

**SAFER
CORNWALL**

Kernow Salwa

**DRUG & ALCOHOL
ACTION TEAM**

Cornwall and Isles of Scilly

Reducing Harm | Promoting Recovery

IDENTIFICATION AND BRIEF ADVICE with adult alcohol users

A Step by Step Guidebook

This Step by Step Guide is for practitioners who have completed the Alcohol Identification and Brief Advice Training, commissioned by Safer Cornwall and Cornwall DAAT.

2023 version

Adapted with permission from 'Alcohol Brief Interventions Step by Step Guide' Somerset Drug & Alcohol Partnership (December 2010)

Step by Step Guide **to Identification and Brief Advice** **with adult alcohol users:**

Step 1

- Identify risk level of alcohol intake using the 3 question AUDIT-C.
- This includes calculating alcohol units with an appropriate tool.
- Unit measurement acts both as part of the identification process, and as a key self assessment learning exercise for the client.
- *AUDIT-C is also part of the ASSIST-Lite drug, alcohol and tobacco screening tool.*

Step 2

- If AUDIT-C score is 0-4, this is defined as 'Lower Risk' drinking.
- Give positive reinforcement feedback using the NHS Brief Advice Handout (max 10 minutes).
- Encourage continued sensible drinking, and end alcohol intervention.

Step 3

- If AUDIT-C score is 5 or above, ‘Increasing Risk’ or ‘Higher Risk’ drinking is possibly indicated.
- Feed back the results of AUDIT-C and give simple advice using the NHS Alcohol Brief Advice Handout (1 - 10 minutes).

This is one unit... For more detailed information on calculating units see: www.nhs.uk/medicines/alcohol/units/

...and each of these is more than one unit

Risk	Men	Women	Common Effects
Lower risk	Both men and women should not regularly drink more than 14 units per week spread over three or more days	Regularly drinking 15-20 units per week	<ul style="list-style-type: none"> Increased relaxation Sociability Serious enjoyment of alcoholic drinks
Increasing risk	Regularly drinking 15-20 units per week	Regularly drinking 15-20 units per week	<ul style="list-style-type: none"> Low energy Relationship problems Depression Insomnia Impotence High blood pressure Alcohol dependence Liver disease Breast, mouth and throat cancers
Higher risk	More than 6 units per day on a regular basis or more than 50 units per week	More than 6 units per day on a regular basis or more than 35 units per week	<ul style="list-style-type: none"> Progressively increasing risk of: Low energy Relationship problems Depression Insomnia Impotence High blood pressure Alcohol dependence Liver disease Breast, mouth and throat cancers

What's everyone else like? Population by Risk Category

Making your plan

- Have several 'drink-free' days, when you don't drink at all
- When you do drink, set yourself a limit and stick to it
- Quench your thirst with non-alcoholic drinks before and in-between alcoholic drinks
- Avoid drinking in rounds or in large groups
- Drink when you drink - have your first drink when starting to eat
- Snacks to 'soak' alcohol (beer/fager)
- Avoid going to the pub after work
- Plan activities and tasks at those times you would usually drink
- When bored or stressed do something physical instead of drinking
- Avoid or limit the time spent with 'heavy' drinking friends

The potential benefits of cutting down

Psychological/ Social/ Financial

- Improved mood
- Improved relationships
- Reduced risks of drink driving
- Spare money

Physical

- Better sleep
- More energy
- Reduced risk of injury
- Reduced hangovers
- Better physical shape
- Reduced risk of high blood pressure
- Reduced risk of cancer
- Reduced risks of liver disease
- Reduced risks of brain damage

What's your personal target?

DRINKS TRACKER

ONE YOU DRINKS TRACKER

- Explain that a full 10 question AUDIT is required for a more accurate result, either in this session or in follow up appointment.

Step 4

- Complete full 10 question AUDIT to identify risk level of alcohol intake.
- This can take place either:
 - a) in same appointment if time allows, or
 - b) in follow up appointment with the same agency within 2 weeks, or
 - c) in signposted appointment in Primary Care with GP or WAVY ('With You Cornwall') Worker.

Step 5

- If full AUDIT score is 5-7, this is defined as 'Lower Risk' drinking.
- Give positive reinforcement feedback using the same NHS Brief Advice Handout (see Step 3).
- Encourage continued sensible drinking, and end alcohol intervention.

Step 6

- If full AUDIT score is 8-15, this is defined as 'Increasing Risk' drinking.
- Give feedback using the NHS Brief Advice Handout, encouraging a reduction in alcohol intake.
- Emphasise the risks of continued 'Increasing Risk' drinking, and the benefits of reducing to 'Lower Risk' levels.
- Follow up in future appointments, to encourage and support lifestyle changes.

8-12	Increasing Risk drinking	Simple Advice Brief Intervention and support Refer if not progressing
13-15	Increasing Risk drinking	Extended Brief Intervention Signpost/Refer

Step 7

- If full AUDIT score is 16-19, this is defined as 'Higher Risk' drinking.
- Give feedback using the same NHS Brief Advice Handout, encouraging a careful reduction in alcohol intake.
- Emphasise the risks of continued 'Higher Risk' drinking, and the benefits of reducing alcohol intake and risk level.
- An alcohol referral (or signposting) to Primary Care/GP or 'With You Cornwall' is advised as medical detox *may* be needed.
- This may involve preparatory work with the client using a 'Motivational Interviewing' approach:
In this situation it could be worth having a discussion of the positives and negatives of continuing to drink unchanged, and the positives and negatives of reducing drinking, listed on paper, along with simple drink diaries and targets, to help the client to enhance their motivation and plan for lifestyle changes (20 – 40 minutes).
- *Then follow these up in later appointments, to monitor drinks diaries or Apps, and to assess and encourage engagement.*

Step 8

- If full AUDIT score is 20+, this is defined as 'Higher Risk' drinking, possibly 'Alcohol Dependence.'
- This indicates that referral to a specialist alcohol intervention (and probable detox) in Primary Care with GP or 'With You Cornwall' Worker is essential.
- Follow up in future appointments, to assess and encourage engagement, and to support lifestyle changes.

Advice for all Steps

- If at any stage the person declines an appropriate referral or signpost to an alcohol service or intervention, offer an information leaflet giving them contact details for WAWY, or offer them the opportunity to return to see you when they are ready.
- Be aware that you may need to consult with WAWY if you identify complex issues, such as past drug use or particular risks or vulnerabilities, even for low AUDIT scores.

Cornwall Alcohol IBA Simple Pathway Grid:

Tool	Score	Risk Level	Intervention
AUDIT-C	0 – 4	'Lower Risk'	<ul style="list-style-type: none"> Positive reinforcement with NHS Brief Intervention Handout (10 mins).
AUDIT-C	5 +	Possible 'Increasing Risk' or 'Higher Risk'	<ul style="list-style-type: none"> Positive reinforcement with NHS Brief Intervention Handout (10 mins). Full AUDIT needed either in this session or in follow up appointment.
AUDIT	5 – 7	'Lower Risk'	<ul style="list-style-type: none"> Positive reinforcement with NHS Brief Intervention Handout (10 mins).
AUDIT	8 – 15	'Increasing Risk'	<ul style="list-style-type: none"> Feedback using the NHS Brief Advice Handout, encouraging a reduction in alcohol intake, highlighting benefits and risks. Follow up in future appointments, to encourage and support lifestyle changes. 8-12: Brief Intervention and support, refer if not progressing. 13-15: Extended Brief Intervention, Signpost/Refer.
AUDIT	16 – 19	'Higher Risk'	<ul style="list-style-type: none"> Feedback using the NHS Brief Advice Handout, encouraging a reduction in alcohol intake, highlighting benefits and risks. Referral (or signpost) to WAWY: 0333 2000 325 Follow up in future appointments, to encourage and support lifestyle changes. Consider using 'Brief Lifestyle Intervention' tool, to help the client to enhance their motivation, and plan for lifestyle changes if capacity and time allows (20 – 40 mins). Follow up in later appointments to assess and encourage engagement.
AUDIT	20 +	Possible Dependence?	<ul style="list-style-type: none"> Referral to specialist alcohol intervention with WAWY is essential. Follow up in future appointments, to assess and encourage engagement, and to support lifestyle changes.

Background about AUDIT:

- **AUDIT stands for ‘Alcohol Use Disorders Identification Test’, and it is a useful educational tool which helps people to identify their own drinking pattern.**
- **AUDIT is considered the gold standard for screening for alcohol use disorders and is used internationally, after development and extensive testing globally by the World Health Organisation. It is regarded as the most accurate alcohol screening tool, enabling a high degree of accuracy in identifying the risk level of someone’s drinking.**
- **AUDIT-C focuses on alcohol consumption levels.**
- **AUDIT-C now forms part of the ASSIST-Lite drug, alcohol and tobacco screening tool.**

Added Value:

- **To add value to this training, please go to Learning For Health to find the IBA E-Learning tool for various work settings:**

<https://www.e-lfh.org.uk/programmes/alcohol/>

Simple interpretation guidance for AUDIT scores:

AUDIT Score	Risk Level	Intervention
0-7	Low Risk drinking	Alcohol education and positive reinforcement
8-12	Increasing Risk drinking	Simple Advice Brief Intervention and support Refer if not progressing
13-15	Increasing Risk drinking	Extended Brief Intervention Signpost/Refer
16-19	Higher Risk drinking	Signpost/Refer Ongoing Support
20 +	Possible alcohol dependence or complex case	Referral to specialist for diagnostic evaluation and treatment Ongoing Support



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