

# **TIIG Lancashire**

Alcohol-related violence across Lancashire April 2013 to March 2016

April 2017

Karen A Critchley, Simon Russell and Mark Whitfield



Public Health Institute, Faculty of Education, Health and Community, Liverpool John Moores University, Henry Cotton Campus, 15-21 Webster Street, Liverpool, L3 2ET

www.ljmu.ac.uk/phi

**\** 0151 231 4500

**y** twitter.com/PHI\_IMS ISBN: 978-1-912210-03-9 (web)





Karen Critchley, Simon Russell and Mark Whitfield April 2017

**Public Health Institute** 

Faculty of Education, Health and Community

Liverpool John Moores University

2nd Floor, Henry Cotton Building

15-21 Webster Street

Liverpool

L3 2ET

Tel: 0151 231 4500

Fax: 0151 231 4552

Email: tiig@ljmu.ac.uk

Web: www.tiig.info and www.cph.org.uk

Twitter: www.twitter.com/tiig phi

# CONTENTS

ACKNOWLEDGEMENTS	5
KEY FINDINGS	6
THIS REPORT	7
AREA DESCRIPTION	8
DATA OVERVIEW	9
VIOLENCE ACROSS LANCASHIRE	11
DATA ITEMS	11
DATA OVERVIEW	12
DEMOGRAPHIC PROFILE	13
AREA OF RESIDENCE	16
ATTENDANCE INFORMATION	20
INCIDENT LOCATION	21
VIOLENCE AND DEPRIVATION	23
ALCOHOL-RELATED VIOLENCE ACROSS LANCASHIRE	24
DATA OVERVIEW	24
AREA OF RESIDENCE	25
INCIDENT LOCATION	27
LAST DRINK LOCATION	29
INCIDENT LOCATION VS LAST DRINK LOCATION	30

# **TABLES**

Table 1. Mid-2015 population estimates by age (Lancashire, North West and England & Wales)
Table 2. Mid-2015 population estimates by authority area and gender
Table 3. Lancashire Accident and Emergency Departments9
Table 4. Injury attendances by hospital, Lancashire residents, April 2013 to March 20169
Table 5. Injury attendances by authority area, Lancashire residents, April 2013 to March 2016
Table 6. Injury attendances by injury group, Lancashire residents, April 2013 to March 2016
Table 7. Assault-related data items collected by Lancashire hospitals
Table 8. Assault attendances by hospital, Lancashire residents, April 2013 to March 2016
Table 9. Assault attendances by age group and gender, Lancashire residents, April 2013 to March 2016
Table 10. Assault attendances by age group and gender, Lancashire residents, April 2013 to March 2016
Table 11. Assault attendances for the 21 LSOAs with the highest rates, Lancashire residents, April 2013 to March 2016
Table 12. Assault attendances by alcohol consumption, Lancashire residents, April 2013 to March 2016
Table 13. Assault attendances by alcohol consumption, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016
Table 14. Alcohol-related assault attendances for the 17 LSOAs with the highest number by LSOA, Chorley and Preston residents, April 2013 to March 2016
Table 15. Alcohol-related assault attendances where incident occurred at home by LSOA, Preston residents, April 2013 to March 2016
Table 16. Alcohol-related assault attendances by incident location and last drink location, Chorley, Preston, South Ribble and West Lancashire residents. April 2013 to March 2016

# **FIGURES**

Figure 1. Assault attendances by gender, Lancashire residents, April 2013 to March 2016
Figure 2. Assault attendances by age group, Lancashire residents, April 2013 to March 2016
Figure 3. Assault attendances by age, Lancashire residents, April 2013 to March 2016
Figure 4. Assault attendances by ethnicity, Lancashire residents, April 2013 to March 2016
Figure 5. Number of assault attendances by LSOA of residence with authority boundaries, Lancashire residents, April 2013 to March 2016
Figure 6. Rate of assault attendances per 1,000 population by LSOA of residence with authority boundaries (three-year average), Lancashire residents, April 2013 to March 2016
Figure 7. Assault attendances by referral source, Lancashire residents, April 2013 to March 2016
Figure 8. Assault attendances by arrival mode, Lancashire residents, April 2013 to March 2016
Figure 9. Assault attendances by disposal method, Lancashire residents, April 2013 to March 2016
Figure 10. Assault attendances by incident location, Lancashire residents, April 2013 to March 2016
Figure 11. Assault attendances by incident location and gender, Lancashire residents, April 2013 to March 2016
Figure 12. Assault attendances by incident location and age group, Lancashire residents, April 2013 to March 2016
Figure 13. Assault attendance rate per 1,000 population vs deprivation, Lancashire residents, April 2013 to March 2016 23
Figure 14. Alcohol-related assault attendances by authority area, Chorley, Preston, South Ribble and West Lancashire residents,  April 2013 to March 2016
Figure 15. Alcohol-related assault attendances by incident location, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016
Figure 16. Alcohol-related assault attendances by incident location and local authority, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016
Figure 17. Alcohol-related assault attendances by last drink location, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016

# **ACKNOWLEDGEMENTS**

With thanks to the Lancashire Accident and Emergency Departments for collecting and sharing data for the purpose of the Trauma and Injury Intelligence Group Project. Thanks also to the Pan Lancashire Steering Group for their comments and contributions, in particular Andrew Ascroft. Finally, thanks to Becky Willner for designing the front cover.

# **KEY FINDINGS**

- Between April 2013 and March 2016, there were a total of 600,731 injury attendances made by residents of Lancashire to the Accident and Emergency Departments (AEDs) across the county. Blackpool Victoria Hospital had the highest number of injury attendances (n=228,339; 38%), followed by Royal Blackburn Hospital (n=190,415; 32%)
- Of the total attendances by Lancashire residents, 129,249 (22%) were residents of Blackpool, 62,307 (10%) were residents of Wyre, and 57,303 (10%) were residents of Blackburn with Darwen.
- The AEDs across Lancashire differ in the level of assault-related injury data they collect but, as of July 2016, all AEDs were compliant with the Information Sharing to Tackle Violence (ISTV) mandatory data items (assault date, assault time, assault location, assault location details, assault weapon, and assault weapon details).
- Four hospitals (Chorley & South Ribble Hospital, Royal Preston Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital) record whether alcohol was consumed prior to the assault. A challenge for TIIG Lancashire 2017/18 is to enable the recording of alcohol-related assault data across all AEDs.
- Of the total attendances, 14,427 were for injuries sustained from assaults. Royal Blackburn Hospital had the highest number of assault attendances (n=5,148; 36%), followed by Royal Preston Hospital (n=3,439; 24%) and Blackpool Victoria Hospital (n=3,087; 21%).
- Of assault attendances, 10,278 (71%) were made by males; and 7,407 (51%) were aged between 15 and 29 years.
- The majority (94%) of assault attendees were of White ethnicity (7,546), while Asian or Asian British accounted for 3% of attendances (219).
- The authority areas with the highest numbers of assault attendances were Preston (2,336; 16%), Blackpool (2,216; 15%) and Blackburn with Darwen (1,836; 13%).
- Of the 21 LSOAs with the highest assault attendance rates per 1,000 population, ten were in Blackpool, five were in Preston, three were in Blackburn with Darwen, two were in Burnley, and one was in Pendle.
- Where incident location was recorded, just under half of assaults (47%; 5,331) occurred in a public place, followed by 20% (2,235) at home, and six per cent of assaults (682) occurred at licensed premises (pub, club or bar).
- Higher rates of assault attendance were found to be associated with higher levels of deprivation; these findings are taken from patient address, not incident location geography.
- Of the 5,200 assault-related injury attendances made by Lancashire residents to the four hospitals which collect information around alcohol, data were recorded for 4,282 attendances. Of which, 2,278 (44%) reported consuming alcohol prior to the incident, 1,866 (44%) reported that alcohol had not been consumed, and 137 (3%) refused to say or were unable to answer.
- Royal Preston Hospital had the highest number of assault-related injury attendances where alcohol had been consumed prior to the incident (n=1,700), followed by Chorley & South Ribble Hospital (n=529). Royal Preston Hospital also had the highest proportion who reported consuming alcohol (55%), followed by Southport and Formby District General Hospital (53%) and Chorley and South Ribble Hospital (50%).
- Just under half (47%) of alcohol-related assaults occurred in a public place, followed by one-fifth (20%) in a location categorised as 'other', 16% occurred at licensed premises, 13% at home and 4% at someone else's home. A proportion of assaults recorded as a public place could include incidents which took place at licensed premises, due to differing recording practices across trusts.

# THIS REPORT

As agreed by commissioners and members of the Pan Lancashire Steering Group, the structure of bespoke work in 2016/17 was changed from Themed Reports to analysis of key issues. In response to the Lancashire alcohol action plan, this report considers Lancashire residents presenting to the Accident and Emergency Departments (EDs) across Lancashire following incidents of alcohol-related violence between April 2013 and March 2016.

Two trusts in Lancashire capture alcohol-related information: Lancashire Teaching Hospitals NHS Foundation Trust (Chorley & South Ribble Hospital and Royal Preston Hospital) and Southport & Ormskirk Hospital NHS Trust (Ormskirk & District General Hospital and Southport & Formby District General Hospital in Merseyside<sup>1</sup>). This report will focus on the data collected by these two trusts; however, an overview of Lancashire residents attending trusts due to violence across the county will be provided.

This report presents ED attendances for violence across Lancashire in terms of demographics, area of residence, attendance rates and attendance information (incident location, referral source, arrival mode and disposal method) between April 2013 and March 2016. Using alcohol-related data collected by two of the trusts, case studies will also be provided for Chorley, Preston, South Ribble and West Lancashire local authorities. These analyses may be valuable for Community Safety Partnerships (CSPs) and other stakeholders when informing the delivery and commissioning of violence and/or alcohol preventative initiatives.

<sup>&</sup>lt;sup>1</sup> Although Southport & Formby District General Hospital is in Merseyside, Lancashire residents attending this hospital have been included in this report.

# LANCASHIRE AREA PROFILE

#### AREA DESCRIPTION

Situated in the North West of England, Lancashire is made up of 14 authority areas and its total population in 2015 was estimated at 1.48 million (Office for National Statistics, 2016<sup>2</sup>). Table 1 displays mid-2015 population estimates by age group. Compared to the North West of England and England & Wales, Lancashire had a slightly lower proportion of persons aged four years and under, 15 to 29 years and 30 to 59 years, but a higher proportion of persons aged 60 years and over.

Table 1. Mid-2015 population estimates by age (Lancashire, North West and England & Wales)<sup>3</sup>

	0-4		5-14	ļ	15-29		<b>30-5</b> 9	)	60+	
Area	N	%	N	%	N	%	N	%	N	%
Lancashire	88,485	6.0	171,803	11.6	277,250	18.8	569,542	38.5	371,035	25.1
North West	443,189	6.2	829,322	11.6	1,392,045	19.4	2,813,350	39.2	1,695,929	23.6
England & Wales	3,610,602	6.2	6,702,514	11.6	11,158,774	19.3	22,987,535	39.7	13,425,988	23.2

Table 2 shows the population of Lancashire authority areas by gender. Blackburn with Darwen has the largest population (n=146,846), followed by Lancaster (n=142,283), Preston (n=141,302) and Blackpool (n=139,578). Preston had the highest proportion of males (50.5%), followed by Chorley (50.1%), while West Lancashire had the highest proportion of females (51.4%), followed by Fylde and Wyre (51.2% each) and South Ribble (51.1%).

Table 2. Mid-2015 population estimates by authority area and gender

	Ma	le	Female		Total population
Authority area	N	%	N	%	N
Blackburn with Darwen	73,180	49.8%	73,666	50.2%	146,846
Blackpool	68,795	49.3%	70,783	50.7%	139,578
Burnley	43,109	49.3%	44,262	50.7%	87,371
Chorley	56,568	50.1%	56,401	49.9%	112,969
Fylde	37,771	48.8%	39,551	51.2%	77,322
Hyndburn	39,671	49.4%	40,557	50.6%	80,228
Lancaster	70,018	49.2%	72,265	50.8%	142,283
Pendle	44,466	49.3%	45,645	50.7%	90,111
Preston	71,324	50.5%	69,978	49.5%	141,302
Ribble Valley	28,705	49.1%	29,775	50.9%	58,480
Rossendale	34,163	49.2%	35,324	50.8%	69,487
South Ribble	53,671	48.9%	55,980	51.1%	109,651
West Lancashire	54,739	48.6%	58,003	51.4%	112,742
Wyre	53,569	48.8%	56,176	51.2%	109,745
Total	729,749	49.4%	748,366	50.6%	1,478,115

www.ons.gov.uk

<sup>3</sup> Throughout this report, percentages may not add up to 100% due to rounding.

# LANCASHIRE ACCIDENT AND EMERGENCY DEPARTMENTS

Lancashire has six Accident and Emergency Departments (AEDs) that primarily serve residents of Lancashire (Table 3). These are Royal Blackburn Hospital (which includes data from Burnley General Hospital Urgent Care Centre [UCC]), Blackpool Victoria Hospital, Chorley and South Ribble Hospital, Royal Preston Hospital, Ormskirk and District General Hospital and Royal Lancaster Infirmary. Lancashire residents who attended Southport and Formby District General Hospital in Merseyside are also included in analyses.

**Table 3. Lancashire Accident and Emergency Departments** 

NHS trust	Hospital
Blackpool Teaching Hospitals NHS Foundation Trust	Blackpool Victoria Hospital
East Lancashire Hospitals NHS Trust	Royal Blackburn Hospital
	Burnley General Hospital
Lancashire Teaching Hospitals NHS Foundation Trust	Chorley and South Ribble Hospital
	Royal Preston Hospital
Southport and Ormskirk Hospitals NHS Trust	Ormskirk and District General Hospital
	Southport and Formby District General Hospital <sup>4</sup>
University Hospitals of Morecambe Bay NHS Foundation Trust	Royal Lancaster Infirmary

# DATA OVERVIEW

Between April 2013 and March 2016, there were a total of 600,731 injury attendances made by residents of Lancashire to the AEDs across the county. Injury attendances decreased by 3% between 2013/14 and 2014/15, but then increased by 1% between 2014/15 and 2015/16, representing a 2% decrease overall (Table 4).

Blackpool Victoria Hospital had the highest number of injury attendances (n=228,339; 38%), followed by Royal Blackburn Hospital (n=190,415; 32%). Across the three-year period, attendances to these two hospitals increased by 4% each, while they reduced at all other hospitals.

Table 4. Injury attendances by hospital, Lancashire residents, April 2013 to March 2016

Hospital	2013/14	2014/15	2015/16	% change	Total (N)	Total (%)
Blackburn	61,811	64,461	64,143	4%	190,415	32%
Blackpool	76,772	71,538	80,029	4%	228,339	38%
Chorley	20,943	20,201	18,765	-10%	59,909	10%
Lancaster	12,915	12,718	10,321	-20%	35,954	6%
Ormskirk	2,237	1,752	1,311	-41%	5,300	1%
Preston	26,615	25,196	23,146	-13%	74,957	12%
Southport	2,148	2,189	1,520	-29%	5,857	1%
Total	203,441	198,055	199,235	-2%	600,731	100%

<sup>&</sup>lt;sup>4</sup> Data included in this report from this hospital are for Lancashire residents only.

1

Table 5 shows injury attendances by local/unitary authority area of residence and financial year. Over one in five (22%) injury attendances between April 2013 and March 2016 were made by residents of Blackpool, while equal proportions of attendances were made by residents of Blackburn with Darwen and Wyre (10% each). Nine per cent of attendees were from Burnley and 8% were from Preston. Injury attendances over the three-year period decreased for those resident in Blackburn with Darwen, Chorley, Lancaster, Preston, Ribble Valley, South Ribble and West Lancashire, while they increased for those resident in Blackpool, Burnley, Fylde, Hyndburn, Pendle, Rossendale and Wyre.

Table 5. Injury attendances by authority area, Lancashire residents, April 2013 to March 2016

Authority area	2013/14	2014/15	2015/16	% change	Total (N)	Total (%)
Blackburn with Darwen	19,692	19,366	18,245	-7%	57,303	10%
Blackpool	43,754	40,927	44,568	2%	129,249	22%
Burnley	17,365	18,505	19,155	10%	55,025	9%
Chorley	13,803	13,616	12,761	-8%	40,180	7%
Fylde	14,730	13,457	15,250	4%	43,437	7%
Hyndburn	5,678	5,894	5,791	2%	17,363	3%
Lancaster	12,030	11,871	9,638	-20%	33,539	6%
Pendle	13,793	15,013	15,232	10%	44,038	7%
Preston	17,042	16,317	14,788	-13%	48,147	8%
Ribble Valley	3,872	3,779	3,739	-3%	11,390	2%
Rossendale	3,282	3,478	3,543	8%	10,303	2%
South Ribble	13,004	12,172	11,429	-12%	36,605	6%
West Lancashire	4,610	4,164	3,071	-33%	11,845	2%
Wyre	20,786	19,496	22,025	6%	62,307	10%
Total	203,441	198,055	199,235	-2%	600,731	100%

The majority (79%) of injury attendances were categorised as 'other' injury (Table 6). Just under one in ten (8%) injury attendances were categorised as falls; however, it should be noted that only Lancashire Teaching Hospitals NHS Foundation Trust (Chorley & South Ribble Hospital and Royal Preston Hospital) categorise falls as a specified injury group while all other trusts in Lancashire record falls under the 'other' injury category. Sports injuries accounted for 6% of attendances, 4% were road traffic collisions, 2% were assaults, 1% were deliberate self-harm and 0% were firework injuries. Over the three-year period, attendances decreased for assaults, falls, other injuries and sports injuries, while they increased for deliberate self-harm, firework injuries and road traffic collisions.

Table 6. Injury attendances by injury group, Lancashire residents, April 2013 to March 2016

Injury group	2013/14	2014/15	2015/16	% change	Total (N)	Total (%)
Assault	5,253	4,611	4,563	-13%	14,427	2%
Deliberate self-harm	1,160	1,157	1,225	6%	3,542	1%
Fall	17,146	16,876	15,898	-7%	49,920	8% <sup>5</sup>
Firework injury	30	33	44	47%	107	0%
Other injury	159,939	154,959	158,914	-1%	473,812	79%
Road traffic collision	8,367	8,695	8,532	2%	25,594	4%
Sports injury	11,546	11,724	10,059	-13%	33,329	6%
Total	203,441	198,055	199,235	-2%	600,731	100%

#### **VIOLENCE ACROSS LANCASHIRE**

# DATA ITEMS

The AEDs across Lancashire differ in the level of assault-related injury data they collect. All are compliant with the College of Emergency Medicine (CEM<sup>6</sup>) and Information Sharing to Tackle Violence (ISTV<sup>7</sup>) mandated data items; however, some AEDs collect additional data for assault attendances, recommended by the Trauma and Injury Intelligence Group (TIIG; Table 7). There are four hospitals (Chorley & South Ribble Hospital, Royal Preston Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital) which collect information around alcohol for assault attendances, including whether alcohol was consumed prior to the assault and the location (type and details) of where alcohol was last consumed.

<sup>5</sup> 

<sup>&</sup>lt;sup>5</sup> Please note, falls comprise a larger proportion of injury attendances than 8%; only Lancashire Teaching Hospitals NHS Foundation Trust categorise falls as a specified injury group.

<sup>&</sup>lt;sup>6</sup> CEM Guideline for information sharing to reduce community violence: <a href="https://orca.cf.ac.uk/69081/1/CEM4881-CEC-Guideline-Information-sharing-to-reduce-Community-Violence-Sep-2009-(Revised-Aug-2011).pdf">https://orca.cf.ac.uk/69081/1/CEM4881-CEC-Guideline-Information-sharing-to-reduce-Community-Violence-Sep-2009-(Revised-Aug-2011).pdf</a>.

<sup>&</sup>lt;sup>7</sup> ISTV Initial Standard - Specification: <a href="http://webarchive.nationalarchives.gov.uk/+/http://www.isb.nhs.uk/documents/isb-1594/amd-31-2012/1594312012spec.pdf">http://webarchive.nationalarchives.gov.uk/+/http://www.isb.nhs.uk/documents/isb-1594/amd-31-2012/1594312012spec.pdf</a>.

Table 7. Assault-related data items collected by Lancashire hospitals<sup>8</sup>

	CEM/ISTV data items						TIIG recommended data items			
Hospital	Assault date	Assault time	Assault location type	Assault location details	Assault weapon	Assault weapon details	Alcohol consumed	Location last drink type	Location last drink details	Reported to police
Blackburn	Y	Υ	Υ	Υ	Υ	Υ	-	-	-	-
Blackpool	Υ	Υ	Υ	Υ	Υ	Υ	-	-	-	-
Chorley	Y	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Lancaster	Y	Υ	Υ	Υ	Υ	Υ	-	-	-	-
Ormskirk	Y	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Preston	Y	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Southport	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ

#### **DATA OVERVIEW**

Between April 2013 and March 2016, there were 14,427 assault-related injury attendances made by residents of Lancashire to the AEDs across the county. Royal Blackburn Hospital had the highest number of assault attendances (n=5,148; 36%), followed by Royal Preston Hospital (n=3,439; 24%) and Blackpool Victoria Hospital (n=3,087; 21%; Table 8). Although assault attendances decreased by 13% overall, they increased at Lancaster Royal Infirmary and Ormskirk & District General Hospital (35% and 78% respectively).

Table 8. Assault attendances by hospital, Lancashire residents, April 2013 to March 2016

Hospital	2013/14	2014/15	2015/16	% change	Total (N)	Total (%)
Blackburn	1,942	1,703	1,503	-23%	5,148	36%
Blackpool	1,174	924	989	-16%	3,087	21%
Chorley	464	445	417	-10%	1,326	9%
Lancaster	292	306	394	35%	992	7%
Ormskirk	23	25	41	78%	89	1%
Preston	1,246	1,066	1,127	-10%	3,439	24%
Southport	112	142	92	-18%	346	2%
Total	5,253	4,611	4,563	-13%	14,427	100%

<sup>&</sup>lt;sup>8</sup> Southport and Ormskirk Hospitals NHS Trust also collects information regarding the attacker/s (number, gender and relationship).

Over seven in ten (71%) assault attendances across Lancashire between April 2013 and March 2016 were male (Figure 1).

Figure 1. Assault attendances by gender, Lancashire residents, April 2013 to March 2016<sup>9</sup>

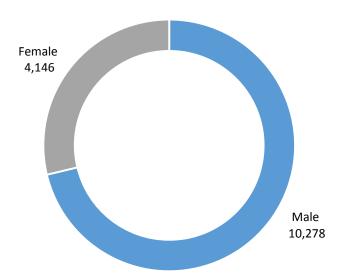
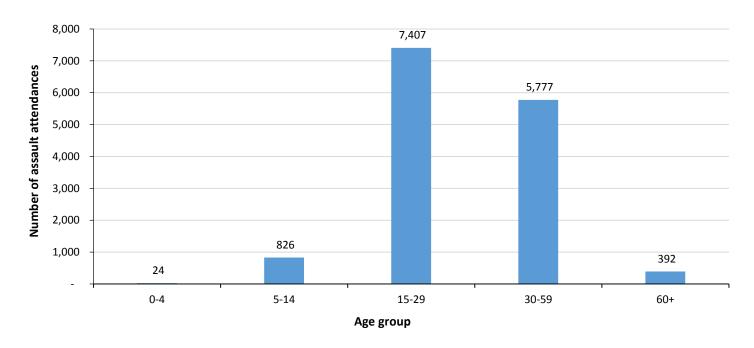


Figure 2 shows the age groups of assault attendances over the three-year period. Just over half (51%) of assault attendees were aged between 15 and 29 years, followed by two-fifths (40%) aged between 30 and 59 years.

Figure 2. Assault attendances by age group, Lancashire residents, April 2013 to March 2016<sup>10</sup>



\_

<sup>&</sup>lt;sup>9</sup> There were <5 records where the gender was unrecorded.

<sup>&</sup>lt;sup>10</sup> There were <5 records where the age was unrecorded.

Figure 3 shows a steady increase in the number of assault attendances as age increased for young people, peaking at 19 years (n=641), at which point, with the exception of some fluctuations, assault attendances generally declined with age.

Figure 3. Assault attendances by age, Lancashire residents, April 2013 to March 2016<sup>11</sup>

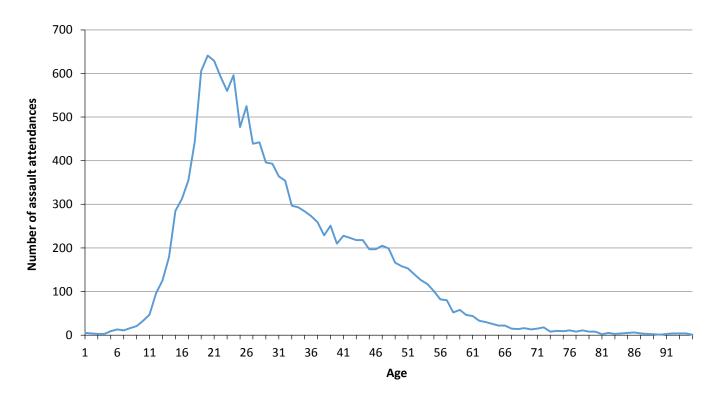


Table 9 compares age group and gender of assault attendees aged between 15 and 49 years. Males aged between 20 and 24 years accounted for the highest number of assault attendances (n=2,120), followed by males aged between 15 and 19 years (n=1,687), and males aged between 25 and 29 years (n=1,576). The proportion of males overall was 71%; however, it was higher for those aged 29 years and under. Notably, the largest proportions of females were aged between 45 and 49 years and between 35 and 39 years (33% and 32% respectively).

Table 9. Assault attendances by age group and gender, Lancashire residents, April 2013 to March 2016<sup>12</sup>

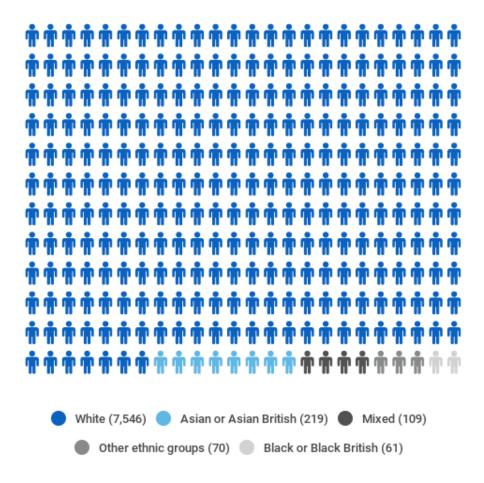
	Male	Male		Female		
Age group	N	%	N	%	N	
15-19	1,687	72%	671	28%	2,358	
20-24	2,120	74%	734	26%	2,854	
25-29	1,576	72%	618	28%	2,194	
30-34	1,131	71%	461	29%	1,592	
35-39	829	68%	393	32%	1,222	
40-44	758	70%	325	30%	1,083	
45-49	617	67%	308	33%	925	
Total	8,718	71%	3,510	29%	12,228	

 $<sup>^{11}</sup>$  There were <5 records where the age was unrecorded.

<sup>&</sup>lt;sup>12</sup> There were <5 records where the age and/or gender was unrecorded; these have been omitted from the table.

The majority (94%) of assault attendees were of White ethnicity; Asian or Asian British accounted for 3% of attendances (Figure 4). Mixed, other ethnic groups and Black or Black British each accounted for 1% of attendances.

Figure 4. Assault attendances by ethnicity, Lancashire residents, April 2013 to March 2016<sup>13</sup>



<sup>&</sup>lt;sup>13</sup> Royal Blackburn Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital do not record patients' ethnicity. Of the hospitals that do record ethnicity, 186 patients were not asked, 650 did not state their ethnicity and <5 records were unrecorded.

#### AREA OF RESIDENCE

Table 10 shows AED assault attendances by local/unitary authority of patient residence and financial year. The area with the highest number of attendances was Preston with 16% of total attendances (n=2,336), followed by Blackpool (n=2,216; 15%) and Blackburn with Darwen (n=1,836; 13%). The number of attendances decreased over the three years for all areas except Lancaster for which there was a 38% increase; most of this increase was between 2014/15 and 2015/16 (27%).

Table 10. Assault attendances by age group and gender, Lancashire residents, April 2013 to March 2016

Authority area	2013/14	2014/15	2015/16	% change	Total (N)	Total (%)
Blackburn with Darwen	703	592	541	-23%	1,836	13%
Blackpool	832	697	687	-17%	2,216	15%
Burnley	438	449	392	-11%	1,279	9%
Chorley	359	355	325	-9%	1,039	7%
Fylde	169	111	147	-13%	427	3%
Hyndburn	324	281	218	-33%	823	6%
Lancaster	285	308	392	38%	985	7%
Pendle	338	238	248	-27%	824	6%
Preston	839	739	758	-10%	2,336	16%
Ribble Valley	103	96	77	-25%	276	2%
Rossendale	122	109	105	-14%	336	2%
South Ribble	368	281	319	-13%	968	7%
West Lancashire	143	168	136	-5%	447	3%
Wyre	230	187	218	-5%	635	4%
Total	5,253	4,611	4,563	-13%	14,427	100%

Figure 5 maps the number of assault attendances by lower super output area (LSOA) of patient residence with authority boundaries. The LSOAs with the highest number of assault attendances were Blackburn with Darwen 006E (n=111), Preston 014A (n=93), Blackpool 006A (n=87) and Chorley 007C (n=79). The top three LSOAs are all city centre areas in Blackburn, Preston and Blackpool respectively.

Figure 5. Number of assault attendances by LSOA of residence with authority boundaries, Lancashire residents, April 2013 to March 2016

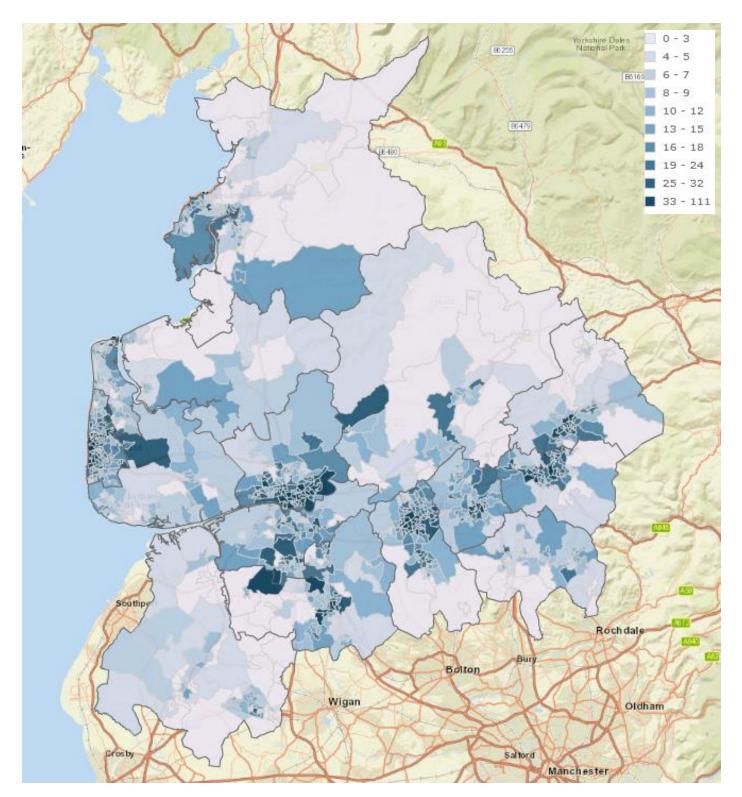


Figure 6 maps the rate of assault attendance per 1,000 population by LSOA of patient residence with authority boundaries. Rates have been calculated using the average number of attendances across the three years. The LSOAs with the highest rates of assault attendance per 1,000 population were Blackpool 006A and Blackburn with Darwen 006E (19 each), followed by Blackpool 010E (17).

Figure 6. Rate of assault attendances per 1,000 population by LSOA of residence with authority boundaries (three-year average), Lancashire residents, April 2013 to March 2016

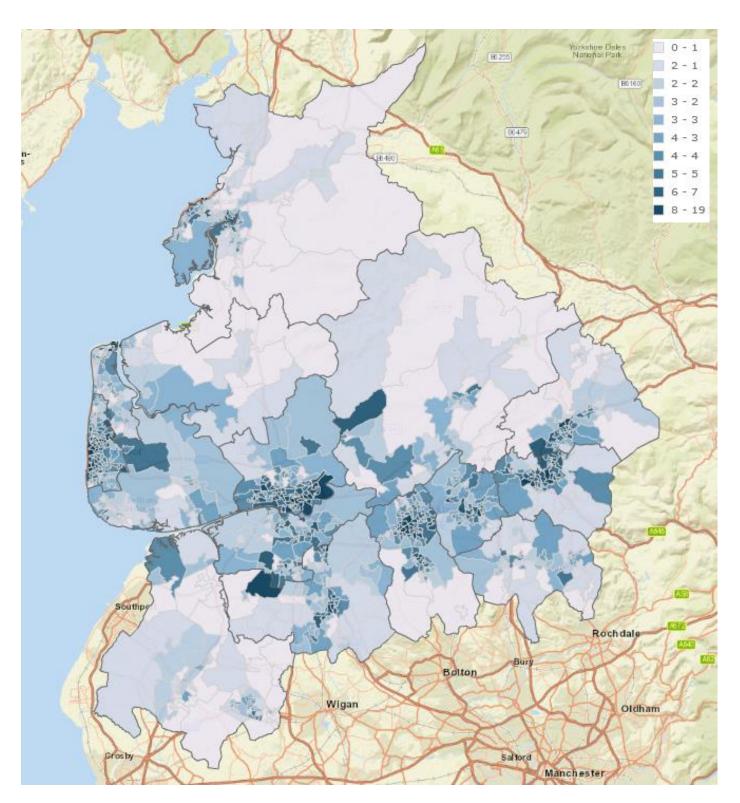


Table 11 shows the 21 LSOAs with the highest rate of assault attendances between April 2013 and March 2016, per 1,000 population. Ten of the 21 LSOAs with the highest rates were in Blackpool, while five were in Preston, three were in Blackburn with Darwen, two were in Burnley and one was in Pendle.

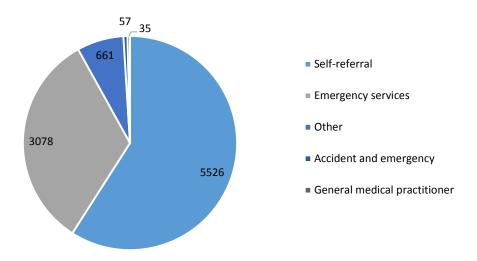
Table 11. Assault attendances for the 21 LSOAs with the highest rates, Lancashire residents, April 2013 to March 2016

LSOA code	LSOA name	Total number of assault attendances	Rate of assault attendances per 1,000 population (three-year average)
E01012681	Blackpool 006A	87	19
E01012655	Blackburn with Darwen 006E	111	19
E01012737	Blackpool 010E	71	17
E01012736	Blackpool 010D	58	15
E01012670	Blackpool 011A	49	14
E01033224	Preston 017G	43	13
E01012683	Blackpool 006B	54	13
E01012751	Blackpool 013D	52	12
E01025286	Preston 009E	69	12
E01012673	Blackpool 010A	46	12
E01024895	Burnley 003F	50	12
E01025295	Preston 014A	93	12
E01012679	Blackpool 008B	52	12
E01012682	Blackpool 008D	50	12
E01025297	Preston 014C	69	11
E01012675	Blackpool 010B	53	11
E01012622	Blackburn with Darwen 009C	53	11
E01012629	Blackburn with Darwen 006A	38	11
E01025219	Pendle 010F	41	11
E01024907	Burnley 010D	38	11
E01025290	Preston 017B	52	11

#### ATTENDANCE INFORMATION

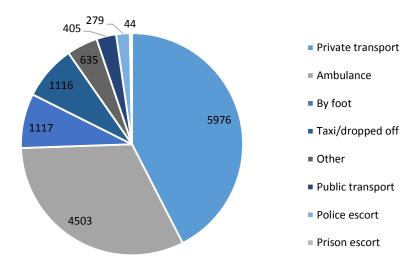
Just under three-fifths (59%) of assault attendees self-referred to the AED, while one-third (33%) were referred by the emergency services (Figure 7).

Figure 7. Assault attendances by referral source, Lancashire residents, April 2013 to March 2016<sup>14</sup>



Just over two-fifths (42%) of assault attendees arrived at the AED by private transport, followed by just under one-third (32%) who arrived by ambulance (Figure 8).

Figure 8. Assault attendances by arrival mode, Lancashire residents, April 2013 to March 2016<sup>15</sup>

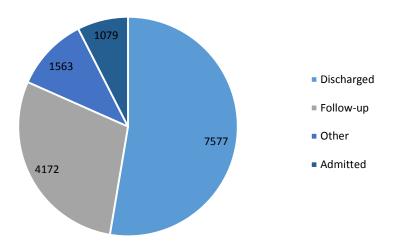


<sup>&</sup>lt;sup>14</sup> Chorley & South Ribble Hospital and Royal Preston Hospital do not record referral source. Of the hospitals that do, 199 were unrecorded.

<sup>&</sup>lt;sup>15</sup> There were 352 records where the arrival mode was unrecorded or unknown.

Just over half (53%) of assault attendees were discharged from the AED with no follow-up treatment required, while just under three in ten (29%) required follow-up treatment for their injuries, 11% were recorded as 'other' (which includes those who left the department before being treated, refused treatment and died in department) and 7% were admitted into hospital (Figure 9).

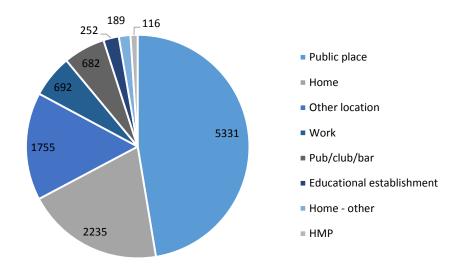
Figure 9. Assault attendances by disposal method, Lancashire residents, April 2013 to March 2016<sup>16</sup>



#### INCIDENT LOCATION

Figure 10 shows the incident location for assaults between April 2013 and March 2016. Just under half (47%) of assaults occurred in a public place, followed by 20% at home. Six per cent of assaults were recorded to have occurred at a pub, club or bar; however, a proportion of assaults recorded as a public place could include incidents which took place at a pub, club or bar, due to differing recording practices across the trusts.

Figure 10. Assault attendances by incident location, Lancashire residents, April 2013 to March 2016<sup>17</sup>



<sup>&</sup>lt;sup>16</sup> There were 36 records where the disposal method was unrecorded. There were <5 records where the patient died; these have been included with the 'other' count.

<sup>&</sup>lt;sup>17</sup> Royal Blackburn Hospital did not start recording incident location until December 2013. There were an additional 1,027 record where the incident location was unrecorded.

Figure 11 shows assault location by gender. There were more males than females for all assault locations, except for those which occurred at home where there were equal proportions for males and females.

Figure 11. Assault attendances by incident location and gender, Lancashire residents, April 2013 to March 2016<sup>18</sup>

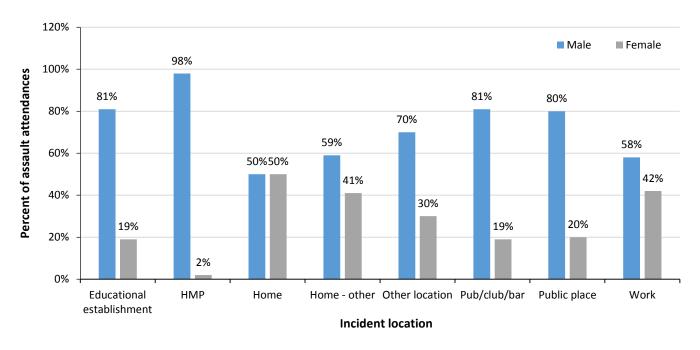
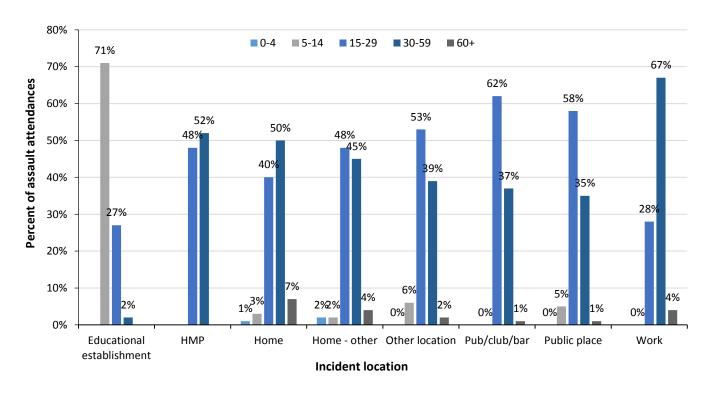


Figure 12 shows assault locations by age group. For assaults which occurred in another person's home, 'other' locations, pub, club or bar and public place, there were larger proportions aged between 15 and 29 years, while for assaults which occurred at a HM Prison, home and work, there were larger proportions aged between 30 and 59 years. The majority (71%) of assaults which occurred in an educational establishment involved persons aged between five and 14 years.

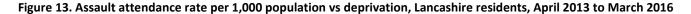
Figure 12. Assault attendances by incident location and age group, Lancashire residents, April 2013 to March 2016<sup>18</sup>

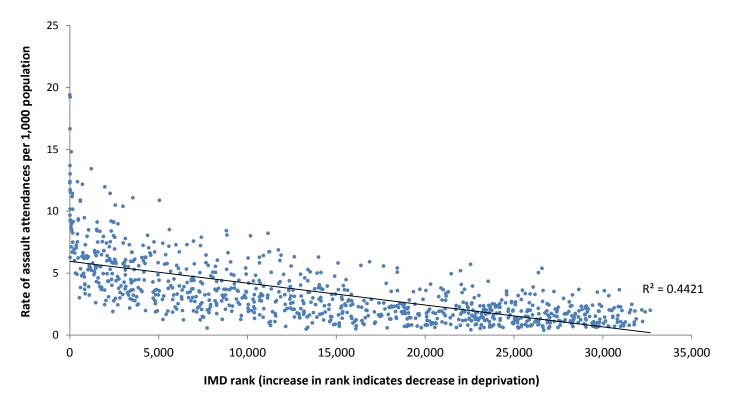


<sup>&</sup>lt;sup>18</sup> There were 3,175 records where the incident location was unrecorded or unknown and <5 records where the gender/age was unrecorded.

#### VIOLENCE AND DEPRIVATION

Figure 13 shows the rate of assault attendance per 1,000 population against the English Index of Multiple Deprivation (IMD) 2015 for each LSOA. As displayed, there is a clear relationship between assault and deprivation; higher assault rate per 1,000 population were associated with lower IMD rank, representing an increased level of deprivation. This association was found to be highly significant (correlation coefficient -0.719; p<0.001); the model of association between deprivation and assault rate explained 44% of the variance. While this association does not necessarily imply causation, there is substantial evidence that deprivation underpins violence in UK societies.<sup>19</sup>





11

<sup>&</sup>lt;sup>19</sup> Kawachi, I., Kennedy, B.P. and Wilkinson, R.G. (1999). Crime: social disorganisation and relative deprivation. Social Science & Medicine. 48 719–731.

# ALCOHOL-RELATED VIOLENCE ACROSS LANCASHIRE

#### DATA OVERVIEW

Between April 2013 and March 2016, there were a total of 5,200 assault-related injury attendances made by Lancashire residents to the four hospitals which collect alcohol-related data items for assault attendances (Chorley & South Ribble Hospital, Royal Preston Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital). Of these, 2,278 reported that they had consumed alcohol prior to the incident (44%).

Table 12 shows attendances to these hospitals made by Lancashire residents (excluding records where data were not recorded) in response to whether alcohol was consumed prior to the assault. Royal Preston Hospital had the highest number of assault-related injury attendances where alcohol had been consumed prior to the incident (n=1,700), followed by Chorley & South Ribble Hospital (n=529). Royal Preston Hospital also had the highest proportion who had consumed alcohol (55%), followed by Southport and Formby District General Hospital (53%) and Chorley and South Ribble Hospital (50%). Just 4% of the attendees to Ormskirk and District Hospital reported that they had consumed alcohol, while 91% had not (this is a children's AED).

Table 12. Assault attendances by alcohol consumption, Lancashire residents, April 2013 to March 2016<sup>20</sup>

	Yes		N	No		Refused/ unable to answer	
Hospital	N	%	N	%	N	%	N
Chorley	529	50%	492	47%	31	3%	1,052
Ormskirk	***	4%	21	91%	***	4%	23
Preston	1,700	55%	1,330	43%	86	3%	3,116
Southport	<50	53%	23	25%	<25	22%	91
Total	2,278	53%	1,866	44%	138	3%	4,282

Of the 2,278 assault attendances where alcohol had been consumed, 2,027 were resident in Chorley, Preston, South Ribble and West Lancashire local authorities (89%; Table 13). There were similar numbers of attendances made by Lancashire residents versus residents of Chorley, South Ribble and West Lancashire authority areas; however, there was a difference of 434 for attendances to Royal Preston Hospital.

Table 13. Assault attendances by alcohol consumption, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016

	Yes		N	No		Refused/ unable to answer	
Hospital	N	%	N	%	N	%	N
Chorley	525	51%	476	46%	29	3%	1,030
Ormskirk	***	4%	21	91%	***	4%	23
Preston	1,455	54%	1,171	44%	56	2%	2,682
Southport	<50	52%	23	26%	<20	22%	88
Total	2,027	53%	1,691	44%	105	3%	3,823

<sup>&</sup>lt;sup>20</sup> Throughout this report, numbers less than five have been suppressed (with \*\*\*) to maintain patient confidentiality. Where there is only one number less than five in a category then a second number has been suppressed to prevent back calculations from totals (e.g. <20).

20

#### AREA OF RESIDENCE

From now on in the report, analyses are for residents of Chorley, Preston, South Ribble and West Lancashire local authorities where alcohol had been consumed prior to the assault only (attendances to Chorley & South Ribble Hospital, Royal Preston Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital only).

Of the residents of Chorley, Preston, South Ribble and West Lancashire local authorities who presented with assault-related injuries where alcohol was a factor, over half (54%) were resident in Preston (Figure 14). Similar proportions were resident in South Ribble and Chorley (22% and 21% respectively), while 3% were resident in West Lancashire.

Figure 14. Alcohol-related assault attendances by authority area, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016

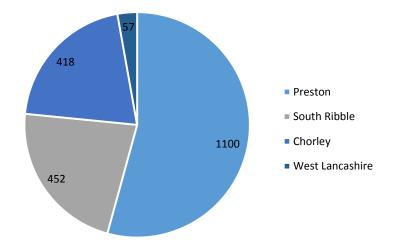


Table 14 shows the 17 LSOAs with the highest numbers of alcohol-related assault attendances between April 2013 and March 2016. All but two of the LSOAs with the highest numbers were in Preston.

Table 14. Alcohol-related assault attendances for the 17 LSOAs with the highest number by LSOA, Chorley and Preston residents, April 2013 to March 2016

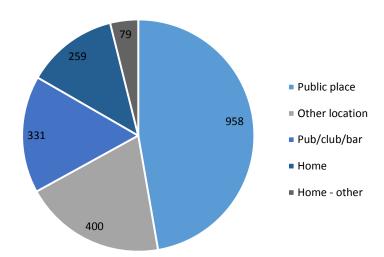
1		
LSOA code	LSOA name	N
E01025292	Preston 015B	33
E01025286	Preston 009E	32
E01025296	Preston 014B	31
E01025297	Preston 014C	30
E01025314	Preston 012G	28
E01025290	Preston 017B	27
E01025283	Preston 009B	24
E01025313	Preston 012F	24
E01025232	Preston 013B	24
E01033223	Preston 017F	24
E01024940	Chorley 010D	23
E01025245	Preston 007E	23
E01025287	Preston 009F	23
E01025293	Preston 015C	23
E01024942	Chorley 012A	22
E01025274	Preston 011B	22
E01025310	Preston 012C	22

#### INCIDENT LOCATION

This section considers residents of Chorley, Preston, South Ribble and West Lancashire local authorities where alcohol was a factor (attendances to Chorley & South Ribble Hospital, Royal Preston Hospital, Ormskirk & District General Hospital and Southport & Formby District General Hospital only).

Just under half (47%) of alcohol-related assaults occurred in a public place, followed by one-fifth (20%) in a location categorised as 'other' (Figure 15). Sixteen per cent occurred at licensed premises, 13% at home and 4% at someone else's home. It should be noted that a proportion of assaults recorded as a public place could include incidents which took place at licensed premises, due to differing recording practices across the two trusts.

Figure 15. Alcohol-related assault attendances by incident location, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016<sup>21</sup>



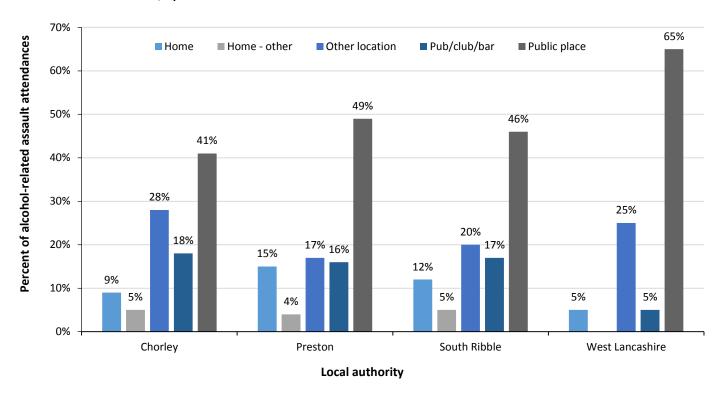
When comparing these figures to all assault attendances made by all Lancashire residents across the county's hospitals, the proportion which occurred in a public place were the same (47%). For incidents where alcohol had been consumed, there was a higher proportion which occurred at licensed premises (16% vs 6%<sup>22</sup>) and a lower proportion which occurred at home (13% vs 20%).

<sup>&</sup>lt;sup>21</sup> Due to low numbers incidents which occurred at HM Prison and work, and records recorded as unknown, have been included in the 'other' count.

<sup>&</sup>lt;sup>22</sup> Caution is required when interpreting these figures owing to varying recording practices.

Shown in Figure 16 are the incident locations by local authority. Preston had the largest proportion of incidents which occurred at home (15%), followed by South Ribble (12%), Chorley (9%) and West Lancashire (5%). There were similar proportions of incidents which took place at licensed premises for Chorley, Preston and South Ribble residents (18%, 16% and 17% respectively), while West Lancashire had the largest proportion of assaults which occurred in a public place<sup>23</sup> (65%), followed by Preston (49%), South Ribble (46%) and Chorley (41%).

Figure 16. Alcohol-related assault attendances by incident location and local authority, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016



<sup>&</sup>lt;sup>23</sup> 'Public place' may include city/town centres, streets, parks, public transport and public buildings, but in AED reporting may also include licensed premises. TIIG works closely with AED reception staff to enhance understanding that licensed premises should be separately categorised.

The LSOAs which had five or more residents presenting to an AED with alcohol-related assault injuries where the incident occurred at home were all in Preston local authority (Table 14); Preston 012C had the highest number (n=10), followed by Preston 007A (n=7).

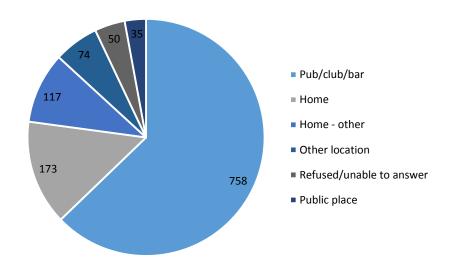
Table 15. Alcohol-related assault attendances where incident occurred at home by LSOA, Preston residents, April 2013 to March 2016

LSOA code	LSOA name	N
E01025310	Preston 012C	10
E01025234	Preston 007A	7
E01025287	Preston 009F	6
E01025296	Preston 014B	6
E01025298	Preston 014D	6
E01025306	Preston 017D	6
E01033223	Preston 017F	6
E01025245	Preston 007E	5
E01025288	Preston 010D	5
E01025276	Preston 012A	5
E01025312	Preston 012E	5
E01025247	Preston 016A	5

# LAST DRINK LOCATION

Over three-fifths (63%) of alcohol-related assault attendees consumed alcohol in licensed premises prior to the incident, while 14% consumed alcohol at home, 10% at someone else's home and 6% at a location categorised as 'other' (Figure 17).

Figure 17. Alcohol-related assault attendances by last drink location, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016<sup>24</sup>



 $<sup>^{\</sup>rm 24}$  There were 676 records where the last drink location was unrecorded.

TIIG | Alcohol-related violence across Lancashire

#### INCIDENT LOCATION VS LAST DRINK LOCATION

Table 16 compares incident location and last drink location, where recorded. For assaults which occurred at home, the majority (78%) had their last drink at home and, similarly, 51% of assaults which occurred at someone else's home had their last drink at someone else's home. Half (50%) of assaults which took place in a location categorised as 'other' had their last drink in licensed premises, while the majority of incidents which occurred at licensed premises or in a public place had their last drink in a pub, club or bar (95% and 70% respectively).

Table 16. Alcohol-related assault attendances by incident location and last drink location, Chorley, Preston, South Ribble and West Lancashire residents, April 2013 to March 2016

	Last drink location						
Incident location	Home	Home - other	Other location	Pub/club/bar	Public place	Refused/unable to answer	Total
Home	112	5	5	22	0	0	144
Home - other	<10	<25	<10	7	***	***	45
Other location	17	31	28	103	12	15	206
Pub/club/bar	***	***	***	222	***	***	234
Public place	32	56	31	404	21	34	578
Total	173	117	74	758	35	50	1,20 7



