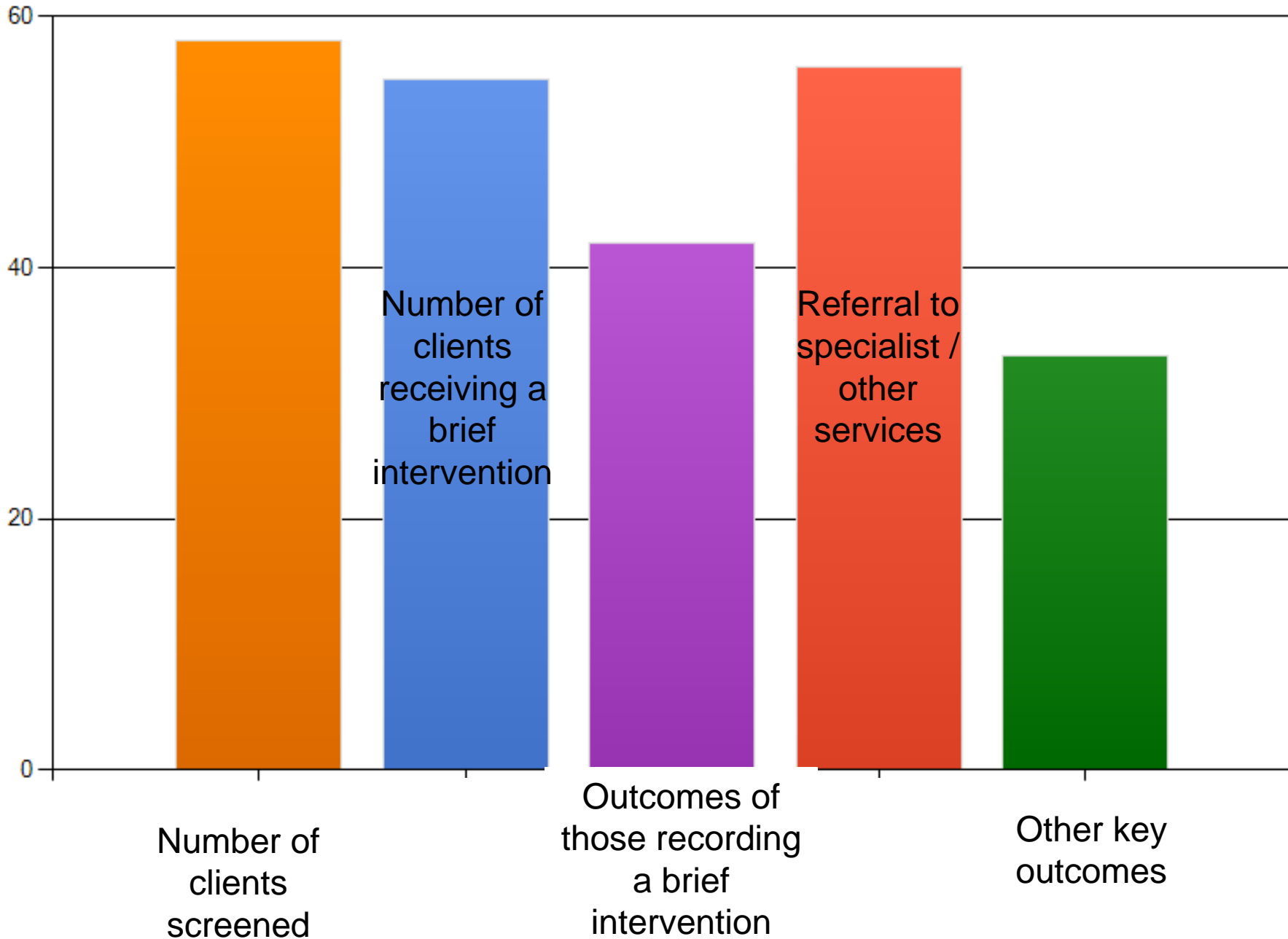


# Continued

- *[address] GP's lack of awareness of alcohol referral pathways*
- *Proper resources to refer patients onto - available in the community near to home*
- *GPs not delivering PHC based on payments only*
- *Industrial -scale IBA training to all front line staff and follow up services for dependent drinkers*



# Does your service record or monitor any of the following:



## Comments /suggestions for improving the delivery or commissioning of brief interventions services? (n22)

- *Current SBI must focus on validated research methods/tools to evaluate the service*
- *information sharing across all uk practitioners*
- *more training with the non alcohol services*
- *ensure [SBI] is a compulsory subject in health professional undergraduate curricula*
- *An understanding of the whole care pathway has been useful ... to identify gaps ... and facilitate conversations between providers at different points of the pathway*

# Further info & contacts

[www.alcoholacademy.net](http://www.alcoholacademy.net)

[www.alcoholpolicy.net](http://www.alcoholpolicy.net)

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