LANCASHIRE CONSTABULARY SUBMISSION TO THE 2013 HERMAN GOLDSTEIN AWARD FOR EXCELLENCE IN PROBLEM-ORIENTED POLICING
Alcohol is too often a pre-cursor and catalyst for crime and disorder in Blackpool in addition to creating health and safety issues in the wider community. People suffering the effects of excess alcohol consumption frequently find themselves becoming a victim or perpetrator of alcohol related crime or disorder.

A range of data sets available from the police, ambulance and hospital demonstrated a clear need to develop a new intervention. 15% of all recorded crime in Blackpool takes place in the Night Time Economy (NTE) which constitutes 37% of all of the town’s violent crime. On a peak Saturday night over 80% of Accident and Emergency (A&E) visits were alcohol related predominantly originating in the NTE. Before the initiative was implemented there were between 75 and 150 A&E attendances every Saturday night between 8pm on a Saturday and 8am on the Sunday. This violence and attendance in turn contributes to one of the highest rates of alcohol related hospital admissions in England and the highest rate of alcohol related deaths in England.

Blackpool has developed a Night Safe Haven facility which operates in the town centre and supports the reduction of crime and/or anti-social behaviour (ASB) by offering immediate time, support and free water for rehydration to:

- people in a safe space in the town centre that allows them an opportunity to rest and recuperate ensuring they do not become vulnerable and thus improving their chance of a safe passage out of the town centre
- potential perpetrators of violence.

The facility incorporates:

- a mobile police station to deal with reports of crime and to take statements from victims and witnesses
- a St. John Ambulance treatment centre to assess minor injuries
- North West Ambulance Service (NWAS) with paramedics available to treat patients at the scene as well as referring cases to hospital
- nurses offering support to those using the facility
- a bus providing a rest area for those in need with access to free water, foil blankets, condoms and safe disposable footwear
- advice in relation to alcohol/drug use and sexual health.

Summary

Alcohol is too often a pre-cursor and catalyst for crime and disorder in Blackpool in addition to creating health and safety issues in the wider community. People suffering the effects of excess alcohol consumption frequently find themselves becoming a victim or perpetrator of alcohol related crime or disorder.
The Night Safe Haven brings partner agencies together to provide a ‘one stop shop’ for those experiencing difficulties on a night out, providing:

- safeguarding to reduce vulnerability
- early intervention to reduce incidents of alcohol related violent crime.

As a result, the Night Safe Haven has:

- reduced ASB and violent crime
- strengthened relationships between the public services and the wider community.
Blackpool’s problems

Blackpool town centre has over 400 licensed premises, consisting of 175 hotels, 106 restaurants, 29 off licence premises and 84 pubs and clubs. The pub and club premises alone cater for 60,000 people at any one time via vertical drinking establishments. The entire town has a high concentration of licensed premises compared to other areas nationally with a total of 180 off-licenced premises and 1,900 on-licenced premises.

Blackpool town centre plays host to a vast amount of holiday makers and locals alike who visit the resort to utilise the late night bars and clubs. Blackpool’s late night economy is sustained by large numbers of people who are attracted by the sale of alcohol and or the attractions that are offered.

As the UK’s “Stag and Hen Party Capital” Blackpool suffers high levels of binge drinking and faces additional issues that in many cases people who visit the resort come to Blackpool with the sole intention of ‘getting drunk’.

Blackpool has the UK’s poorest record of alcohol related health and hospital admissions and with this in mind it is noted that added pressures are faced by A&E’s medical team at Blackpool Victoria Hospital as well as the Ambulance Service who transport patients.

Problematic Street Drinking is also a significant issue and has a detrimental impact on the fear of crime amongst both residents and visitors. Emergency services report spending a disproportionate response time during weekend evenings dealing with alcohol fuelled violence, injury, sickness and crime. Saturday evenings and early Sunday morning were identified as peak times for anti-social behaviour, violent crime and hospital accident and emergency admissions.

Many of the problems in Blackpool stemmed from the harm caused by alcohol. A significant focus was being given to address the deprivation which leads to increased crime and poor health outcomes for residents. However the problem within the NTE involved both local residents and significant numbers of visitors.
In summary, alcohol related violent crime and ASB in Blackpool predominantly fall into three main areas:

- Town Centre and NTE
- Youth alcohol related ASB in the neighbourhoods
- Problematic Street Drinking.

How did we identify the problem?

Tackling violent crime and ASB within the NTE was a priority for the Police, Community Safety Partnership, and other emergency services and was often the focus of local residents, visitors and the local and national media.

The impact on the emergency department of the hospital at weekends was significant both in terms of admission rates and waiting times. Many patients attending the hospital emergency department required police supervision due to the threat they posed to other patients and hospital staff. The fears of hospital staff were highlighted by the media and raised concerns that the threat posed to hospital staff was significant.

The Community Safety Partnership drew together a working sub-group to assess the impact the night time economy was having on the emergency services and levels of violent crime and anti-social behaviour. The focus around developing a problem solving approach centred on increasing the safety, health and wellbeing of both residents and visitors. A NTE strategy was developed which focused on two key elements:

- early intervention
- safeguarding.
Analysis

Blackpool became a significant holiday destination of choice during the Victorian era, during which time the area developed a strong affiliation to alcohol. Post the 1960s transformation in holiday choice with more British residents choosing to travel to Europe the town fell in popularity and slowly the town became increasingly deprived.

Blackpool reinvigorated itself by developing a lively night time economy which became the location of choice for alcohol fuelled Stag and Hen Party groups. During the early part of this century, the vertical drinking establishments thrived and the associated increase in levels of violent crime and ASB was deemed to be a price worth paying. However more recently the problem had been too great and moves were put in place to address the harm being caused.

Erskine et al 2010 suggests “a clear association between alcohol related death and socio-economic deprivation”. Blackpool has the highest level of alcohol related mortality in the country. It is the most deprived local authority in Lancashire and one of the worst in England and Wales having deteriorated from 18th place in the 2007 Index of Multiple Deprivation to 10th in 2010. There is a correlation between Blackpool’s areas of deprivation and hot-spots for violent crime, domestic abuse, and criminal damage, all associated to some degree with alcohol abuse.

A range of data profiles provided a strong evidence base for analysis, which included:
• Police crime patterns
• Hospital admissions data
• Ambulance location data
• Hospital emergency department patient treatment numbers
• Cost analysis data
• Local alcohol profiles published by the North West Public Health Observatory for alcohol and violent crime consistently highlight Blackpool to have amongst the worst measures across almost all indices. See Appendix 1.

On a peak Saturday night over 80% of A&E visits were alcohol related predominantly originating in the NTE. Before the initiative was implemented there were between 75 and 150 A&E attendances
every Saturday night between 8pm on a Saturday and 8am on the Sunday.

In Blackpool alcohol is a factor in:

- **15%** of all recorded crime in Blackpool
- **37%** of all violent crime.

(Source: MADE District Profile 2010/2011).

Levels of personal violence in Blackpool are the fourth highest in Great Britain, and well above the Lancashire County area average:

- Blackpool **76 per 1,000** population compared to 41.2 Lancashire county average with **36%** of incidents alcohol related
- **25%** of all sexual offences in the county of Lancashire occur in Blackpool
- **43%** of serious sexual offences are alcohol related
- **31%** of all sexual offences are alcohol related.

Innocent passers-by often had to suffer the consequences of the behaviour of others:

- hospital A&E staff, other patients and their relatives all suffered as a result of lengthening waits, violence in the waiting areas and a general feeling of discomfort
- the increasing demand placed pressure on other areas of the hospital as patients were admitted, slowing down the transfer out of the A&E department and further impacting upon the availability of paramedics and police resources.

Blackpool has one of the highest incidence of alcohol related A&E attendances in England with one of the highest rate of alcohol related hospital admissions and the highest rate of alcohol related premature deaths. Alcohol related hospital admissions in Blackpool increased rapidly during the 1990’s and the start of the new century reaching a high of over **1,300 admissions per 100,000 capita** during 2002/03. The rate of admissions then steadied off for a few years. As the effects of the 2003 Licencing Act took affect the alcohol related hospital admissions began to increase dramatically again. **Appendix 2** demonstrates that by 2010/11 this rate of admissions more than doubled to nearly **3,000 admissions per 1,000,000 capita**.
Response

What were the options?

The options considered included:

• continue to maintain a high presence and respond as necessary – this was deemed financially unsustainable and would not address the problem adequately
• increase the numbers of police and ambulance paramedic teams in the town centre, this was considered to be expensive and to be highly responsive rather than preventative
• establish a facility to deal with the consequences of alcohol related violent crime and anti-social behaviour. However, this would only address the problem after it had occurred and would not decrease the demand for police and paramedic time
• establish the Night Safe Haven Service as there is strong national evidence base that buses providing a rest area help reduce crime and hospital attendance, as highlighted in the ‘Local Routes’ guidance and the 2012 alcohol strategy.

It was identified that by offering a visible safe haven a suitable location in the town centre it would be possible to:

• reduce the number of people who become ill, deteriorate after an incident, becoming vulnerable through alcohol or being lost
• record police victim/witness statements instead of having to return to the police station.

What did we do first?

Before the Night Safe Haven was launched the following took place:

• a full cost analysis including developing a Systems Dynamics Model was undertaken and provided an evidence base which outlined projected savings to emergency services
• risk assessments were completed in line with all the service provider requirements
• the project was developed and managed utilising PRINCE2 project management methodology
• all plans were submitted to the relevant governance bodies
• a full business plan was developed, submitted to and approved by the funding body and the Community Safety Partnership executive board
• procedures were agreed with the clinical and governance leads for all organisations.
The Night Safe Haven was launched in April of 2011 as a multi-agency partnership. The service structure and staff can be viewed at [http://youtu.be/8A-IJ5Jq3wA](http://youtu.be/8A-IJ5Jq3wA).

**What is the aim?**

As a multi-agency provision:
- to reduce the number of people who are admitted to Blackpool Victoria Hospital’s A&E Department due to excess alcohol consumption or as a consequence of alcohol related violence
- to safeguard and remove vulnerability by reducing the number of people in the town centre who become victims of alcohol related crime and disorder.

**How does it work?**

The Night Safe Haven bus is:
- facilitated by a co-ordinator employed by Renaissance @ Drugline Lancashire (a drug and alcohol treatment charity)
- supported by:
  - NHS Blackpool Nurses
  - Paramedics from North West Ambulance Service (NWAS) with a fully fitted ambulance
  - St John Ambulance with an ambulance
  - Lancashire Constabulary.

The service offers people access to:
- a safe and secure environment in the town centre in order to compose themselves and or if necessary their friends
- free health care from NHS nurses [See Appendix 3.](#)

The nurses remain on board throughout the duration of outreach sessions offering people advice, support and on the spot assessment of their needs and if necessary signpost as appropriate to:
- St. John Ambulance staff for minor injuries
- NWAS should the person have a greater need for care.
For people who are suffering the effects of excess alcohol consumption sometimes all they require is time to recover. With the guidance of the nurses, their needs are supported thus alleviating the stresses/pressures faced by Blackpool's Victoria Hospital A&E Department.

In the event of a person needing hospitalisation the patient is transferred to the hospital in the ambulance on site or by calling a second unit depending on the urgency.

The facility offers a safe and quiet area for police officers to take statements from witnesses and victims of crime thereby avoiding a journey to the police station. This is more convenient for the police and the victim/witness who is providing the statement. It also creates a safe place for police to ask people to remain until a responsible person is able to collect them instead of transporting to custody at the police station or A&E.

The distribution of harm reduction promoting a safe night out in Blackpool, encourages the use of services provided by the Night Safe Haven and retains direct links with Blackpool’s vulnerable person’s taxi service. The service is offered to people who are unable to secure a safe journey home. The taxi service is a free service that can be used for vulnerable people in the town during their evening. If a vulnerable person presents at the Night Safe Haven Bus and has no means to fund a taxi home the Night Safe Haven Bus can arrange for free transportation that evening and seek reimbursement in the future. Thus in turn also offers support to the reduction of anti-social crime/disorder allowing vulnerable people a safe route home.

Should an under 18 year old present at the Night Safe Haven and the staff are able to secure a parents/guardian’s telephone number, they are called. An explanation of the situation is offered and assistance in many cases is offered in way of transportation home. This in turn offers a reduction in the quantity of vulnerable people who are out and about in the town centre. In many cases people are heavily under the influence of alcohol and could potentially find themselves victims of crime, anti-social behaviour or alcohol related disorder.
Police and door staff ‘bring’ people to the provision who are vulnerable, intoxicated or in need of immediate care and support. Again, as the Night Safe Haven is available in the town centre, the stress and pressures faced by the staff at Blackpool’s Victoria Hospital are reduced as cases are dealt with there and then. Exceptions are made with cases that are too extreme to deal with in the town centre and where urgent hospitalisation is unavoidable.

See Appendix 4 for a diagram demonstrating the pathway for people presenting at the Night Safe Haven.

Blackpool consistently develops new and innovative services which are highlighted nationally as good practice. The commitment of both statutory and voluntary partners across Blackpool has been fundamental in bringing about significant improvements to the town over the past decade, especially the work undertaken to reduce crime, disorder, ASB and substance/alcohol misuse.

There are still some significant challenges ahead, which collectively the Partnership is committed to addressing, particularly around realising further reductions in alcohol related hospital admissions, levels of alcohol related violent crime and improvements in the health and well-being of both visitors and residents of Blackpool.
Assessment

The provision has:

- significantly reduced police and ambulance paramedic journeys to hospital
- made Blackpool a more inviting destination for visitors
- reduced alcohol related crime and associate numbers of victims.

Simple surveys are carried out on board the service with people who access the provision. Feedback is gathered in relation to the responses offered and findings are presented in each quarter and annual report published.

A cross section of people utilising the service are asked a simple set of questions relating to the service such as:

- Satisfaction with the service?
- Would they use the service again?
- Would they recommend the service to other people?

During the 12/13 financial year 179 people were questioned and the overall feedback received has been extremely positive. Each person who utilises the service offers positive and encouraging feedback.

Feedback is gathered from people who support the service on a weekly basis. As new staff members from the partner agencies assist in the operational evenings the coordinator asks for their thoughts. Once again positive feedback is received from staff.

During 2012 the Night Safe Haven avoided 956 hospital attendances (calculated on the numbers seen who would have previously been transported to hospital by an emergency service but was instead treated and recovered at the Night Safe Haven. In addition to this almost 3,200 others were seen by the service to receive advice on alcohol or drugs, sexual health, condoms, disposable shoes (to reduce falls), silver blankets, water, directions, placed in a safe taxi, held until parents could collect, or simply a quiet area of rest. All of these have had an unmeasured impact on reducing the requirements for emergency services and reduced crime. This has in turn contributed
significantly to the change in the rate of alcohol related hospital admissions which prior to launching the provision increased by 18% following successive years of increases. During 2012/13 the rate of alcohol related hospital admissions actually decreased by approximately 1%.

See Appendix 2 – Alcohol Related Hospital Admissions.

The Night Safe Haven Bus continues to support the reduction of crime and/or ASB by offering vulnerable people a safe space in the town centre. People who are suffering the effects of excess alcohol consumption frequently find themselves becoming a victim or perpetrator of alcohol related crime or disorder.

An analysis of reported incidents of ASB and violence with and without injury within the two neighbourhood areas that cover Blackpool town centre, Talbot and Claremont, during the first year of the Night Safe Haven initiative shows an encouraging reduction in both the levels of Police reported ASB and violence. Whilst the reductions cannot be solely attributed to the introduction of the Night Safe Haven, the facility operates during those periods when levels of ASB and violent crime are particularly prevalent.

Talbot neighbourhood area has seen reported levels of ASB fall from 2,306 in 2010/11 to 2,032 incidents in 2011/12, levels of violence with and without injury has fallen from 323 incidents in 2010/11 to 290 in 2011/12. See Appendix 5.

Claremont neighbourhood area has seen reported levels of ASB fall from 2,505 in 2010/11 to 1,990 incidents in 2011/12, levels of violence with and without injury has fallen from 348 incidents in 2010/11 to 293 in 2011/12. See Appendix 6.

As well as reducing the numbers attending A&E or being taken to the police station by over 600 people, it is:

• saving on officer time
• preventing future harm
• providing a feeling of safety for visitors.
The Night Safe Haven has:
• helped build a rapport between the public services and the users of the NTE
• strengthened relationships between police, ambulance, and the other services involved.

During the period since April 2011 the number of ambulance calls across Blackpool has increased dramatically, including in the town centre area. During the first year the total number of ambulance call outs in the immediate vicinity of the Night Safe Haven increased from **739 to 851**. However the proportion of people transported to hospital and requiring additional support decreased with the peak month of June reducing from **66%** during 2010 to **50%** during 2011 (the month the full provision started to achieve maximum effectiveness. The demand for ambulance services continued to increase during 2012/13 with **1,095** ambulance call outs recorded, however during this time period the proportion of people transferred to the hospital by ambulance reduced to **45%** during June 2012 reaching an all-time low of **38%** during May 2012. Due to a long, cold, wet winter and budgetary restraints the service was closed between December 2012 and May 2013. The charts show an increase in the proportion of people being transported to hospital during this period although the numbers did not reach as high as prior to the provision being introduced suggesting a possible change in behaviour as a consequence of the Night Safe Haven. See Appendix 7 – North West Ambulance Service Data.

An analysis of those using the Night Safe Haven showed that:
• The majority (**60%**) were male
• **70%** were aged 19-40
• More of the services users (**15%**) were aged over 40 than under 18 (**11%**)
• Police were the largest referring agency to the Night Safe Haven (**37%**)
• Although only **14%** using the service were presenting with solely an alcohol issue, the majority are actually cause by alcohol including victims of violence (**9%**) and many of those seeking directions are under the influence of alcohol (**35%**) See Appendix 8 - Profiles of Night Safe Haven users.
The Night Safe Haven helps build a safer night time environment which in turn is a good promotion to increase the numbers and variety of visitors. It is anticipated this will make Blackpool more welcoming to families at night, improving the environment, reducing crime and improving life chances for local residents.

The Night Safe Haven has received external commendation from:
- Drink Wise North West
- The Department of Health Alcohol Policy Unit.

It has won the Lancashire Police & Crime Commissioner POP Award and was a finalist for the National Health Service Journal Awards.

A continued investment can be maintained from partners for as long as the provision is able to demonstrate effectiveness in reducing crime and A&E attendances at peak times on an “Invest to Save” basis. The clear demonstration of success to date will assist police and ambulance services to present a case for mainstreaming the provision and incorporating staffing into the main ambulance duty rota and police Saturday rota.

There has been recognition that the service could be improved by more effective promotion, which could include a membership scheme for town centre establishments who abide to a governance structure and receive additional support around the management of the their venue. Training would be provided to staff in bars, clubs and door supervisors to help them improve their first aid, situation management, anger management and how to seek help. See Appendix 9.

Pubs, clubs and door staff companies could subscribe their membership by utilising a modification of the current website at www.altn8.org. See Appendix 10. Those companies signing up to the scheme will also receive additional promotional material including posters, drinks coasters and polycarbonate glasses. See Appendix 11.
The awareness raising carried out in the pubs and clubs will also be enhanced by advertising outside of the establishments and by introducing a mobile phone app. See Appendix 12.

The service could include a field doctor who would be able to increase the medical cover to include stitching and antibiotic treatment. Further improvements will be realised on delivery of a bespoke outreach vehicle which has been ordered and will replace the bus. See Appendix 13 - The proposed new bus facility.
### Blackpool: Local Alcohol Profile for England

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<td>Months of life lost - females</td>
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<td>Alcohol-specific mortality - males</td>
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<td>Alcohol-specific hospital admission - males</td>
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<td>Employees in bars - % of all employees</td>
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Appendix 2

Alcohol Related Hospital Admissions
Rate per 100,000

(x1000)
Appendix 3

Night Safe Haven Location
Night Safe Haven

Person presents @ Safe Haven

- Requires medical treatment
- Crime related
- Triage
- Medical condition
- Assessed by SJA NWAS
  - Minor Injury
  - Emergency care required
  - SJA Treatment
  - NWAS Assessment

Triage

- Taken onboard Safe Night Haven Bus
- Police visit NWAS to compile report
- Compile Police report
- Take appropriate Police action

Medical condition

- Police visit
- NWAS to compile report

Nursing care

- Provide meal, shelter, water etc.
- Provide harm reduction advice
- Check if need for condoms/foil blanket/footwear etc., provide as appropriate

Condition worsens

- Condition worsens
- Monitor patient
- Hospitalisation required
- Requires Ambulance transport

Transport to A&E

Not able to get home under own means

Discharge

Phone Taxi

Requires medical treatment

Emergency care required

SJA Treatment

NWAS Assessment

Hospitalisation required

Requires Ambulance transport

Transport to A&E

Discharge
Appendix 5

Talbot anti-social behaviour incidents & levels of violence with and without injury

Anti-Social behaviour incidents 2010-11 and 2011-12

Levels of violence with and without injury 2010-11 and 2011-12
### Appendix 6

**Claremont anti-social behaviour incidents & levels of violence with and without injury**

#### Anti-Social behaviour incidents 2010-11 and 2011-12

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#### Levels of violence with and without injury 2010-11 and 2011-12

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Appendix 7

North West Ambulance Service data

(\times 100)

Not taken
Transported

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Not taken
Transported

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<td>2013/12</td>
<td>30</td>
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Nightsafe haven
keeping you safe tonight
Profiles of Night Safe Haven Users

- **Male**: 60%
- **Female**: 40%

- **0-9**: 2%
- **10-16**: 15%
- **17-18**: 9%
- **19-25**: 0%
- **26-40**: 29%
- **41-60**: 41%
- **Over 60**: 0%

Appendix 8
Profiles of Night Safe Haven Users

- St John: 10%
- Door staff: 10%
- Street pastors: 5%
- NWAS: 4%
- Street Angels: 1%
- Bar staff: 37%
- Taxi driver: 3%
- Venue Management: 2%
- Member of public: 13%
- Police: 23%

- Alcohol: 5%
- Bullying: 2%
- Directions: 10%
- Drug use: 4%
- Foil/water/supplies: 14%
- General Health: 0%
- Existing problem: 5%
- Vulnerable: 37%
- Mental health: 1%
- Fallen: 1%
- No money: 2%
- Needed a safe space: 21%
- Rubbing shoes: 9%
- Punched a wall: 2%
- Lost in town: 35%
- Suffered violence: 2%
Appendix 9

Night Safe Haven
Partners’ Resources
Appendix 10

Night Safe Haven Partners’ Subscribing Site
Appendix 11

Poster Design

IT'S CHEAPER
BY BUS

If you see someone who is very drunk or in need of some help whilst in your establishment, get them on the bus.

Referring someone to the Nightsafe Haven could save £xxx in costs to the emergency services & ultimately your business.

HELP KEEP CUSTOMERS SAFE AND YOU WILL SOON SEE THE BENEFITS TO YOUR BUSINESS

SCAN THIS CODE FOR OUR FREE APP

GET ONBOARD WITH THE SAFE HAVEN BUS
Drinks Coasters
Appendix 12

Vicinity Promotion
Appendix 13

The proposed new bus facility
Vehicle preferably based on a Fiat Ducato chassis.

External Elements
1) NWAS Livery, Battenberg and Partnership Logos.
2) 360 degree adjustable floodlights.
3) Blue lights, multi coloured telescopic light (to aid with identification at events).
4) Wheelchair/access ramp (external to rear doors), rear doors must be able to close with ramp deployed.
5) External cupboard to store wheelchair and collapsible examination tables.
6) Access to toilet.
7) Access to kitchen equipment (half or full door).
8) Awnings both sides (with flaps to provide more external space at prolonged events).

Communications/ICT
1) Sat Nav.
2) 2 x Airwave handset and safe.
3) Mobile phone and Bury car kit.
4) Internet access points & mains power plugs.
5) Rear View camera.

Equipment
1) Offside - External TV with Freeview and ability to play recorded messages and or power point (touch screen).
2) Internal TV same as above.
3) Generator.
4) External Power source (240v caravan type).
5) External 3pin plug sockets.
6) Shoreline charger.
7) External steps on all doors with hand rails.
8) Heaters to all areas.
9) External Access Toilet (with hand basin).
10) Kitchen facilities (inc. sink) with external access door/hatch.
11) Sink in clinical area.
13) Winch for stretcher use with rear ramp access.
14) 3 x seats in clinical area, with storage underneath.
15) 4 x seats & 2 x tables (jockey seat type) in rear area.
16) 2 x collapsible examination tables in rear area.
17) Maximum storage throughout (inc. PR info storage cupboard).
18) Door between Kitchen area and clinical area.
19) Door between Clinical area and rear area.
20) Access handrails.
21) All surfaces must meet IPC standards and be wipe clean with no nooks/crannies etc.

Medical equipment
1) AED.
2) Suction.
3) Wheelchair/carry chair.
4) 2 x collapsible examination tables.
5) Oxygen 1 x D size & 1 x E size storage.
6) ALS & BLS bags.
7) Various consumables as per RRV.
8) N2O2.
Agency & Officer Information

Key Project Team Members:

**Stephen Allum**
Police Inspector Lancashire Constabulary

**Stephen Morton**
Public Health Practitioner
Lead for Alcohol Harm Reduction, Tobacco Control, NHS Health Checks, Public Health in Secondary Care, Licensing & Community Safety
Blackpool Council

**Dave Rigby**
Sector Manager,
North West Ambulance Service (NWAS)

**Leah Emerson**
RISK @ Renaissance Co-ordinator, Safe Haven Bus
Co-ordinator, Renaissance at Drugline - Lancashire

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## Abbreviations & Glossary of Terms

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<tr>
<th>Abbreviation</th>
<th>Definition</th>
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<tr>
<td>A&amp;E</td>
<td>Accident and Emergency Department</td>
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<tr>
<td>Alcohol related hospital admissions</td>
<td>Patients admitted to a hospital bed for a period of at least 4 hours as a result of one or more or a range of specified conditions caused by alcohol</td>
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<tr>
<td>ASB</td>
<td>Anti-Social Behaviour</td>
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<tr>
<td>Drugline</td>
<td>A North West based drugs and alcohol misuse service</td>
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<tr>
<td>Drinkwise NW</td>
<td>Part of Drinkwise UK. An organisation formed to help minimise alcohol harm by working with NHS and Local Authorities to raise awareness of and reduce harms from alcohol</td>
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<tr>
<td>Lancashire Constabulary</td>
<td>Local Police Force</td>
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<tr>
<td>MADE District Profile</td>
<td>Lancashire countywide multi-agency data collection and analysis service</td>
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<tr>
<td>NHS</td>
<td>National Health Service</td>
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<tr>
<td>NTE</td>
<td>Night Time Economy. A 14 street area of Blackpool serving as the focal point of night time drinking and entertainment</td>
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<td>NWAS</td>
<td>North West Ambulance Service</td>
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<td>Hen Party</td>
<td>A pre-wedding party/event for a bride and her friends</td>
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<tr>
<td>PRINCE2</td>
<td>Projects IN Controlled Environments. A flexible project management tool and system</td>
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<td>Renaissance</td>
<td>A North West based charity, working in substance misuse and sexual health</td>
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<td>Stag Party</td>
<td>A pre-wedding party/event for a bridegroom and his friends</td>
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<tr>
<td>St. John Ambulance</td>
<td>A national, community voluntary organisation, providing first aid support and training</td>
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<tr>
<td>Community Safety Partnership</td>
<td>A partnership working together to reduce crime and disorder, substance misuse and re-offending. Each Local Authority must by law, work in partnership with the Police, Fire and Rescue Service, Local NHS and Local Probation Trust.</td>
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