# DIRECTED ENHANCED SERVICE (DES) ALCOHOL SPECIFICATION

# Part 1: Activity and Resources

#### 1.1 INTRODUCTION

It is a government priority to address the issue of illness associated with increasing alcohol consumption. The purpose of this DES is to:

- **1.1.1** Reward Contractors for case finding newly registered patients aged 16 and over (from 1<sup>st</sup> April 2011 for a period of 1 year until 31<sup>st</sup> March 2012).
- **1.1.2** Deliver simple brief advice to help reduce alcohol-related risk in adults drinking at increasing or higher risk levels, and consideration of specialist referral for dependent drinkers.

#### 1.2 SERVICE SPECIFICATION

- **1.2.1** This DES does not include a requirement to set up a register of increasing or higher risk drinkers.
- **1.2.2** Contractors are required to screen newly registered patients aged 16 and over using **either one of two shortened** versions of the World Health Organisation (WHO) Alcohol Use Disorder Identification Test (AUDIT) questionnaire.

Use either: FAST (4 Questions) – attached

AUDIT C (3 Questions) - attached

**1.2.3** Screening will apply to all patients registered between 1 April 2011 and 31 March 2012, who are aged 16 or over at the time the short case finding test is applied. For the purpose of this DES the test must be applied within the financial year in which the patient registered.

The following Read Codes are recommended:

	Read v2	Read CTV3	Snomed CT
FAST alcohol screening test	388u.	XaNO9	303471000000106
AUDIT C alcohol screening test	38D4.	XaORP	335811000000106

There are currently no codes available which indicate a positive FAST or AUDIT C test result so it will be necessary to add a value to a field associated with the code (please consult your computer system supplier for details). A value of 3+ is regarded as positive for FAST and a value of 5+ is regarded as positive for AUDIT C.

**1.2.4** If a patient is identified as positive, the remaining questions of the longer "10 question" AUDIT (attached) questionnaire should be used to determine increasing, higher risk or likely dependent drinking.

The following Read Codes are recommended:

	Read v2	Read CTV3	Snomed CT
AUDIT C alcohol screening test	38D3.	XM0aD	273265007

A value should be added to a field associated with the code to record the score.

- 0-7 indicates sensible or lower risk drinking
- 8-15 indicates increasing risk drinking
- 16-19 indicates higher risk drinking
- 20 and over indicates possible alcohol dependence
- **1.2.5** Following identification, the Contractor should deliver brief advice and / or intervention to those identified as:
  - a) 8-15 increasing risk drinking
  - b) 16-19 higher risk drinking

Dependent drinkers should be referred to specialist services as detailed below:

Northamptonshire Alcohol Services:

## CAN

32-34 Derngate Northampton NN1 1UH

Tel: 01604 627027 Fax: 01604 629557

## Wellingborough Multi Agency Partnership

41 Oxford Street Wellingborough NN8 4JG

Tel: 01933 271879 Fax: 01933 274285

## **CAN**

43 High Street Corby NN17 1UU

Tel: 01536 201973 Fax: 01536 204199

The referral should include all relevant screening information.

**1.2.6** The recommended brief intervention is the basic 5 minutes of advice used in the WHO clinical trial (modified for the UK context by the

University of Newcastle) of brief intervention in a programme which has been modified for this context entitled "How much is too much?"

The following Read Codes are recommended for recording the intervention offered:

	Read v2	Read CTV3	Snomed CT
Brief intervention for excessive	9k1A.	XaPPv	366371000000105
alcohol consumption completed			

**1.2.7** Information regarding the audit tools and brief advice and intervention can be accessed at:

www.alcohollearningcentre.org.uk/Topics/Browse/BriefAdvice/

**1.2.8** Patient identified as possibly alcohol dependent (scores of 20 or more) should be considered for referral for specialist services.

The following Read Codes are recommended for recording specialist referral:

	Read v2	Read CTV3	Snomed CT
Referral to specialist alcohol	8HkG.	XaORR	431260004
treatment service			

- **1.2.9** The Contractor is required to respond to any other identified need for a patient that relates to their levels of drinking and provide any treatment that may be required as part of the primary medical service contract.
- **1.2.10** The Contractor is required to make any relevant entries regarding treatment in the patient's medical record.

#### 1.3 RESOURCES

- **1.3.1** The Contractor will be paid £2.38 for each newly registered patient aged 16 and over who have been screened by the Contractor using either one of the two shortened versions of the WHO Alcohol Use Disorders Identification Test (AUDIT) Questionnaire FAST **or** AUDIT C during each financial year.
- **1.3.2** The Contractor cannot be paid more than one payment of £2.38 for any individual patient in each financial year.

# Part 2: Payment Mechanism

2.1 Payment is dependent upon the PCT receiving a written report by 28th April 2012. The report must reflect in each year of the DES the following (all elements to be included appropriate to patient's need):

- **2.1.1** The **number** of new registered patients aged 16 and over within the financial year who have had the short standard case-finding test (FAST or AUDIT C).
- 2.1.2 The **number** of newly registered patients aged 16 and over who have screened positive using a short case-finding test of the World Health Organisation (WHO) during the financial year, who then undergo a fuller assessment using a validated tool (AUIDIT) to determine increasing risk, higher risk or possible dependent drinking.
- **2.1.3** The **number** of newly registered patients aged 16 and over who have been identified as increasing or higher risk drinkers who have received **brief advice** to help them reduce their alcohol related risk.
- **2.1.4** The **number** of newly registered patients scoring 20+ on the full ten question AUDIT questionnaire who have been **referred** by the Contractor for specialist advice for dependent drinking during that financial year.
- 2.2 The Contractor will be paid upon receipt of the annual report submitted by 28th April of each contract year containing numbers of patients as detailed in 2.1 after the end of each financial year (after 31<sup>st</sup> March 2012).
- **2.3** See payment criteria below:
  - o Late submissions (after 28th April 2012) will result in nil payment
  - No submission will result in nil payment
- **2.4** Payment will be made following verification of any report in each year.
- 2.5 The Contractor will not be paid for reports that are incomplete or do not fulfil the requirements of 2.1.

## Part 3: Excluded Services

- **3.1** Patients who are under 16 years of age are not included in this DES.
- **3.2** Patients who were registered prior to 1<sup>st</sup> April 2011 aged 16 and over are not eligible for this DES.