

The Probation Service's Response to the scrutiny review into alcohol-related hospital admissions.

**Recommendation No. 25**

**The Probation Service lower the threshold for ATR referrals to 20+ in line with the National Offender Management Service guidelines and the recommendation from the Department of Health National Support Team.**

**The Probation Service develop Alcohol Specified Orders by April 2011.**

Response

A review of Alcohol Treatment Requirements (ATRs) across Hampshire Probation Trust has recently been undertaken, including looking at the threshold score for ATR referrals. The review report is currently been written up and it is anticipated that its recommendations will be considered in the next two weeks.

We are also currently looking at how best to design and commission a Specified Activity Requirement for offenders whose assessment score is below that of an ATR. Again we will be in a position to take this forward once outcome of the above review is known.

Sarah Beatie.  
Offender Management Director  
(Portsmouth & IOW)

South Central Ambulance Service's Response to the scrutiny review of alcohol-related hospital admissions.

**Recommendation 21**

**That improvements be made by the ambulance and police services to the way that information is recorded and collated to provide the evidence base for dealing with alcohol-related incidents.**

**These services provide monthly data relating to incidents in night time economy areas to the Safer Portsmouth Partnership.**

Whilst we welcome the report's findings, it is extremely difficult for the Ambulance Service to provide accurate data surrounding the involvement of alcohol in incidents to which we attend.

As you can appreciate the Ambulance Service attends many incidents which could be deemed as alcohol related and these vary from incidents in which the patient/victim is directly in drink, incidents where the perpetrator may be in drink and the victim may not, incidents of a driving nature, which again may result in casualties other than the person involved with drink. These are just examples of the variety of calls, and to provide accurate data for all stakeholders we would need to work as a

group to be very specific in what we need to record as this has a bearing on what is reported and to what level as this may remain as a personal record for an individual.

As I have shared with you in the past the Ambulance Service is generally data rich, however, when it comes to the recording of specific incidents, often we will find that one topic covers a variety of calls. We will be happy to work with you and our other partners to establish a precise data set for the future, with information that we can share outside of our confidentiality clause.

Hopefully this is of some assistance and I look forward to hearing the thoughts from the working group on how we can progress this in the future.

Neil Cook  
Head of Operations, East Hampshire  
South Central Ambulance Service NHS Trust