

THE ASSESSMENT TOOL

A tool to describe the available services for the management of hazardous and harmful alcohol consumption¹ at the country or regional level

The aim of this instrument is to develop a comprehensive tool that can be used to describe the available services for the management of hazardous and harmful alcohol consumption at the country or regional level. It is not a tool that will be completed in one day or at one time; rather it is a tool that will be gradually completed over time, building up a detailed and sophisticated profile of the management of hazardous and harmful alcohol consumption. The aim of the tool is to identify currently what is going on, and to identify deficiencies or areas in the country that need further work and strengthening.

Within each country or region, it is suggested that one person is nominated for ensuring that the tool is completed and returned.

It is suggested that the tool is completed by country or regional coalitions or partnerships that are set up to support the development of services for managing hazardous and harmful alcohol consumption. If no such coalition or partnership exists, it is suggested that a coalition is formed, with its first task to complete the tool. The tool can also be completed through meetings with individual experts. The tool can be divided into separate sections for different experts to complete. Certain questions require opinion or expert judgement; in this case, consensus can be achieved at meetings of coalitions or partnerships.

The tool:

- Provides a baseline description of services for managing hazardous and harmful alcohol consumption, identifying areas where services may require development or strengthening;
- Provides a mechanism for monitoring service provision over time;
- Allows sharing of information and examples of practice; and
- Provides a mechanism for coalitions or partnerships to discuss and have a shared view on services for managing hazardous and harmful alcohol consumption.

¹ Hazardous alcohol consumption is a level of consumption or pattern of drinking that is likely to result in harm should present drinking habits persist. Harmful drinking is defined as 'a pattern of drinking that causes damage to health, either physical or mental'.

Completion of the tool²

It is preferable that you complete the tool electronically as a word document.

Within the tool there are text boxes. Just place the cursor in the text box and type. (Pressing the tab key moves you from box to box). You can also cut text from other documents and paste them into the text boxes. There are no limits to the size of the text boxes.

Within the tool, there are check boxes. Just place the cursor in the check box that you want to mark and left click the mouse. If you want to correct the check box, just left click the mouse again.

Where you see **[Document Reference]** in the Assessment Tool, please provide the information listed below using this PHEPA Document Reference Template, one for each document. Please copy the closed blank form and then save the completed form with a file name in the format: PHEPAquestionnumbercountry.doc (no spaces). Example: PHEPA22.1Catalonia.doc. At the point where you see the relevant **[Document Reference]** in the tool, please insert the file name of this document.

Where you see **[Organization Reference]** in the Assessment Tool, please provide the information listed below using this PHEPA Organization Reference Template, one for each organization. Please copy the closed blank form and save this completed form with a file name in the format: PHEPAquestionnumbercountry.doc (no spaces). Example: PHEPA3.1Catalonia.doc. At the point in the tool where you see the relevant **[Organization Reference]** in the questionnaire, please insert the file name of this document.

Where data is not available, please do not collect or estimate it, but mark that it is not available. Where the answer is not known, please indicate this in the extra comments box that is placed after each question.

The timetable is that the tool should be completed and returned to Peter Anderson by e-mail by 30th September 2008: peteranderson.mail@gmail.com. It is preferable to return the tool if it is 75% to 80% completed, rather than waiting for it to be 100% completed.

If you have any queries, please contact Peter Anderson by e-mail.

² The tool was first developed in 2004 by Peter Anderson. It has been revised for the European Commission funded PHEPA Project, with assistance from the partners of the Project.

If completing for a region, please state when the answers apply for the country and not the region

THE ASSESSMENT TOOL

**A tool to describe the available services for the management
of hazardous and harmful alcohol consumption at the country or regional level**

Please cross the box, place a cross in the table or type your answer where indicated.

PART I

Personal details of contact person for completion of tool

Name: Nick Heather

Organization and position: Northumbria University, Emeritus Professor of Alcohol & Other Drug Studies

Address (name and number of street, postal code, town): Division of Psychology, Northumbria University, Newcastle upon Tyne, NE1 8ST, UK

Telephone: +44 191 227 4521

Fax: +44 191 227 3190

Email: nick.heather@northumbria.ac.uk

Website: <http://www.northumbria.ac.uk>

Country: England

If you are answering for a jurisdictional³ region rather than a country as a whole, which jurisdictional region is it?

Please note: unless you state otherwise in the tool, it will be assumed, if you are completing the questionnaire for a jurisdictional region other than a country, that all your answers are for this jurisdictional region.

Population size of the country/region: 51,092

Date of completing the tool (dd-mm-yy): 25-09-08

³ Such a jurisdictional region could be a region within a country or a municipality

If completing for a region, please state when the answers apply for the country and not the region

Is there a country-wide or region-wide formal or informal coalition or partnership that deals with the management of hazardous and harmful alcohol consumption?

Yes

No

If yes:

What is the name of the coalition? Alcohol Concern

When was it established? 1984

Please describe the aim of the coalition in one sentence: Alcohol Concern is the national voluntary organisation on alcohol misuse with the principal aims of reducing the incidence and costs of alcohol-related harm and increasing the range and quality of services for people with alcohol-related problems.

NB Although the promotion of brief interventions for hazardous and harmful drinking is within its remit, Alcohol Concern has a much wider focus than this, i.e., the reduction of alcohol-related harm by whatever means. Further, it is impossible to list all the members of Alcohol Concern; these number well over 700 organisations offering services for people with alcohol problems

If completing for a region, please state when the answers apply for the country and not the region

PART II

A. COMMUNITY ACTION AND MEDIA EDUCATION

1. Have there been public education campaigns implemented in your country or region in the past 24 months in the listed media that provide information about why heavy drinkers should reduce their alcohol consumption (e.g., the harm done by alcohol) and that provide information on how to reduce their alcohol consumption (e.g., you don't need do it alone, effective help is available, etc.) If so, were they publicly funded?

	Provide information about <u>why</u> heavy drinkers should reduce their alcohol consumption	Provide information on <u>how</u> to reduce their alcohol consumption	Were the campaigns publicly funded		
	If yes, please tick box	If yes, please tick box	Fully	Partial	No
Television	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspapers and magazines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Billboards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please add any extra comments here Since October, 2006 there has been a joint Department of Health and Home Office mass media campaign urging young drinkers to know their limits and stay within them. The advertising campaign uses television ads, posters and a Know Your Limits website to get the message across that too much alcohol actually makes you vulnerable, even while it makes you feel tough." See <http://www.alcoholpolicy.net/2006/10/know_your_limit.html>. Earlier this year, under the same title of "Know Your Limits", the Department of Health introduced a campaign to help members of the public to accurately calculate the numbers of units in alcohol beverages. In addition to mass media promotion, this campaign involves website jointly funded by the alcohol industry <<http://www.alcoholissues.co.uk/portman-group-drinkaware.html>>. Lastly the Department of Health has just launched a social marketing campaign aimed at reducing the alcohol consumption of 35+ regular excessive drinkers. This involves various media, including an alcohol screening website, a telephone helpline and widespread distribution of a self-help booklet.

If completing for a region, please state when the answers apply for the country and not the region

C. HEALTH CARE INFRASTRUCTURE

Integrated health care system

2. To what extent on a scale from 0 to 10, would you say that the management of hazardous and harmful alcohol consumption is integrated in the health care system, including co-operation or relationships between primary health care and secondary health care, similar to that for other chronic diseases such as hypertension or diabetes?

Not at all						Fully				
0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please add any extra comments here The Government has recently made a concerted attempt, using a variety of methods, to "mainstream" the management of hazardous and harmful consumption in the health care system. This has resulted in considerable improvements in the response to alcohol-related harm but there is still some way to go before full integration could be claimed, mainly because of difficulty in finding effective ways to incentivise medical and other professions for this work.

If completing for a region, please state when the answers apply for the country and not the region

Structures for quality of care

3. For each topic in the table, is there a formal governmental organization, or organization appointed or contracted by the government that:

	Yes	No	If yes, please provide filename for organizational reference (and complete organization reference template)
3.1. Has the responsibility of preparing clinical guidelines for managing hazardous and harmful alcohol consumption?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PHEPA3.1England.doc
3.2. Monitors health outcomes at the population level from managing hazardous and harmful alcohol consumption?	<input type="checkbox"/>	<input type="checkbox"/>	PHEPA3.2England.doc
3.3. Monitors the quality of care provided for managing hazardous and harmful alcohol consumption?	<input type="checkbox"/>	<input type="checkbox"/>	PHEPA3.2England.doc
3.4. Reviews the cost effectiveness of interventions for managing hazardous and harmful alcohol consumption?	<input type="checkbox"/>	<input type="checkbox"/>	PHEPA3.1England.doc
3.5. Reviews the safety of pharmacological treatments for managing alcohol dependence?	<input type="checkbox"/>	<input type="checkbox"/>	PHEPA3.3England.doc
3.6. Provides information on managing hazardous and harmful alcohol consumption to health care providers?	<input type="checkbox"/>	<input type="checkbox"/>	PHEPA3.4England.doc

Please add any extra comments here

If completing for a region, please state when the answers apply for the country and not the region

Research and knowledge for health

4. Is there a **formal** research programme for managing hazardous and harmful alcohol consumption with specifically allocated funding from governmental, government appointed or non-governmental organizations (excluding the pharmaceutical companies and the alcohol industry)?

- Yes, from governmental organizations
- Yes, from government appointed organizations
- Yes, from non-governmental organizations
- No

Please add any extra comments here

The Department of Health and the Home Office have funded a large cluster randomised controlled trial (SIPS/ Trailblazer Project) "to test how best to use a variety of models of screening and brief intervention (SBI) in primary and secondary healthcare settings, focussing particularly on value for money and mainstreaming". The 3 settings involved are primary health care, accident and emergency services and criminal justice services. Funding is currently £3.8 million, 6-month follow-up results will be available in 2009 and 12-month follow-up results in 2010. In addition to this funding, a range of organisations (eg, Wellcome Trust, Alcohol & Education Research Council) continue to fund research on alcohol SBI.

5. To what extent on a scale from 0 to 10, would you say that education on managing hazardous and harmful alcohol consumption is formally part of the curriculum of undergraduate/basic professional training of the following health care providers?

If completing for a region, please state when the answers apply for the country and not the region

Pharmacy students											
Undergraduate/ basic professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Postgraduate professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continuing medical education	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social worker students											
Undergraduate/ basic professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Postgraduate professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continuing medical education	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychology students											
Undergraduate/ basic professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Postgraduate professional training	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Continuing medical education	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please add any extra comments here All these numbers are sheer guesswork since the relevant information is not available. By the way, continuing education for psychologists etc. is not "medical" education!

If completing for a region, please state when the answers apply for the country and not the region

Health care policies and strategies for managing hazardous and harmful alcohol consumption

6. Are there official written policies on managing hazardous and harmful alcohol consumption from the Government or Ministry of Health? Please mark all that apply:

- Yes, a governmental written stand alone policy on managing hazardous and harmful alcohol consumption
- Yes, a governmental written policy on managing hazardous and harmful alcohol consumption which is part of an overall alcohol policy or strategy
- No, but there is a governmental policy on managing hazardous and harmful alcohol consumption in preparation
- No, there are no governmental policies on managing hazardous and harmful alcohol consumption

If yes,

Please give filename for document reference: PHEPA6.0England.doc
(and complete document reference template)

Please add any extra comments here In 2006, the Department of Health published guidance to commissioners and treatment providers on the provision of treatment for alcohol misusers and SBI was prominent in this guidance (National Treatment Agency for Substance Misuse, Models of Care for Alcohol Misusers, Department of Health, London). Also, in 2005, the Department of Health published "Alcohol Misuse Interventions: guidance on developing a local programme of improvement." This contained "practical steps to improve screening and brief interventions for hazardous and harmful drinkers and treatment for dependent drinkers." The extent to which this guidance has been implemented is unknown.

7. If available, the governmental policy on managing hazardous and harmful alcohol consumption includes:

If completing for a region, please state when the answers apply for the country and not the region

	Yes	No
A strategy on training for health professionals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A national funded research strategy for managing hazardous and harmful alcohol consumption	<input type="checkbox"/>	<input checked="" type="checkbox"/>
A strategy to support interventions by primary care professionals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive support for managing alcohol dependence in specialised treatment facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please add any extra comments here Research is mentioned in Safe, Sensible, Social, including the SIPS project and other government funded projects or intentions but this does not amount to a national funded research strategy. Similarly, treatment for alcohol dependence is covered in the renewed national strategy but this hardly amounts to "intensive support" for such treatment.

If completing for a region, please state when the answers apply for the country and not the region

Structures to manage implementation within health services

8. Is there an identified person within the Department of Health or Government, or who is contracted by the Department of Health or Government, who oversees or manages services for hazardous and harmful alcohol consumption?



Yes

No

Please provide his/her contact details:

Name: Don Lavoie

Organization and position: Department of Health

Address: Room 628 Wellington House, 133-155 Waterloo Road, London SE1 8UG

Telephone: +44 20 7972 4793

Email: Don.Lavoie@dh.gsi.gov.uk

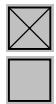
Website: http://www.dh.gov.uk/en/ContactUs/ContactDetailsList/DH_066346

Please add any extra comments here Other members of the Alcohol Policy Team at the Department of Health could have been listed, eg, Clive Henn.

If completing for a region, please state when the answers apply for the country and not the region

Funding health services and allocating resources

9. Is there government funding for services for the management of hazardous and harmful alcohol consumption?



Yes



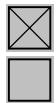
No

If no,



Funding is being prepared

10. Is the amount of funding reviewed from time to time?

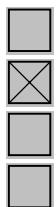


Yes



No

If yes,



Annually reviewed



Reviewed every 2 to 5 years



Reviewed every 5 years or longer



Other (please specify):

Please add any extra comments here A relatively small amount of funding was made available to Primary Care Trusts (PCTs) for alcohol SBI but it is widely accepted that this funding was often diverted to other areas or to reduce budget deficits. Attempts to have alcohol SBI included in the Quality & Outcomes Framework (QoF), which would mean that primary care services would be paid for this work in the same way they are for smoking cessation advice, have so far been unsuccessful. PCTs have been able if they wished to fund alcohol SBI as part of a National Enhanced Service in the General medical Services (GMS) contract but few appear to have taken this up. Just recently, the Department of Health has announced an agreement between NHS Employers and the GPs Committee of the British Medical Association to include alcohol among 5 new "Clinical Directed Enhanced Services" as part of the GMS Contract. In the specification for this DES, it is stated that practices will be paid for delivering alcohol SBI among newly registered patients. While this is to be welcomed, it is unlikely to be as effective in promoting alcohol SBI as including it in the QoF.

If completing for a region, please state when the answers apply for the country and not the region

11. Is a proportion of alcohol taxes specifically earmarked or allocated (this means hypothecated) to fund the costs of services for managing hazardous and harmful alcohol consumption?

Yes

No

12. If yes, please state the proportion:

13. If yes, is the money raised from the tax actually spent on the costs of services for managing hazardous and harmful alcohol consumption?

Yes

No

14. Is the proportion of tax allocated for services for managing hazardous and harmful alcohol consumption reviewed from time to time?

Yes

No

If yes,

Annually reviewed

Reviewed every 2 to 5 years

Reviewed every 5 years or longer

Other (please specify):

Please add any extra comments here Hypothecation is anathema to the Treasury which blocks any attempts to introduce it.

If completing for a region, please state when the answers apply for the country and not the region

D. SUPPORT FOR TREATMENT PROVISION

Screening, quality assessment, referral and follow-up systems

15. To what extent on a scale from 0 to 10, do you consider that the following screening and support systems are available for **primary health care providers** in managing hazardous and harmful alcohol consumption?

Availability of:	Not at all										Fully	
	0	1	2	3	4	5	6	7	8	9	10	
Screening instruments to identify at risk drinkers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Case notes or computer records to record alcohol risk status	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Protocol charts or diagrams as an aid for managing hazardous and harmful alcohol consumption	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Support by facilitators or advisors for managing hazardous and harmful alcohol consumption	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Systems to follow-up patients for monitoring and advice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								

Please add any extra comments here All these things are fully available to providers but whether they are adequately accessible is a different question.

If completing for a region, please state when the answers apply for the country and not the region

Protocols and guidelines

16. Are there multidisciplinary clinical guidelines for managing hazardous and harmful alcohol consumption in your country/region that have been approved or endorsed by at least one health care professional body?



Yes



No

If yes:



Stand alone guidelines for managing hazardous and harmful alcohol consumption



Part of other clinical care guidelines (e.g. mental health guidelines)

If yes, please provide filename for document reference(s): PHEPA16.0England.doc
(and complete document reference template(s))

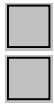
If no:



Guidelines are being prepared

Please add any extra comments here

17. If there are endorsed clinical guidelines for managing hazardous and harmful alcohol consumption, have there been any studies in your country on their implementation or adherence?



Yes



No

If yes, please provide filename for document reference(s):
(and complete document reference template(s))

If no:



Studies are being prepared

If completing for a region, please state when the answers apply for the country and not the region

Please add any extra comments here The SIPS research project (see above) is using an SBI pack very similar to How Much Is Too Much? and will report on acceptability to providers, adherence and extent of implementation.

18. Are the following health care providers reimbursed for managing hazardous and harmful alcohol consumption, or is the management of hazardous and harmful alcohol consumption within their terms of service (contract) and part of their normal salary?

	Reimbursed for managing hazardous and harmful alcohol consumption	Managing hazardous and harmful alcohol consumption within terms of service and part of normal salary		
	Yes	No	Yes	No
General practitioners	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nurses working in general practice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Doctors in hospital	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nurses in hospitals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pharmacists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dentists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Addiction specialists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please add any extra comments here Special payment for alcohol SBI, where it exists, is made to primary care practices, not individual practitioners, although practitioners obviously benefit indirectly from this payment. Although it may not always or even often be carried out, managing hazardous and harmful alcohol consumption just technically come within the terms of service of medical practitioners and other health care professionals.

If completing for a region, please state when the answers apply for the country and not the region

19. For the following professional groups, are there specialized guidelines or protocols, a written policy on managing hazardous and harmful alcohol consumption by the professional association, training for managing hazardous and harmful alcohol consumption within professional vocational education and training for managing hazardous and harmful alcohol consumption within accredited continuing medical education?

For the following professional groups, are there the following for managing hazardous and harmful alcohol consumption:								
	Specialized guidelines or protocols		Written policy on managing hazardous and harmful alcohol consumption by professional association		Training for managing hazardous and harmful alcohol consumption within professional vocational training		Training for managing hazardous and harmful alcohol consumption within accredited continuing medical education	
	Yes	No	Yes	No	Yes	No	Yes	No
General practitioners	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nurses in general practice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nurses in general hospitals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Specialist nurses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pharmacists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Midwives	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Psychiatrists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Obstetricians	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Addiction specialists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please add any extra comments here Training for managing hazardous and harmful alcohol consumption is probably available for most of the professions but whether or not it is taken up is a different question.

If completing for a region, please state when the answers apply for the country and not the region

E. INTERVENTION AND TREATMENT

Availability and accessibility

20. On a scale from 0 to 10, to what extent do you think that patient help for hazardous and harmful alcohol consumption is obtainable (obtainable means that patients can get the help) in the following settings?

Help is obtainable from:	Not at all										Fully	
	0	1	2	3	4	5	6	7	8	9	10	
General/family practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hospital clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Specialist clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Addiction services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please add any extra comments here

If completing for a region, please state when the answers apply for the country and not the region

F. HEALTH CARE PROVIDERS

Clinical accountability

21. To what extent do you estimate on a ten-point scale that the following health care professionals consider advice for hazardous and harmful alcohol consumption as part of their routine clinical practice?

Advice is routine in clinical practice:	Not at all										Fully	
	0	1	2	3	4	5	6	7	8	9	10	
General practitioners/ Family doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Nurses working in general practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Midwives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If there are any publications on this topic, please provide the filenames for the document reference(s) and complete the document reference template(s):

Please add any extra comments here

If completing for a region, please state when the answers apply for the country and not the region

Treatment provision

22. Have there been any studies, surveys or publications on the following or similar outcomes in primary health care (general practice/family practice) in your country or region, and if so, what are the main findings of the most recent results?

	Date of information Please write NO, if information not available	Main findings	Please provide filename for document reference (and complete document reference template, one for each document)
Patients are asked or screened about their alcohol consumption	2005	The General Practice Research Database (GPRD) study found extremely low levels of formal identification, treatment and referral of patients with alcohol use disorders by general practitioners (GPs). GPs tended to under-identify younger patients with alcohol use disorders compared with older patients.	PHEPA22.1Engl and.doc
Patients with hazardous or harmful alcohol consumption are given advice	2005	See above.	PHEPA22.1Engl and.doc
Advice meets quality criteria	No		
Practice protocols and guidelines are followed	No		

If completing for a region, please state when the answers apply for the country and not the region

The effectiveness of interventions for hazardous and harmful alcohol consumption	2006	<p>Opportunistic brief interventions delivered to hazardous and harmful drinkers in primary health care are effective in reducing alcohol consumption to low risk levels.</p> <p>The public health impact of widespread implementation of brief interventions in primary health care is potentially very large.</p> <p>NNT for alcohol brief interventions in primary health care is about 8 and this compares favourably with advice to quit smoking.</p> <p>Brief interventions in primary health care are equally effective among men and women</p> <p>Brief interventions in primary health care are effective among older adults.</p>	PHEPA22. 2England.d. doc
The cost effectiveness of interventions for hazardous and harmful alcohol consumption	2006	Brief interventions delivered opportunistically are cost-effective compared to no interventions	PHEPA22. 2England.d. doc

If completing for a region, please state when the answers apply for the country and not the region

The use of the AUDIT questionnaire	2008	The full 10-item Alcohol Use Disorders Identification Test (AUDIT) should be the gold standard for screening tools but, within routine consultations, a shortened version of the AUDIT should be used. Among shortened version of the AUDIT, practices felt most positive about the AUDIT-C and, in particular, the FAST as pre-screening tools. The AUDIT could also be administered as part of a population-led data collection exercise;	PHEPA22.3England.doc
The attitudes of health care providers to managing hazardous and harmful alcohol consumption	2005	A quantitative survey conducted with a sample of 424 GPs in England showed a higher level of awareness of alcohol use disorders than the GPRD study or earlier surveys.	PHEPA22.1England.doc

If completing for a region, please state when the answers apply for the country and not the region

Increasing the involvement of health care providers in managing hazardous and harmful alcohol consumption	2007	It was agreed to develop and use two levels of BI: simple structured advice (simple BI) and brief behavioural counselling (extended BI). Simple BI, needing only a few minutes to deliver, should be offered to all patients screening positive for hazardous or harmful alcohol consumption. Extended BI, taking 20–30– minutes and often involving repeat consultations, should be offered to harmful drinkers, those who have failed to respond to simple BI and patients who wish to discuss their alcohol consumption further.	PHEPA22.3England.doc
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Please add any extra comments here A recent Cochrane systematic review carried out in England by Kaner and colleagues reached similar conclusions to the NTA review cited above [PHEPA22.2England.doc] except that SBi was not found to be effective specifically among women. Reasons for this difference in findings are unclear. With regard to increasing the involvement of health care providers in the management of hazardous and harmful alcohol consumption, the findings of the SIPS project (see above), when they become available, will provide important information on this issue.

If completing for a region, please state when the answers apply for the country and not the region

G. HEALTH CARE USERS

Knowledge

23. Have there been any studies, surveys or publications that provide answers for the following or similar information concerning hazardous and harmful alcohol consumption and if so, what are the main findings of the most recent results?

	Date of information Please write NO, if information not available	Main findings	Please provide filename for document reference (and complete document reference template, one for each document)
People know that hazardous and harmful alcohol consumption can be dangerous to their health	No		
People know about effective methods to reduce hazardous and harmful alcohol consumption	No		

Please add any extra comments here Although there may have been local surveys to address these two issues, there is no national data. Evaluations of the Government's "Know Your Limits" campaign and the social marketing campaign among older harmful drinkers may throw light on these questions.

If completing for a region, please state when the answers apply for the country and not the region

Help seeking behaviour

24. Have there been any surveys, studies, or publications which provide information on the proportion of hazardous and harmful alcohol users who have ever used one of the following methods to reduce their alcohol consumption and if so, what are the main findings of the most recent results?

	Date of information Please write NO, if information not available	Main findings	Please provide filename for document reference (and complete document reference template, one for each document)
Help from a doctor	1996	A household survey in England by OPCS published in 1996 found that, of current and former drinkers who had spoken to a medical practitioner or other health professional in the last year, only 7% (men = 12%; women = 5%) reported having discussed alcohol consumption with their GP at the surgery	PHEPA24.0England.doc
Help from a nurse	No		
Help from a pharmacist	No		
Help from a dentist	No		
Help from friends or family	No		
Advice from the Internet	No		
Specialist clinic	No		
Self-help group	No		
Help line telephone service	No		
Willpower alone	No		

If completing for a region, please state when the answers apply for the country and not the region

Please add any extra comments here The data on help-seeking from medical practitioners are clearly out-of-date and there is still no reliable information on other avenues or forms of help-seeking. Again, this information may become available, in part, if and when the Government attempts to evaluate the effects of recent mass media campaigns aimed at reducing alcohol-related harm.