

BLUE LIGHT PROJECT YEAR 1

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*Working with
treatment resistant
drinkers*



The Police
and Crime
Commissioner
for Lincolnshire



BLUE LIGHT PROJECT – YEAR 1

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What is Blue Light?

The perception exists that if a problem drinker does not want to change, nothing can be done to help until the person discovers some motivation. This message has been repeated many times over the years and is still heard frequently. As a result of a one size fits all approach to tackling problematic drinkers our county (and country) has 94% of its problematic drinkers not engaged in treatment.

The Blue Light Model which has been developed by Alcohol Concern identifies the need to work with those drinkers outside of a treatment setting and ensuring the clients other needs are met. For example someone who is a blue lighter might also be homeless, unemployed and be estranged from their family. The Blue lighter would not necessarily see their drinking as the most important of their problems to address often because their drinking is how they self-medicate to cope with their other more pressing issues. The Blue Light style of working would look to remedy their lack of housing, support them to get benefits, keep their appointments and over time look to rebuild relationships with family and friends. Blue Light aims to ensure the foundations for the person are in place and as stable as can be before even looking to tackle the alcohol abuse.

'94% of problematic drinkers not engaged in treatment'

Blue Light in Lincolnshire

The focus of this project is the 'Blue Light' clients those higher risk and dependent drinkers who are not only treatment resistant but are also placing a significant burden on emergency services such as the Police, EMAS and A&E.

In Lincolnshire the Blue Light Project is commissioned by Safer Communities (LCC) and the Police and Crime Commissioner with equal contribution being made by each. The funding goes towards Training provided by Alcohol Concern and the Blue Light Outreach worker Project which is provided by NACRO.

The Blue Light Project Lincolnshire has a three pronged approach to tackling those treatment resistant drinkers:

1. Training; for all professionals who may come into contact with Blue Light clients on how to administer Information and Brief Advice (IBA).
2. Blue Light Engagement Groups (BLEG) are multi-agency meetings where those in the community causing a high level of alcohol related disorder are presented and the group produce a plan which will steer the Blue Light client closer towards tackling their drinking and preventing further negative impact on society. This is done by agencies identifying barriers and removing them through a planned package of support. Partners include police, local council, housing, health, Addaction and the outreach team if their client is being discussed.
3. Blue Light Outreach Worker Project; works with those identified by Police data as frequent users of their service as a result of their alcohol misuse. The outreach worker will work

closely with the client and put together an action plan to address all the clients issues such as housing, financial and health with the aim of reducing the impact these clients have on emergency services and increasing the chance of the client entering and engaging in a meaningful way with treatment services.

Year 1 Results:

Training:

During 2015/ 2016, 19 Blue Light Training sessions were delivered in Lincolnshire, 372 professionals were trained including 7 at train the trainer level. Professionals included police, social services, P3, Addaction, LPFT, and local Community Safety managers.

Feedback from professionals

'great training, very knowledgeable, very helpful and interesting trainer'

'good course very informative'

'I found this highly informative and interesting and will be using these techniques in my work'

You can find the Blue Light Manual here which supports this training:

<https://www.alcoholconcern.org.uk/blue-light-project>

'372 Professionals have been Blue Light Trained'

Blue Light Engagement Groups (BLEG)

Lincoln's successful 'Street Drinking Engagement Group' incorporated those considered blue lighters regardless of whether they were 'street drinking', this meant opening up the criteria to anyone drinking causing problems for the local community. The group still works well to bring partners around the table and resolve issues with this problematic client group.

Spalding, North Kesteven and West Lindsey also have successful BLEG's which they hold alongside or independent to the Vulnerable Adults Panel (VAP). The success of these groups relies on partner engagement at the meetings and cases being brought to the meeting for action planning.

Boston and East Lindsey have attempted to form a functioning BLEG but have struggled to get the cases for discussion as many fall within their ASB group criteria. However if in the future the group is identified as being needed it can be supported to set up again.

Blue Light Outreach Worker Project

Over the year 46 referrals into the Blue Light Outreach project were made. Of those 29 referrals fell within the first 6 months of the project year and of those 10 cases had engaged for 6 months and 5 cases had engaged for 3 months. We looked initially at a sample of those who had engaged for 6 months following referral on to the project in our evaluation. A sample of 7 people of those who had been worked with for a minimum of 6 months was looked at by the analyst. Overall this sample demonstrated a 66% decrease in police incidents.

The table below shows the number of police incidents involving each individual 180 days before they were adopted by Nacro and 180 days after:

Client	Incidents 180 days (6 months) before adoption	Cost of Police Incidents 180 days before intervention	Incidents 180 days (6 months) after adoption	Cost of Police Incidents in the 180 days after intervention
Ben* (*not real name)	44	£11,748	8	£2,136
Gary*(*not real name)	33	£8,811	18	£4,806
D	14	£3,738	8	£2,136
L	9	£2,403	4	£1,068
A	5	£1,335	1	£267
T	8	£2,136	1	£267
A	4	£1,068	3	£801
C	16	£4,272	1	£267
Total (excluding A)	128	£34,176	43	£11,481

Notes:

- 'A' died 60 days after adoption, and so has not been counted in the final total. Ben* died 181 days after adoption, so has been counted in the final total.
- Cost – Is based on 1 police officer in attendance and no arrest made. Does not include Ambulance costs or A&E costs - **Alcohol Concern average estimates for a police call out.**

Please note this is a small sample due to the time it would take to carry this process out for all referrals. Some cases were not suitable for this process due to anomalies such as incarceration points, moving out of area and time engaged being less than 6 months. A further more detailed look at all those referred is being considered but hasn't yet taken place due to analytical capacity.

Case studies

Client: Gary* (*Not real name)

Incidents:

- Before: 33 (180 days before intervention)
- After: 18 (180 days after intervention)

Percentage decrease: 45.5%

Background

Since receiving custodial sentence in January 2012 for two and half years for making threats to kill, causing a danger to road users, common assault and witness intimidation between September and December 2011. Gary has alternated between rough sleeping; living in poor quality private rented accommodation provided by rogue landlords and supported accommodation.

Gary is bi-sexual and has prostituted himself to fund his alcohol abuse. He has been in an abusive relationship with a female who has mental health and alcohol issues. They've been many reported incidents with regards to this relationship, one where the female hit Gary in the head with hammer which lead to Gary being hospitalized and possibly links to his current health issues.

Referral to Blue Light

P3's Street Outreach Team verified Gary as a rough sleeper and secured Gary a room in a supported accommodation project around the same time he was referred to the Blue Light Project in Jan 2016. We gathered the relevant information for Gary and contacted the project that Gary was living to set up a meeting. We met with Gary a couple of times however staff were resistant to our involvement stating that they were supporting Gary and they failed to see what we could provide, claiming they were more that capable of dealing with his issues. The Blue Light Project was happy to leave his support to the team.

Gary was sexually inappropriate with both other residents and staff, culminating in an incident which led to Gary claiming he had been sexually assaulted by another resident. After an investigation, no charges were brought against the individual. Shortly after this Gary was evicted for ASB due to his drinking. Gary returned to rough sleeping. No agency was made aware of this eviction.

The Street Outreach Team intervened again when Gary was found rough sleeping in Lincoln in March 2016. Street Outreach was aware of our previous involvement. Specialist Outreach Team (SOT) contacted us and we re-opened Gary's referral. Gary was accommodated under a duty by East Lindsey District Council (ELDC) and our service started working intensively with him whilst in Temporary Accommodation.

Our main concern was to try and stop ELDC discharging their duty, due to Gary's ongoing drinking and subsequent ASB.

There were complaints from neighbour's and numerous incidents involving his partner. By now a safeguarding referral had been made as there was evidence that Gary's partner had been financially exploiting him. There was also an injunction in place barring Gary from having contact with his partner's husband and an incident in the street with her husband led to Gary being put in a motel over a weekend. Thus ELDC discharging duty after that weekend, we referred Gary to a 'Nacro'

project in Boston who thankfully accommodated him immediately. It was agreed before the more that ELDC would provide an exit, assisting with funds for private rented if Gary could sustain his place at Nacro without incident.

Where we are now

There has been little change in Gary's behavior and a clear pattern has emerged. Gary can abstain from alcohol for up to 10 days when his finances are low however when paid he binge drinks and his behavior is very problematic. However the intense work from the keyworkers is helping to reduce his impact on blue light services as some of his most essential needs such as helping to maintain housing and general support are being met by the project.

Client: Ben* (*Not real name)

Incidents:

- Before: 44 (180 days before intervention)
- After: 8 (180 days after intervention)

Percentage decrease: 82%

Ben has become a frequent flyer (repeatedly attending hospital emergency services when in alcohol) and regular caller of 999 Blue light services including police and ambulance. Often attendees to his home following a 999 call would find Ben making threats to self-harm and talking about how lonely he is all whilst in drink. Ben has previous convictions for breach of the peace and disorder all whilst in drink. A marker was placed on the property after aggressive behaviour towards ambulance staff leading to all ambulance call outs requiring police to be in attendance.

Ben was in poor health often complaining of pins and needles in his legs, being unsteady on his feet and requiring a taxi to the shop which was a 5 minute walk away. Ben's diet was poor only consuming a quarter of an adult sized meal a day whilst consuming 12L of Frosty Jacks cider every day (89 units per day).

Ben had piles of unopened mail including bills and his house was cluttered (hoarding). Whilst financially stable (work pension) his daughter was financially abusing him regularly taking his pension money. His daughter herself homeless (although would frequently stay) was also battling addiction to opiates. Ben had one associate for company but otherwise was lonely. This associate however was also financially abusing Ben to the point where the local post office where Ben would regularly visit raised concerns. Ben did not see this as financial abuse.

Blue Light Intervention

Ben was spoken to about his regular phone calls to the emergency services and the impact it could have on those who really need the service. A new phone support system was implemented where Ben would have a security device around his neck in case of falls or concerns about his wellbeing. This made Ben feel safer knowing he could pull it and someone would speak to him over the loudspeaker on his phone to check he was okay. Ben was also given the Nacro 24/7 helpline if he ever wanted to talk or needed some support.

Clear that Ben was in poor health physically and mentally the Blue Light worker opened all mail with Ben and responded to letters and arranged payments for outstanding bills and set up direct debits to prevent future bills mounting up. This helped to reduce the stress Ben had been feeling about unpaid bills.

The BL worker arranged for a GP home visit where blood tests were done and he was told he was malnourished and taken in to hospital for 5 days and detoxed. On return home he continued to drink but reduced to 9L of Frosty Jacks cider per day and 67 units compared to the previous 12L a day. DART were contacted and a worker came to Ben and discussed looking to reduce alcohol use further despite being treatment resistant. Blue Light worker then assisted Ben in to a routine of having breakfast and dinner every day and taking vitamins and mineral prescribed by the GP using an alarm system as a reminder. Ben also began drinking tea in the mornings instead of cider first thing.

BL worker continued to have regular visits with Ben and ensure appropriate referrals were made to services, appointments were attended and other partners were advised on the BL 'roll with resistance' techniques in order to get the best outcomes for Ben.

A referral was made to the fire service regarding the hoarding and a gradual plan was made with the BL worker to start clearing walk ways within the property.

A referral was made by the BL worker to adult social care and someone was assigned to his case. The BL worker formed a 'team around' partnership to discuss his needs and ensure all partners were communicating their activity with Ben.

The End

Towards the end Ben had managed to reduce his alcohol consumption to 6L of Frosty Jacks from the original 12L through implementing support for all the chaos Ben was experiencing. Unfortunately Ben died due to his poor physical health from years of alcohol misuse whilst BL were working with him. BL worked with him for 6 months and had made significant improvements to his life and reduced the impact he was having on the emergency services quite significantly. Unfortunately Ben's health was damaged beyond repair from years of alcohol abuse and he died shortly after 6 months of Blue Light support being given.

Feedback from clients

Client M

"I'm currently engaging with the blue light project. I have found their services very helpful in my current situation. Both Bridget and Pippa have always been there when I needed them. I find them very approachable, easy to talk to and find their support valuable in my recovery."

Client P

"They have given me the most support I have ever had. If it wasn't for Bridget I would still be sat at the Cathedral homeless, drunk I maybe would even be dead. They have given me a new lease of life. Brilliant support"

Feedback from Professionals

Emma Waters - Domestic Abuse Coordinator and Safeguarding Officer

"They have been brilliant when we have had a query – the work that they are doing with the person who has been highlighted for the project is already showing changes to the negative behaviours and in the support they offer him, having long term intervention is going to be key in keeping him well and him managing to sustain a tenancy, control his drinking and helping him to feel part of a community. They work very hard in understanding their clients and supporting them to make changes towards better health and wellbeing, in all aspects of their lives"

Sharon Walker – Framework Housing

"Many thanks for your support in working in partnership with framework to achieve successful outcomes for some of our most vulnerable people. We have achieved some positives with your help and intervention. You are a unique individual that understands the constraints of support have as a single agency."

Andy Balding – Lincolnshire Police (Lincoln) ASB Officer

"Bridget, Pippa and the rest of the team involved in the Blue Light Project have been doing some very good work in Lincoln with our 'change-resistant' drinkers. Most, if not all, of these problematic individuals have been on the Police 'radar' for several years and I have been involved in applying to the Courts for enforcement options to try and protect the victims of their behaviour. It is clear to me that Bridget and the team are extremely dedicated to help these people. They work tirelessly to provide the support that is necessary to help keep them out of trouble and to tackle their addiction, despite all the difficulties associated with this particular client group. I've noticed a marked improvement in the behaviour of many of the individuals that the team has engaged with up to this point in time.

The Police fully support the Blue Light Project. It fills a large void that no other services provide."

Jonny Goldsmith - Operations Manager P3 - People Potential Possibilities

"Too often we expect clients to adapt to meet the needs of services, rather than services adapting to meet the needs of clients. Therefore, it's been refreshing to work with a service (Blue Light) that not only recognises the challenges of working with those who have multiple and complex needs, but reacts accordingly. Their proactive approach, flexible way of working and willingness to work in partnership to solve complex problems has enabled some of our very challenging clients, to not only access support services, but crucially to do so in a timely manner."

Joanne Smith – Senior Housing Officer

"We have a very good working relationship with the Blue Light Project.

We deal with Bridget and her service on a regular basis, assisting with rehousing clients both in the private sector and through the Authorities stock.

We deal with chaotic clients in need of support and accommodation across the City who are not always easy to assist, however we work well together to get the best outcome for the client."

Mark Johnson – ARC Manager DS West DIU

We have been working closely with Blue Light (Bridget/Pippa) in relation to an ARC client who is profiled on both schemes.

There has been and still is regular liaison in relation to working together to give the client the best opportunity to rehabilitate.

Blue light have been very open to collaborating to manage the client assisting with funding options, progressing accommodation requests and safeguarding the client amongst other tasks.

Blue light have attended ARC meetings and have become an essential part of the ARC partnership focus.

Media Coverage

[Blue Light Project](#) – August 2015

[ITV News Feature on the Blue Light Project](#) – December 2016