

# Alcohol Services Bill

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# B I L L

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Require local authorities and health authorities to provide alcohol services in their area to address the needs of people with alcohol problems; to produce joint five-year strategic projections and annual service evaluations and plans, and to establish joint commissioning arrangements in their areas for the purchase of alcohol services.

**B**E IT ENACTED by the Queen’s most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:—

## 1 Inspection of alcohol care services

- (1) The Commission for Health Improvement (or its successor body) shall have completed reviews and reports (or, where appropriate, investigations) on
  - (a) the quality of;
  - (b) the management of;
  - (c) the provision of;
  - (d) the comprehensiveness and integration of individual needs assessment for services; 10
  - (e) the availability of; and
  - (f) access for persons whose health or social care needs arise as a result of, or are increased by their consumption of alcohol, within the meaning of Part 2 of the Schedule of Act, to 15

alcohol care services, within the meaning of Part 1 of the Schedule to this Act, which are purchased or commissioned by any NHS body (whether a health authority under continuing arrangements, or a Primary Care Trust) or provided by any NHS body or by any prescribed service provider in every part of England within three years of the coming into force of this Act. 20

- (2) In carrying out its duties under subsection (1), the Commission for Health Improvement shall have regard to any guidance, models of care, service

frameworks or other standards that the Secretary of State, the National Care Standards Commission (or its successor body) or the National Treatment Agency for Substance Misuse may for the time being issue, that apply to alcohol care services.

- (3) Where, in the course of performing its duties under subsection 1, the Commission for Health Improvement finds deficiencies in respect of quality, management, provision, comprehensiveness or integration of assessment, availability or access, it shall— 5
- (a) publish its review, report or investigation;
  - (b) make recommendations for action by NHS bodies, including Health Authorities, and in particular by Primary Care Trusts to remedy those deficiencies; 10
  - (c) make recommendations for action by local authorities, where any of the costs of alcohol care services in the area in which the Commission for Health Improvement finds deficiencies, are defrayed from monies held by local authorities; and 15
  - (d) make recommendations to the Secretary of State.
- (4) The National Care Standards Commission (or its successor body) shall have completed reviews and reports (or, where appropriate, investigations) on 20
- (a) the quality of;
  - (b) the management of;
  - (c) the provision of;
  - (d) the comprehensiveness and integration of individual needs assessment for services;
  - (e) the availability of; and 25
  - (f) access for persons whose health or social care needs arise as a result of, or are increased by their consumption of alcohol, to
- alcohol care services purchased, commissioned, or provided by any local authority or prescribed service provider in every part of England within three years of the coming into force of this Act. 30
- (5) In carrying out its duties under subsection (4), the National Care Standards Commission shall have regard to any guidance, models of care, service frameworks that the Secretary of State, the Commission for Health Improvement (or its successor body) or the National Treatment Agency for Substance Misuse may for the time being issue, that apply to alcohol care services. 35
- (3) Where, in the course of performing its duties under subsection (4), the National Care Standards Commission finds deficiencies in respect of quality, management, provision, comprehensiveness or integration of assessment, availability or access, it shall— 40
- (a) publish its review, report or investigation;
  - (b) make recommendations for action by local authorities, where any of the costs of alcohol care services in the area in which the National Care Standards Commission finds deficiencies, are defrayed from monies held by local authorities; 45
  - (c) make recommendations for action by NHS bodies, including Health Authorities, and in particular Primary Care Trusts to remedy those

- deficiencies; and  
 (d) make recommendations to the Secretary of State.

## 2 Health authority plans

- (1) Any plan developed by any Health Authority produced in fulfilment of their duty under section 28 (1) of the Health Act 1999 (c.8) shall include a plan for the provision of alcohol care services for the people for whom they are responsible. 5
- (2) In preparing or reviewing any plan under section 28 (1) of the Health Act 1999 (c.8), a Health Authority—
- (a) must consult and seek the participation of representatives of those providers of alcohol care services, including prescribed providers, which either have provided alcohol care services in the last five years to, are currently providing alcohol care services to, or in their view are likely to provide alcohol care services to persons for whom they are responsible; 10
  - (b) may consult representatives of providers of other alcohol care services; and 15
  - (c) must have regard to any guidance for the time being issued by the Secretary of State.
- (3) Where a Strategic Health Authority has directed a Primary Care Trust to produce a plan, under Section 17A of the 1977 Act, the duty of subsection (1) above shall apply to that Primary Care Trust. 20

## 3 Community strategies

- (1) Every local authority shall, in the community strategy that it prepares or modifies under section 4 of the Local Government Act 2000 (c.22), show how their plans for the social well-being of their area will benefit persons whose health or social care needs arise as a result of, or are increased by their consumption of alcohol, and shall show how they will ensure the continued availability of and access to alcohol care services within their area for persons who will need them. 25
- (2) In preparing or modifying their community strategy, a local authority— 30
- (a) must consult and seek the participation of representatives of those providers of alcohol care services, including prescribed providers, which either have provided alcohol care services in the last five years to, are currently providing alcohol care services to, or in their view are likely to provide alcohol care services to persons living in their area; 35
  - (b) may consult representatives of providers of other alcohol care services; and
  - (c) must have regard to any guidance for the time being issued by the Secretary of State.

#### 4 Scrutiny

- (1) Each local authority to which Section 7 of the Health and Social Care Act 2001 (c.15) applies shall, using the arrangements put in place in that section, review and scrutinise the quality of, provision of, management of, availability of, and access to alcohol care services within an authority's area, and to make reports and recommendations where appropriate. 5

#### 5 Financial provisions

*There shall be paid out of money provided by Parliament—*

- (1) *any expenditure incurred by the Secretary of State in consequence of this Act, and* 10
- (2) *any increase attributable to this Act in the sums payable out of money so provided by virtue of any other Act.*

#### 6 Short title, interpretation, commencement, extent, etc

- (1) This Act may be cited as the Alcohol Services Act 2002.
- (2) In this Act— 15
- “NHS body” means a Strategic Health Authority, Health Authority, Special Health Authority, Primary Care Trust or NHS Trust;
- “the 1977 Act” means the National Health Service Act 1977 (c.49);
- “prescribed” means prescribed by regulations made by the Secretary of State; and 20
- “service provider” means a person who provides services, including alcohol care services
- (a) in accordance with arrangements under section 28C of the 1977 Act, or
- (b) under Part II of that Act.
- (3) This Act shall come into force on such day as the Secretary of State may by order appoint, but that day shall be no later than 1st April 2003. 25
- (4) This Act applies to England and Wales.

## SCHEDULE

### ALCOHOL CARE

#### PART 1

##### ALCOHOL CARE SERVICES: DEFINITION

*Content of alcohol care services* 5

1. For the purposes of this Act, alcohol care services include (but are not limited to) any services which are
  - (a) outreach services;
  - (b) advice and information services;
  - (c) counselling services; 10
  - (d) specialist diagnostic support services;
  - (e) screening programmes;
  - (f) minimal interventions and brief treatments;
  - (g) longer term specialist remedial treatment, including detoxification and counselling services; 15
  - (h) residential services, including those which include the provision of nursing care;
  - (i) rehabilitation support services;
  - (j) development and other support services for self-help groups; and/or
  - (k) triage for other services; 20where they are provided either persons whose health or social care needs arise as a result of, or are increased by their consumption of alcohol (within the meaning of Part 2 of this Schedule), or to their children, spouses, partners and relatives, and where the aim of the provision of the service or services is to prevent, cure, palliate or relieve a person's condition within the meaning of paragraph 3 of this Schedule, or to reduce associated risks, or to provide related support to other persons affected by that person's condition. 25

*Provision of alcohol care services*

2. Provided that it falls within paragraph 1 above, a service is an alcohol care service whether it is 30
  - (a) provided in primary care settings, hospital or other secondary care, residential or nursing care, a children's home, day centre, a specialist agency, any domiciliary setting, a hostel, the workplace, prison or other place of correction, or a public place (e.g. outreach work), or elsewhere; 35
  - (b) provided by an individual, a body corporate, a voluntary organisation or charitable trust, a local authority or an NHS body; or whether it is;

- (c) provided by a nurse, medical practitioner, social worker, probation officer, or specialist in any aspect of alcohol problems, or other competent person.

## PART 2

### PERSON IN NEED OF ALCOHOL CARE SERVICES: DEFINITION 5

#### *Nature of need*

3. A person whose health or social care needs arise as a result of, or are increased by their consumption of alcohol is a person
- (a) with a condition, whether or not one recognised in standard clinical diagnostic classifications in use for the time being, but being either a disease, syndrome, disability, significant discomfort or impairment in functioning, or any problem that is likely to reduce the expected lifespan or to lead to any of these problems in the foreseeable future for the person; 10
  - (b) where that problem arises from or is increased, or the risk of future conditions is increased by their consumption of alcohol; and 15
  - (c) where that condition would be ameliorated or future risk reduced, to a significant degree, by the provision of alcohol care services; or a person
  - (d) who is a child, parent, spouse or partner of a person with such a condition and whose well-being is significantly affected by that person's condition. 20

#### *Scope of need*

4. For the avoidance of doubt, a person may be a person whose health or social care needs arise as a result of, or are increased by their consumption of alcohol is a person, even if their consumption of alcohol does not meet the conditions conventionally required for "abuse" or "misuse", and even if they (or their child, parent, spouse or partner) are no longer consuming alcohol, but their previous consumption continues to have the effects specified in paragraph 3 above. 25 30

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To require local authorities and health authorities to provide alcohol services in their areas to address the needs of people with alcohol problems, to produce joint five-year strategic projections and annual service evaluations and plans, and to establish joint commissioning arrangements in their areas for the purchase of alcohol services.

*Ordered to be brought in by Ross Cranston,  
Mr Kelvin Hopkins, Mrs Marion Roe,  
Bob Russell, Mr Russell Brown,  
Jon Cruddas, Mr. David Amess,  
Mr David Drew, Mrs Betty Williams,  
Mr Siôn Simon, The Reverend Martin Smyth  
and Fiona Mactaggart.*

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*Ordered, by The House of Commons,  
to be printed, 23rd April 2002.*

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Fax 01603 723000*

PUBLISHED BY AUTHORITY OF THE HOUSE OF COMMONS  
LONDON: THE STATIONERY OFFICE LIMITED  
Printed in the United Kingdom by  
The Stationery Office Limited

£2.00

Bill 124

(755290)

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