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► [A review of alcohol services for offenders in the North East region.](#)

North East Public Health Observatory.

North East Public Health Observatory, 2010.

Problem drinking offenders in north east England benefit from creative partnership working, but still this report baldly states that, "for 'alcohol only' prisoners, an alcohol care pathway does not exist"; low-level intervention in prison is followed by minimal support on release.

Summary This research arises from a requirement by the Department of Health for each English region to review alcohol services for offenders. With this in mind, the North East Public Health Observatory was commissioned to:

- undertake a review of alcohol services for problematic drinkers in the North East region;
- identify current provision for offenders within those services;
- map the needs of offenders in the community and in prison;
- identify service provision and needs based on gender and age differences;
- identify good practice; and
- identify gaps in service provision.

The work included face-to-face and telephone interviews with 10 prison staff and 24 staff in local services and a focus group of five problem drinkers who had been involved in the criminal justice system.

[Main findings](#)

Screening Alcohol arrest and court referral services provide an early entry point to alcohol treatment in many areas. In order to promote equity of access to interventions, consideration should be given to the implementation of arrest and court referral throughout the region. Most areas use identify risky drinking using the [AUDIT questionnaire](#) and the Offender Assessment System (OASys), except one which uses only OASys as they have not been able to implement community-based alcohol treatment. Most areas use an AUDIT score of 20 or more (indicative of possible dependence) as a trigger for being assessed for clinical intervention and/or an alcohol treatment requirement.

Access to alcohol awareness and personal development, social and life skills modules Across all areas, programmes such as Drink Impaired Driving, Addressing Substance Related Offending and the Alcohol Information Pack by the National Offender Management Service are used. However, the consistency of use of these resources is unknown in some areas. Additional courses, programmes and projects have been developed in some areas such as the You Turn Project for female offenders or women at risk of offending. Several areas run an Alcohol Specified Activities Requirement, an educational programme for offenders on community sentences.

Triage and comprehensive assessment of alcohol treatment needs Information regarding the need of an individual entering prison from the community for alcohol withdrawal treatment is provided informally and inconsistently to prison healthcare workers. Where two agencies are involved in assessing an offender for treatment, conflicting AUDIT scores have been known to occur.

Care planning There is a significant gap in care planning for prisoners between care coordination in prison and care coordination on release. For 'alcohol only' prisoners, an alcohol care pathway does not exist. Ultimately, problematic alcohol users would have had little in terms of education, low-level one-to-one support or psychosocial interventions while in prison, and will receive minimal support when accessing services on release.

Structured specific alcohol treatment programmes Community-based services across the North East provide structured alcohol treatment ranging from community detoxification programmes, residential rehabilitation, psychosocial counselling to structured motivational work. Clinical interventions for dependent drinkers largely meet the needs of those in prison. However, stakeholders agree that other provision for drinkers in prisons was not adequate to meet all their alcohol-related needs.

Access to formal peer support groups All areas have Alcoholics Anonymous groups: some have more scheduled meetings than others. In most areas criminal justice agencies are not directly linked to self-help groups. Information regarding Alcoholics Anonymous is available in most probation services. However, direct referrals are not made as it is felt that offenders should attend Alcoholics Anonymous of their own volition.

The authors' conclusions

In conclusion, this report highlights some of the excellent, productive and strong partnership working and commendable, innovative and creative practices within the North East, delivered by a professional and committed workforce. Nevertheless, it also identifies gaps in provision often affecting problem drinkers in general as well as offenders. In particular, care pathways between prison and community services need significant development in most areas.

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