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# Integrated Monitoring System Annual Report

## Cheshire and Merseyside 2013/14

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## PREVIOUS REPORTS

### The Alcohol Treatment in Cheshire and Merseyside report series

This *Integrated Monitoring System Cheshire and Merseyside 2013/14* report is adapted from a series of reports that highlight intelligence on drug and alcohol treatment in Cheshire and Merseyside. The previous reports were:

- Alcohol Treatment in Cheshire and Merseyside, 2004/05 (Brown et al, 2006)
- Alcohol Treatment in Cheshire and Merseyside, 2005/06 (McVeigh et al, 2006)
- Alcohol Treatment in Cheshire and Merseyside, 2006/07 (McCoy et al, 2007)
- Alcohol Treatment in Cheshire and Merseyside, 2007/08 (McCoy et al, 2009)
- Alcohol Treatment in Cheshire and Merseyside, 2008/09 (McCoy et al, 2010)
- Alcohol Treatment in Cheshire and Merseyside, 2010/11 (Hurst et al, 2012)
- Alcohol Treatment in Cheshire and Merseyside, 2011/12 (Hurst et al, 2013)
- Drug and Alcohol Treatment in Cheshire and Merseyside, 2012/13 (Whitfield et al, 2013)

All the reports above are available at: www.cph.org.uk/publications

## CONTENTS

## EXECUTIVE SUMMARY

This publication is the first report for the IMS (Integrated Monitoring System), which includes information previously reported in the "Alcohol Treatment in Cheshire and Merseyside" and IAD (Inter-Agency Database) NSP (Needle and Syringe Programme) reports, alongside information on drug and alcohol use in the region. During the 2013/14 reporting period, 45 drug and alcohol services (including those offering Needle and Syringe Programmes, also known as NSP) and 94 pharmacies from throughout the region reported attributable information (i.e., containing a client's initials, date of birth and gender), with data being received from 139 different contributing sites in total. Over-all, 76,930 interventions, transactions or referrals to other agencies were delivered to 24,735 individuals, alongside a further 15,072 screenings delivered to both service users and the general public by pharmacies and agencies throughout the Wirral.

The treatment population for IMS reporting services as a whole (including NSP services) was mainly male (83.8%), identified themselves as White British (91.1%) and were aged between 30-44 years (46.3%). For non-NSP services, there were again significantly more males attending (69.8%) with almost two in five (37.3%) individuals aged between 30-44 years, and likewise identifying largely as White British (88.3%). Alcohol was the most commonly reported problem substance for both sets of service users, although large numbers of Steroids and PIED (Performance and Image Enhancing Drugs) users presented to NSP services, accounting for some but not all of the skew towards males in the demographic breakdown.

For non-structured services, Art and Soul (formerly the Spider Project) delivered the highest number of interventions from non-structured services (8,021) with the Alcohol Liaison Service at Aintree Hospital providing interventions to the greatest number of clients (1,944). The monitoring system continues to expand with several new services and pharmacies due to commence reporting in the next financial year.

## INTRODUCTION

This publication details the results of the IMS across Merseyside and Cheshire over the period of the 13-14 financial year, cross matching it with structured NDTMS data, along with an overview of significant developments in terms of policy and publications in the field of drugs and alcohol research.

As with last year, Wirral AUDIT screening data are now included in a separate section. AUDIT screenings are mainly focussed on the general public, often through pharmacies (although some specialist drug and alcohol services are also included), and the population wide scope of the screening means that many individuals screened will not have an issue with any substance. Wirral is the only Local Authority in Cheshire and Merseyside currently comprehensively using the AUDIT (Alcohol Use Disorders Identification Test) screening tool developed by the WHO to identify persons with increasing risk or harmful/dependent use and the data is therefore invaluable as a measurement of alcohol use across the region.

**Box 1.** The non-structured monitoring systems provided by CPH include the data from systems formerly known as ATMS (Alcohol Treatment Monitoring System), NSTMS (Non Structured Treatment Monitoring System, recorded using the GOLIATH system) and IAD (Inter Agency Database), which cover interventions delivered from low threshold drug, alcohol and syringe exchange services.

While the varying systems have been merged into one unified dataset, this report is split into sections so data for each respective part of the dataset can still be identified and analysed individually. There is a large appendix section at the back of the document which provides a more detailed breakdown for some sections.

With the transition of NDTMS provision across England from local centres (including the Centre for Public Health; CPH) to Public Health England (PHE), and public health departments moving from PCTs to local authorities, there has been a significant degree of upheaval to systems which have made exchange of data between organisations at times difficult, alongside the uncertainties around funding and major changes of personnel creating ongoing challenges in maintaining the delivery of local monitoring systems. While all Local Authorities (LAs) within Merseyside and Cheshire contributed towards local monitoring systems for the 2013-14 financial year, the types of service vary between them, with Liverpool in particular having a large number of non-structured (non-NSP) services. However with the launch of the new Integrated Monitoring System (IMS) in April 2014 the delivery of non-structured interventions are now being recorded in Liverpool, Wirral, Sefton and Knowsley and we are in discussion with commissioners over their recording across Cheshire and Merseyside.

## SETTING THE SCENE (ALCOHOL)

Alcohol and alcohol-related issues place great burden upon health services and health providers; with an estimated 1.6 million people in England dependent on alcohol (The Centre for Social Justice, 2013). *The Government's Alcohol Strategy* (HM Government, 2012) set out the Government's proposals to crack down on 'binge drinking', alcohol related violence and the number of people drinking at harmful/damaging levels. Documents such as *Health First – An evidence-based alcohol strategy for the UK* (Alcohol Health Alliance UK, University of Sterling and British Liver Trust, 2013) have also detailed the effects that excessive drinking in the UK is having; including highlighting the impact it will have upon future generations due to significantly high levels of teenage drinking (compared to the European average). We have also seen additional focus by Alcohol Concern (2013) upon improving regulations around alcohol advertising. It has been acknowledged that current guidelines do not do enough to safeguard children against the harms of alcohol, with high levels of alcohol brand recognition amongst children and increasing exposure to alcohol advertising among young people (Alcohol Concern, 2013).

Recommendations going forward from strategies and documents such as these have included commitments to: introduce a minimum unit price for alcohol; pilot innovative sobriety schemes to challenge alcohol-related offending; a sustained reduction in both the numbers of 11-15 year olds drinking alcohol and the amounts consumed; tougher restrictions on advertising and overall availability of alcohol (HM Government, 2012; Alcohol Health Alliance UK, University of Sterling and British Liver Trust, 2013; Alcohol Concern, 2013).

### TAKING ACTION LOCALLY

The 2013-2016 Public Health Outcomes Framework (DH, 2013) includes an indicator for alcohol-related admissions to hospital (2.18) with improvements within this indicator very much focussed around local leadership through health improvement programmes commissioned by local authorities. However, for some, the core role for the delivery of related services must lie within the NHS (DH, 2013).

In April 2013, local councils were also given a public health grant, which includes money for alcohol services (www.gov.uk/government/policies/reducing-harmful-drinking). Through health and wellbeing boards, councils will work with the NHS, Public Health England and local communities to understand local needs and to set public health priorities. Councils will therefore be able to commission prevention and treatment services that meet the needs of local people, including:

- Identification and brief advice programmes delivered by health professionals, which have strong evidence of changing behaviour; and
- Treatment for alcohol dependence.

## SOME FACTS AND FIGURES SURROUNDING ALCOHOL USE, ALCOHOL-RELATED CONSEQUENCES AND TREATMENT INCLUDE*:

*Drinking behaviours*

- In 2012, 31% of men and 24% of women in England drank more than twice the recommended daily amounts (2-3 units women; 3-4 units men).
- In 2012, 43% of school pupils (aged 11-15 years) in England said that they had drunk alcohol at least once.
- Between 2009 and 2012, in real terms, household spending on alcoholic drinks in the UK increased by 1.3%, whilst alcohol bought for consumption outside of the home fell by 9.8%.
- In the United Kingdom, 2008-2010, an average of 11.6 litres of pure alcohol was consumed per capita in those aged 15+ years. This was a decrease on the average recorded in 2003-2005 (13.2 litres; WHO, 2014).

*Drinking related costs, ill health and mortality*

- Anecdotal evidence suggests that the total cost of alcohol abuse could be as high as £6 billion a year in NHS bills, premature deaths, losses to business (absenteeism and unemployment), drink related crimes and accidents (Royal College of Physicians, 2014 )
- More than one in five children (approximately 2.6 million) lives with a parent who drinks hazardously (The Centre for Social Justice, 2013).
- The Net Ingredient Cost (NIC) for treating alcohol dependence is the highest it has ever been at £3.13 million (2013); an increase of 6.7% from 2012, with over 183,000 prescription items dispensed in 2013.
- In 2012/2013 there were over one million admissions to hospital where the primary reason for admission was alcohol-related disease, injury or condition; as well as secondary diagnosis
    - Males are more likely to be admitted for alcohol related illness, injury or conditions, making up 65% of overall alcohol related admissions.
    - In under 16's, however, females are more likely to be admitted for alcohol related illness, injury or conditions (55%) when compared to males under the age of 16.
- Alcohol related admission rates for 2012/13 were shown to be highest in the North East (2,500/100,000 population) and lowest in the South East (1,500/100,000 population).
- The United Kingdom of Great Britain and Northern Ireland does not have legally binding regulations on alcohol sponsorship/sales promotion; nor is it a legal requirement to put health warning labels on alcohol advertisements/containers. It also has no national alcohol monitoring system in place. (WHO, 2014).
- In 2012, there were 3.3 million deaths worldwide due to the harmful use of alcohol (WHO, 2014).

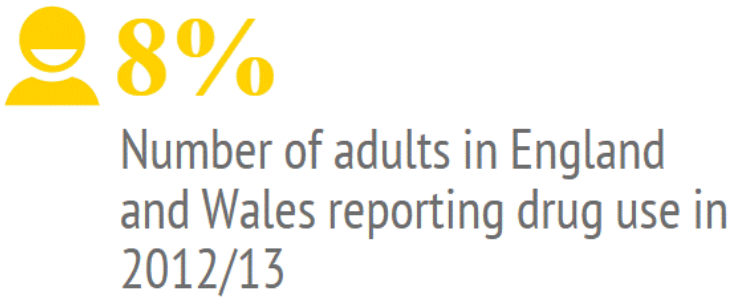
***Please note: Unless otherwise stated the facts above are taken from HSCIC 2014.**


**Figure 1 - Number of school children who have drunk alcohol at least once**

## SETTING THE SCENE (DRUGS)

The 2010 Drug Strategy, *Reducing Demand, Restricting Supply, Building Recovery* (HM Government, 2010) sets out the Coalition Government's approach to tackling drugs, with an emphasis on recovery. *Medications in Recovery* (NTA, 2012), provides a consensus on recovery-orientated treatment for heroin users and, alongside the development of a suite of recovery resources, provides a national framework for best practice for practitioners. The Payment by Results pilots continue in 11 areas with a pilot of heroin assisted treatment also underway, both of which will be fully evaluated. A commitment to harm reduction measures such as needle and syringe exchange, infectious disease testing and treatment continues the public health approach adopted in the UK since the 1980s. An international comparative study is currently being carried out by the Home Office to look at examples of work in other countries and whether this could inform national policy. The *Action Plan on NPS* published in 2012 provides the basis of government action to address the problem of new psychoactive substances (HM Government, 2012) and it was announced in late 2013 that the government would conduct a review into new psychoactive substances. Alongside the *Annual Review of the Drug Strategy* (HM Government, 2013a), an Evaluation Framework has been published (HM Government, 2013b) setting out how the government will assess the costs and benefits of the 2010 Drug Strategy.

The *2013-2016 Public Health Outcomes Framework* (DH, 2013) includes two indicators related directly to drugs, 2.15: successful completion of drug treatment and 2.16: People entering prison with substance dependence issues who are previously not known to community treatment. In April 2013, the 2.15 indicator was updated separating opiate and non-opiate users.



## SOME KEY FACTS SURROUNDING DRUG USE, DRUG-RELATED CONSEQUENCES AND TREATMENT INCLUDE:

- In 2012/13, 8% of adults aged 16 to 59 years old in England and Wales reported using drugs in the last year, a decrease from 12% in 2001/02 (Home Office, 2013). This decrease is primarily driven by a decrease in cannabis use (from 10.7% to 6.4%).
- Trends in stimulant use have fluctuated with a decline in amphetamines use since the turn of the century and an increase in cocaine powder use until 2008/09. Since then, reported use of cocaine powder has decreased from 3.3% to 2.0% but there has been growing concern about the use of NPS. In 2012/13, last year use of mephedrone by 16 to 24 year olds decreased to 1.6% from 3.3% the previous year and 4.4% in 2010/11.
- Drug use among school children has also decreased with use over the past year at around 12% in 2012 compared to 21% in 2003. Cannabis use and any stimulant use have decreased substantially since 2003, although use remained stable between 2011 and 2012 (Fuller, 2013).
- There were an estimated 293,879 opiate and/or crack cocaine users aged 15 to 64 in England in 2011/12 and 87,302 injectors of these drugs (Hay et al., 2014). There has been a decrease in the number of injectors of opiates and/or crack cocaine since the previous year's estimate.
- In 2012/13, 193,575 adults and 15,289 young people aged under 18 received treatment for primary drug misuse in England (PHE, 2013a; 2013b). Just under two-thirds of opiate users are estimated to be in treatment annually with around 90% receiving prescribing treatment. Of the primary opioid users in prescribing treatment, around two-thirds have been in prescribing treatment for more than 12 months.
- Despite a decrease in reported cannabis use (Home Office, 2013) the number of individuals receiving treatment for primary cannabis use in England has continued to increase and, in 2012/13 (n=29,902) was 48% higher than in 2005/06 (n=20,148) (PHE, 2013a; 2013b)
- In England in 2012/13, there were 6,549 NHS hospital admissions with a primary diagnosis of drug-related mental health or behavioural disorders and 61,142 admissions with a primary or secondary diagnosis. While the number of primary and secondary diagnosis admissions has increased substantially since 2002/03 (n=31,490), the number of primary diagnosis admissions has decreased (n=7,691) although there was a 5% increase between 2011/12 and 2012/13 (Health and Social Care Information Centre, 2013)
- In addition, in 2012/13 there were 12,346 hospital admissions with a primary diagnosis of poisoning by illicit drugs, an increase since 2002/03 (n=7,011) (Health and Social Care Information Centre, 2013). Of these, three-quarters had a primary diagnosis of poisoning by other opioids, which excludes heroin and methadone.
- There were 2,367 drug-related deaths in England in 2012, the lowest number since 1994 (ONS, 2013). Deaths among males have decreased in recent years while deaths among females have increased. Thirty per cent of drug-related deaths also involved alcohol. The number of deaths mentioning heroin decreased slightly after a large decrease between 2010 and 2011 and deaths mentioning methadone also decreased after a substantial increase the previous year.
- In England in 2012, the prevalence of HIV amongst people who inject drugs was 1.4%. Prevalence of Hepatitis C infection was much higher at 49%, although there were marked regional variations with a rate of 64% in the North West compared to 33% in the North East (PHE, 2013c). Eighteen per cent of people who inject drugs had markers of current or former Hepatitis B infection in 2011, down from 31% in 2002.
- Thirty per cent of people who inject drugs reported symptoms of an injecting site infection in 2012 (PHE, 2013c).
- In 2012, 91% of people who inject drugs reported ever using a needle and syringe exchange and 14% reported sharing needles and syringes in the last 4 weeks compared to 33% in 2002. Three-quarters reported Hepatitis B vaccine uptake (PHE, 2013c).
- Although opiates remain the most commonly injected drugs, the proportion of people who inject amphetamines or amphetamine-type stimulants has increased among participants to the UAM survey. People who inject these stimulants typically inject more frequently than opiate users (PHE 2013d).

# 1. NATIONAL, REGIONAL AND LOCAL LITERATURE

## 1.1. ALCOHOL


### UPDATING ENGLAND-SPECIFIC ALCOHOL-ATTRIBUTABLE FRACTIONS (JONES AND BELLIS, 2014)

Alcohol attributable fractions (AAFs) specific to England were first calculated in 2008 (Jones et al, 2008) to estimate the impact that alcohol has on population health and health service use, and are routinely applied to provide an indication of the health impacts of alcohol. This report reviews and updates the methodology for calculating England-specific AAFs based upon a growing evidence base for the association between alcohol consumption and the development of acute and chronic conditions. It details 50 conditions, of which 20 are wholly (100%) attributable to alcohol consumption.

Some of the key findings include:

- In 2010, 21,162 deaths were attributable to alcohol consumption. Of which, 5,221 deaths were from wholly attributable conditions; and 15,941 deaths were from partially attributable conditions. The biggest contributors to alcohol-attributable deaths were cancers, digestive diseases and injuries.
- 296,421 potential years of life were lost due to deaths attributable to alcohol consumption in 2010; equivalent to an average of 15.4 and 11.3 years of life lost per alcohol-related death in men and women respectively.
- In 2010/11, 914,929 hospital admission episodes were attributable to alcohol - 288,753 of these were for wholly attributable conditions, while 626,176 hospital admission episodes were for partially attributable conditions. The largest contributors to admissions were hypertensive diseases, mental and behavioural disorders due to use of alcohol and other unintentional injuries.
- In 2010/11, 202,871 primary hospital admission episodes were attributable to alcohol consumption. Of which, 54,097 primary hospital admission episodes were for wholly attributable conditions; and 148,774 primary hospital admission episodes were for partially attributable conditions. Types of unintentional injury and mental and behavioural disorders due to the use of alcohol were the largest contributors for males and females.

The authors of the report conclude that whilst limitations to the methods used to calculate the updated AAFs must be acknowledged; the report does, however, address several shortcomings of the methods used previously to calculate England-specific AAFs. **www.cph.org.uk/publication/updating-england-specific-alcohol-attributable-fractions/**


### ALCOHOL-USE DISORDERS: PREVENTING HARMFUL DRINKING. EVIDENCE UPDATE MARCH 2014 (NICE, 2014)

This document provides a summary of selected new evidence to support (not replace) the evidence that was provided in the original *NICE public health guidance 24 'Alcohol-use disorders: preventing harmful drinking'* (www.nice.org.uk/guidance/PH24), which was aimed at all those whose actions affect the populations attitude to and use of alcohol. The guidance identified how government policies on alcohol pricing, its availability and how it is marketed could be used to combat alcohol-related harm.

Where the evidence was not deemed to be impactful, it may still be considered a key piece of information to be read, or may substantially strengthen the evidence base underpinning a recommendation in the NICE guidance.

**www.evidence.nhs.uk/search?q=alcohol%20treatments%202014&ps=40**


## LOCALISING THE PUBLIC HEALTH RESPONSIBILITY DEAL – A TOOLKIT FOR LOCAL AUTHORITIES (DH, PHE AND LOCAL GOVERNMENT ASSOCIATION, 2013).

*Localising the Public Health Responsibility Deal: A Toolkit for Local Authorities* (Department of Health, Public Health England and Local Government Association, 2013), has been developed from the Public Health Responsibility Deal (https://responsibilitydeal.dh.gov.uk/). It aims to be helpful (at a more local level) for encouraging partnership working between local authorities and small/medium sized businesses to promote healthy lifestyle choices to staff and customers and improve the health of their local communities.


## NORTH WEST MENTAL WELLBEING SURVEY 2012/2013 (JONES ET AL, 2013).

The first North West mental wellbeing survey took place in 2009 (Deacon et al, 2010) providing a greater degree of understanding about the positive mental wellbeing of people in the region. The North West Mental Wellbeing Survey 2012/13 report highlights key findings from the North West Mental Wellbeing Survey 2012/13 as well as providing comparison to the baseline survey conducted in 2009. The survey measured the positive mental health and wellbeing of 11,500 people across the North West of England through a series of 54 questions.

In relation to alcohol the survey found that:

- Compared with the North West mean, lower risk drinkers[1] had significantly higher mental wellbeing levels, while abstainers and higher risk drinkers had significantly lower mental wellbeing.

- Those who were classed as abstainers[2] reported significantly lower mental wellbeing than both lower risk and increasing risk drinkers, but significantly higher mental wellbeing than higher risk drinkers.

**http://phlive.org.uk/831/**

[1] *Lower risk drinking* - consumption of less than 22 units of alcohol per week for males, and less than 15 units of alcohol per week for females. *Increasing risk drinking* - consumption of between 22 and 50 units of alcohol per week for males, and between 15 and 35 units of alcohol per week for females. *Higher risk drinking* - more than 50 units of alcohol per week for males, and more than 35 units of alcohol per week for females.

[2] It is also important to note that the proportion of abstainers reported was higher than the synthetic estimates for the North West presented in the Local Alcohol Profiles for England (LAPE – www.lape.org.uk), while all other categories were lower.


## NO QUICK FIX. EXPOSING THE DEPTH OF BRITAIN'S DRUG AND ALCOHOL PROBLEM (THE CENTRE FOR SOCIAL JUSTICE, 2013).

This report outlines the challenges associated with the treatment of those with drug and alcohol addiction. It advocates the importance of movement to a recovery-orientated system that highlights harm reduction as only one of the first steps needed to achieve abstinence and full recovery from drug and alcohol addiction. It suggests that cuts in funding to residential rehabilitations centres and a continued focus upon harm reduction services alone, have a negative impact upon breaking the cycle of addiction.

The report highlights issues associated with tackling alcohol abuse, stating that there is an imbalance in the proportion of those addicted to drugs who receive treatment when compared to those who are alcohol dependent. It also questions the withdrawal of the Governments plans for a minimum unit price for alcohol.

This report is to be followed by policy recommendations to help solve Britain's drug and alcohol crisis.

**www.centreforsocialjustice.org.uk/publications/no-quick-fix-exposing-the-depth-of-britain%E2%80%99s-drug-and-alcohol-problem**


## POPULATION SCREENING FOR EARLY SIGNS OF ALCOHOL-RELATED LIVER DISEASE IN HAZARDOUS AND HARMFUL DRINKERS IN LIVERPOOL AND KNOWSLEY (COOK ET AL, 2014).

The Preventing Alcohol Harm in Liverpool and Knowsley (PrevAIL) project aimed to:

Identify levels of alcohol-related harm amongst persons aged 36 to 55 years resident in Liverpool and Knowsley(local authority areas that suffer from significantly higher levels of alcohol attributable hospital admissions than nationally); generate indicators which can be used for planning targeted interventions in order to reduce levels of alcohol misuse in Liverpool and Knowsley; and inform a future randomised trial to test whether feedback on liver health can enhance the success of a brief intervention.

The project identified that:

- Further research is required to understand the long-term efficacy of using a liver screen as part of a brief intervention;
- Findings from the in-depth questionnaire used in PrevAIL could be used to inform the advice and support given alongside the test result, for example, by providing feedback about the range of other harms experienced by those drinking more than the recommended lower risk threshold.
- Findings from the study will also inform a randomised control trial of the effectiveness of augmenting a standard alcohol brief intervention with feedback on liver health.

**www.cph.org.uk/publication/population-screening-for-early-signs-of-alcohol-related-liver-disease-in-hazardous-and-harmful-drinkers-in-liverpool-and-knowsley/**

## 1.2. DRUGS INCLUDING NEEDLE EXCHANGE PROGRAMMES

### ANALYSIS OF SURVEY DATA ON THE IMPLEMENTATION OF NICE PH18 GUIDANCE RELATING TO NEEDLE AND SYRINGE PROVISIONS IN ENGLAND (BATES, JONES AND MCVEIGH, 2014)

As part of work undertaken to inform the update of NICE guidance *Needle and syringe programmes: providing people who inject drugs with injecting equipment* (www.nice.org.uk/guidance/PH18) (first issued in 2009), a survey was undertaken in 2013 of those who commission and provide needle and syringe programme services in England. The primary aims of the survey were to understand how widely this NICE guidance had been implemented; and Identify any barriers to applying the guidance recommendations.

Key conclusions indicated that:

- There was variation in the extent to which recommendations made in the PH18 guidance were implemented by providers and commissioners of needle and syringe programme (NSP) services.
- Despite the guidance providing the opportunity to bring greater uniformity in the commissioning and provision of NSP services in England, there is still variability in commissioning policy and practice across England.
- Further implementation of the guidance is likely to be helped through the improvement of barriers such as improving data collection and monitoring of NSP clients and increasing staff training opportunities.

http://www.cph.org.uk/wp-content/uploads/2014/04/NICE-PH18-guidelines-implementation-report.pdf

### NEEDLE AND SYRINGE PROGRAMMES (NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE, 2014)



NICE published new public health guidelines on needle and syringe programmes in March 2014 replacing the previous guidelines published in 2009 (NICE, 2009). The guidelines contain 10 recommendations for directors of public health, commissioners and providers of needle and syringe programmes and related services:

- *Consult with and involve users, practitioners and the local community*
- *Collate and analyse data on injecting drug use*
- *Commission both generic and targeted services to meet local need*
- *Monitor services*
- *Develop a policy for young people who inject drugs*
- *Provide a mix of services*
- *Provide people with the right type of equipment and advice*
- *Provide community pharmacy-based needle and syringe programmes*
- *Provide specialist (level 3) needle and syringe programmes*
- *Provide equipment and advice to people who inject image- and performance-enhancing drugs*

For each of the recommendations, the guidelines set out who is responsible for taking action and provides further detailed advice. The evidence underpinning the revised guidelines is also set out, which includes reviews carried out for the initial 2009 guidelines and updated reviews commissioned for the current exercise. An overview of the updated evidence reports is given below.

## NEEDLE AND SYRINGE PROGRAMMES: SUPPORTING EVIDENCE

A survey of those commissioning and providing needle and syringe exchange programmes was undertaken to assess the implementation of the NICE PH18 guidance, including barriers to implementation and to gain a better understanding of the nature and extent of NSP provision (Bates et al., 2013). Of the six recommendations contained in PH18, full implementation was lowest for recommendation 1, planning, needs assessment and community engagement followed by recommendation 2, meeting need. Providers were less likely to report full implementation than commissioners. Commissioners were most likely to identify a lack of capacity and lack of service user information as barriers to implementation for recommendations 1 and 2. The survey also found that implementation varied across areas. The authors conclude that improving data collection and monitoring of NSP clients and increasing training opportunities for staff are likely to improve the implementation of recommendations.

An updated review of quantitative and qualitative evidence to support guidance on the optimal provision of needle and syringe programmes was undertaken (Jones et al., 2013). A number of key research questions were addressed and the evidence mapped to these. The review concluded that there is good evidence that high provision of NSP can reduce sharing behaviours and, alongside OST, can reduce the transmission of HCV. The review also found that certain users may prefer certain types of NSP provision with syringe vending machines and outreach services attracting individuals with higher risk profiles. The authors suggest that a range of services are required to meet differing needs. The evidence for additional harm reduction services offered by NSPs is mixed, particularly regarding the extent to which provision of drug-taking equipment promotes non-injecting modes of use. Furthermore, there is a lack of evidence around the effectiveness and cost-effectiveness of interventions linking users with wider medical and social support services, although a trusting relationship between staff and clients is seen as key to wider engagement. The delivery of NSP in non-specialist settings with less trusting relationships such as pharmacies may be a barrier to further uptake of services. Wider installation of syringe drop boxes is recommended.

A fieldwork report examining the relevance, use, acceptability and ease of implementation of the 10 draft recommendations in the new guidance was published in November 2013 (Moss et al., 2013). Fieldwork was undertaken using focus groups and one-to-one interviews with professionals involved in the delivery or commissioning of NSPs or those with a remit of harm reduction work. Within the report, findings are described under each recommendation focusing on the relevance of the recommendation, the feasibility/ease of implementation, and usefulness/areas of ambiguity. The findings fed into the final guidance. Four cross-cutting themes were also identified: the link with recovery, a focus on reducing blood-borne viruses, pharmacy provision, and emerging cohorts such as people who inject performance and image enhancing drugs (PIEDs).

## USERS OF PERFORMANCE AND IMAGE ENHANCING DRUGS (PIEDS)

Recognising the different needs of emerging cohorts of injectors, a review of the evidence on the optimal provision of NSP for reducing the prevalence of blood borne viruses and morbidity and mortality among people who inject PIEDs was also carried out (Bates et al., 2013). The review found that there is a distinct lack of evidence on the delivery and impact of harm reduction services for people who inject PIEDs. Where evidence exists, it addresses steroid users only with no evidence available for users of other PIEDs. Existing evidence suggests that people who inject PIEDs have different risk profiles to other users of NSPs but may have a higher risk of infection with evidence of the sharing of equipment among this group. Current services, with their focus on opiate and stimulant injectors may act as a barrier to attendance among this group and there is a need for multi-faceted services, catering for users of PIEDs and providing additional services alongside needle and syringe exchange.

## YOUNG PEOPLE

A systematic review of published and unpublished literature was undertaken to explore the profile and key risk behaviours among young people who inject drugs (Platt et al., 2013). The quantitative review found that younger PWID are more likely to be homeless and female than older PWID, with homelessness rates of up to 70% in some studies. They are also more likely to be injected by someone else, although there was little difference in injecting risk behaviour. Up to 44% were reportedly involved in sex work, although it is unclear how this differs from older PWID. The authors suggest that interventions for this group should tackle multiple vulnerabilities, particularly homelessness and sex work with young girls a key target group. Evidence suggests that NSPs can reduce needle/syringe sharing among this group.

The qualitative review found six themes emerging from the evidence: young people positioning themselves as distinct from older PWID; initiation into injecting; drug use as a function of belonging and peer relationships; trust and mistrust linked to drug using others and services; barriers and facilitators of service use; and environmental constraints to enacting risk awareness. Many reported prolonged assistance with injecting, which is one of the constraints the authors suggest limits individual capacity for harm reduction in this group. Identified barriers to service access included stigma and structural barriers. The authors conclude that a case-by-case approach is required to address the needs of young PWID, which should take into account the context of their drug use.

A report on a project to develop a consensus on the optimal provision of NSP services to young people who inject drugs was published in 2013 (Hunt and Platt, 2013). Alongside a consensus building exercise, a policy review was carried out which found no international policy documents containing explicit guidelines on the provision of NSP to young people. While the authors identified policy documents from the UK containing governing principles and a broad framework for services for this group, they conclude that there is a lack of detailed information to support practice in this area that reflects current injecting practices among young people. Findings from interviews with key experts found that the conflict between safeguarding and providing harm reduction services to young people was a key issue. Other themes emerging from the project included: young person centred services, outreach and the role of peers, interagency working, role of pharmacies, and parents and carers. The authors suggest that the lack of consideration about providing NSP to very young people (up to the age of 14) may restrict the applicability of the report's findings.

## GAPS IN THE EVIDENCE AND RECOMMENDATIONS FOR RESEARCH

The Public Health Advisory Committee identified 17 gaps in the evidence related to needle and syringe programmes and made 5 recommendations for research questions in this area to support the development of future guidelines:

1) How can NSPs encourage specific groups of people who inject drugs to use the service effectively? (e.g. recent initiates, sex workers, ex-prisoners, homeless people, occasional injectors, injectors of NPS).

2) What are the most effective and cost effective ways of delivering NSPs to: young people aged under 18; and users of PIEDs?

3) What type of behaviour-change interventions delivered by NSPs are effective in promoting safer drug use practices and reducing the incidence of overdose (outside of the provision of injecting equipment)?

4) What type of injecting equipment, paraphernalia and non-injecting equipment effectively and cost-effectively reduce the harm associated with injecting drug use?

5) Do NSPs have any unintended consequences?

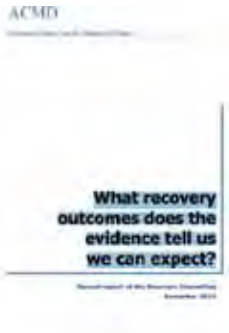
## MEDICATIONS IN RECOVERY: BEST PRACTICE IN REVIEWING TREATMENT (PUBLIC HEALTH ENGLAND, 2013)

Public Health England published advice from the Recovery Orientated Drug Treatment expert group on the frequency and content of treatment reviews. The main advice from the group is that:

- Care planning should be part of a phased and layered treatment programme;
- For those receiving OST, strategic reviews should take place three months after treatment entry and no later than six months after with further reviews every six months;
- There should be no fixed timetable of review with decisions on frequency personalised and deliberative;
- The strategic review should always assess a client's recovery goals and pathway;
- There is no specified format for the strategic review but the individual should always be the central participant;
- It is important that the focus does not become too narrow and considers all aspects of an individual's treatment and recovery;
- Reviews should continue after treatment to monitor continued recovery and provide a rapid route back to treatment if required.

The guidance also provides a table of possible review findings and associated actions and lists the relevant evidence-based guidelines in relation to drug treatment.

## WHAT RECOVERY OUTCOMES DOES THE EVIDENCE TELL US WE CAN EXPECT? (ADVISORY COUNCIL ON THE MISUSE OF DRUGS, 2013A)



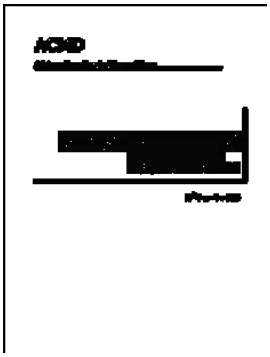

The ACMD Recovery Committee published a report exploring the evidence around recovery outcomes. The Committee defines recovery as wider than overcoming alcohol or drug dependence and suggests that approaches that do not consider wider outcome domains are inadequate. The wider outcome domains reflect the identified dimensions of recovery capital: human capital; social capital; physical and economic capital; and cultural capital.

The report looks at the evidence on recovery rates among individuals in treatment and differentiates by type of substance. It also looks at the evidence around natural recovery, although the lack of research in this area is noted. The recorded outcomes in all the domains are explored with a reduction in drug and alcohol use the most widely studied outcome measure. However, evidence suggests that this is a long-term process and that many individuals who overcome dependence do so without being abstinent.

The evidence around the wider outcome domains is also explored:

- *Human capital*: evidence shows high levels of morbidity and mortality among heroin users but evidence for other types of drug use (e.g. stimulants, NPS) is lacking. There is emerging research around genetic factors of dependence.
- *Social capital*: evidence shows that families have an impact on dependence and recovery outcomes and that supportive local communities may aid recovery outcomes. Mutual aid has also been shown to improve recovery outcomes.
- *Physical and economic capital*: the relationship between drugs and crime is complex but there is evidence that treatment reduces crime. There is evidence that criminal convictions can hinder recovery. Stable housing is beneficial to recovery while employment outcomes appear to be tougher to achieve.
- *Cultural capital*: evidence shows that culture and social conformity have an impact on recovery outcomes. Stigma can hinder recovery.

The report concludes that these domains are inter-related and changes in one domain can have an impact on another domain. The ACMD set out a number of recommendations including the need for long-term, extensive support for individuals through their recovery journey, greater understanding of an individual's recovery capital and the needs of different groups of users and a focus across all recovery domains not just reducing drug and alcohol use.



## KETAMINE: A REVIEW OF USE AND HARMS (ADVISORY COUNCIL ON THE MISUSE OF DRUGS, 2013B)

The ACMD reviewed the harms associated with ketamine following evidence of increased harms since the previous review in 2004. The ACMD's report covers an overview of the chemistry and pharmacology of ketamine, its clinical and veterinary use, prevalence of use and misuse, medical harms, social harms and interventions for ketamine use/misuse.

The report showed that there was an increase in reported ketamine use between 2006/07 and 2010/11 with decreases in last month and last year use reported since. Chronic toxicity issues include bladder problems, which appear directly linked to the amount, frequency and length of time of ketamine use. Up to one-third of long-term ketamine users experience chronic, severe abdominal pain. Deaths mentioning ketamine rose from 0-3 during 2001-2006 to 7-22 in the period 2007-2012. The number of treatment presentations for ketamine use peaked in 2010/11 at 845 individuals.

The ACMD made a number of recommendations including: healthcare professionals should ask patients with unexplained urinary tract symptoms about ketamine use; there should be a strong public health message about the long-term effects of ketamine use such as bladder problems; treatment services should be able to respond to individuals with ketamine dependence; further research should be carried out on ketamine and its effects, including long-term effects; and ketamine should be rescheduled from Class C to Class B.


## GUIDANCE FOR LOCAL AUTHORITIES ON TAKING ACTION AGAINST 'HEAD SHOPS' SELLING NEW PSYCHOACTIVE SUBSTANCES (NPS) (HOME OFFICE, 2013)

The Home Office published guidance for local authorities setting out the legal powers available for dealing with head shops selling new psychoactive substances and drug paraphernalia. The four main types of offences that head shops may be committing and the circumstances in which they may be prosecuted are described in detail:

- Selling controlled drugs
- Selling drugs paraphernalia
- Breaching the Intoxicating Substances (Supply) Act 1985
- Breaching consumer protection regulations

The guidance suggests that wider engagement with local partners is essential to minimise the harms caused by head shops and that the most appropriate course of action will depend on local circumstances.

# 2. EXAMPLES OF CURRENT RESEARCH THAT IS TAKING PLACE WITHIN THE CENTRE FOR PUBLIC HEALTH

There are a number of drug and alcohol-related research projects that are currently on-going at the Centre for Public Health. Some of these projects are detailed below.

## 2.1. ALCOHOL-RELATED RESEARCH

### EVALUATION OF RADAR

The Rapid Access to Detoxification: Acute hospital Referral (RADAR) service provides rapid access to detoxification for patients from all Greater Manchester Acute Trusts. Patients who present to Accident and Emergency are fast-tracked into residential detoxification within the Chapman Barker Unit at the Prestwich Hospital site. The main aims of the service are to:

- Reduce burden on Acute Trusts in relation to alcohol related admissions
- Improve clinical outcomes for service users
- Provide improved experience for service users in a therapeutic setting
- Demonstrate costs effectiveness

Liverpool John Moores University (LJMU) have been commissioned by the Chapman Barker Unit, Greater Manchester West, to evaluate RADAR.

The project aims to evaluate RADAR through the exploration of patient experience in addition to a cost effectiveness analysis based on patients' clinical outcomes, other alcohol related admissions and wider economic consequences such as other healthcare costs and crime-related costs.

The project is due to finish in December 2014.

### ALCOHOL RESEARCH UK (ARUK) – CONSTRUCTING ALCOHOL IDENTITIES

'Constructing alcohol identities. How young people navigate and make sense of online intoxicogenic marketing and culture'

The overall aims of this research project are to explore how young people (YP) interpret and incorporate industry and peer driven social media representations of alcohol use when constructing and negotiating their own on- and off-line identities; how this relates to their 'ideal' identities; and how this process might impact upon alcohol-related health and social behaviours. The researchers are particularly interested in the mediating role of gender and socioeconomic status in shaping identity, and how social media may influence this process. Through comparison with contemporary health promotion campaigns (which may also have industry involvement) the research will seek to understand the social and symbolic meanings of online industry and peer driven alcohol representations, and how these may conflict with, or support processes and values which are important to YP's identity construction.

It is hoped that this work will have useful policy and practice applications, such as:

- Providing a useful contribution to future development of the Advertising Standards Association Code of Non-broadcast Advertising, Sales Promotion and Direct Marketing code (CAP; Section 18 alcohol), which have previously focused on alcohol industry marketing messages rather than how consumers interact and manipulate those messages through social media.
- Providing insights into young people's alcohol behaviours online and how these might be relevant to the development of evidence based health promotion.

- Contributing to public discussions on alcohol, exploring the view that alcohol marketing is no longer something which is simply delivered to consumers, but one in which they are active participants.

This project is ongoing.

## ALCOHOL RESEARCH UK (ARUK) – ALCOHOL CONSUMPTION

National Survey - The impact of socioeconomic status on alcohol-related harms: detecting differences in patterns of alcohol consumption among people living in deprived and less affluent deprived areas through a new national survey

Research evidence identifies that alcohol-related harm and ill-health falls disproportionately on more deprived populations, who typically experience a greater incidence of alcohol related mortality, alcohol related hospital admissions, liver disease and other alcohol related health conditions than populations in more affluent areas. However alcohol consumption, as measured by national surveys, appears relatively evenly distributed across the social gradient and so there appears to be an 'alcohol-harm paradox'; whereby drinking the same quantity of alcohol has a different effect in deprived compared to less deprived populations.

Researchers at the Centre for Public Health sought to collect more accurate estimates of alcohol consumption levels and patterns in England. This was done by conducting a national telephone survey (n=70,397) between May 2013 and May 2014 targeting individuals aged 16 years or older and living in England. In addition to asking participants about their drinking frequencies and quantities on typical days, the questionnaire was designed to elicit recall of non-typical drinking patterns and special occasion drinking.

The aim of this research was to examine whether more accurate estimates of population levels of alcohol consumption may reveal differences in consumption patterns amongst people living in deprived areas and those in more affluent areas, and therefore whether they provide an explanation for the apparent alcohol-harm paradox.

In addition to this, two booster surveys were conducted:

1. a homeless booster survey - Understanding the alcohol harm paradox – A booster survey to examine alcohol consumption of a homeless population, was conducted was conducted with 200 people using hostel services between June 2013 and February 2014 in Liverpool, Leeds and London, in order to target populations usually underrepresented in national estimates of consumption. Homeless individuals are a hard to access population who are often missed by household surveys, and who may consume alcohol at higher levels than the general population.

   This aimed to identify whether the homeless population has different drinking patterns to the general population, and what influenced these drinking habits. Also what impact missed consumption amongst this population has upon national consumption estimates.

2. University students are one group that may typically be missed from or underrepresented in national surveys of alcohol consumption. The student booster survey - Alcohol consumption among students: an analysis of the impact of non-typical consumption on typical patterns of drinking was conducted between October 2013 and March 2014 with 515 students across three cities.

The aims of this research were to examine drinking frequency and quantity among University students. The analysis will compare consumption across typical and non-typical consumption, and examine the impact of consumption around special occasions on typical drinking frequency and quantity. Finally, consideration will be given to estimating the likely contribution that missed consumption among University students makes to national consumption estimates.

It is anticipated that the research findings will be available late 2014.

## 2.2. DRUG-RELATED RESEARCH

### NEEDS ASSESSMENT: NEEDLE EXCHANGE IN KNOWSLEY

Following the publication of new NICE guidance relating to the delivery of needle exchange services in April 2014, Knowsley Council have commissioned LJMU to undertake a needs assessment that aims to:

- Increase understanding about the demand for needle exchange in Knowsley; and
- Identify any gaps in current service delivery.

The study will focus on the delivery of services in four pharmacy and drug service needle exchanges in the Borough. Data collection will take place through interviews and surveys with needle exchange and drug service staff and clients, examining their experiences and perceptions about service delivery.

This project is due to run from November 2014 to February 2015

### ITREND

The Internet Tools for Research in Europe on New Drugs (ITREND) project is a two year ongoing project aimed at monitoring trends in Novel Psychoactive Substances INPS). The project is funded by the European Committee and collaborates with 5 European Countries (UK, France, Poland, Netherlands and Czech Republic).

The project objectives are:

- To monitor online drug forums
- To monitor online marketing and the availability of NPS online
- Test purchasing and analysis of NPS and the of reference standards among laboratories
- Data collection on NPS use via an online survey.

The project aims to enhance the knowledge base on the emerging trends of new drugs purchased online. The main outputs of the project are substance factsheets for the most prevalent NPS across countries and an observational tool that is aimed at helping interdisciplinary researchers identify and monitor new trends and patterns in consumption of NPS.

The project was launched in April 2013 and is due to be completed in April 2015.

### ESTIMATING THE PREVALENCE OF PROBLEMATIC OPIATE USE IN IRELAND USING INDIRECT STATISTICAL METHODS

Reliable estimates of the prevalence of opiate use at the local and national level are important for the planning and provision of services and meeting the requirements of the European Monitoring Centre for Drugs and Drug Addiction. Information concerning the number of people who use heroin is essential to formulating effective policies for tackling drug-related harm as heroin is associated with the highest levels of harm. Therefore, such current estimates are valuable in terms of informing service provision at the local level and also for estimating the social costs of drug problems.

LJMU have been commissioned by National Advisory Committee on Drugs and Alcohol (NACDA) to produce prevalence estimates of opiate use in Ireland. In order to do this, capture-recapture methods will be used.

This project is due to finish in May 2015.

## EVALUATION OF THE PILOT STAGE OF THE HSE PHARMACY NEEDLE EXCHANGE PROGRAMME

The Irish Pharmacy Needle Exchange Programme has been running since 2011 and Health Service Executive (HSE) Ireland commissioned this study to evaluate the pilot stage of the programme.

The study aims to:

- Gather data regarding prevalence of blood-borne viruses and needle sharing behaviours amongst the injecting drug user population; and
- Look at pharmacy staff and needle exchange client perspectives and experiences regarding the delivery of needle exchange in the pharmacy.

This project is ongoing, due for completion in December 2014.

## GLASGOW EFFECT PROJECT

The 'Scottish Effect' is a term coined to explain the higher mortality experienced in Scotland compared to England over and above that explained by higher levels of deprivation. This 'excess' has also been shown in Glasgow compared to the equally deprived cities of Liverpool and Manchester (the 'Glasgow Effect').

Problem drug use is known to have a detrimental influence on health and social outcomes (including homelessness and unemployment). A higher prevalence of problem drug use has been suggested as a causal factor in explaining the excess mortality in Scotland.

Capture – Recapture can be used to estimate the incidence of problem drugs misuse for certain populations through time, and the use of age-cohorts can provide estimates of the size and distribution of the drug-using population which can inform different modelled scenarios for service planning. The use of these, and other data and techniques can provide a greater understanding of the impact of drugs misuse in Scotland compared to elsewhere in the UK. This information is required not only in relation to issues around service provision and planning, but also potentially to achieve reductions in the excess mortality currently experienced by Scottish (and especially Glasgow) populations.

LJMU has been commissioned by the Glasgow Centre for Population Health to compare drug-related mortality in Scotland and England.

The aim of the project is to produce reliable estimates of the incidence of opiate use in England and Scotland at the national and local level. These incidence estimates will be used in conjunction with published prevalence estimates to re-create a time series of prevalence which will, in turn, be used to quantify drug-related mortality.

This project is ongoing.

## ERANID

The European Area Network on Illicit Drugs (ERANID) aims to improve cooperation in drug research and to inform policy decisions within participating countries. The project focuses on strengthening cross-border research in various aspects of the illicit drugs problem and to promote multidisciplinary research within the field of socio-economic sciences and humanities. The project is commissioned by the European Union under the 7th Framework Programme and collaborates with 6 European Countries (UK, France, Netherlands, Italy, Portugal, and Belgium).

The project objectives are to:

- Develop a database of existing and ongoing research within the illicit drugs field

- Identify gaps in research and develop a set of research priorities which represent urgent issues for drug policy making.

The key element of ERANID is to develop a Strategic Research Agenda (SRA) that aims to overcome the fragmentation of drug research and address current research gaps in the illicit drugs field. ERANID will build a network between funding bodies, policy makers and other stakeholders who will help create a consensus on identified research priorities, from which a two joint research calls will be developed.

The project began in January 2013 and is due to be completed in January 2017.

# 3. INTEGRATED MONITORING SYSTEM

## 3.1. IMS: DEMOGRAPHIC PROFILE

The Integrated Monitoring Systems (IMS) brings together activity from both low threshold drug and alcohol services delivering brief interventions and Needle and Syringe Programme (NSP) services delivered in both agency and pharmacy settings across Merseyside and Cheshire. The gender breakdown is largely skewed towards males with the percentage ranging from 79.4% in Liverpool to 93.3% in Halton. As can be seen later in this report, this is largely because of the high prevalence of Steroid and PIED[3] users using NSP services and this is amplified in areas which do not currently record activity from low threshold services such as Cheshire East, and Cheshire West and Chester.

### GENDER

| | Female | % | Male | % | Total Clients |
|---|---|---|---|---|---|
| **Cheshire East** | 123 | 9.5% | 1,170 | 90.5% | 1,293 |
| **Cheshire West & Chester** | 159 | 9.3% | 1,554 | 90.7% | 1,713 |
| **Halton** | 41 | 6.7% | 567 | 93.3% | 608 |
| **Knowsley** | 62 | 10.6% | 521 | 89.4% | 583 |
| **Liverpool** | 2,183 | 20.6% | 8,396 | 79.4% | 10,579 |
| **Sefton** | 385 | 17.2% | 1,849 | 82.8% | 2,234 |
| **St. Helens** | 220 | 10.5% | 1,872 | 89.5% | 2,092 |
| **Warrington** | 127 | 8.3% | 1,404 | 91.7% | 1,531 |
| **Wirral** | 704 | 17.2% | 3,398 | 82.8% | 4,102 |
| **Total:** | **4,004** | **16.2%** | **20,731** | **83.8%** | **24,735** |

**Table 1 - IMS clients by gender**

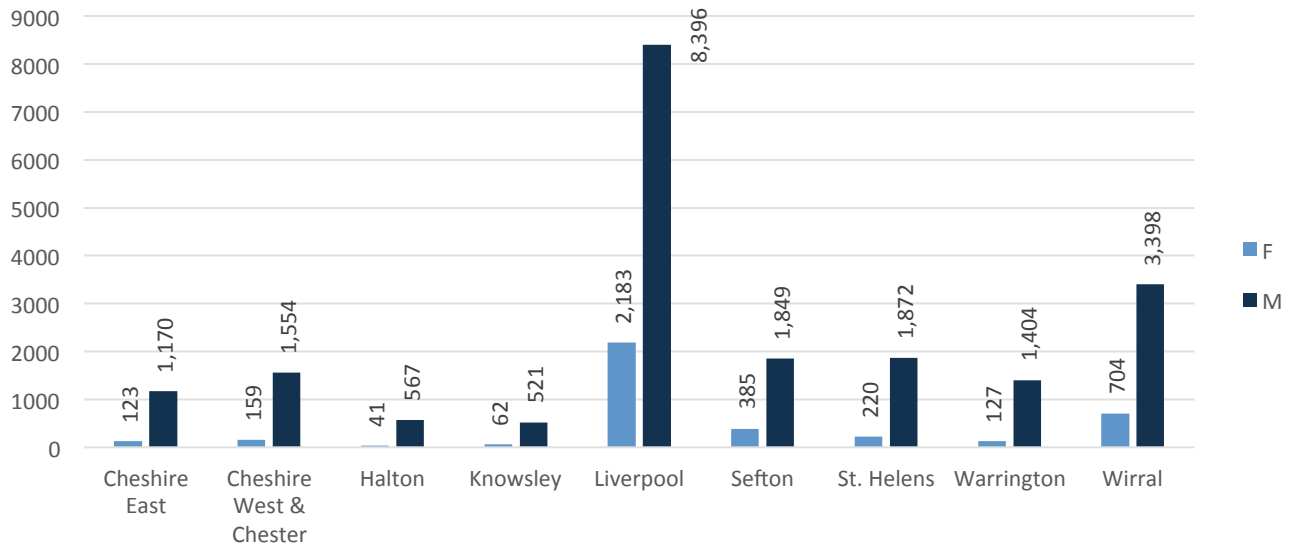



**Figure 2 - IMS Clients by gender**

[3] Performance and Image Enhancing Drugs (PIEDS) is a collective term used to describe a range of drugs which are used to improve performance in sport or athletics, mask the use of performance-enhancing drugs to avoid drug testing or to improve the body's appearance.

## AGE GROUP

The age profile of females attending IMS services was older than males attending the same services, with just under 8 in 10 females being aged under 50 (79.8%) compared to almost 9 in 10 males being aged under 50 (87.8%) The 0-17 year age range saw the biggest differentials between male and females, with 0-17 year olds making up 2.2% of the female breakdown, compared with only 0.4% of the male breakdown.

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 16 | 31 | 27 | 23 | 9 | 9 | *** | *** | 0 | 123 |
| | Male | *** | <28 | <190 | 224 | 256 | 186 | 153 | 77 | 47 | <6 | *** | *** | 1,170 |
| | **Total** | *** | **28** | **192** | **240** | **287** | **213** | **176** | **86** | **56** | **7** | *** | *** | **1,293** |
| **Cheshire West & Chester** | Female | *** | *** | 15 | 31 | 31 | 34 | 26 | 10 | 5 | *** | 0 | 0 | 159 |
| | Male | <14 | <20 | 229 | 288 | 292 | 261 | 253 | 118 | 56 | <18 | 8 | *** | 1,554 |
| | **Total** | **14** | **21** | **244** | **319** | **323** | **295** | **279** | **128** | **61** | **20** | **8** | *** | **1,713** |
| **Halton** | Female | 0 | 0 | *** | 11 | 9 | 6 | 7 | *** | *** | 0 | 0 | 0 | 41 |
| | Male | *** | 5 | <99 | 151 | 123 | 81 | 57 | <40 | <12 | 0 | *** | 0 | 567 |
| | **Total** | *** | **5** | **101** | **162** | **132** | **87** | **64** | **41** | **14** | 0 | *** | 0 | **608** |
| **Knowsley** | Female | 0 | 0 | 8 | 12 | 6 | 9 | 12 | 6 | *** | *** | *** | *** | 62 |
| | Male | *** | 6 | 95 | 115 | 87 | 53 | 73 | 36 | <13 | <17 | <9 | <18 | 521 |
| | **Total** | *** | **6** | **103** | **127** | **93** | **62** | **85** | **42** | **14** | **18** | **9** | **20** | **583** |
| **Liverpool** | Female | 54 | 38 | 107 | 188 | 268 | 312 | 431 | 273 | 196 | 120 | 76 | 120 | 2,183 |
| | Male | 31 | 129 | 783 | 1,112 | 1,199 | 1,216 | 1,272 | 1,138 | 707 | 315 | 207 | 287 | 8,396 |
| | **Total** | **85** | **167** | **890** | **1,300** | **1,467** | **1,528** | **1,703** | **1,411** | **903** | **435** | **283** | **407** | **10,579** |
| **Sefton** | Female | *** | *** | 25 | 33 | 50 | 59 | 88 | 56 | 46 | 12 | 8 | *** | 385 |
| | Male | <9 | <16 | 96 | 277 | 283 | 269 | 380 | 305 | 143 | 38 | 31 | *** | 1,849 |
| | **Total** | **9** | **18** | **121** | **310** | **333** | **328** | **468** | **361** | **189** | **50** | **39** | **8** | **2,234** |
| **St. Helens** | Female | 6 | *** | 18 | 34 | 53 | 28 | 54 | 15 | 5 | *** | *** | 0 | 220 |
| | Male | 5 | <40 | 269 | 276 | 314 | 314 | 366 | 170 | 59 | <39 | <16 | 7 | 1,872 |
| | **Total** | **11** | **43** | **287** | **310** | **367** | **342** | **420** | **185** | **64** | **40** | **16** | **7** | **2,092** |
| **Warrington** | Female | *** | *** | 13 | 21 | 32 | 21 | 11 | 16 | *** | *** | 0 | 0 | 127 |
| | Male | <7 | <35 | 213 | 314 | 248 | 217 | 210 | 114 | <33 | <12 | 5 | *** | 1,404 |
| | **Total** | **7** | **37** | **226** | **335** | **280** | **238** | **221** | **130** | **36** | **13** | **5** | *** | **1,531** |
| **Wirral** | Female | 27 | 16 | 62 | 52 | 90 | 83 | 119 | 102 | 62 | 45 | 20 | 26 | 704 |
| | Male | 20 | 105 | 499 | 607 | 465 | 425 | 482 | 376 | 217 | 94 | 45 | 63 | 3,398 |
| | **Total** | **47** | **121** | **561** | **659** | **555** | **508** | **601** | **478** | **279** | **139** | **65** | **89** | **4,102** |
| **Total:** | | **181** | **446** | **2,725** | **3,762** | **3,837** | **3,601** | **4,017** | **2,862** | **1,616** | **722** | **428** | **538** | **24,735** |

**Figure 3 - IMS clients by age group** [4]

[4] Please note throughout this report all numbers less than five have been suppressed in line with patient confidentiality and if there is only one number less than five in a category then a second number will be suppressed at the next level in order to prevent back calculations from the total.

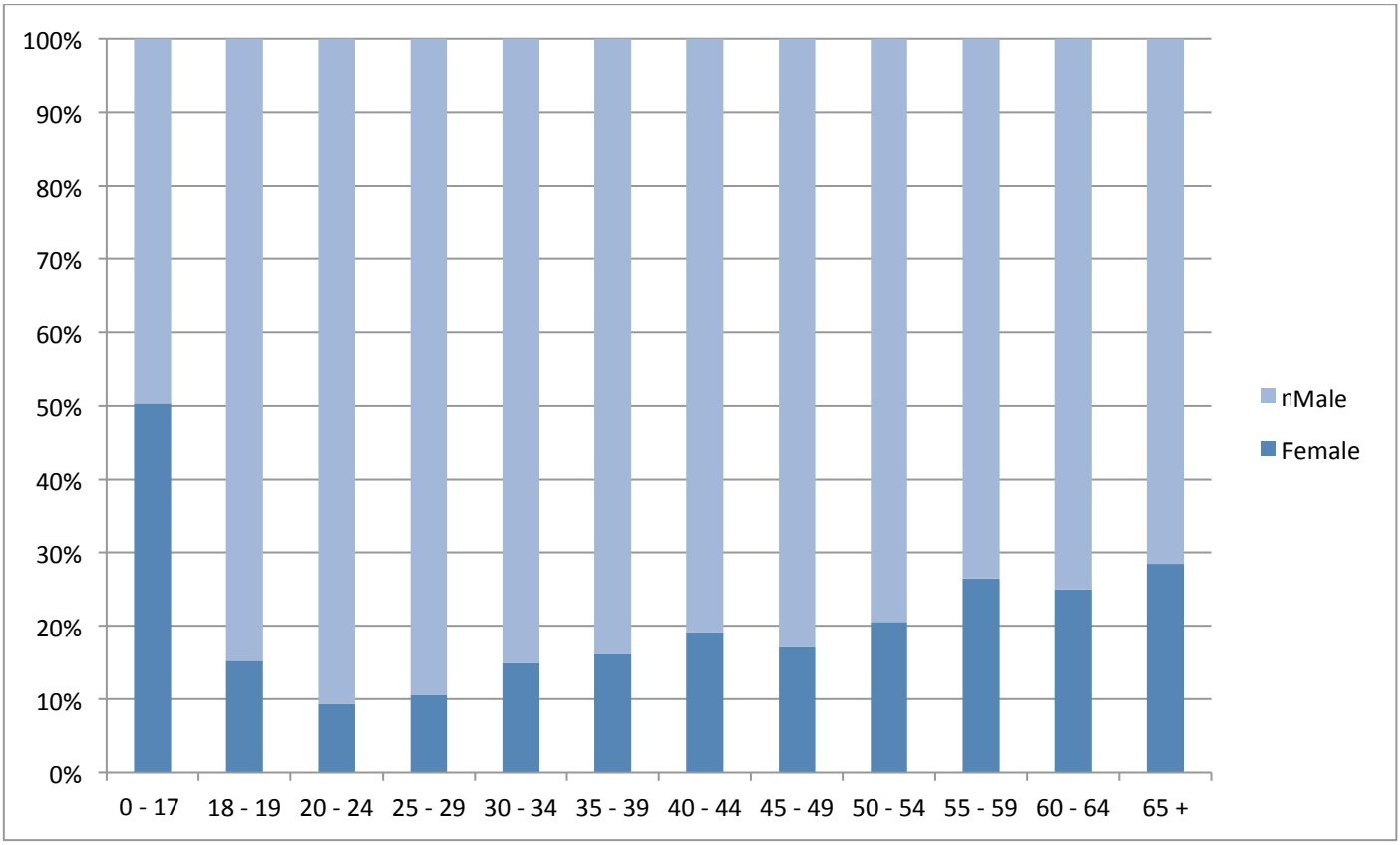



**Figure 4 - IMS clients, proportional split by age group and gender**

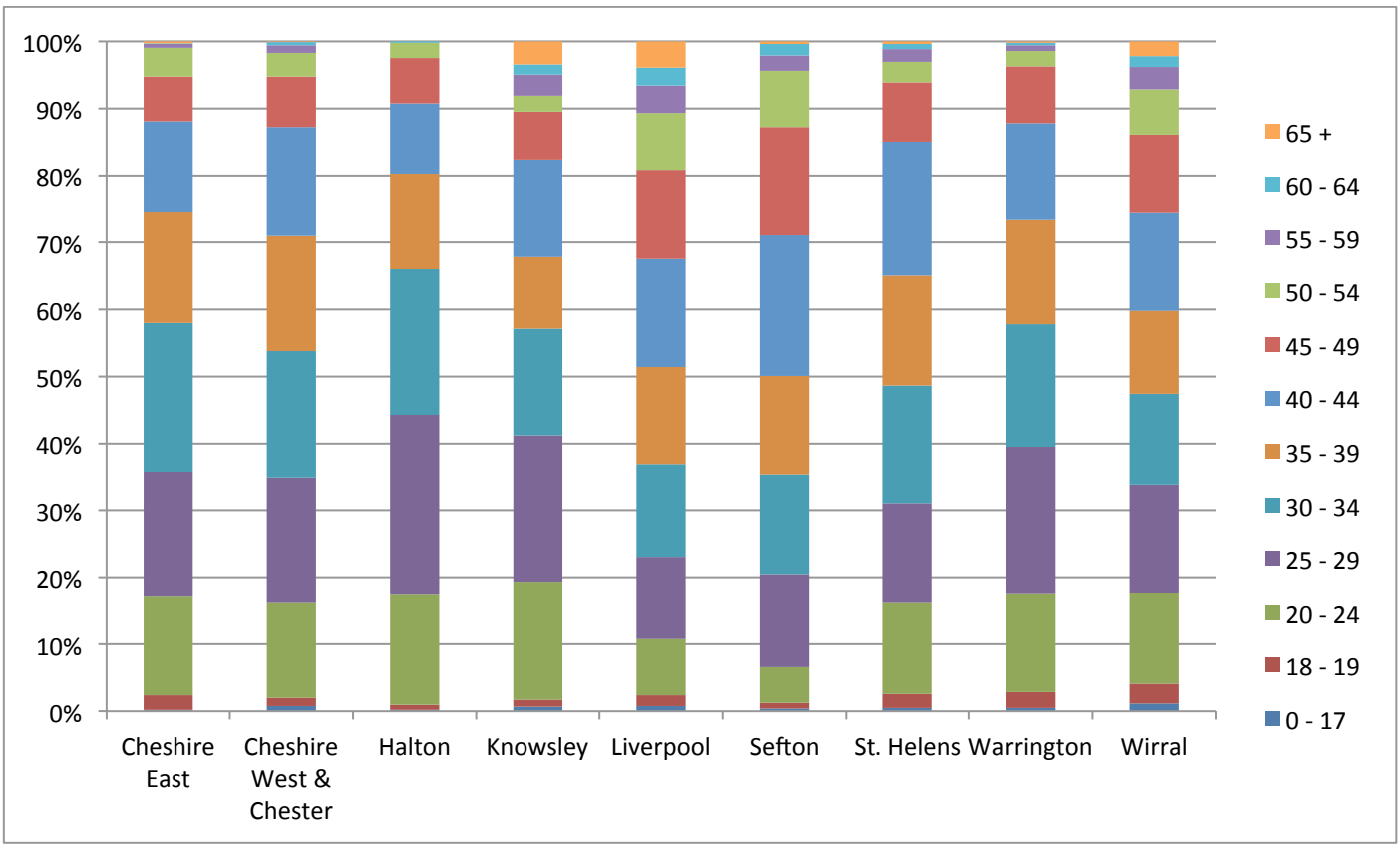



**Figure 5 - IMS clients, proportional split by Local Authority**

## ETHNICITY

The ethnicity of individuals using IMS services who have an ethnicity recorded was in the main White British, ranging from 82.8% in Liverpool to 100% in Cheshire West and Chester – all areas record "White British" ethnicity at a level of above 95% other than Liverpool (82.8%) and Cheshire East (91.4%) Of those whose ethnicity was not recorded as White British, the main ethnic groups identified are Other White (1.6%), African (1.2%) and Other Black (1.0%).

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| **A: White British** | 91.4% | 100.0% | 97.2% | 96.6% | 82.8% | 96.6% | 96.8% | 96.7% | 96.8% | 91.1% |
| **B: White Irish** | 0.8% | 0.0% | 0.6% | 3.4% | 1.3% | 0.5% | 1.4% | 0.2% | 0.6% | 0.9% |
| **C: Other White** | 5.8% | 0.0% | 0.6% | 0.0% | 2.5% | 1.0% | 0.0% | 1.6% | 0.6% | 1.6% |
| **D: White and Black Caribbean** | 0.6% | 0.0% | 0.6% | 0.0% | 1.3% | 0.0% | 0.0% | 0.2% | 0.2% | 0.6% |
| **F: White and Asian** | 0.3% | 0.0% | 0.0% | 0.0% | 0.5% | 0.0% | 0.0% | 0.0% | 0.1% | 0.2% |
| **G: Other Mixed** | 0.3% | 0.0% | 0.6% | 0.0% | 0.9% | 0.3% | 0.5% | 0.5% | 0.5% | 0.6% |
| **P: Other Black** | 0.3% | 0.0% | 0.0% | 0.0% | 2.2% | 0.2% | 0.3% | 0.0% | 0.4% | 1.0% |
| **S: Other** | 0.6% | 0.0% | 0.0% | 0.0% | 1.6% | 1.2% | 0.7% | 0.4% | 0.2% | 0.9% |
| **J: Pakistani** | 0.0% | 0.0% | 0.6% | 0.0% | 0.2% | 0.0% | 0.2% | 0.0% | 0.0% | 0.1% |
| **E: White and Black African** | 0.0% | 0.0% | 0.0% | 0.0% | 0.5% | 0.2% | 0.2% | 0.2% | 0.1% | 0.2% |
| **H: Indian** | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% | 0.2% | 0.2% | 0.1% |
| **K: Bangladeshi** | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| **L: Other Asian** | 0.0% | 0.0% | 0.0% | 0.0% | 1.2% | 0.0% | 0.0% | 0.0% | 0.1% | 0.5% |
| **M: Caribbean** | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% | 0.0% | 0.1% | 0.1% |
| **N: African** | 0.0% | 0.0% | 0.0% | 0.0% | 3.0% | 0.0% | 0.0% | 0.0% | 0.0% | 1.2% |
| **R: Chinese** | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| **Z: Not Stated** | 0.0% | 0.0% | 0.0% | 0.0% | 1.4% | 0.0% | 0.0% | 0.2% | 0.0% | 0.6% |

**Table 2 - IMS clients by ethnicity**


Of the remaining 8.9%:

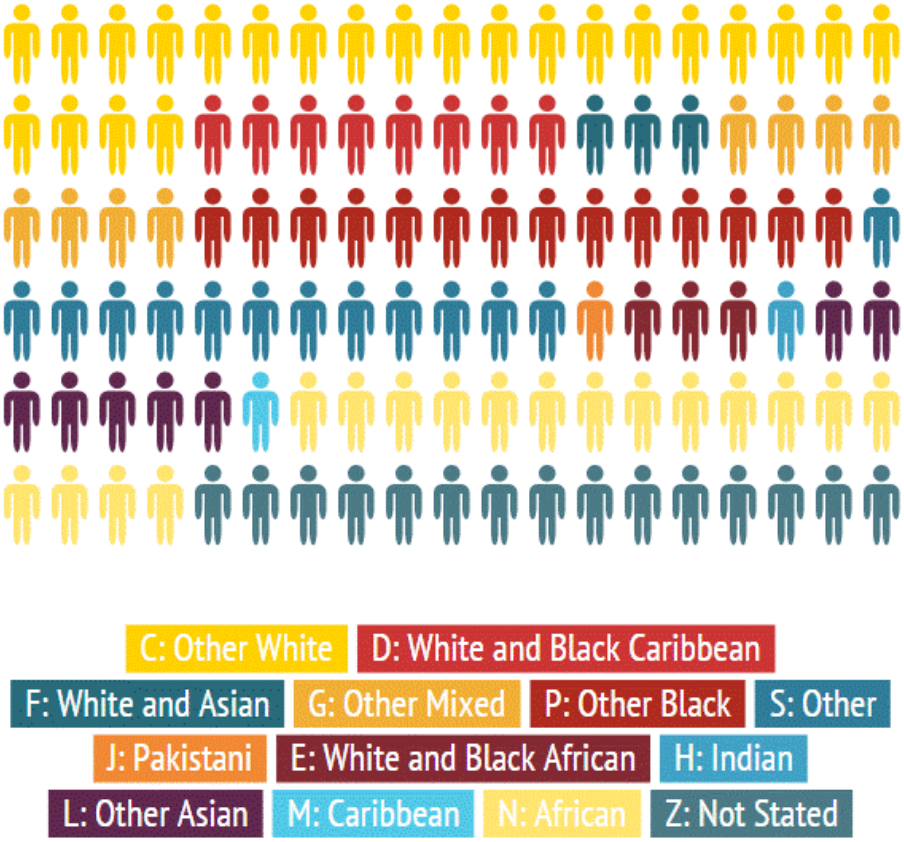



**Figure 6 - IMS breakdown of non-White British ethnicity**

## 3.2. IMS: MAIN SUBSTANCE

The main substance used by IMS services where this was recorded was alcohol (40.5%) followed by Steroids and PIEDS (35.7%) and heroin (14.7%), again due to the high number of NSP services within the dataset. Of the overall total, 52.3% did not have a main substance recorded, mainly due to the poor capture of this field by pharmacies.

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| **Alcohol** | 0 | 0 | 0 | 12 | 3,419 | 127 | 0 | 0 | 1,470 | 5,028 |
| | 0.0% | 0.0% | 0.0% | 13.0% | 69.8% | 8.8% | 0.0% | 0.0% | 50.5% | 40.5% |
| **Amphetamines (excl Ecstasy)** | 13 | <6 | 0 | 0 | 38 | *** | 16 | *** | 9 | 85 |
| | 2.2% | 0.5% | 0.0% | 0.0% | 0.8% | 0.1% | 2.2% | 0.3% | 0.3% | 0.7% |
| **Anti-depressants** | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | *** | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| **Benzodiazepines** | 0 | 0 | 0 | 0 | <7 | *** | 0 | *** | *** | 13 |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.1% | 0.0% | 0.3% | 0.1% | 0.1% |
| **Cannabis** | 0 | 0 | 0 | 0 | 256 | 8 | 0 | *** | 27 | 292 |
| | 0.0% | 0.0% | 0.0% | 0.0% | 5.2% | 0.6% | 0.0% | 0.2% | 0.9% | 2.4% |
| **Cocaine (excl Crack)** | 0 | 0 | 0 | *** | 211 | 23 | 0 | 0 | 17 | 253 |
| | 0.0% | 0.0% | 0.0% | 2.2% | 4.3% | 1.6% | 0.0% | 0.0% | 0.6% | 2.0% |
| **Crack Cocaine** | *** | 0 | *** | 0 | 86 | 66 | <6 | 0 | *** | 164 |
| | 0.3% | 0.0% | 0.7% | 0.0% | 1.8% | 4.6% | 0.7% | 0.0% | 0.1% | 1.3% |
| **Ecstasy** | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 5 |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| **Hallucinogens** | 0 | 0 | 0 | 0 | <34 | 0 | 0 | 0 | *** | 34 |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.7% | 0.0% | 0.0% | 0.0% | 0.0% | 0.3% |
| **Heroin** | 69 | 195 | 15 | 13 | 453 | 723 | 140 | 40 | 172 | 1,820 |
| | 11.5% | 20.8% | 10.5% | 14.1% | 9.2% | 49.9% | 19.0% | 6.2% | 5.9% | 14.7% |
| **Methadone** | 5 | *** | *** | *** | 85 | 29 | *** | 0 | 27 | 156 |
| | 0.8% | 0.4% | 1.4% | 1.1% | 1.7% | 2.0% | 0.4% | 0.0% | 0.9% | 1.3% |
| **Other Drugs** | *** | 0 | 0 | *** | 23 | *** | 7 | 6 | 6 | 47 |
| | 0.5% | 0.0% | 0.0% | 1.1% | 0.5% | 0.1% | 1.0% | 0.9% | 0.2% | 0.4% |
| **Other Opiates** | 0 | 0 | *** | 0 | 24 | 10 | 0 | 0 | 5 | 40 |
| | 0.0% | 0.0% | 0.7% | 0.0% | 0.5% | 0.7% | 0.0% | 0.0% | 0.2% | 0.3% |
| **Prescription Drugs** | *** | 0 | 0 | 0 | 45 | *** | 0 | 0 | *** | 48 |
| | 0.2% | 0.0% | 0.0% | 0.0% | 0.9% | 0.1% | 0.0% | 0.0% | 0.0% | 0.4% |
| **Steroids & PIEDS** | 509 | 735 | 124 | 63 | 214 | 457 | 564 | 598 | 1,166 | 4,430 |
| | 84.6% | 78.3% | 86.7% | 68.5% | 4.4% | 31.6% | 76.7% | 92.1% | 40.1% | 35.7% |
| **Total** | **602** | **939** | **143** | **92** | **4,899** | **1,448** | **735** | **649** | **2,910** | **12,417** |

**Table 3 - IMS clients main substance, where recorded**

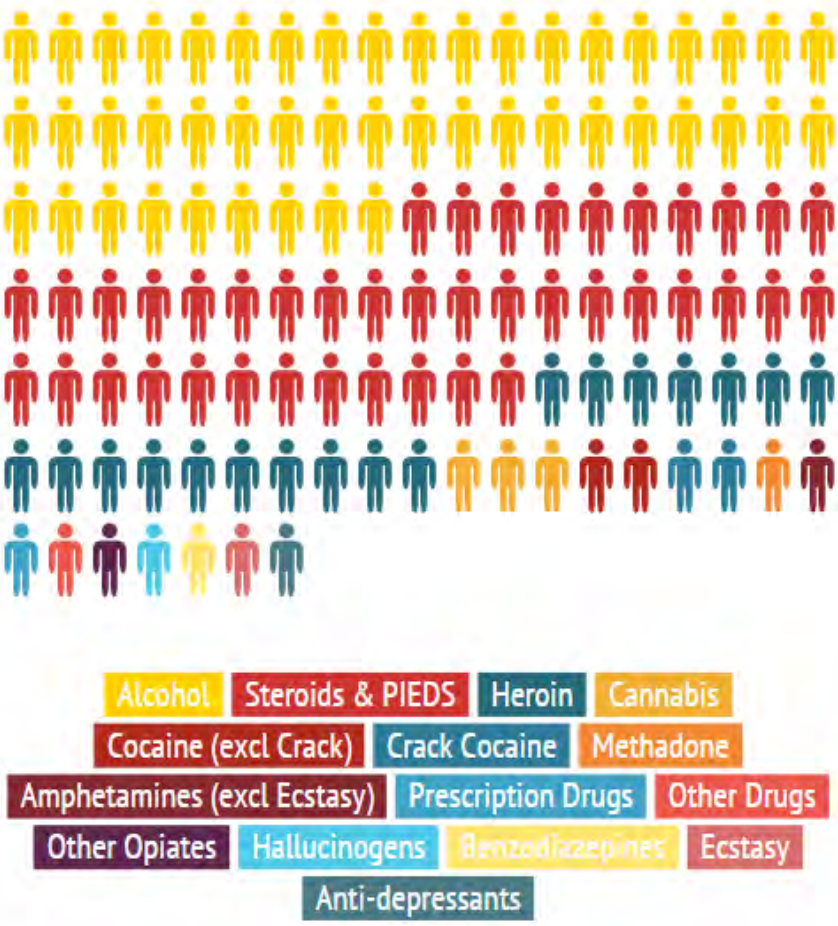



**Figure 7 - IMS Main substance used where recorded, 2013-14**

## 3.3. IMS: GEOGRAPHIC PROFILE

### LOCAL AUTHORITY AREA OF IMS SERVICE

Liverpool accounted for the highest percentage of activity delivered by IMS services (42.8%) followed by Wirral (16.6%) and Sefton (9.0%), reflecting both relative populations between areas reporting to IMS and the greater prevalence of services in areas such as Liverpool and Wirral.

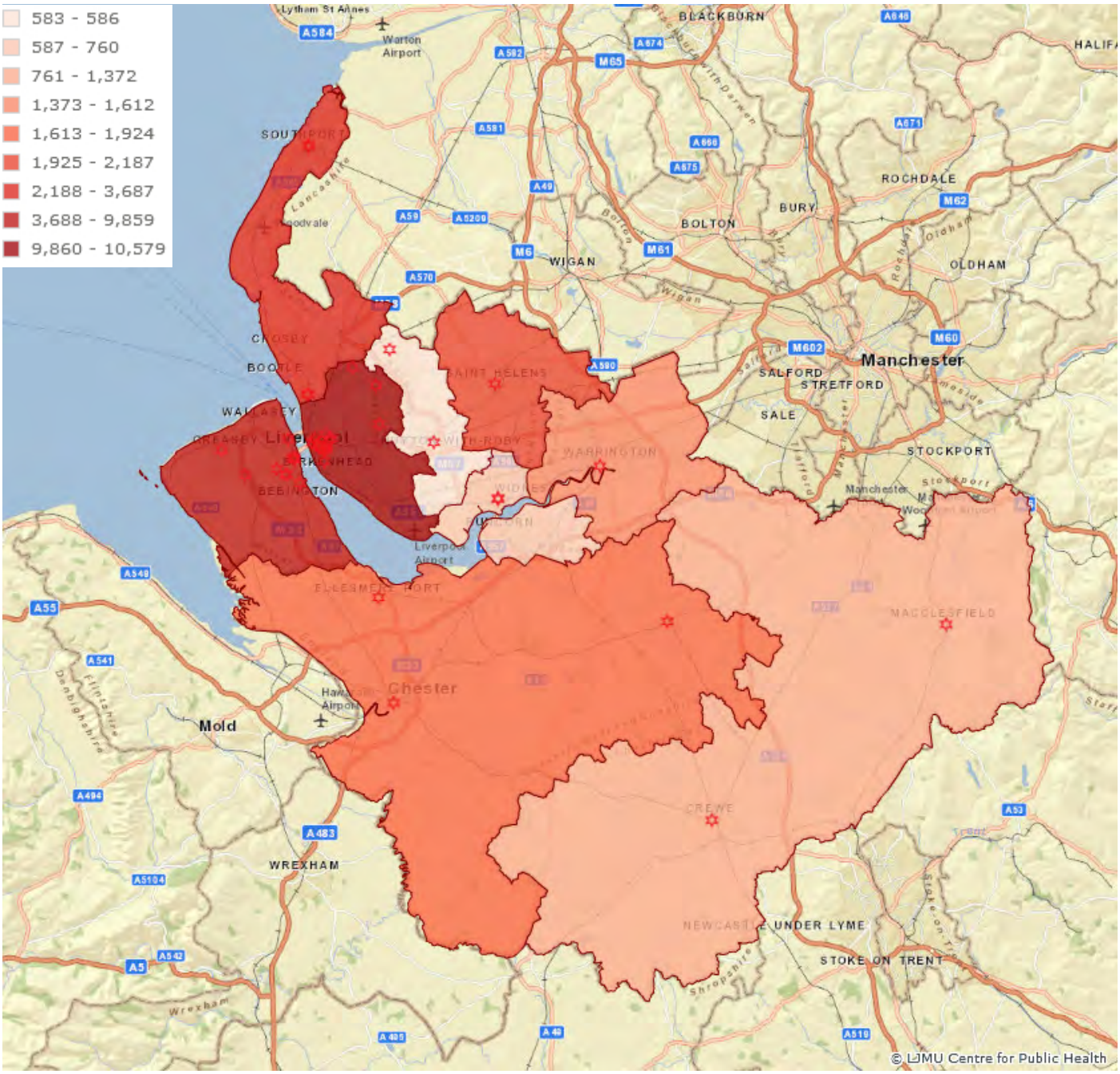



**Figure 8 - Clients by local authority of IMS service**

## POSTCODE AREA OF RESIDENCE

The postcode areas with the highest number of clients residing in them were L20 (655 clients), CH42 (519 clients), L4 (456 clients) and CH41 (406 clients). Although most clients resided in areas covered by IMS services, there were significant pockets of clients resident in areas outside of the region, including North Wales, Greater Manchester, Newcastle-under-Lyme and Preston. A valid postcode of residence was recorded for 39.5% of all IMS clients.

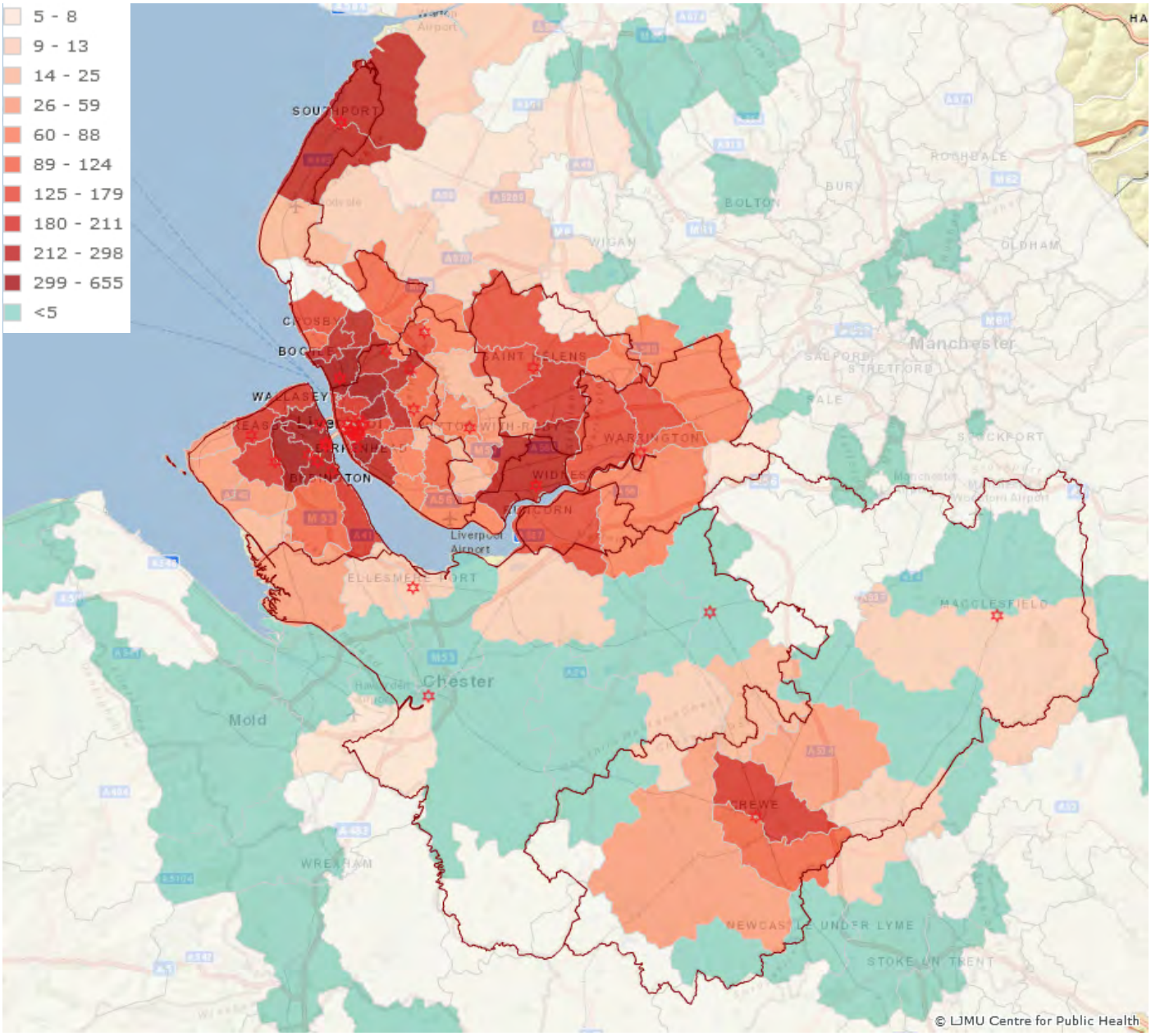



**Figure 9 - IMS clients by postcode of residence**

# 4. NON STRUCTURED TREATMENT

## 4.1. NON STRUCTURED TREATMENT: DEMOGRAPHIC PROFILE

Four areas contributed to the non-structured treatment part of the IMS dataset, previously known as NSTMS and ATMS, using the GOLIATH and BAKER systems to record the delivery of brief interventions – Liverpool, Sefton, Wirral and Knowsley. Knowsley only began collecting data late in the 13/14 financial year and consequently report low numbers due to the short period of time the data was collected for.

### GENDER

| | Female | % | Male | % | Total Clients |
|---|---|---|---|---|---|
| **Knowsley** | 8 | 57.1% | 6 | 42.9% | 14 |
| **Liverpool** | 1,636 | 31.4% | 3,570 | 68.6% | 5,206 |
| **Sefton** | 173 | 35.2% | 319 | 64.8% | 492 |
| **Wirral** | 610 | 26.3% | 1,711 | 73.7% | 2,321 |
| **Total:** | **2,427** | **30.2%** | **5,606** | **69.8%** | **8,033** |

**Table 4 - Non structured treatment clients by gender**

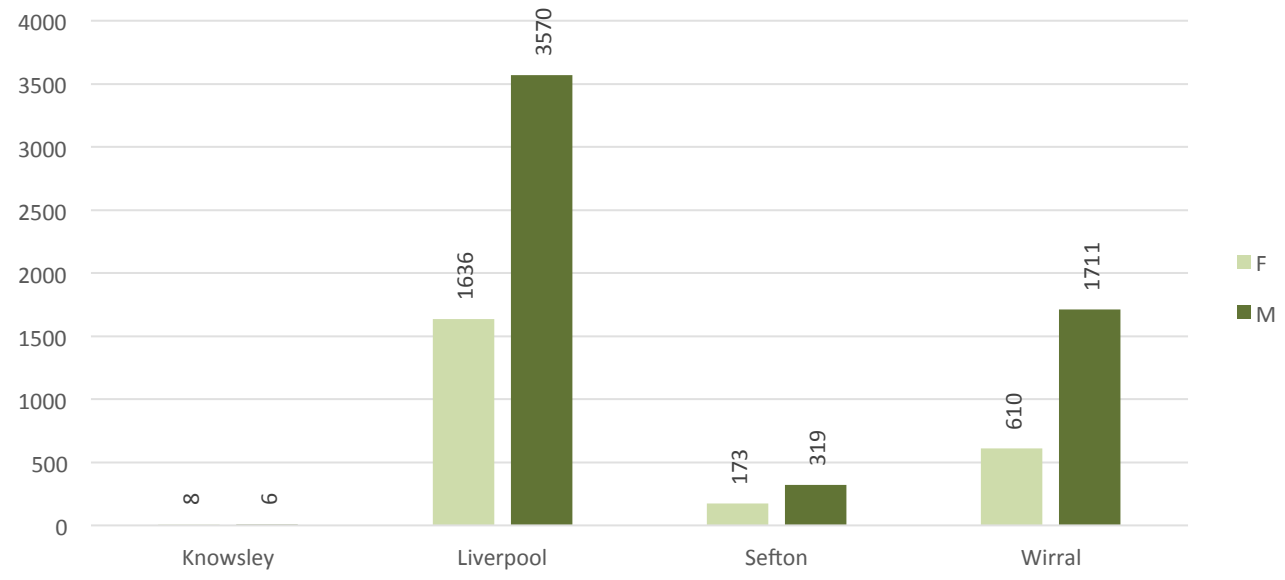



**Figure 10 - Non structured treatment clients by gender**

In all areas the peak age range of clients presenting to non-structured treatment services was concentrated in the 40-49 age bracket, with Liverpool reporting 29.1% of clients within this age range, Sefton 48.6% and Wirral 26.5%. Liverpool had the highest proportion of all areas reporting service users aged 60 and over (12%) while Wirral reported the highest proportion of service users aged under 25 (19%).

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 and over | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Knowsley** | Female | 0 | 0 | *** | *** | 0 | *** | *** | *** | *** | 0 | 0 | *** | 8 |
| | Male | 0 | 0 | *** | *** | 0 | *** | *** | *** | *** | 0 | 0 | *** | 6 |
| | **Total** | **0** | **0** | *** | *** | **0** | *** | *** | *** | *** | **0** | **0** | *** | **14** |
| **Liverpool** | Female | 53 | 35 | 70 | 125 | 190 | 214 | 286 | 214 | 157 | 104 | 71 | 117 | 1,636 |
| | Male | 15 | 70 | 273 | 320 | 313 | 422 | 473 | 543 | 430 | 255 | 183 | 273 | 3,570 |
| | **Total** | **68** | **105** | **343** | **445** | **503** | **636** | **759** | **757** | **587** | **359** | **254** | **390** | **5,206** |
| **Sefton** | Female | 0 | *** | 8 | 8 | 16 | 27 | 38 | 32 | 27 | 11 | *** | *** | 173 |
| | Male | 0 | *** | 7 | 15 | 23 | 36 | 88 | 81 | 41 | 15 | <14 | *** | 319 |
| | **Total** | **0** | *** | **15** | **23** | **39** | **63** | **126** | **113** | **68** | **26** | **15** | *** | **492** |
| **Wirral** | Female | 27 | 13 | 57 | 42 | 73 | 60 | 106 | 85 | 57 | 44 | 20 | 26 | 610 |
| | Male | 16 | 74 | 245 | 263 | 203 | 185 | 239 | 184 | 135 | 70 | 39 | 58 | 1,711 |
| | **Total** | **43** | **87** | **302** | **305** | **276** | **245** | **345** | **269** | **192** | **114** | **59** | **84** | **2,321** |
| **Total:** | | **111** | **193** | **661** | **774** | **818** | **948** | **1,234** | **1,141** | **848** | **499** | **328** | **478** | **8,033** |

**Table 5 - Non structured treatment clients by age group and gender, 2013-14**

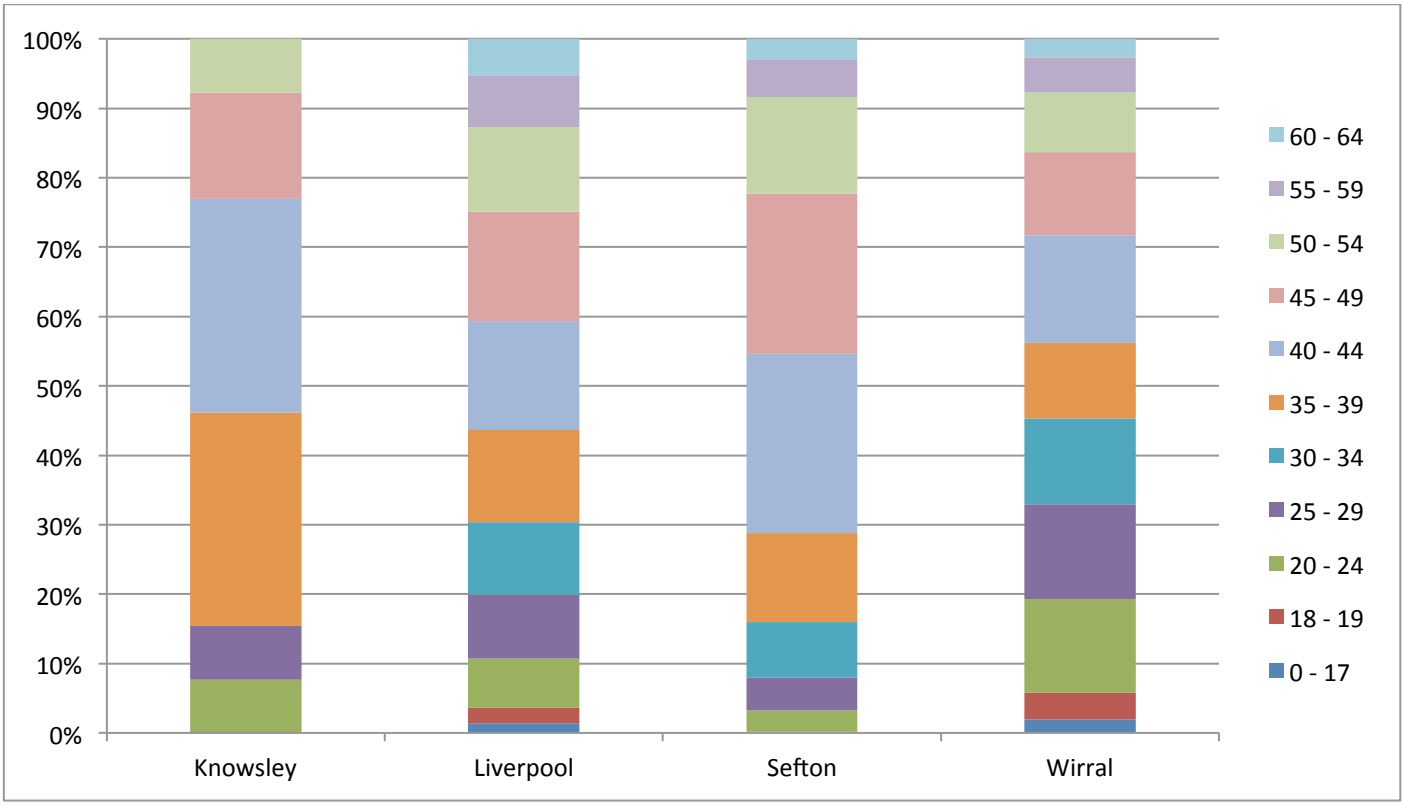



**Figure 11 - Non structured treatment clients proportional split by Local Authority, 2013-14**

The ethnicity of individuals using non-structured services who have an ethnicity recorded was again mainly White British, ranging from 82.1% in Liverpool to 96.8% in Wirral[5]. Of those whose ethnicity was not recorded as White British, the main ethnic groups identified are African (1.9%), Other White (1.8%) and Other Black (1.5%).

| | Knowsley | Liverpool | Sefton | Wirral | Total |
|---|---|---|---|---|---|
| **A: White British** | 100.0% | 82.1% | 95.9% | 96.8% | 88.3% |
| **B: White Irish** | 0.0% | 1.4% | 0.6% | 0.7% | 1.1% |
| **C: Other White** | 0.0% | 2.7% | 1.0% | 0.6% | 1.8% |
| **D: White and Black Caribbean** | 0.0% | 1.3% | 0.0% | 0.3% | 0.9% |
| **F: White and Asian** | 0.0% | 0.5% | 0.0% | 0.1% | 0.3% |
| **G: Other Mixed** | 0.0% | 0.9% | 0.4% | 0.2% | 0.6% |
| **P: Other Black** | 0.0% | 2.2% | 0.2% | 0.5% | 1.5% |
| **S: Other** | 0.0% | 1.8% | 1.2% | 0.1% | 1.2% |
| **J: Pakistani** | 0.0% | 0.3% | 0.0% | 0.0% | 0.2% |
| **E: White and Black African** | 0.0% | 0.5% | 0.2% | 0.1% | 0.3% |
| **H: Indian** | 0.0% | 0.2% | 0.0% | 0.1% | 0.1% |
| **K: Bangladeshi** | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| **L: Other Asian** | 0.0% | 1.3% | 0.0% | 0.1% | 0.8% |
| **M: Caribbean** | 0.0% | 0.2% | 0.0% | 0.1% | 0.1% |
| **N: African** | 0.0% | 3.3% | 0.0% | 0.1% | 1.9% |
| **R: Chinese** | 0.0% | 0.1% | 0.0% | 0.0% | 0.0% |
| **Z: Not Stated** | 0.0% | 1.2% | 0.4% | 0.3% | 0.8% |

**Table 6 - Non structured treatment clients by ethnicity, 2013-14**

[5] Please note that Knowsley's figures have been removed from any narrative breakdown in this section due to low numbers, which are supressed under 5

## 4.2. NON STRUCTURED TREATMENT: MAIN SUBSTANCE

The main substance of use identified by individuals attending non-structured treatment services where this was recorded was alcohol (74.4%), followed by heroin (10.9%), cannabis (4.3%) and cocaine (3.6%). 21.2% of the overall total did not have a main substance recorded.

| | Knowsley | Liverpool | Sefton | Wirral | Total |
|---|---|---|---|---|---|
| **Alcohol** | <14 | 3,419 | 127 | 1,470 | 5,028 |
| | <90% | 73.9% | 26.0% | 90.1% | 74.4% |
| **Amphetamines (excl Ecstasy)** | 0 | 38 | *** | *** | 41 |
| | 0.0% | 0.8% | 0.2% | 0.1% | 0.6% |
| **Anti-depressants** | 0 | *** | 0 | *** | *** |
| | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% |
| **Benzodiazepines** | 0 | <9 | 0 | *** | 9 |
| | 0.0% | 0.1% | 0.0% | 0.2% | 0.1% |
| **Cannabis** | 0 | 256 | 8 | 27 | 291 |
| | 0.0% | 5.5% | 1.6% | 1.7% | 4.3% |
| **Cocaine (excl Crack)** | *** | 209 | 20 | 11 | 242 |
| | >10% | 4.5% | 4.1% | 0.7% | 3.6% |
| **Crack Cocaine** | 0 | 86 | 13 | *** | 102 |
| | 0.0% | 1.9% | 2.7% | 0.2% | 1.5% |
| **Ecstasy** | 0 | 5 | 0 | 0 | 5 |
| | 0.0% | 0.1% | 0.0% | 0.0% | 0.1% |
| **Hallucinogens** | 0 | <34 | 0 | *** | 34 |
| | 0.0% | 0.7% | 0.0% | 0.1% | 0.5% |
| **Heroin** | 0 | 400 | 285 | 54 | 739 |
| | 0.0% | 8.7% | 58.3% | 3.3% | 10.9% |
| **Methadone** | 0 | 81 | <25 | *** | 109 |
| | 0.0% | 1.8% | 4.9% | 0.2% | 1.6% |
| **Other Drugs** | 0 | 22 | 0 | *** | 24 |
| | 0.0% | 0.5% | 0.0% | 0.1% | 0.4% |
| **Other Opiates** | 0 | 23 | <12 | *** | 37 |
| | 0.0% | 0.5% | 2.0% | 0.2% | 0.5% |
| **Prescription Drugs** | 0 | 45 | *** | *** | 47 |
| | 0.0% | 1.0% | 0.2% | 0.1% | 0.7% |
| **Steroids & PIEDS** | 0 | 0 | 0 | 49 | 49 |
| | 0.0% | 0.0% | 0.0% | 3.0% | 0.7% |
| **Total** | **14** | **4,624** | **489** | **1,632** | **6,759** |

**Table 7 - Non structured treatment clients by main substance, where recorded, 2013-14**

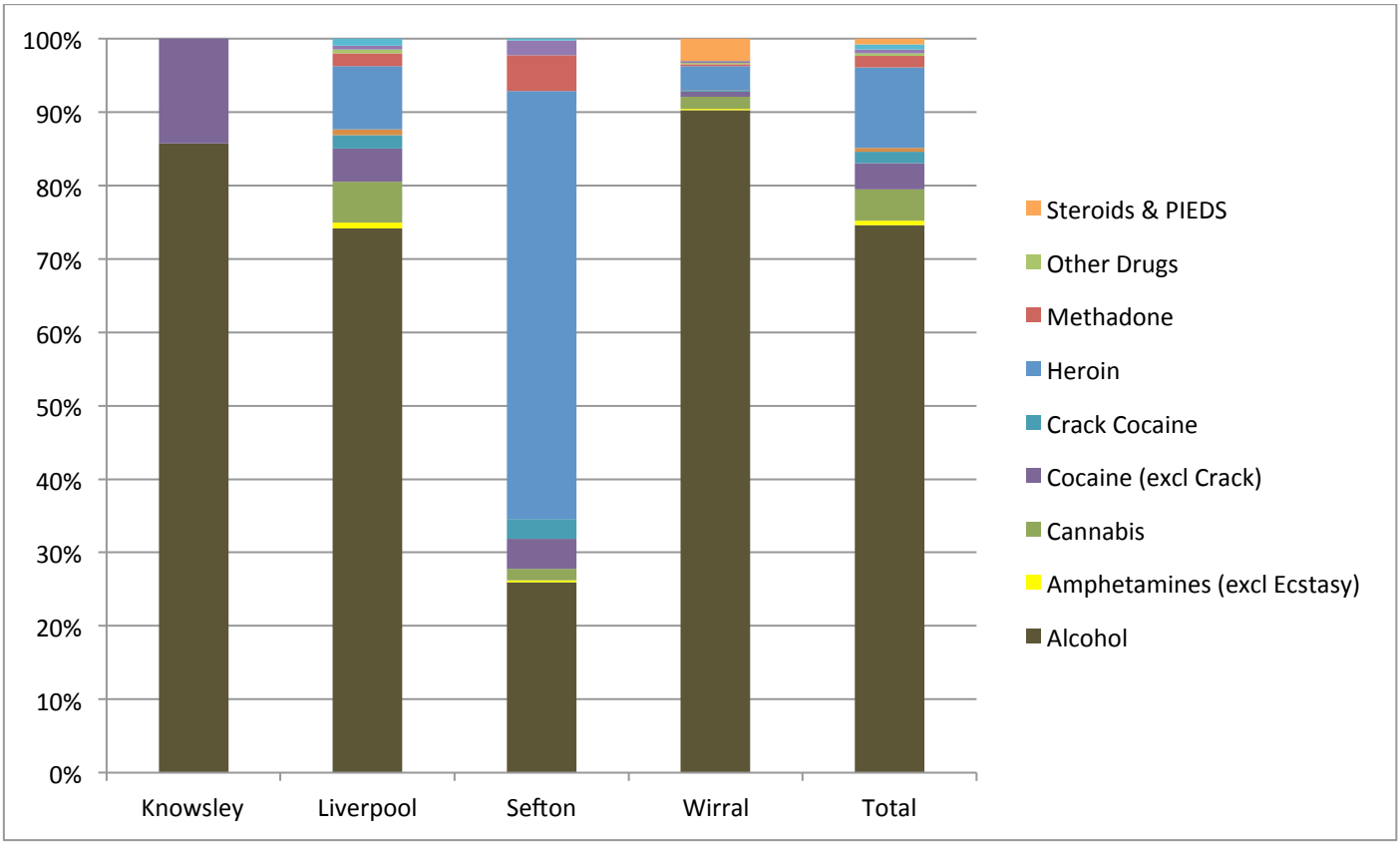



**Figure 12 - IMS Main substance used where recorded, 2013-14**

## 4.3. NON STRUCTURED TREATMENT: ACTIVITY DELIVERED

### INTERVENTIONS

Non-structured treatment services delivered Brief Interventions in almost 3 presentations out of every 4.[6] A total of 35,133 interventions, either Brief Interventions or Advice and Information, were delivered in total to 8,033 individuals, each individual receiving an average of just over 4 interventions from a service over the course of the year.

| | Advice and Information (General) | Brief Intervention | Total |
|---|---|---|---|
| **Knowsley** | 7 | 8 | 15 |
| **Liverpool** | 6,256 | 24,867 | 31,123 |
| **Sefton** | 0 | 669 | 669 |
| **Wirral** | 886 | 2,440 | 3,326 |
| **Total:** | **7,149** | **27,984** | **35,133** |

**Table 8 - Non structured treatment clients, interventions summary, 2013-14**

### ONWARD REFERRALS

Only Liverpool and Wirral currently record onward referrals to other organisations. The main organisation type referred to was "Other" (47.3%), followed by Homeless Service (18.0%), Housing Provider (5.1%), Job Centre/Plus and Employment Services (4.4%) and Local Non Structured Treatment and Other Support Providers (4.0%).[7]

| | Liverpool | Wirral | Total: |
|---|---|---|---|
| **Community Alcohol Team** | 35 | 6 | 41 |
| **Detox Service** | 51 | 5 | 56 |
| **Drug service non-Statutory** | 122 | 3 | 125 |
| **Drug Service Statutory** | 45 | 4 | 49 |
| **Education Service** | 66 | 43 | 109 |
| **Fire Service (Vulnerable Persons Team)** | 8 | 2 | 10 |
| **GP** | 111 | 28 | 139 |
| **Homeless Service** | 745 | 4 | 749 |
| **Hospital A&E** | 7 | 2 | 9 |
| **Hospital General** | 51 | 0 | 51 |
| **Housing Provider** | 208 | 5 | 213 |
| **Job Centre / Job Centre Plus /Employment Service** | 131 | 51 | 182 |
| **Local Non Structured Treatment & Other Support** | 105 | 63 | 168 |
| **Police Service (including specialist rape)** | 18 | 0 | 18 |
| **Psychiatry services** | 53 | 0 | 53 |
| **Psychological Services** | 38 | 1 | 39 |
| **Rehab Service** | 22 | 4 | 26 |
| **Social Services** | 52 | 3 | 55 |
| **Welfare Advice Agency** | 101 | 5 | 106 |
| **Other** | 1,646 | 327 | 1,973 |
| **Total Referrals:** | 3,615 | 556 | 4,171 |

**Table 9 - Non structured treatment clients, onward referrals, 2013-14**

[6] The information system used to record data in Sefton only allows the option "Brief Intervention" to be recorded.

[7] As GOLIATH allows agencies to record specific organisations they refer to alongside the intervention type, we intend to look at the composition of "Other" to examine what types of service this refers to.

## 4.4. NON STRUCTURED TREATMENT: CLIENT ASSESSMENT

### EMPLOYMENT STATUS

Over half of the individuals seen within the year who recorded an employment status reported themselves as being unemployed and seeking work (53%), a figure which ranged from 51.9% in Liverpool to 61.9% in Wirral.[8] Those describing themselves as being in regular employment ranged from 6.2% in Wirral to 13.3% in Sefton. Completion of this field ranged from 17.2% in Wirral to 94.5% in Sefton, with an overall 36.6% completion rate.

| | Knowsley | Liverpool | Sefton | Wirral |
|---|---|---|---|---|
| **Regular Employment** | *** | 300 | 62 | 46 |
| **Pupil / Student** | 0 | 72 | 5 | 42 |
| **Long term sick or disabled** | *** | 1,106 | 107 | 41 |
| **Homemaker** | *** | 18 | *** | *** |
| **Unemployed and seeking work** | 6 | 2,490 | 264 | 268 |
| **Not receiving benefits** | 0 | 153 | *** | *** |
| **Unpaid voluntary work** | 0 | 19 | 0 | 5 |
| **Retired from paid work** | *** | 21 | 8 | 10 |
| **Other** | 0 | 622 | 13 | 19 |
| **Not Known / Blank** | *** | 1,197 | 27 | 2,078 |

**Table 10 - Non structured treatment clients by employment status, 2013-14**

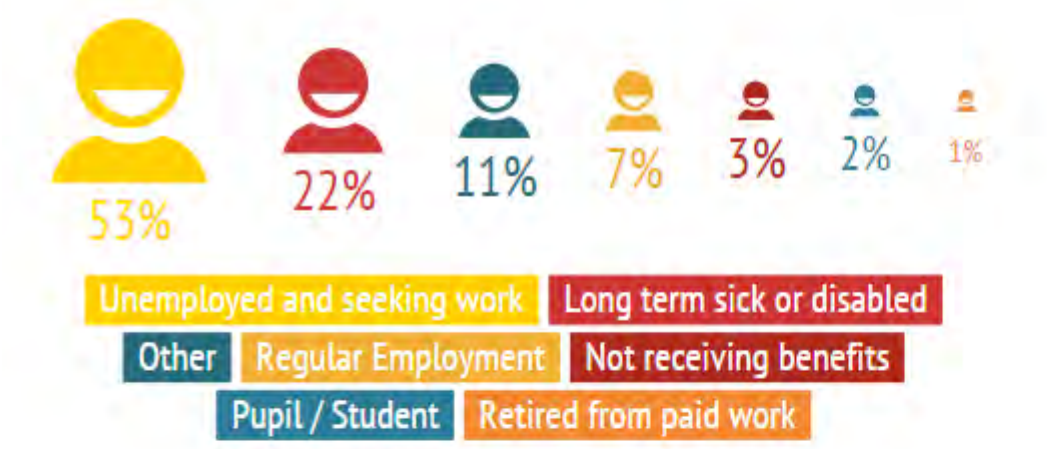



**Figure 13 - Percentage of clients by employment status where recorded, 2013-14**

[8] Employment status is the latest status recorded by each agency for each client.

## PARENTAL STATUS

Just over 3 in 5 individuals seen within the year who recorded a parental status reported themselves as not being a parent (62%), a figure which ranged from 40.1% in Sefton to 64.7% in Liverpool. Of those individuals identifying themselves as parents, those with some or all of their children living with them ranged from 7.2% in Liverpool to 20.2% in Wirral. Completion of this field ranged from 13.8% in Wirral to 80.7% in Liverpool, with an overall 61.8% completion rate.

| | Knowsley | Liverpool | Sefton | Wirral |
|---|---|---|---|---|
| **All the children live with client** | 5 | 272 | 45 | 47 |
| **Some of the children live with client** | 0 | 76 | 28 | 23 |
| **None of the children live with client** | *** | 1,298 | 149 | 104 |
| **Not a parent** | *** | 3,130 | 150 | 172 |
| **Client declined to answer** | 0 | 64 | *** | *** |
| **Not Stated** | 7 | 1,158 | 119 | 2,164 |

**Table 11 - Non structured treatment clients by parental status**

## ACCOMMODATION STATUS

Just over two thirds of individuals seen within the year who recorded an accommodation status reported themselves as having no housing problem (71%), a figure which ranged from 68.1% in Liverpool to 84.4% in Sefton. Individuals identifying themselves as having an urgent housing issue (where they had no fixed abode), ranged from 4.6% in Wirral to 18.2% in Liverpool. Completion of this field ranged from 13.8% in Wirral to 80.7% in Liverpool, with an overall 65.3% completion rate.

| | Knowsley | Liverpool | Sefton | Wirral |
|---|---|---|---|---|
| **NFA - urgent housing problem** | 0 | 901 | 29 | 20 |
| **Housing problem** | 0 | 678 | 47 | 60 |
| **No housing problem** | 12 | 3,373 | 412 | 357 |
| **Blank - Not recorded** | *** | 1,046 | 5 | 2,074 |

**Table 12 - Non structured treatment clients by accommodation status**

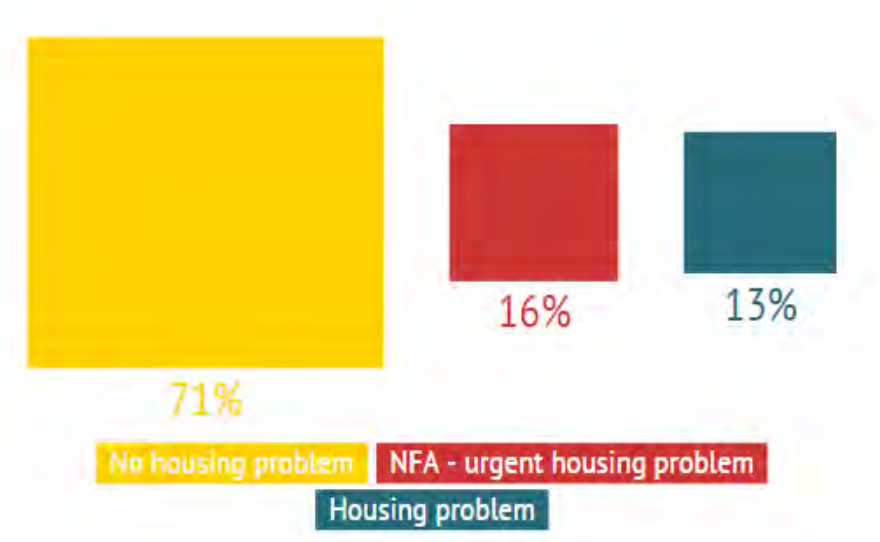



**Figure 14 - Percentage of clients by accommodation status where recorded, 2013-14**

## 4.5. NON STRUCTURED TREATMENT: GEOGRAPHIC PROFILE

### LOCAL AUTHORITY AREA OF TREATMENT

Less than 1% of the total number of clients seen by non-structured treatment services were seen in Knowsley Local Authority, against figures of 6% for Sefton, 29% for Wirral and 65% for Liverpool.

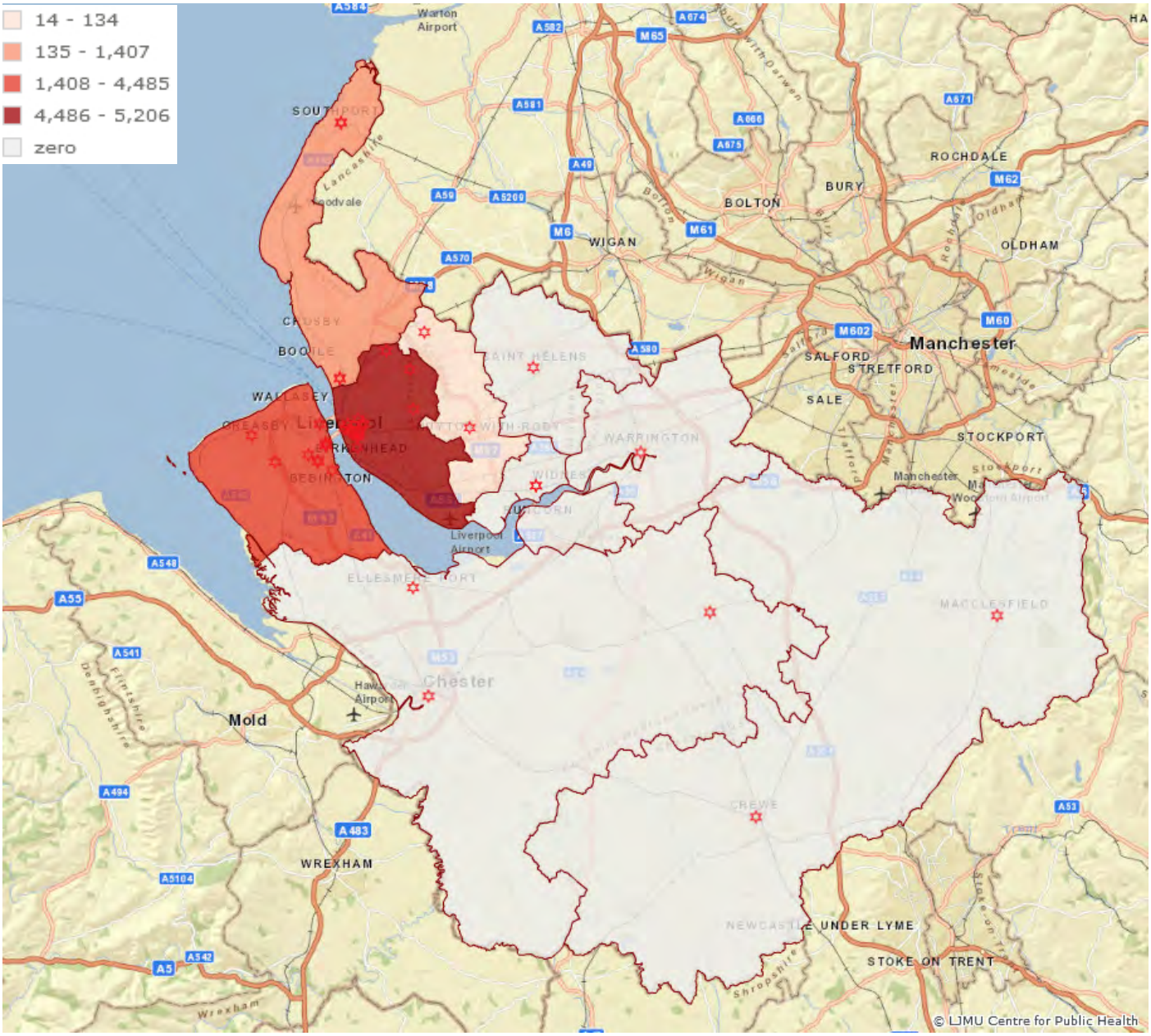



**Figure 15 - Non structured treatment clients by local authority, 2013-14**

The postcode areas with the highest number of clients residing in them were L4 (434 clients), L20 (351 clients), L6 (348 clients) and L8 (280 clients). Wirral's CH42 postcode had the highest number of clients outside of the Liverpool area (233), with PR9 and PR8 both having the highest number of clients in Sefton (77 each). A valid postcode of residence was recorded for 67.1% of all non-structured clients.

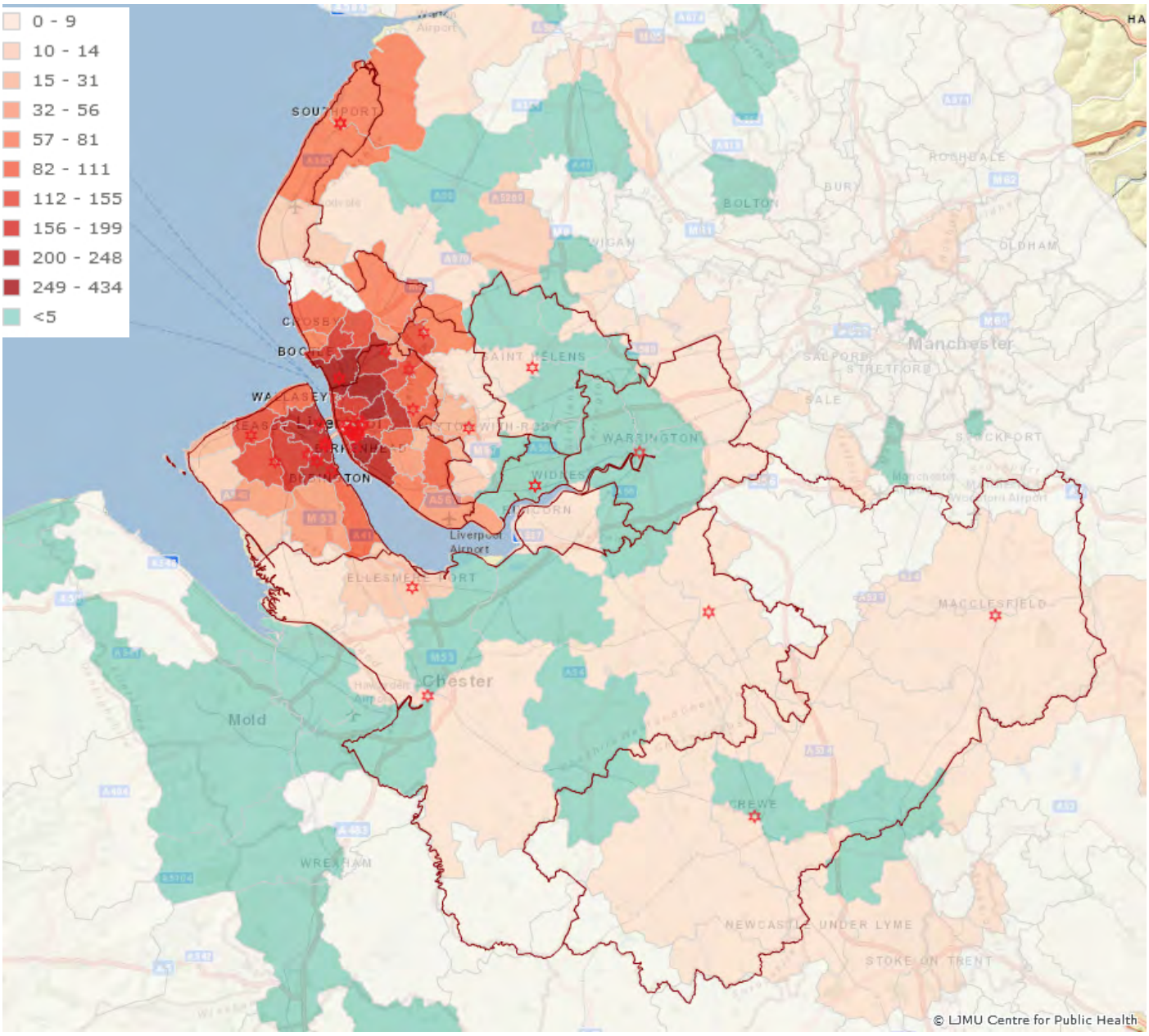



**Figure 16 - Non structured treatment clients by postcode of residence, 2013-14**

# 5. NEEDLE & SYRINGE PROGRAMME – ALL CLIENTS

The needle & syringe programme data included in this section includes all clients who completed an exchange transaction during 2013/14. A further breakdown of these tables is available in appendix A, B and C where the tables have been repeated for all new clients only, for all non-steroid clients only, and for all new non-steroid clients only.

## 5.1. NEEDLE & SYRINGE PROGRAMME: DEMOGRAPHIC PROFILE [ALL CLIENTS]

### GENDER

The substantial majority of client attending NSPs (Needle and Syringe Programmes) operated in both an agency and pharmacy setting are male, ranging from 87.3% in Sefton to 94.8% in Wirral, and an average overall of 90.4% – this can be accounted for in the main by the high number of Steroid and PIED users attending NSPs across the region.

| | Female | % | Male | % | Total Clients |
|---|---|---|---|---|---|
| **Cheshire East** | 123 | 9.5% | 1,170 | 90.5% | 1,293 |
| **Cheshire West & Chester** | 159 | 9.3% | 1,554 | 90.7% | 1,713 |
| **Halton** | 41 | 6.7% | 567 | 93.3% | 608 |
| **Knowsley** | 54 | 9.5% | 515 | 90.5% | 569 |
| **Liverpool** | 593 | 10.7% | 4,924 | 89.3% | 5,517 |
| **Sefton** | 230 | 12.7% | 1,575 | 87.3% | 1,805 |
| **St. Helens** | 220 | 10.5% | 1,872 | 89.5% | 2,092 |
| **Warrington** | 127 | 8.3% | 1,404 | 91.7% | 1,531 |
| **Wirral** | 106 | 5.2% | 1,934 | 94.8% | 2,040 |
| **Total** | **1,653** | **9.6%** | **15,515** | **90.4%** | **17,168** |

**Table 13 - NSP client numbers by gender (agency and pharmacy combined)**

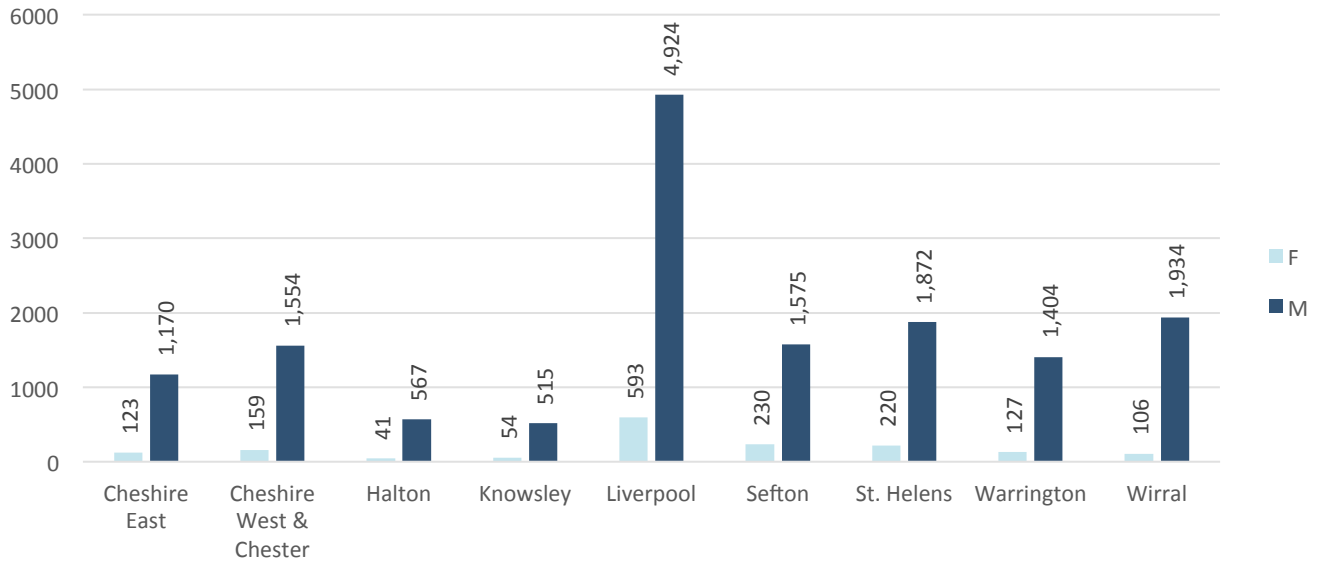



**Figure 17 - NSP client numbers by gender (agency and pharmacy combined), 2013-14**

## AGE GROUP

The age of individuals attending NSPs peaks for most areas around the 25-34 age band, with Halton in particular having a high proportion of attendees (49%) aged between 25-34 years against 33% for both St Helens and Sefton who report the highest number of attendees in the 40-44 years age band (20% each). All areas have less than 1% of attendees presenting aged 65 and over, other than Knowsley which registers 3%. Sefton has the lowest proportion of those attending aged under 25 (7%).

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65+ | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 16 | 31 | 27 | 23 | 9 | 9 | *** | *** | 0 | 123 |
| | Male | *** | 28 | <190 | 224 | 256 | 186 | 153 | 77 | 47 | <6 | *** | *** | 1,170 |
| | **Total** | *** | **28** | **192** | **240** | **287** | **213** | **176** | **86** | **56** | **7** | *** | *** | **1,293** |
| **Cheshire West & Chester** | Female | *** | *** | 15 | 31 | 31 | 34 | 26 | 10 | 5 | *** | 0 | 0 | 159 |
| | Male | <14 | <20 | 229 | 288 | 292 | 261 | 253 | 118 | 56 | <18 | 8 | *** | 1,554 |
| | **Total** | **<15** | **21** | **244** | **319** | **323** | **295** | **279** | **128** | **61** | **20** | **8** | *** | **1,713** |
| **Halton** | Female | 0 | 0 | *** | 11 | 9 | 6 | 7 | *** | *** | 0 | 0 | 0 | 41 |
| | Male | *** | 5 | <100 | 151 | 123 | 81 | 57 | <40 | <12 | 0 | *** | 0 | 567 |
| | **Total** | *** | **5** | **101** | **162** | **132** | **87** | **64** | **41** | **14** | **0** | *** | **0** | **608** |
| **Knowsley** | Female | 0 | 0 | 8 | 11 | 6 | 5 | 10 | 6 | *** | *** | *** | *** | 54 |
| | Male | *** | 6 | 94 | 115 | 87 | 53 | 71 | 34 | <13 | <16 | <9 | <18 | 515 |
| | **Total** | *** | **6** | **102** | **126** | **93** | **58** | **81** | **40** | **13** | **18** | **<10** | **<20** | **569** |
| **Liverpool** | Female | *** | *** | 38 | 66 | 85 | 111 | 160 | 63 | 41 | 16 | 6 | *** | 593 |
| | Male | <17 | <60 | 515 | 800 | 898 | 812 | 822 | 616 | 287 | 61 | 24 | <16 | 4,924 |
| | **Total** | **17** | **62** | **553** | **866** | **983** | **923** | **982** | **679** | **328** | **77** | **30** | **17** | **5,517** |
| **Sefton** | Female | *** | *** | 17 | 26 | 35 | 36 | 56 | 28 | 21 | *** | 5 | *** | 230 |
| | Male | <9 | <16 | 89 | 265 | 266 | 237 | 305 | 234 | 108 | <25 | 21 | *** | 1,575 |
| | **Total** | **9** | **17** | **106** | **291** | **301** | **273** | **361** | **262** | **129** | **25** | **26** | **5** | **1,805** |
| **St. Helens** | Female | 6 | *** | 18 | 34 | 53 | 28 | 54 | 15 | 5 | *** | *** | 0 | 220 |
| | Male | 5 | <42 | 269 | 276 | 314 | 314 | 366 | 170 | 59 | <40 | <16 | 7 | 1,872 |
| | **Total** | **11** | **43** | **287** | **310** | **367** | **342** | **420** | **185** | **64** | **40** | **16** | **7** | **2,092** |
| **Warrington** | Female | *** | *** | 13 | 21 | 32 | 21 | 11 | 16 | *** | *** | 0 | 0 | 127 |
| | Male | <7 | <35 | 213 | 314 | 248 | 217 | 210 | 114 | <35 | <11 | 5 | *** | 1,404 |
| | **Total** | **<9** | **37** | **226** | **335** | **280** | **238** | **221** | **130** | **36** | **13** | **5** | *** | **1,531** |
| **Wirral** | Female | 0 | *** | 6 | 11 | 19 | 25 | 17 | 19 | 5 | *** | 0 | 0 | 106 |
| | Male | 5 | <38 | 291 | 397 | 298 | 274 | 273 | 221 | 95 | <32 | 6 | 6 | 1,934 |
| | **Total** | **5** | **40** | **297** | **408** | **317** | **299** | **290** | **240** | **100** | **32** | **6** | **6** | **2,040** |
| | | **71** | **259** | **2,108** | **3,057** | **3,083** | **2,728** | **2,874** | **1,791** | **801** | **232** | **103** | **61** | **17,168** |

**Table 14 - NSP client numbers by age group and gender (agency and pharmacy combined) , 2013-14**

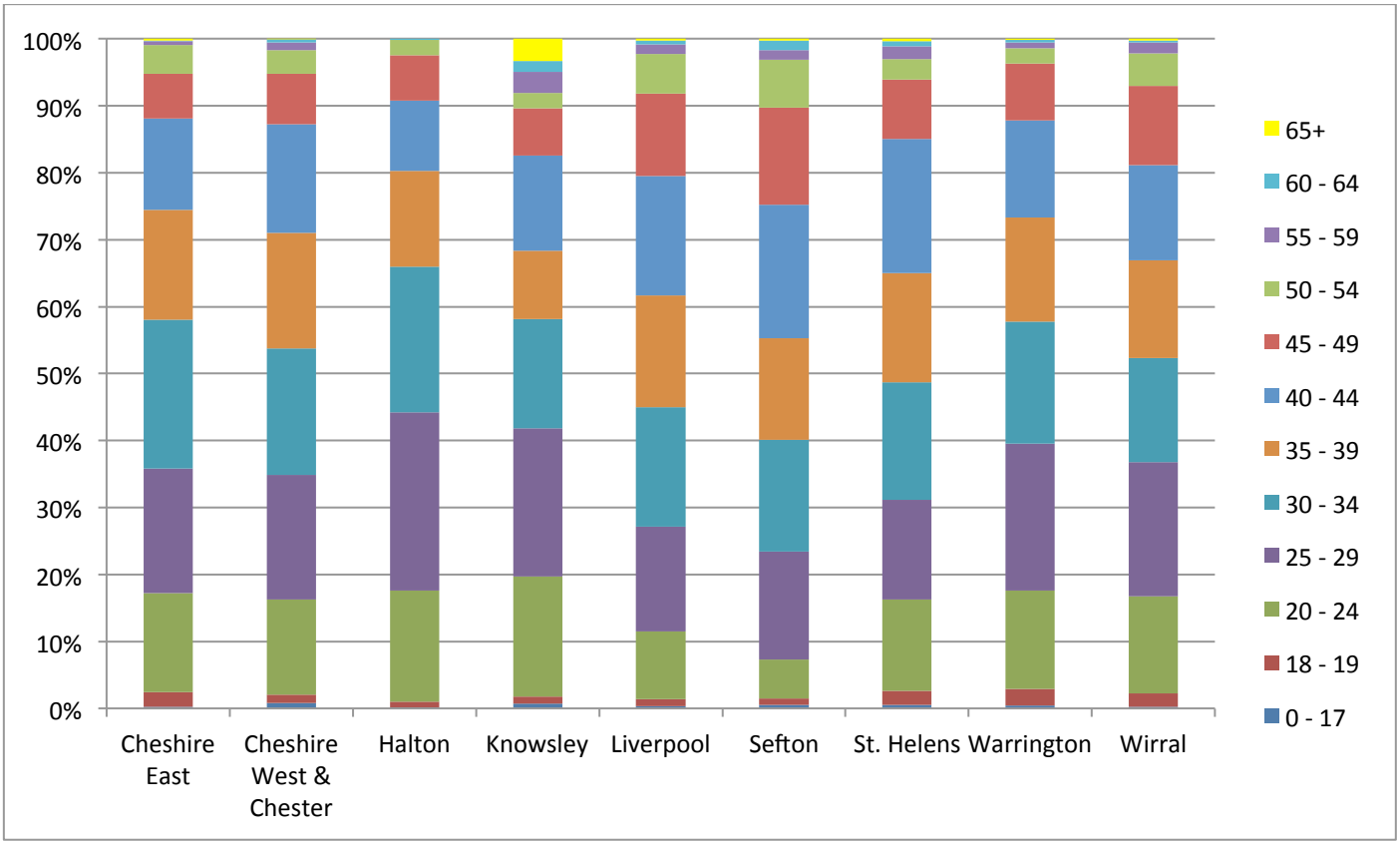



**Figure 18 - NSP client numbers by age group (agency and pharmacy combined) , 2013-14**

The ethnicity of individuals using NSP services who have an ethnicity recorded[9] is in the main White British, ranging from 79.6% in Liverpool to 100% in Cheshire West and Chester – all areas record "White British" ethnicity at a level of above 90% other than Liverpool. Of those whose ethnicity is not recorded as White British, the main ethnic groups identified are Other White (1.2%), White Irish and Other Mixed (both 0.6%).

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| **A: White British** | 91.4% | 100.0% | 97.2% | 96.0% | 79.6% | 98.1% | 96.8% | 96.7% | 96.7% | 94.6% |
| **B: White Irish** | 0.8% | 0.0% | 0.6% | 4.0% | 0.3% | 0.0% | 1.4% | 0.2% | 0.4% | 0.6% |
| **C: Other White** | 5.8% | 0.0% | 0.6% | 0.0% | 0.6% | 1.0% | 0.0% | 1.6% | 0.5% | 1.2% |
| **D: White and Black Caribbean** | 0.6% | 0.0% | 0.6% | 0.0% | 1.0% | 0.0% | 0.0% | 0.2% | 0.1% | 0.2% |
| **F: White and Asian** | 0.3% | 0.0% | 0.0% | 0.0% | 0.3% | 0.0% | 0.0% | 0.0% | 0.2% | 0.1% |
| **G: Other Mixed** | 0.3% | 0.0% | 0.6% | 0.0% | 1.3% | 0.0% | 0.5% | 0.5% | 0.7% | 0.6% |
| **P: Other Black** | 0.3% | 0.0% | 0.0% | 0.0% | 1.3% | 0.0% | 0.3% | 0.0% | 0.3% | 0.3% |
| **S: Other** | 0.6% | 0.0% | 0.0% | 0.0% | 0.0% | 1.0% | 0.7% | 0.4% | 0.4% | 0.4% |
| **J: Pakistani** | 0.0% | 0.0% | 0.6% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% | 0.1% |
| **E: White and Black African** | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.2% | 0.1% | 0.1% |
| **H: Indian** | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.2% | 0.1% |
| **L: Other Asian** | 0.0% | 0.0% | 0.0% | 0.0% | 0.3% | 0.0% | 0.0% | 0.0% | 0.2% | 0.1% |
| **M: Caribbean** | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% |
| **R: Chinese** | 0.0% | 0.0% | 0.0% | 0.0% | 0.6% | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% |
| **Z: Not Stated** | 0.0% | 0.0% | 0.0% | 0.0% | 14.7% | 0.0% | 0.0% | 0.2% | 0.1% | 1.4% |

**Table 15 - NSP client numbers by ethnicity (agency and pharmacy combined) , 2013-14**

[9] "Ethnicity not recorded" refers to when this field has been left blank rather than completed with "Not Stated"

## 5.2. NEEDLE & SYRINGE PROGRAMME: MAIN SUBSTANCE [ALL CLIENTS]

The main substances of use identified by individuals attending needle and syringe exchange services where this was recorded were steroids and PIEDS (77.0%), followed by heroin (19.6%) and crack cocaine (1.1%). 67.4% of the overall total did not have a main substance recorded.

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| Amphetamines (excl Ecstasy) | 13 | <6 | 0 | 0 | 0 | *** | 16 | *** | 7 | 44 |
| | 2.2% | 0.5% | 0.0% | 0.0% | 0.0% | 0.1% | 2.2% | 0.3% | 0.5% | 0.8% |
| Benzodiazepines | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** | *** | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% | 0.3% | 0.1% | 0.1% |
| Cannabis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% |
| Cocaine (excl Crack) | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 6 | 11 |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.7% | 0.3% | 0.0% | 0.0% | 0.5% | 0.2% |
| Crack Cocaine | *** | 0 | *** | 0 | 0 | 54 | <6 | 0 | *** | 63 |
| | 0.3% | 0.0% | 0.7% | 0.0% | 0.0% | 5.4% | 0.7% | 0.0% | 0.1% | 1.1% |
| Heroin | 69 | 195 | 15 | 13 | 55 | 470 | 140 | 40 | 126 | 1,123 |
| | 11.5% | 20.8% | 10.5% | 16.7% | 19.9% | 47.4% | 19.0% | 6.2% | 9.5% | 19.6% |
| Methadone | 5 | *** | *** | *** | *** | 5 | *** | 0 | 23 | 47 |
| | 0.8% | 0.4% | 1.4% | 1.3% | 1.4% | 0.5% | 0.4% | 0.0% | 1.7% | 0.8% |
| Other Drugs | *** | 0 | 0 | *** | *** | *** | 7 | 6 | *** | 23 |
| | 0.5% | 0.0% | 0.0% | 1.3% | 0.4% | 0.1% | 1.0% | 0.9% | 0.3% | 0.4% |
| Other Opiates | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | *** | *** |
| | 0.0% | 0.0% | 0.7% | 0.0% | 0.4% | 0.0% | 0.0% | 0.0% | 0.1% | 0.1% |
| Prescription Drugs | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** |
| | 0.2% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| Steroids & PIEDS | 509 | 735 | 124 | 63 | 214 | 457 | 564 | 598 | 1,156 | 4,420 |
| | 84.6% | 78.3% | 86.7% | 80.8% | 77.3% | 46.1% | 76.7% | 92.1% | 87.2% | 77.0% |
| Total | **602** | **939** | **143** | **78** | **277** | **992** | **735** | **649** | **1,325** | **5,740** |

**Table 16 - NSP client numbers by main substance, where recorded (agency and pharmacy combined) , 2013-14**

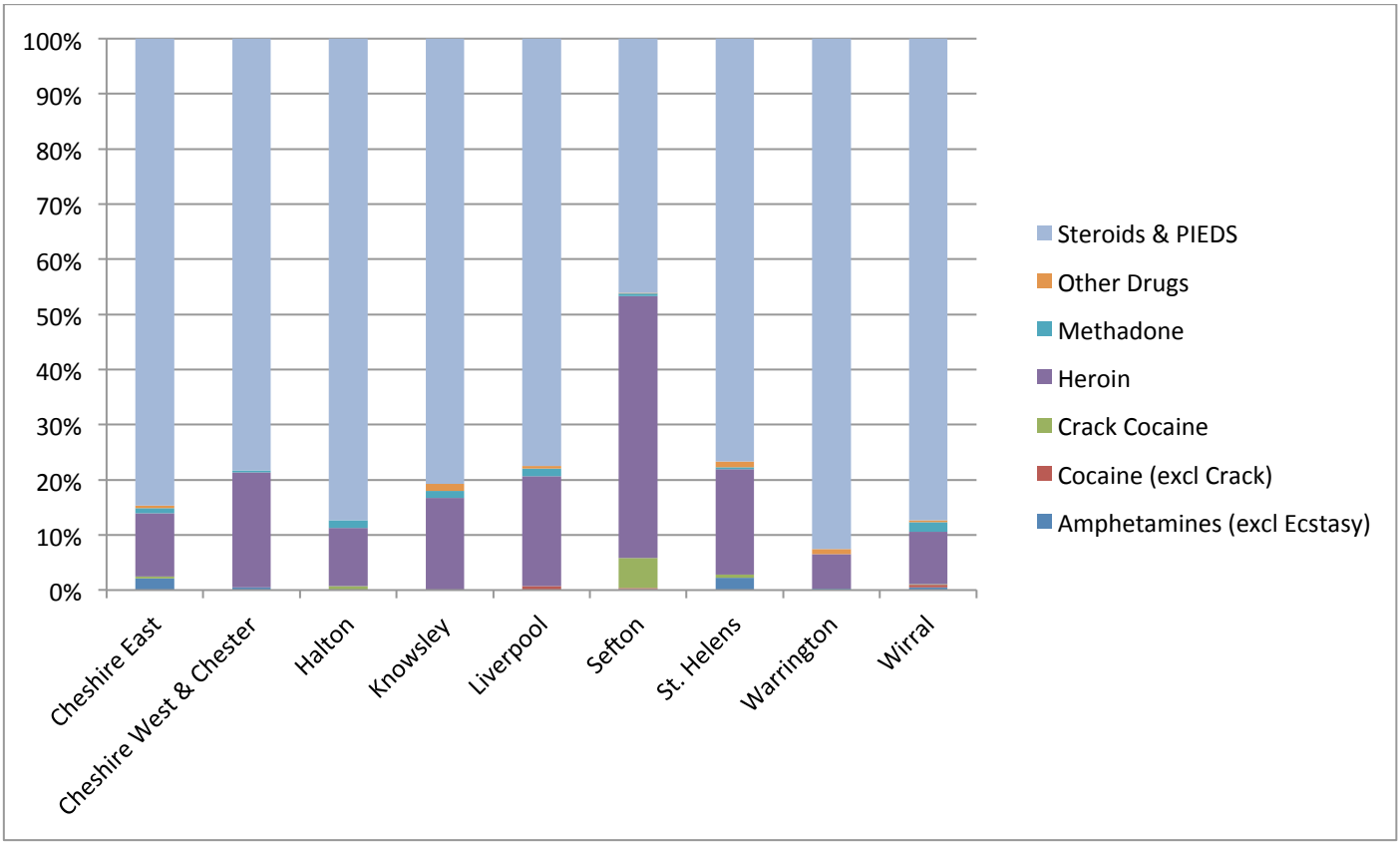



**Figure 19 - NSP client numbers by main substance, where recorded (agency and pharmacy combined) , 2013-14**

## 5.3. NEEDLE & SYRINGE PROGRAMME: ACTIVITY DELIVERED

### TRANSACTIONS

The split between agency and pharmacy for transactions delivered ranges from 7.9% of transactions being delivered in an agency setting in Sefton to 93.7% in Halton. The average is 34.3%, with a split of around 2 pharmacy transactions for every 1 agency transaction.

| | Agency Needle Syringe Programme | Pharmacy Needle Syringe Programme | Total |
|---|---|---|---|
| Chester East | 1,556 | 5,285 | 6,841 |
| Chester West and Chester | 3,166 | 4,756 | 7,922 |
| Halton | 897 | 60 | 957 |
| Knowsley | 141 | 1,175 | 1,316 |
| Liverpool | 823 | 6,496 | 7,319 |
| Sefton | 321 | 3,724 | 4,045 |
| St. Helens | 1,609 | 1,443 | 3,052 |
| Warrington | 1,058 | 913 | 1,971 |
| Wirral | 3,339 | 864 | 4,203 |
| Total | **12,910** | **24,716** | **37,626** |

**Table 17 - NSP activity number of transactions (agency and pharmacy combined) , 2013-14**

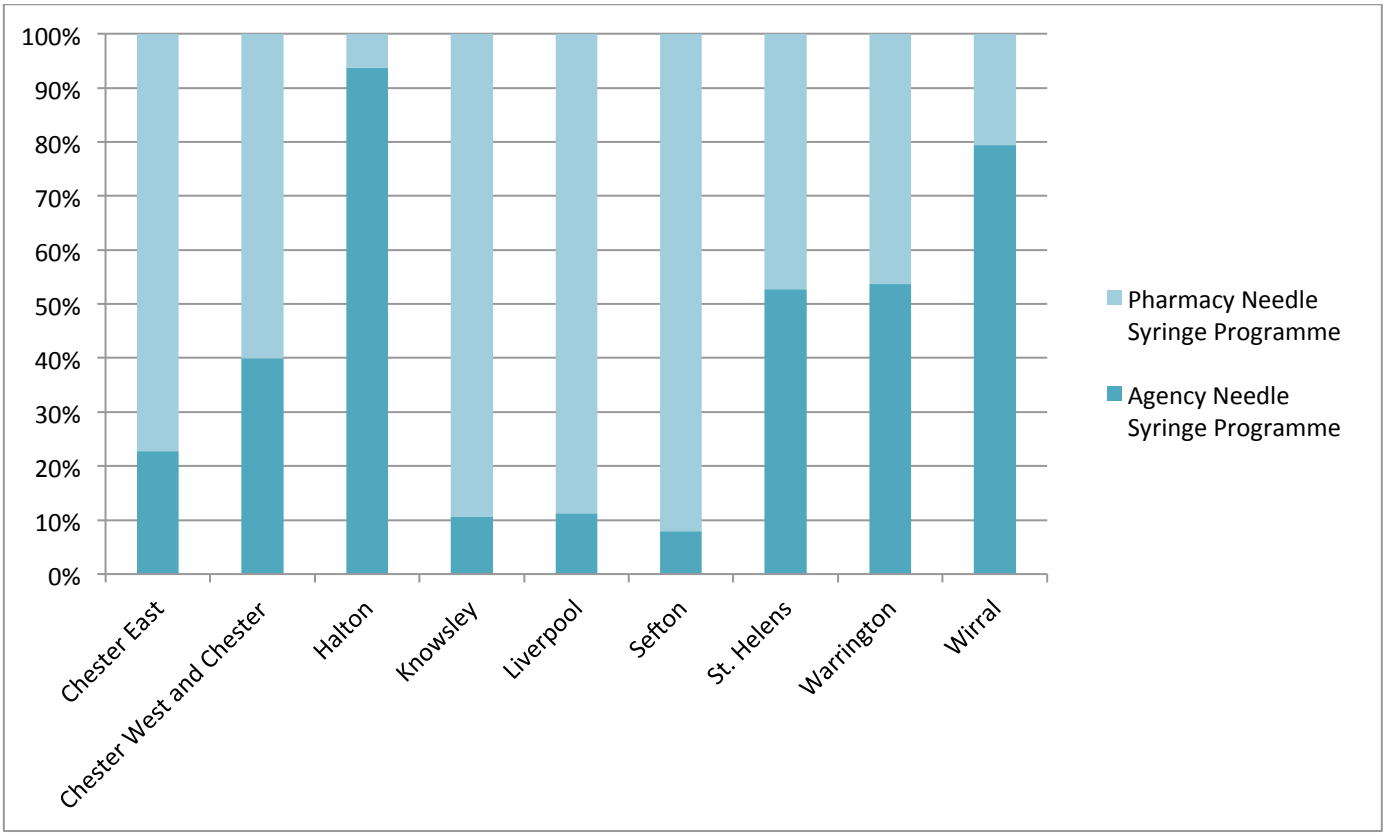



**Figure 20 - NSP transaction split, agencies v pharmacies (agency and pharmacy combined) , 2013-14**

## 5.4. NEEDLE & SYRINGE PROGRAMME GEOGRAPHIC PROFILE [ALL CLIENTS]

### LOCAL AUTHORITY AREA OF TREATMENT

The Local Authority area with the highest number of NSP clients seen was Liverpool (32.1%) followed by St. Helens (12%) and Wirral (11.9%).

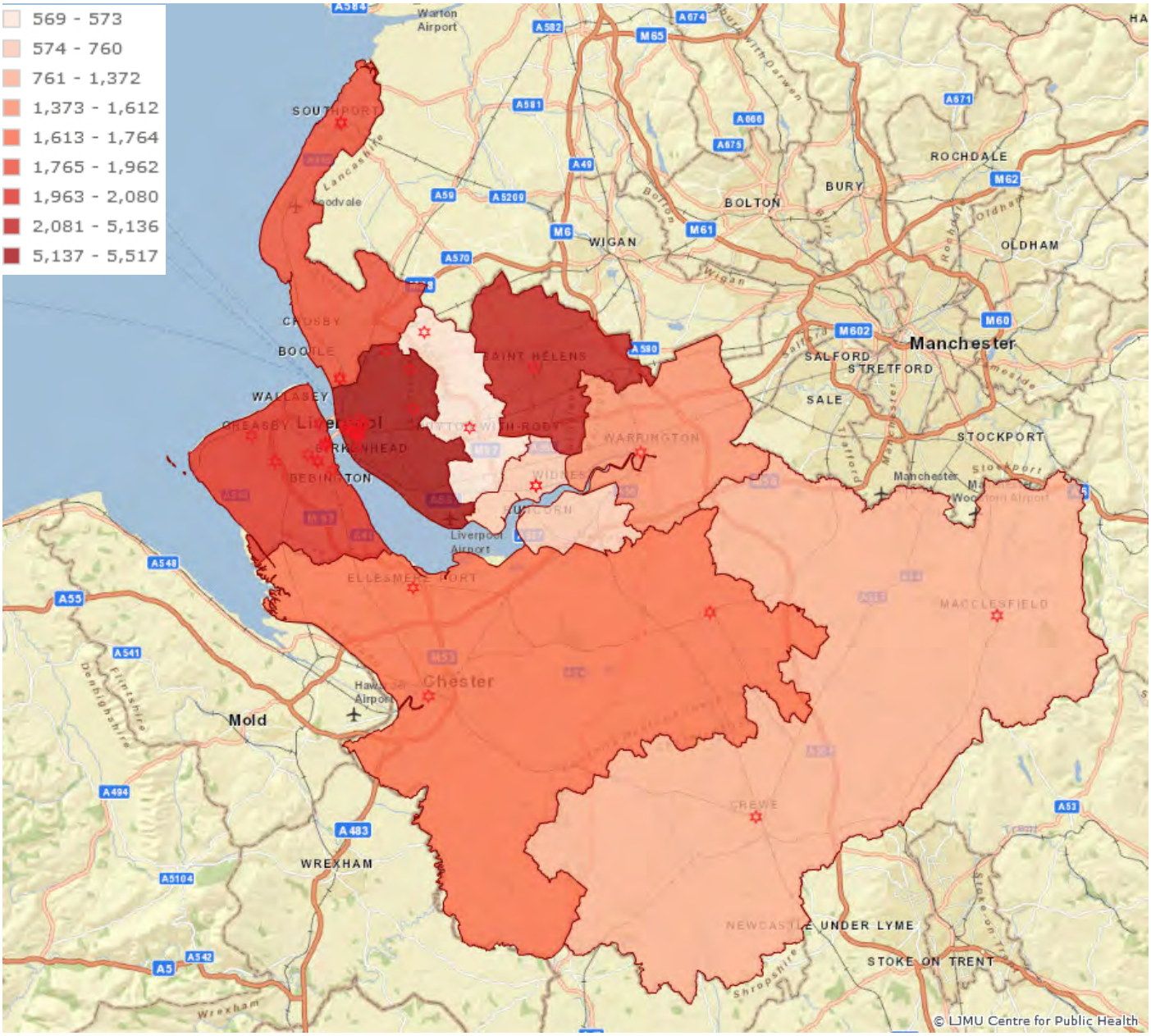



**Figure 21 - NSP client numbers by local authority (agency and pharmacy combined) , 2013-14**

The postcode areas with the highest number of clients residing in them were L20 (304 clients), CH42 (286 clients), WA8 (280 clients) and CW1 (205 clients). These four postcode districts accounted for 22.2% of all exchanges. A valid postcode of residence was recorded for 26.0% of all Needle & Syringe Programme clients.

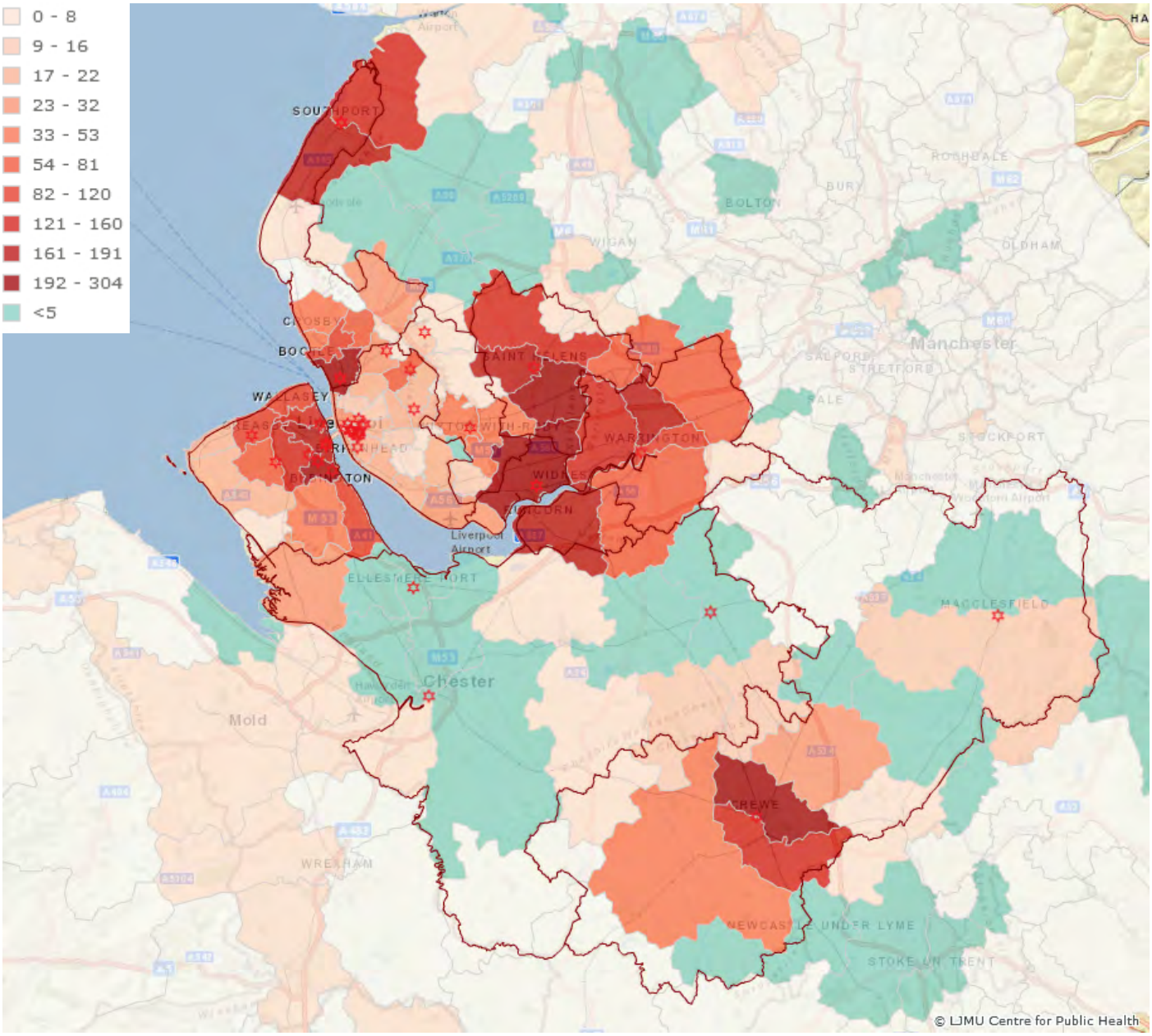



**Figure 22 - NSP client numbers by postcode of residence (agency and pharmacy combined) , 2013-14**

# 6. AGENCY NEEDLE & SYRINGE PROGRAMME - ALL CLIENTS

## 6.1. AGENCY NEEDLE & SYRINGE PROGRAMME: DEMOGRAPHIC PROFILE [ALL CLIENTS]

### GENDER

A substantial majority of client attending NSPs (Needle and Syringe Programmes) operating in an agency setting are male, ranging from 92.1% in Cheshire West and Chester to 97.1% in Liverpool, and an average overall of 95.9% – this can be accounted for in the main by the high number of Steroid and PIED users attending NSPs across the region.

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 26 | 3.8% | 660 | 96.2% | 686 |
| **Cheshire West & Chester** | 92 | 7.9% | 1074 | 92.1% | 1166 |
| **Halton** | 17 | 3.1% | 532 | 96.9% | 549 |
| **Knowsley** | *** | 4.8% | <80 | 95.2% | 83 |
| **Liverpool** | 10 | 2.9% | 335 | 97.1% | 345 |
| **Sefton** | 8 | 4.1% | 186 | 95.9% | 194 |
| **St. Helens** | 29 | 3.7% | 759 | 96.3% | 788 |
| **Warrington** | 21 | 3.2% | 641 | 96.8% | 662 |
| **Wirral** | 30 | 2.3% | 1297 | 97.7% | 1327 |
| **Total** | **237** | **4.1%** | **5,563** | **95.9%** | **5,800** |

**Table 18 - NSP client numbers by gender (agency only) , 2013-14**

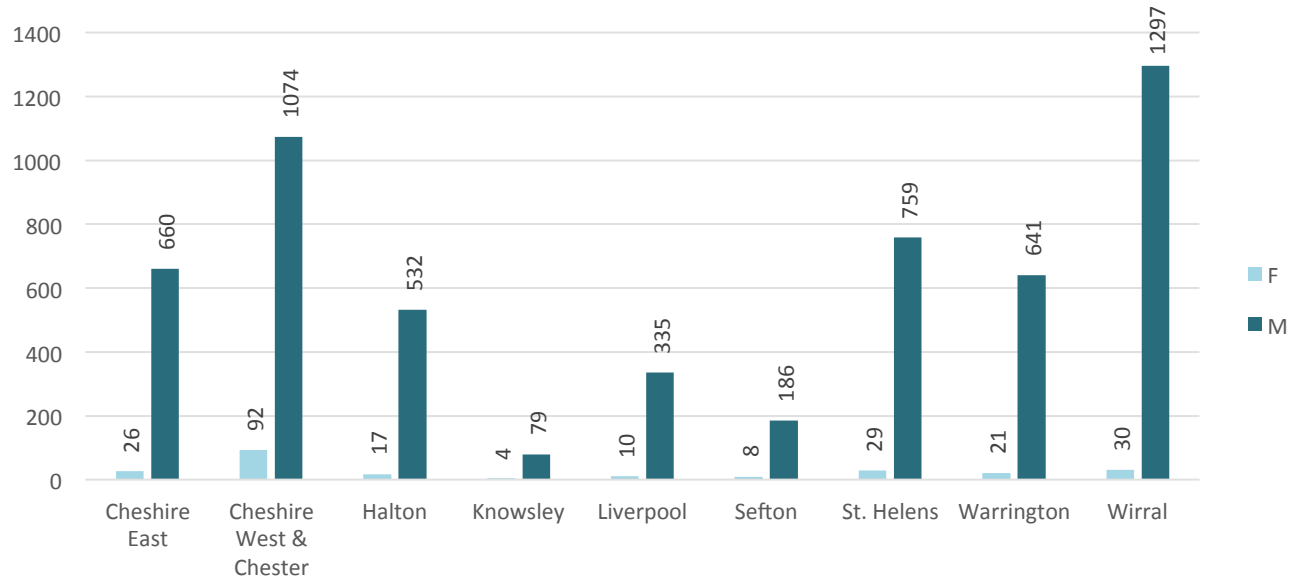



**Figure 23 - NSP client numbers by gender (agency only) , 2013-14**

## AGE GROUP

The age of individuals attending agency based NSPs peaks for most areas around the 25-34 age band, with Halton in particular having as significant proportion of attendees (49%) aged between 25-34 years against 37% for Sefton. All areas have less than 1% of attendees presenting aged 65 and over, other than Sefton which registers 2%. Sefton has the lowest proportion of those attending aged under 25 (8%).

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65+ | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | 0 | 0 | *** | *** | 8 | *** | 5 | *** | *** | *** | *** | 0 | **26** |
| | Male | *** | 25 | <161 | <152 | 130 | <80 | 57 | <33 | <23 | *** | *** | 0 | **660** |
| | **Total** | *** | **25** | **161** | **152** | **138** | **81** | **62** | **34** | **24** | **6** | *** | **0** | **686** |
| **Cheshire West & Chester** | Female | *** | *** | 14 | 19 | 19 | 19 | 9 | *** | *** | *** | 0 | 0 | **92** |
| | Male | <12 | <16 | 209 | 251 | 217 | 142 | 121 | <68 | <33 | <7 | *** | *** | **1,074** |
| | **Total** | **12** | **18** | **223** | **270** | **236** | **161** | **130** | **69** | **34** | **8** | *** | *** | **1,166** |
| **Halton** | Female | 0 | 0 | *** | *** | *** | *** | 5 | *** | *** | 0 | 0 | 0 | **17** |
| | Male | *** | 5 | <98 | <150 | <116 | <71 | 51 | <38 | <9 | 0 | *** | 0 | **532** |
| | **Total** | *** | **5** | **99** | **151** | **116** | **72** | **56** | **38** | **10** | **0** | *** | **0** | **549** |
| **Knowsley** | Female | 0 | 0 | 0 | *** | 0 | *** | *** | 0 | 0 | 0 | 0 | 0 | *** |
| | Male | 0 | *** | 15 | <18 | 14 | <10 | <15 | 5 | *** | 0 | 0 | 0 | **<80** |
| | **Total** | **0** | *** | **15** | **18** | **14** | **10** | **16** | **5** | *** | **0** | **0** | **0** | **83** |
| **Liverpool** | Female | 0 | 0 | *** | *** | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | **10** |
| | Male | *** | *** | <49 | <68 | 69 | 49 | <43 | 29 | <24 | 6 | *** | *** | **335** |
| | **Total** | *** | *** | **49** | **69** | **69** | **49** | **44** | **29** | **25** | **6** | *** | *** | **345** |
| **Sefton** | Female | 0 | 0 | 0 | *** | 0 | 0 | *** | *** | *** | 0 | 0 | *** | **8** |
| | Male | 0 | *** | 13 | <32 | 39 | 33 | <29 | <22 | <9 | 6 | *** | *** | **186** |
| | **Total** | **0** | *** | **13** | **33** | **39** | **33** | **30** | **23** | **9** | **6** | *** | *** | **194** |
| **St. Helens** | Female | 0 | *** | *** | 7 | 6 | *** | 6 | *** | *** | 0 | 0 | 0 | **29** |
| | Male | 0 | <22 | <149 | 155 | 153 | <101 | 98 | <54 | <21 | 10 | *** | 0 | **759** |
| | **Total** | **0** | **<24** | **150** | **162** | **159** | **102** | **104** | **55** | **22** | **10** | *** | **0** | **788** |
| **Warrington** | Female | 0 | *** | 5 | *** | *** | *** | *** | *** | 0 | 0 | 0 | 0 | **21** |
| | Male | 0 | <12 | 140 | <162 | <136 | <69 | <61 | <48 | 16 | *** | *** | *** | **641** |
| | **Total** | **0** | **14** | **145** | **163** | **138** | **71** | **62** | **49** | **16** | *** | *** | *** | **662** |
| **Wirral** | Female | 0 | *** | *** | *** | 6 | 5 | 6 | *** | *** | *** | 0 | 0 | **30** |
| | Male | *** | <29 | <267 | <332 | 239 | 162 | 124 | <88 | <39 | <15 | *** | *** | **1,297** |
| | **Total** | *** | **30** | **268** | **333** | **245** | **167** | **130** | **90** | **39** | **15** | *** | *** | **1,327** |
| **Total** | | **19** | **118** | **1,123** | **1,351** | **1,154** | **746** | **634** | **392** | **183** | **52** | **19** | **9** | **5,800** |

**Table 19 - NSP client numbers by age group and gender (agency only) , 2013-14**

## 6.2. AGENCY NEEDLE & SYRINGE PROGRAMME: MAIN SUBSTANCE [ALL CLIENTS]

The main substances of use identified by individuals attending needle and syringe exchange agency based services where this was recorded were Steroids and PIEDS (83.3%), followed by heroin (13.7%). All other substances each contributed less than 1%. 16.5% of the overall total did not have a main substance recorded.

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| **Amphetamines (excl Ecstasy)** | 13 | <7 | 0 | 0 | 0 | *** | 16 | *** | 7 | **44** |
| | 2.2% | 0.5% | 0.0% | 0.0% | 0.0% | 0.8% | 2.2% | 0.3% | 0.5% | **0.9%** |
| **Benzodiazepines** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | *** | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.3% | 0.1% | **0.1%** |
| **Cannabis** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | **0.0%** |
| **Cocaine (excl Crack)** | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 6 | **11** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.7% | 2.4% | 0.0% | 0.0% | 0.5% | **0.2%** |
| **Crack Cocaine** | *** | 0 | *** | 0 | 0 | 8 | <7 | 0 | *** | **17** |
| | 0.3% | 0.0% | 0.7% | 0.0% | 0.0% | 6.5% | 0.7% | 0.0% | 0.1% | **0.3%** |
| **Heroin** | 69 | 195 | 15 | 13 | 55 | 20 | 138 | 39 | 120 | **664** |
| | 11.5% | 20.8% | 10.5% | 16.7% | 19.9% | 16.3% | 18.8% | 6.0% | 9.1% | **13.7%** |
| **Methadone** | 5 | *** | *** | *** | *** | *** | *** | 0 | 22 | **44** |
| | 0.8% | 0.4% | 1.4% | 1.3% | 1.4% | 2.4% | 0.4% | 0.0% | 1.7% | **0.9%** |
| **Other Drugs** | *** | 0 | 0 | *** | *** | *** | 7 | 6 | *** | **23** |
| | 0.5% | 0.0% | 0.0% | 1.3% | 0.4% | 0.8% | 1.0% | 0.9% | 0.3% | **0.5%** |
| **Other Opiates** | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | *** | *** |
| | 0.0% | 0.0% | 0.7% | 0.0% | 0.4% | 0.0% | 0.0% | 0.0% | 0.1% | **0.1%** |
| **Prescription Drugs** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** |
| | 0.2% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | **0.0%** |
| **Steroids & PIEDS** | 509 | 735 | 124 | 63 | 214 | 87 | 564 | 598 | 1,156 | **4,050** |
| | 84.6% | 78.3% | 86.7% | 80.8% | 77.3% | 70.7% | 76.9% | 92.3% | 87.7% | **83.3%** |
| **Total** | **602** | **939** | **143** | **78** | **277** | **123** | **733** | **648** | **1,318** | **4,861** |

**Table 20 - NSP client numbers by main substance, where recorded (agency only), 2013-14**

# 7. PHARMACY NEEDLE & SYRINGE PROGRAMME - ALL CLIENTS

## 7.1. PHARMACY NEEDLE & SYRINGE PROGRAMME: DEMOGRAPHIC PROFILE [ALL CLIENTS]

### GENDER

By far the majority of clients attending NSPs (Needle and Syringe Programmes) operating in a pharmacy setting are male, ranging from 60% in Halton to 89.7% in Wirral, and an average overall of 87.7% – this can be accounted for in the main by the high number of Steroid and PIED users attending NSPs across the region, although it should be noted that the proportion of male clients attending pharmacy NSPs is noticeably lower than those attending agency NSPs – 87.7% against 95.9%, a difference of 8.2% overall, and for some areas more so than others (36.9% difference for Halton for example).

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 104 | 15.2% | 581 | 84.8% | 685 |
| **Cheshire West & Chester** | 82 | 12.3% | 585 | 87.7% | 667 |
| **Halton** | 24 | 40.0% | 36 | 60.0% | 60 |
| **Knowsley** | 51 | 10.4% | 441 | 89.6% | 492 |
| **Liverpool** | 583 | 11.2% | 4,621 | 88.8% | 5,204 |
| **Sefton** | 223 | 13.6% | 1,416 | 86.4% | 1,639 |
| **St. Helens** | 200 | 14.4% | 1,191 | 85.6% | 1,391 |
| **Warrington** | 107 | 12.0% | 781 | 88.0% | 888 |
| **Wirral** | 81 | 10.3% | 706 | 89.7% | 787 |
| **Total** | **1,455** | **12.3%** | **10,358** | **87.7%** | **11,813** |

**Table 21 - NSP client numbers by gender (pharmacy only) , 2013-14**

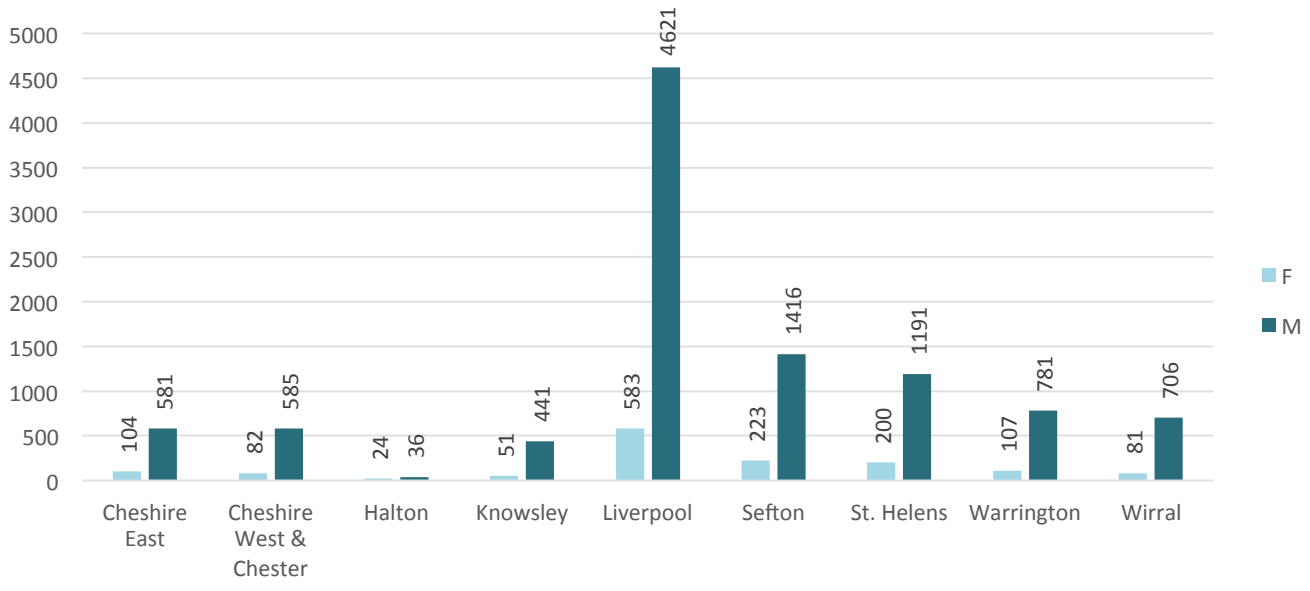



**Figure 24 - Figure 24 - NSP client numbers by gender (pharmacy only) , 2013-14**

## AGE GROUP

The age of individuals attending pharmacy based NSPs peaks for most areas around the 30-39 age band, slightly higher than that of agency based attendances, with Halton in particular having a high proportion of attendees (54%) aged between 30-39 years against 26% for Knowsley. Wirral in particular has a high rate of those attending aged between 40-40 years (43%). All areas have 1% or less of attendees presenting aged 65 and over, other than Knowsley which registers 4%. Halton has the lowest proportion of those attending aged under 25 (3%).

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65+ | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 16 | 26 | 25 | 18 | 6 | 8 | 0 | 0 | 0 | **104** |
| | Male | *** | *** | <33 | 80 | 142 | 123 | 118 | 52 | 27 | *** | 0 | *** | **581** |
| | **Total** | *** | *** | **34** | **96** | **168** | **148** | **136** | **58** | **35** | *** | **0** | *** | **685** |
| **Cheshire West & Chester** | Female | 0 | 0 | *** | 16 | 15 | 19 | 20 | 8 | *** | *** | 0 | 0 | **82** |
| | Male | *** | *** | <24 | 44 | 98 | 141 | 163 | 65 | <31 | <12 | 5 | 0 | **585** |
| | **Total** | *** | *** | **24** | **60** | **113** | **160** | **183** | **73** | **32** | **12** | **5** | **0** | **667** |
| **Halton** | Female | 0 | 0 | 0 | <10 | 8 | *** | *** | *** | *** | 0 | 0 | 0 | **24** |
| | Male | 0 | 0 | *** | *** | 8 | <14 | <8 | *** | *** | 0 | 0 | 0 | **36** |
| | **Total** | **0** | **0** | *** | **11** | **16** | **16** | **8** | *** | *** | **0** | **0** | **0** | **60** |
| **Knowsley** | Female | *** | *** | 37 | 62 | 85 | 111 | 158 | 63 | 38 | 16 | 6 | *** | **583** |
| | Male | <16 | <59 | 469 | 743 | 835 | 767 | 784 | 589 | 270 | 55 | 23 | <14 | **4,621** |
| | **Total** | **16** | **60** | **506** | **805** | **920** | **878** | **942** | **652** | **308** | **71** | **29** | **17** | **5,204** |
| **Liverpool** | Female | 0 | 0 | 8 | 10 | 6 | *** | 9 | 6 | *** | *** | *** | *** | **51** |
| | Male | *** | 5 | 80 | 98 | 74 | <48 | 58 | 29 | <10 | <16 | <9 | <18 | **441** |
| | **Total** | *** | **5** | **88** | **108** | **80** | **49** | **67** | **35** | **10** | **18** | **9** | **<20** | **492** |
| **Sefton** | Female | *** | *** | 17 | 25 | 35 | 36 | 54 | 26 | 20 | *** | 5 | *** | **223** |
| | Male | 8 | 14 | 76 | 238 | 232 | 208 | 282 | 218 | 103 | 18 | 18 | *** | **1,416** |
| | **Total** | **9** | **16** | **93** | **263** | **267** | **244** | **336** | **244** | **123** | **19** | **23** | *** | **1,639** |
| **St. Helens** | Female | 6 | *** | 17 | 30 | 48 | 26 | 51 | 13 | *** | *** | *** | 0 | **200** |
| | Male | 5 | <23 | 134 | 131 | 176 | 232 | 279 | 124 | <43 | <29 | <14 | 7 | **1,191** |
| | **Total** | **11** | **24** | **151** | **161** | **224** | **258** | **330** | **137** | **44** | **30** | **14** | **7** | **1,391** |
| **Warrington** | Female | *** | *** | 8 | 20 | 29 | 18 | 9 | 13 | *** | *** | 0 | 0 | **107** |
| | Male | <7 | <23 | 79 | 157 | 115 | 152 | 152 | 69 | <18 | <10 | *** | *** | **781** |
| | **Total** | **7** | **23** | **87** | **177** | **144** | **170** | **161** | **82** | **20** | **12** | *** | *** | **888** |
| **Wirral** | Female | 0 | *** | *** | 8 | 14 | 22 | 12 | 17 | *** | 0 | 0 | 0 | **81** |
| | Male | *** | <13 | <32 | 72 | 74 | 121 | 164 | 146 | <64 | 17 | *** | *** | **706** |
| | **Total** | *** | **13** | **33** | **80** | **88** | **143** | **176** | **163** | **66** | **17** | *** | *** | **787** |
| **Total** | | **52** | **148** | **1,018** | **1,761** | **2,020** | **2,066** | **2,339** | **1,447** | **642** | **180** | **87** | **53** | **11,813** |

**Table 22 - NSP client numbers by age group and gender (pharmacy only), 2013-14**

## 7.2. PHARMACY NEEDLE & SYRINGE PROGRAMME: MAIN SUBSTANCE [ALL CLIENTS]

The main substance of use identified by individuals attending pharmacy based needle and syringe exchange services where this was recorded were heroin (52.5%), followed by steroids and PIEDS (41.9%). Of the overall total, 92.5% did not have a main substance recorded, due to the low quality of data from pharmacy based services. [10]

| | Cheshire East | Cheshire West & Chester | Halton | Knowsley | Liverpool | Sefton | St. Helens | Warrington | Wirral | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| **Benzodiazepines** | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.1% | 0.0% | 0.0% | 0.0% | **0.1%** |
| **Crack Cocaine** | 0 | 0 | 0 | 0 | 0 | 46 | 0 | 0 | 0 | **46** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 5.2% | 0.0% | 0.0% | 0.0% | **5.2%** |
| **Heroin** | 0 | 0 | 0 | 0 | 0 | 457 | *** | *** | *** | **468** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 52.0% | 100% | 100% | 87.5% | **52.5%** |
| **Methadone** | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | *** | *** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% | 12.5% | **0.3%** |
| **Steroids & PIEDS** | 0 | 0 | 0 | 0 | 0 | 373 | 0 | 0 | 0 | **373** |
| | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 42.4% | 0.0% | 0.0% | 0.0% | **41.9%** |
| **Total** | **0** | **0** | **0** | **0** | **0** | **879** | *** | *** | **8** | **891** |
| **Not Recorded** | 685 | 667 | 60 | 492 | 5,204 | 799 | 1,389 | 886 | 779 | **10,961** |
| | 100% | 100% | 100% | 100% | 100% | 47.6% | 99.9% | 99.8% | 99.0% | **92.5%** |

**Table 23 - NSP client numbers by main substance, where recorded (pharmacy only), 2013-14**

[10] Currently main substance of use is only reported by Sefton pharmacy exchanges; in all other local authority areas this data item is not completed for over 99% of individuals. Cheshire East, Cheshire West & Chester, and Knowsley pharmacies record exchange activity via the *Webstar Health - NEX* software, but do not record main substance as part of the data.

# 8. CROSS MATCHING – IMS, DIP AND NDTMS

## CHESHIRE AND MERSEYSIDE SUMMARY

This section looks at the combined data from the Integrated Monitoring System (IMS), Criminal Justice - Drugs Intervention Programme (DIP) and National Drugs Treatment Monitoring System (NDTMS), consequently inclusive of every individual in contact with any drug or alcohol treatment/low threshold service or syringe-exchange in each Local Authority. Client attributor data is cross matched for all clients in treatment between 1st April 2013 and 31st March 2014 within any of the nine Local Authority areas in Cheshire and Merseyside.

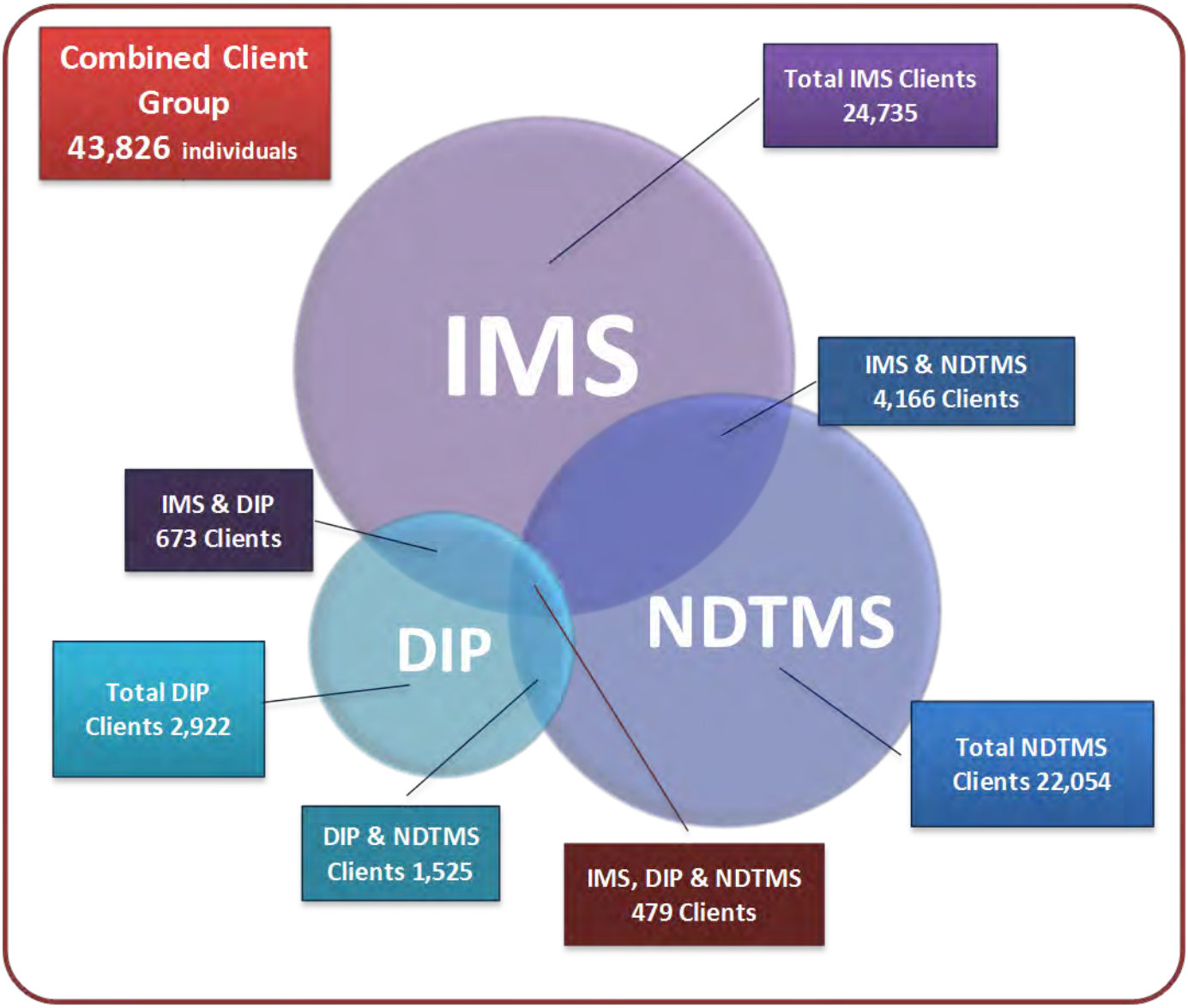



**Figure 25 - Venn diagram of different data sources and their reporting activity across Merseyside and Cheshire, 2013-14**

| | IMS | NDTMS | DIP | Combined |
|---|---|---|---|---|
| **Cheshire East** | 1,293 | 1,617 | *** | 2,660 |
| **Cheshire West & Chester** | 1,713 | 1,990 | *** | 3,389 |
| **Halton** | 608 | 1,242 | 9 | 1,801 |
| **Knowsley** | 583 | 1,690 | 252 | 2,316 |
| **Liverpool** | 10,579 | 6,503 | 1,576 | 16,200 |
| **Sefton** | 2,234 | 2,615 | 430 | 4,344 |
| **St. Helens** | 2,092 | 1,352 | 305 | 3,412 |
| **Warrington** | 1,531 | 1,343 | *** | 2,797 |
| **Wirral** | 4,102 | 3,702 | 342 | 6,903 |
| **Total** | **24,735** | **22,054** | **2,922** | **43,826** |

**Table 24 - Breakdown of monitoring systems across local authorities, 2013-14**

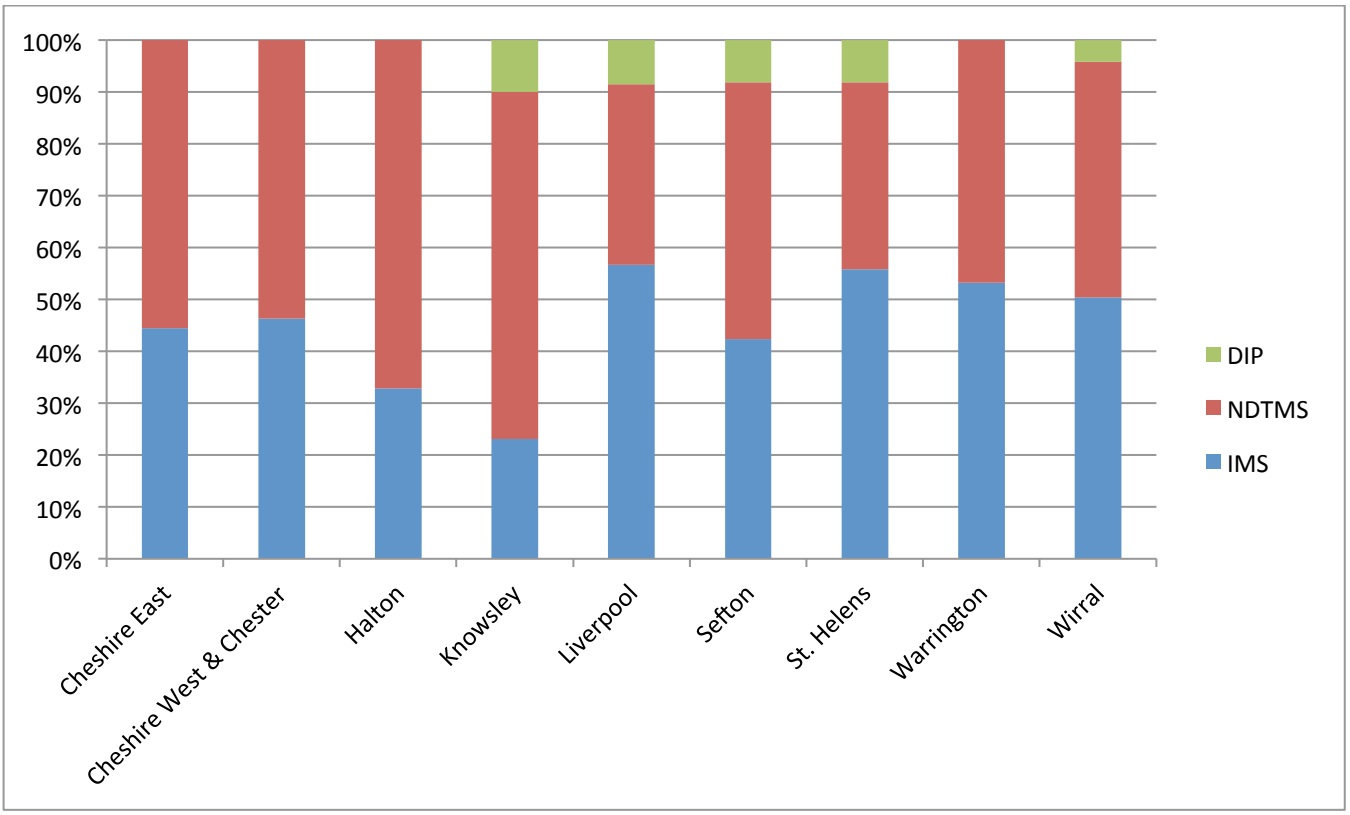



**Figure 26 - Proportional breakdown of monitoring systems across local authorities, 2013-14**

## 8.1. IMS CLIENTS CROSS MATCHING TO NDTMS

The majority of clients reporting to IMS services did not appear in the NDTMS dataset for the same time period. Some of this can be attributed to the high number of Steroid and PIED using individuals attending NSP services but even with these clients removed from the dataset, the majority of IMS clients do still not appear in the NDTMS dataset, ranging from 8.5% crossover in Knowsley to 34.9% crossover in Sefton.

| | IMS Clients Cross Matched to NDTMS | % of all NDTMS Clients | % of all IMS Clients | % non-steroid[11] IMS Clients |
|---|---|---|---|---|
| **Cheshire East** | 250 | 15.5% | 19.3% | 31.9% |
| **Cheshire West & Chester** | 314 | 15.8% | 18.3% | 32.1% |
| **Halton** | 58 | 4.7% | 9.5% | 12.0% |
| **Knowsley** | 44 | 2.6% | 7.5% | 8.5% |
| **Liverpool** | 1,632 | 25.1% | 15.4% | 15.7% |
| **Sefton** | 620 | 23.7% | 27.8% | 34.9% |
| **St. Helens** | 187 | 13.8% | 8.9% | 12.2% |
| **Warrington** | 80 | 6.0% | 5.2% | 8.6% |
| **Wirral** | 981 | 26.5% | 23.9% | 33.4% |
| **Total:** | **4,166** | **18.9%** | **16.8%** | **20.5%** |

**Table 25 - IMS clients cross matched to NDTMS data, 2013-14**

## 8.2. IMS CLIENTS CROSS MATCHING TO DIP

Likewise, the vast majority of clients reporting to IMS services did not appear in the DIP dataset for the same time period. With Steroid and PIED using individuals removed from the dataset, the majority of remaining IMS clients do not appear in the DIP dataset, ranging from 1.7% crossover in Knowsley to 6.8% crossover in Wirral.

| | IMS Clients Cross Matched to DIP | % of all DIP Clients | % of all IMS Clients | % non-steroid[12] IMS Clients |
|---|---|---|---|---|
| **Cheshire East** | 0 | 0.0% | 0.0% | 0.0% |
| **Cheshire West & Chester** | 0 | 0.0% | 0.0% | 0.0% |
| **Halton** | 0 | 0.0% | 0.0% | 0.0% |
| **Knowsley** | <10 | 3.6% | 1.5% | 1.7% |
| **Liverpool** | 320 | 20.3% | 3.0% | 3.1% |
| **Sefton** | 79 | 18.4% | 3.5% | 4.4% |
| **St. Helens** | 63 | 20.7% | 3.0% | 4.1% |
| **Warrington** | *** | 25.0% | 0.1% | 0.1% |
| **Wirral** | 201 | 58.8% | 4.9% | 6.8% |
| Total: | **673** | **23.0%** | **2.7%** | **3.3%** |

**Table 26 - IMS clients cross matched to DIP data, 2013-14**

[11] All IMS clients who cross match to NDTMS shown as a percentage of IMS clients less those who recorded steroids as their main substance.

[12] All IMS clients who cross match to DIP shown as a percentage of IMS clients less those who recorded steroids as their main substance.

## 8.3. DIP CLIENTS CROSS MATCHING TO NDTMS

As might be anticipated from the collaboration between services, the crossover for DIP and NDTMS clients is significantly higher for those areas who commission DIP, ranging from 44.2% in Wirral to 72.8% in Sefton.

| | DIP Clients Cross Matched to NDTMS | % of all NDTMS Clients | % of all DIP Clients |
|---|---|---|---|
| **Cheshire East** | 0 | 0.0% | 0.0% |
| **Cheshire West & Chester** | 0 | 0.0% | 0.0% |
| **Halton** | 0 | 0.0% | 0.0% |
| **Knowsley** | 163 | 9.6% | 64.7% |
| **Liverpool** | 763 | 11.7% | 48.4% |
| **Sefton** | 313 | 12.0% | 72.8% |
| **St. Helens** | 135 | 10.0% | 44.3% |
| **Warrington** | 0 | 0.0% | 0.0% |
| **Wirral** | 151 | 4.1% | 44.2% |
| Total: | **1,525** | **6.9%** | **52.2%** |

**Table 27 - NDTMS clients cross matched to DIP data, 2013-14**

## 9. WIRRAL ALCOHOL SCREENINGS

Wirral Council have commissioned CPH to report on their alcohol screening monitoring programme which has been running since 2008 and contributes towards key performance indicators around general population screening and the delivery of brief interventions where appropriate. A key component of the screening is delivered through use of the Alcohol Use Disorders Identification Test (AUDIT) tool by a range of pharmacies and agencies across the area – in 2013/14, 15,072 screenings delivered to 12,228 individuals were recorded through use of this tool, an increase of 26% from the 2012/13 individuals who had received screenings total.

The majority of individuals presenting to agencies were male (56%) while the majority presenting to pharmacies were female (57%). There were some age differentials between those presenting to agencies and pharmacies, with those aged between 46 and 55 years (23%) being the largest group presenting to agencies (including those agencies providing services not directly related to substance or alcohol use) and those aged 65 and over (22%) being the largest group presenting to pharmacies.

While the majority of lower risk drinkers for 13/14 were female, in every other category a majority were male, with the proportions increasing with severity of drinking, and dependent male drinkers in particular outnumbering female drinkers by almost two to one (97%).

**Box 2.** Wirral Local Authority (previously PCT) began an extensive programme of alcohol screening in 2008 for both service users within existing drug/alcohol service as well as the general population, with AUDIT being the main tool used. AUDIT was developed by WHO as a series of ten questions around an individual's alcohol use to pick up the early signs of hazardous and harmful drinking and identify mild dependence. CPH has produced regular reports on the screenings since 2008 for the LA which include detailed information on the demographics of the population along with information on service providers and pharmacies that deliver the screenings.

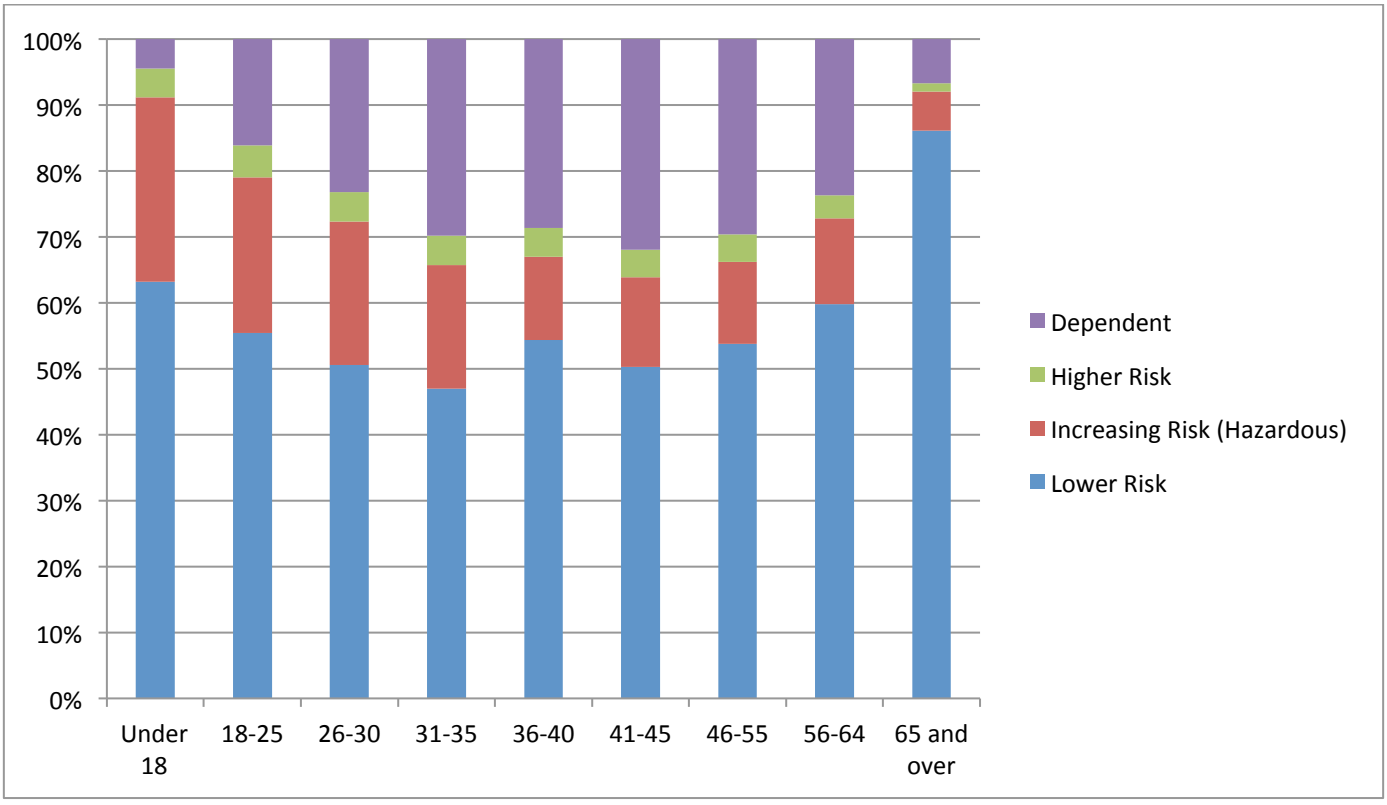



**Figure 27 - Age differentials for individuals receiving AUDIT screening in Wirral, 2013-14**

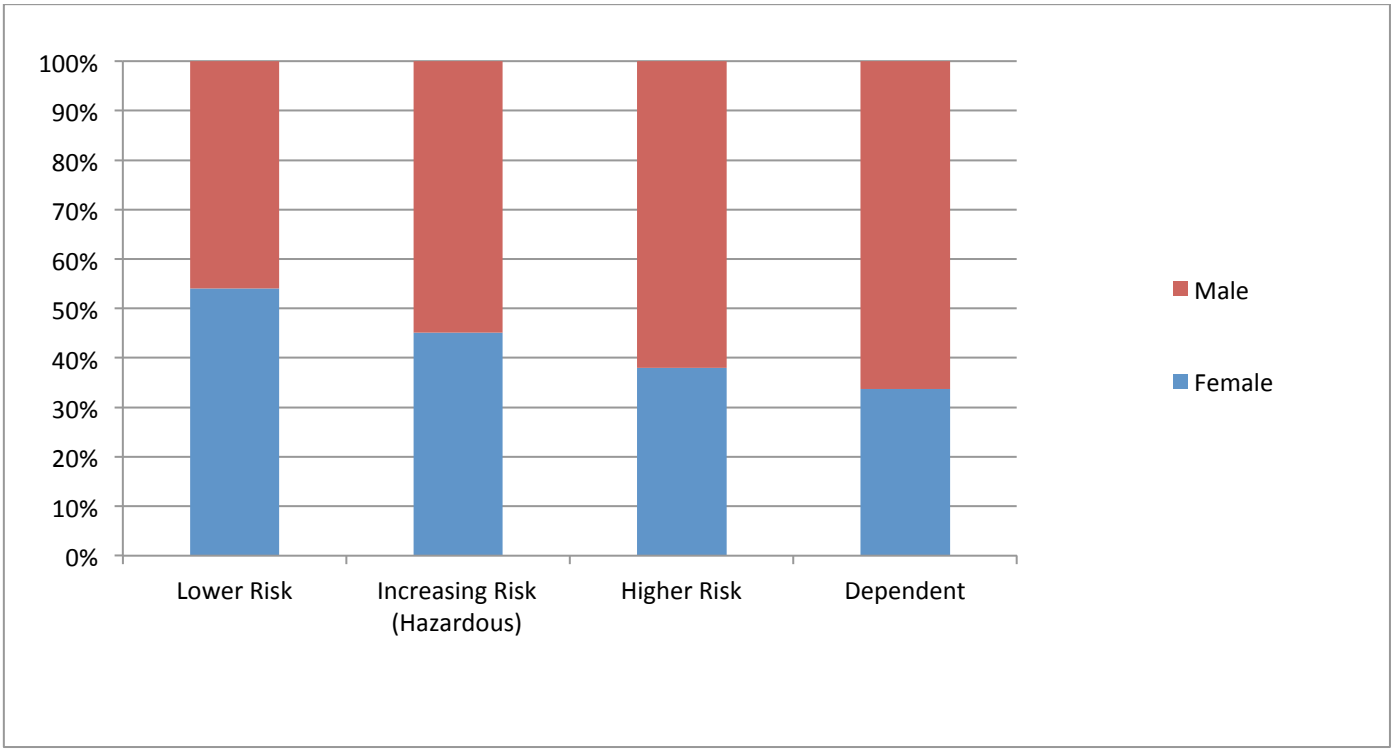



**Figure 28 - Gender differentials for individuals receiving AUDIT screening in Wirral, 2013-14**

## CONCLUSION AND THE LAUNCH OF IMS

When the Wirral AUDIT screening data is combined with the non-structured data, the total number of individuals screened for 2013-14 is 36,963, a significant increase from the figure for 2012-13 (16,647) but this is substantially accounted for by the inclusion of NSP data for the first time (previously captured in a separate IAD (Inter-Agency Database) report).[13] With the inclusion of data from NSP, there is comprehensive coverage across all Local Authority areas in Merseyside and Cheshire, although areas with larger populations form a more substantial part of the dataset as would be anticipated.

The rationale behind the formation of the Integrated Monitoring System (IMS) was to standardise data collection for all services (including pharmacies) delivering non-structured interventions in the form of IBAs (Identification and Brief Advice), Brief Interventions, Extended Brief Interventions and in the case of NSP services, transactions.

Previously interventions were collected via three different systems – NSTMS (Non Structured Treatment Monitoring System, collected using the GOLIATH system alongside services' own data collection tools), ATMS (Alcohol Treatment Monitoring System, collected using the BAKER system alongside services' own data collection tools) and IAD (Inter-Agency Database, collected using the LAIKA system alongside services' own data collection tools). While these three systems collected information on low threshold interventions to drug users, alcohol users and injecting clients respectively, the datasets were similar but distinct, with some such as IAD having been in existence without any significant evolution for a large number of years.

Through standardisation of the dataset, the facility to collect data in useful areas such as screening and wellbeing, some of which relate to distinct PHOF (Public Health Outcome Framework) indicators which Local Authorities are measured on, has been comprehensively expanded, allowing outcome monitoring to take place for the first time for some services, unifying a diverse range of clients who share needs and priorities. The lack of crossover with datasets reporting on structured treatment such as NDTMS, the majority of individuals reporting to the IMS dataset would otherwise remain an invisible population and seriously underestimate the number of individuals in contact with services on a local and regional level. Because the interventions delivered by services reporting to IMS are perhaps less clearly defined than those delivered in "structured" services by their very nature, IMS uses an intervention based model (recording each intervention rather than a start and end date) which also demonstrates the volume of activity occurring within these services. It is therefore an essential tool for reflecting activity across the region, with all the benefits that an independently monitored cross-matched dataset has over local standalone systems.

The dataset also reflects guidance published by the National Institute for Health and Care Excellence in March 2014 (PH52), referenced earlier in this document, which recommends that various bodies including commissioners, DPHs (Directors of Public Health) and Health and Wellbeing Boards should regularly collate and analyse data from a range of sources to look at the types of drugs used, numbers, demographics and characteristics of people who inject. Nearly all of the items subsequently identified in their suggested minimum dataset are present in the IMS dataset and omissions will be incorporated into future versions of the dataset.

IMS now covers over one hundred and forty services and we anticipate that the monitoring system will continue to expand its coverage notwithstanding the current financial difficulties Local Authorities face in the shadow of ongoing austerity. The new IMS-Online web-based data collection tool which replaces GOLIATH, BAKER and LAIKA has already been piloted in a number of services who have provided positive feedback. The tool will be rolled out to every reporting service who wish to use it by April 2015. Two launch events took place for commissioners and partners respectively which provided a forum for discussion around development of the monitoring system and a user group will meet regularly to review and feedback on the dataset and its implementation. InstantAtlas® mapping software has now been integrated into the monitoring area of the CPH website which allows commissioners and public health leads to interrogate the data for their area down to postcode sector level.

[13] It should be noted that this number includes screenings for the general population of Wirral as described in Section 10. Many of these individuals will not be in contact with drug or alcohol services and have only been screened via their local pharmacy or another non-specialist agency service.

## APPENDIX A - NEEDLE & SYRINGE PROGRAMME – EXCLUDING STEROID CLIENTS

## 10. NEEDLE & SYRINGE PROGRAMME - EXCLUDING STEROID CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| Cheshire East | 122 | 14.9% | 695 | 85.1% | 817 |
| Cheshire West & Chester | 124 | 12.6% | 858 | 87.4% | 982 |
| Halton | 40 | 8.1% | 451 | 91.9% | 491 |
| Knowsley | 53 | 10.3% | 460 | 89.7% | 513 |
| Liverpool | 592 | 11.1% | 4,720 | 88.9% | 5,312 |
| Sefton | 216 | 15.7% | 1,157 | 84.3% | 1,373 |
| St. Helens | 217 | 14.0% | 1,336 | 86.0% | 1,553 |
| Warrington | 119 | 12.4% | 838 | 87.6% | 957 |
| Wirral | 101 | 10.6% | 848 | 89.4% | 949 |
| Total | **1,584** | **12.2%** | **11,363** | **87.8%** | **12,947** |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 16 | 31 | 27 | 23 | 8 | 9 | *** | *** | 0 |
| | Male | *** | 8 | <56 | 96 | 164 | 143 | 127 | 62 | 34 | *** | 0 | *** |
| | **Total** | *** | **8** | **58** | **112** | **195** | **170** | **150** | **70** | **43** | **5** | *** | *** |
| **Cheshire West & Chester** | Female | 0 | *** | 7 | 22 | 26 | 26 | 25 | 9 | *** | *** | 0 | 0 |
| | Male | 11 | <9 | 58 | 80 | 141 | 189 | 200 | 101 | <52 | <15 | 6 | *** |
| | **Total** | **11** | **10** | **65** | **102** | **167** | **215** | **225** | **110** | **54** | **16** | **6** | *** |
| **Halton** | Female | 0 | 0 | *** | 11 | 9 | 6 | 6 | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <80 | 120 | 98 | 67 | 46 | <30 | <11 | 0 | *** | 0 |
| | **Total** | **0** | *** | **81** | **131** | **107** | **73** | **52** | **31** | **12** | 0 | *** | 0 |
| **Knowsley** | Female | 0 | 0 | 8 | 10 | 6 | 5 | 10 | 6 | *** | *** | *** | *** |
| | Male | *** | 5 | 81 | 99 | 78 | 48 | 65 | 32 | <10 | <17 | <9 | <18 |
| | **Total** | *** | **5** | **89** | **109** | **84** | **53** | **75** | **38** | **10** | **18** | **9** | **19** |
| **Liverpool** | Female | *** | *** | 38 | 66 | 85 | 111 | 159 | 63 | 41 | 16 | 6 | *** |
| | Male | <16 | <59 | 491 | 754 | 848 | 778 | 798 | 604 | 281 | 55 | 24 | <16 |
| | **Total** | **16** | **61** | **529** | **820** | **933** | **889** | **957** | **667** | **322** | **71** | **30** | **17** |
| **Sefton** | Female | *** | *** | 16 | 25 | 30 | 32 | 53 | 28 | 21 | *** | 5 | *** |
| | Male | <7 | <11 | 40 | 137 | 169 | 184 | 268 | 205 | 98 | <23 | 17 | *** |
| | **Total** | **7** | **12** | **56** | **162** | **199** | **216** | **321** | **233** | **119** | **23** | **22** | *** |
| **St. Helens** | Female | 6 | *** | 17 | 32 | 53 | 28 | 54 | 15 | 5 | *** | *** | 0 |
| | Male | 5 | <23 | 141 | 144 | 198 | 247 | 320 | 154 | 52 | <35 | <15 | 7 |
| | **Total** | **11** | **24** | **158** | **176** | **251** | **275** | **374** | **169** | **57** | **36** | **15** | **7** |
| **Warrington** | Female | *** | *** | 12 | 20 | 31 | 19 | 10 | 15 | *** | *** | 0 | 0 |
| | Male | <7 | <24 | 90 | 163 | 130 | 156 | 160 | 80 | <19 | <10 | *** | *** |
| | **Total** | **7** | **25** | **102** | **183** | **161** | **175** | **170** | **95** | **21** | **12** | *** | *** |
| **Wirral** | Female | 0 | *** | 5 | 11 | 17 | 24 | 17 | 19 | *** | *** | 0 | 0 |
| | Male | *** | <12 | 44 | 89 | 80 | 140 | 192 | 175 | <79 | <28 | 6 | 6 |
| | **Total** | *** | **13** | **49** | **100** | **97** | **164** | **209** | **194** | **82** | **28** | **6** | **6** |
| **Total:** | | **59** | **161** | **1,187** | **1,895** | **2,194** | **2,230** | **2,533** | **1,607** | **720** | **209** | **94** | **58** |

## 11. AGENCY NEEDLE & SYRINGE PROGRAMME - EXCLUDING STEROID CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| Cheshire East | 25 | 11.9% | 185 | 88.1% | 210 |
| Cheshire West & Chester | 57 | 13.1% | 378 | 86.9% | 435 |
| Halton | 16 | 3.7% | 416 | 96.3% | 432 |
| Knowsley | *** | 11.1% | <25 | 88.9% | 27 |
| Liverpool | 9 | 6.4% | 131 | 93.6% | 140 |
| Sefton | 7 | 5.9% | 111 | 94.1% | 118 |
| St. Helens | 26 | 10.4% | 223 | 89.6% | 249 |
| Warrington | 13 | 14.8% | 75 | 85.2% | 88 |
| Wirral | 25 | 10.6% | 211 | 89.4% | 236 |
| Total | 181 | 9.4% | 1,754 | 90.6% | 1,935 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | 0 | 0 | *** | *** | 8 | *** | 5 | *** | *** | *** | *** | 0 |
| | Male | 0 | 5 | <27 | <23 | 38 | <36 | 31 | <17 | <10 | *** | 0 | 0 |
| | **Total** | **0** | **5** | **27** | **24** | **46** | **38** | **36** | **18** | **11** | *** | *** | **0** |
| **Cheshire West & Chester** | Female | 0 | *** | 6 | 10 | 14 | 11 | 8 | *** | *** | *** | 0 | 0 |
| | Male | 9 | *** | 38 | 43 | 66 | 70 | 68 | <50 | <26 | *** | *** | *** |
| | **Total** | **9** | **7** | **44** | **53** | **80** | **81** | **76** | **51** | **27** | *** | *** | *** |
| **Halton** | Female | 0 | 0 | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <78 | <118 | <91 | <57 | <42 | <27 | <7 | 0 | *** | 0 |
| | **Total** | **0** | *** | **79** | **120** | **91** | **58** | **44** | **28** | **8** | 0 | *** | 0 |
| **Knowsley** | Female | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | 5 | *** | <10 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | *** | **5** | **5** | **10** | *** | *** | **0** | **0** | **0** |
| **Liverpool** | Female | 0 | 0 | *** | *** | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <25 | <20 | 19 | 15 | <19 | 17 | <18 | 0 | *** | *** |
| | **Total** | **0** | *** | **25** | **23** | **19** | **15** | **19** | **17** | **19** | **0** | *** | *** |
| **Sefton** | Female | 0 | 0 | 0 | *** | 0 | 0 | *** | *** | *** | 0 | 0 | *** |
| | Male | 0 | *** | 6 | <17 | 17 | 20 | <25 | <16 | <6 | 5 | *** | 0 |
| | **Total** | **0** | *** | **6** | **18** | **17** | **20** | **25** | **17** | **6** | **5** | *** | *** |
| **St. Helens** | Female | 0 | *** | *** | 5 | 6 | *** | 6 | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <20 | 23 | 37 | <34 | 52 | <38 | <14 | 6 | *** | 0 |
| | **Total** | **0** | *** | **21** | **28** | **43** | **35** | **58** | **39** | **15** | **6** | *** | **0** |
| **Warrington** | Female | 0 | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 | 0 |
| | Male | 0 | 0 | <20 | <11 | <18 | <8 | <10 | <13 | *** | 0 | *** | 0 |
| | **Total** | **0** | *** | **21** | **11** | **19** | **8** | **11** | **14** | *** | **0** | *** | **0** |
| **Wirral** | Female | 0 | *** | *** | *** | *** | *** | 6 | *** | 0 | *** | 0 | 0 |
| | Male | 0 | *** | <20 | <22 | <23 | <30 | 43 | <42 | 21 | <10 | *** | *** |
| | **Total** | **0** | *** | **20** | **25** | **25** | **32** | **49** | **44** | **21** | **11** | *** | *** |
| **Total:** | | **9** | **25** | **245** | **303** | **345** | **292** | **328** | **231** | **109** | **30** | **12** | **6** |

## 12. PHARMACY NEEDLE & SYRINGE PROGRAMME - EXCLUDING STEROID CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| Cheshire East | 104 | 15.4% | 573 | 84.6% | 677 |
| Cheshire West & Chester | 81 | 12.3% | 579 | 87.7% | 660 |
| Halton | 24 | 40.0% | 36 | 60.0% | 60 |
| Knowsley | 51 | 10.4% | 441 | 89.6% | 492 |
| Liverpool | 583 | 11.2% | 4,606 | 88.8% | 5,189 |
| Sefton | 210 | 16.4% | 1,069 | 83.6% | 1,279 |
| St. Helens | 200 | 14.7% | 1,161 | 85.3% | 1,361 |
| Warrington | 107 | 12.3% | 764 | 87.7% | 871 |
| Wirral | 81 | 10.6% | 684 | 89.4% | 765 |
| Total | 1,441 | 12.7% | 9,913 | 87.3% | 11,354 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 16 | 26 | 25 | 18 | 6 | 8 | 0 | 0 | 0 |
| | Male | *** | *** | <30 | 79 | 141 | 121 | 116 | 52 | 27 | *** | 0 | *** |
| | **Total** | *** | *** | **33** | **95** | **167** | **146** | **134** | **58** | **35** | *** | **0** | *** |
| **Cheshire West & Chester** | Female | 0 | 0 | *** | 16 | 15 | 19 | 20 | 7 | *** | *** | 0 | 0 |
| | Male | *** | *** | <24 | 44 | 97 | 140 | 160 | 65 | <30 | <11 | 5 | 0 |
| | **Total** | *** | *** | **24** | **60** | **112** | **159** | **180** | **72** | **31** | **12** | **5** | **0** |
| **Halton** | Female | 0 | 0 | 0 | <9 | 8 | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | 8 | <14 | <7 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | **11** | **16** | **16** | **8** | *** | *** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 8 | 10 | 6 | *** | 9 | 6 | *** | *** | *** | *** |
| | Male | *** | 5 | 80 | 98 | 74 | <46 | 58 | 29 | <10 | <16 | <9 | <18 |
| | **Total** | *** | **5** | **88** | **108** | **80** | **49** | **67** | **35** | **10** | **18** | **9** | **19** |
| **Liverpool** | Female | *** | *** | 37 | 62 | 85 | 111 | 158 | 63 | 38 | 16 | 6 | *** |
| | Male | <16 | <58 | 467 | 736 | 832 | 766 | 782 | 589 | 270 | 55 | 23 | <16 |
| | **Total** | **16** | **60** | **504** | **798** | **917** | **877** | **940** | **652** | **308** | **71** | **29** | **17** |
| **Sefton** | Female | *** | *** | 16 | 24 | 30 | 32 | 52 | 26 | 20 | *** | 5 | *** |
| | Male | <7 | <10 | 34 | 124 | 155 | 167 | 249 | 195 | 96 | <16 | 16 | *** |
| | **Total** | **7** | **11** | **50** | **148** | **185** | **199** | **301** | **221** | **116** | **18** | **21** | *** |
| **St. Helens** | Female | 6 | *** | 17 | 30 | 48 | 26 | 51 | 13 | *** | *** | *** | 0 |
| | Male | 5 | <20 | 125 | 126 | 168 | 228 | 277 | 124 | <42 | <30 | <14 | 7 |
| | **Total** | **11** | **22** | **142** | **156** | **216** | **254** | **328** | **137** | **44** | **30** | **14** | **7** |
| **Warrington** | Female | *** | *** | 8 | 20 | 29 | 18 | 9 | 13 | *** | *** | 0 | 0 |
| | Male | <7 | <23 | 73 | 153 | 113 | 149 | 151 | 68 | <18 | <10 | *** | *** |
| | **Total** | **7** | **23** | **81** | **173** | **142** | **167** | **160** | **81** | **20** | **12** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | 8 | 14 | 22 | 12 | 17 | *** | 0 | 0 | 0 |
| | Male | *** | <10 | <28 | 69 | 65 | 121 | 163 | 145 | <63 | 17 | *** | *** |
| | **Total** | *** | **10** | **29** | **77** | **79** | **143** | **175** | **162** | **65** | **17** | *** | *** |
| **Total:** | | **50** | **137** | **953** | **1,626** | **1,914** | **2,010** | **2,293** | **1,421** | **633** | **179** | **85** | **53** |

# APPENDIX B - NEEDLE & SYRINGE PROGRAMME – NEW CLIENTS

## 13. NEEDLE & SYRINGE PROGRAMME – NEW CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 51 | 8.7% | 533 | 91.3% | 584 |
| **Cheshire West & Chester** | 83 | 9.2% | 823 | 90.8% | 906 |
| **Halton** | 33 | 9.6% | 311 | 90.4% | 344 |
| **Knowsley** | 45 | 8.9% | 462 | 91.1% | 507 |
| **Liverpool** | 511 | 11.8% | 3,805 | 88.2% | 4,316 |
| **Sefton** | 198 | 13.9% | 1,231 | 86.1% | 1,429 |
| **St. Helens** | 196 | 11.7% | 1,484 | 88.3% | 1,680 |
| **Warrington** | 108 | 10.2% | 947 | 89.8% | 1055 |
| **Wirral** | 72 | 6.7% | 1001 | 93.3% | 1073 |
| **Total** | 1,297 | 10.9% | 10,597 | 89.1% | 11,894 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 7 | 15 | 12 | 10 | *** | *** | *** | 0 | 0 |
| | Male | *** | 27 | <114 | 106 | 101 | 84 | 56 | <23 | <18 | *** | 0 | *** |
| | **Total** | *** | **27** | **115** | **113** | **116** | **96** | **66** | **23** | **19** | *** | **0** | *** |
| **Cheshire West & Chester** | Female | *** | *** | 10 | 18 | 21 | 14 | 11 | *** | *** | 0 | 0 | 0 |
| | Male | <13 | <18 | 136 | 161 | 154 | 122 | 128 | <56 | <26 | 8 | 5 | *** |
| | **Total** | **13** | **20** | **146** | **179** | **175** | **136** | **139** | **57** | **27** | **8** | **5** | *** |
| **Halton** | Female | 0 | 0 | *** | 11 | 9 | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <65 | 80 | 66 | <46 | <28 | <20 | <9 | 0 | 0 | 0 |
| | **Total** | *** | *** | **66** | **91** | **75** | **48** | **29** | **21** | **9** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 6 | 9 | 6 | 5 | 8 | 6 | *** | *** | *** | *** |
| | Male | *** | 6 | 88 | 107 | 79 | 50 | 58 | 30 | <12 | <13 | <6 | <14 |
| | **Total** | *** | **6** | **94** | **116** | **85** | **55** | **66** | **36** | **12** | **13** | **7** | **14** |
| **Liverpool** | Female | *** | *** | 37 | 56 | 75 | 92 | 133 | 57 | 34 | 15 | 5 | *** |
| | Male | <17 | <56 | 415 | 589 | 626 | 631 | 658 | 501 | 236 | 46 | 20 | <14 |
| | **Total** | **17** | **58** | **452** | **645** | **701** | **723** | **791** | **558** | **270** | **61** | **25** | **15** |
| **Sefton** | Female | *** | *** | 15 | 22 | 29 | 32 | 49 | 21 | 20 | *** | 5 | *** |
| | Male | <9 | <15 | 75 | 202 | 217 | 183 | 233 | 170 | 93 | <18 | 16 | *** |
| | **Total** | **9** | **16** | **90** | **224** | **246** | **215** | **282** | **191** | **113** | **19** | **21** | *** |
| **St. Helens** | Female | 6 | *** | 18 | 30 | 45 | 27 | 46 | 13 | *** | *** | *** | 0 |
| | Male | 5 | <36 | 220 | 206 | 239 | 257 | 293 | 129 | <52 | <30 | <15 | 7 |
| | **Total** | **11** | **39** | **238** | **236** | **284** | **284** | **339** | **142** | **54** | **31** | **15** | **7** |
| **Warrington** | Female | *** | *** | 11 | 19 | 28 | 19 | 9 | 12 | *** | *** | 0 | 0 |
| | Male | <7 | <33 | 132 | 202 | 144 | 162 | 159 | 76 | <24 | <8 | *** | *** |
| | **Total** | **7** | **34** | **143** | **221** | **172** | **181** | **168** | **88** | **26** | **9** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | 8 | 11 | 20 | 9 | 13 | *** | *** | 0 | 0 |
| | Male | 5 | <33 | <140 | 174 | 129 | 139 | 153 | 148 | <60 | <19 | *** | *** |
| | **Total** | **5** | **33** | **142** | **182** | **140** | **159** | **162** | **161** | **62** | **19** | *** | *** |
| **Total:** | | **69** | **237** | **1,486** | **2,007** | **1,994** | **1,897** | **2,042** | **1,277** | **592** | **163** | **80** | **50** |

## 14. AGENCY NEEDLE & SYRINGE PROGRAMME - NEW CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | *** | 1.0% | <294 | 99.0% | 295 |
| **Cheshire West & Chester** | 52 | 8.6% | 554 | 91.4% | 606 |
| **Halton** | 10 | 3.5% | 278 | 96.5% | 288 |
| **Knowsley** | *** | 3.7% | <80 | 96.3% | 81 |
| **Liverpool** | *** | 2.4% | <80 | 97.6% | 83 |
| **Sefton** | *** | 1.9% | <106 | 98.1% | 107 |
| **St. Helens** | 17 | 3.8% | 432 | 96.2% | 449 |
| **Warrington** | 6 | 2.8% | 211 | 97.2% | 217 |
| **Wirral** | 12 | 2.6% | 447 | 97.4% | 459 |
| **Total** | 107 | 4.1% | 2,478 | 95.9% | 2,585 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | *** | 0 | 0 |
| | Male | *** | 24 | 94 | 73 | <50 | 27 | 11 | 5 | 6 | *** | 0 | 0 |
| | **Total** | *** | **24** | **94** | **73** | **51** | **27** | **11** | **5** | **6** | *** | **0** | **0** |
| **Cheshire West & Chester** | Female | *** | *** | 9 | 12 | 13 | 10 | *** | *** | 0 | 0 | 0 | 0 |
| | Male | <12 | <16 | 122 | 137 | 112 | 65 | <50 | <29 | 11 | *** | *** | *** |
| | **Total** | **12** | **17** | **131** | **149** | **125** | **75** | **52** | **29** | **11** | *** | *** | *** |
| **Halton** | Female | 0 | 0 | *** | *** | *** | 0 | *** | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <63 | <78 | <59 | 35 | <20 | <19 | *** | 0 | 0 | 0 |
| | **Total** | *** | *** | **64** | **80** | **59** | **35** | **21** | **19** | **5** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 0 | *** | 0 | *** | *** | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | *** | 15 | <18 | 14 | <10 | <14 | 5 | *** | 0 | 0 | 0 |
| | **Total** | **0** | *** | **15** | **18** | **14** | **10** | **14** | **5** | *** | **0** | **0** | **0** |
| **Liverpool** | Female | 0 | 0 | 0 | *** | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 |
| | Male | *** | 0 | 15 | <17 | 13 | 12 | <10 | 9 | 5 | *** | 0 | 0 |
| | **Total** | *** | **0** | **15** | **17** | **13** | **12** | **10** | **9** | **5** | *** | **0** | **0** |
| **Sefton** | Female | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 |
| | Male | 0 | *** | 11 | 19 | 24 | 18 | <15 | 9 | *** | *** | *** | *** |
| | **Total** | **0** | *** | **11** | **19** | **24** | **18** | **15** | **9** | *** | *** | *** | *** |
| **St. Helens** | Female | 0 | *** | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | <18 | <99 | <90 | <86 | <58 | <53 | <21 | <13 | *** | *** | 0 |
| | **Total** | **0** | **18** | **101** | **92** | **87** | **58** | **53** | **21** | **13** | *** | *** | **0** |
| **Warrington** | Female | 0 | *** | *** | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | <10 | <64 | 54 | 34 | <19 | 15 | 11 | 6 | 0 | *** | *** |
| | **Total** | **0** | **11** | **65** | **54** | **34** | **19** | **15** | **11** | **6** | **0** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | *** | *** | *** | *** | 0 | 0 | *** | 0 | 0 |
| | Male | *** | <23 | <116 | <120 | <80 | <41 | <29 | 28 | 8 | *** | *** | *** |
| | **Total** | *** | **23** | **118** | **121** | **80** | **42** | **29** | **28** | **8** | *** | *** | *** |
| **Total:** | | **19** | **99** | **614** | **623** | **487** | **296** | **220** | **136** | **62** | **18** | **7** | *** |

## 15. PHARMACY NEEDLE & SYRINGE PROGRAMME - NEW CLIENTS

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 48 | 16.3% | 247 | 83.7% | 295 |
| **Cheshire West & Chester** | 32 | 10.0% | 287 | 90.0% | 319 |
| **Halton** | 23 | 41.1% | 33 | 58.9% | 56 |
| **Knowsley** | 42 | 9.8% | 388 | 90.2% | 430 |
| **Liverpool** | 509 | 12.0% | 3,730 | 88.0% | 4,239 |
| **Sefton** | 196 | 14.8% | 1,131 | 85.2% | 1,327 |
| **St. Helens** | 183 | 14.2% | 1,103 | 85.8% | 1,286 |
| **Warrington** | 102 | 12.1% | 744 | 87.9% | 846 |
| **Wirral** | 61 | 9.6% | 576 | 90.4% | 637 |
| **Total** | 1,196 | 12.7% | 8,239 | 87.3% | 9,435 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 7 | 13 | 12 | 10 | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <21 | 33 | 54 | 58 | 46 | <18 | <12 | 0 | 0 | *** |
| | **Total** | *** | *** | **22** | **40** | **67** | **70** | **56** | **18** | **13** | **0** | **0** | *** |
| **Cheshire West & Chester** | Female | 0 | 0 | *** | 7 | 8 | *** | 8 | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <18 | 27 | 49 | <62 | 81 | <27 | <15 | 5 | *** | 0 |
| | **Total** | *** | *** | **18** | **34** | **57** | **64** | **89** | **28** | **16** | **5** | *** | **0** |
| **Halton** | Female | 0 | 0 | 0 | <9 | 8 | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | 8 | <12 | <8 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | **11** | **16** | **13** | **8** | *** | *** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 6 | 8 | 6 | *** | 7 | 6 | *** | *** | *** | *** |
| | Male | *** | 5 | 74 | 90 | 66 | <44 | 45 | 25 | <9 | <13 | <7 | <13 |
| | **Total** | *** | **5** | **80** | **98** | **72** | **46** | **52** | **31** | **9** | **13** | **7** | **14** |
| **Liverpool** | Female | *** | *** | 37 | 55 | 75 | 92 | 132 | 57 | 34 | 15 | 5 | *** |
| | Male | <16 | <56 | 402 | 575 | 613 | 619 | 650 | 492 | 232 | 45 | 20 | <14 |
| | **Total** | **16** | **58** | **439** | **630** | **688** | **711** | **782** | **549** | **266** | **60** | **25** | **15** |
| **Sefton** | Female | *** | *** | 15 | 22 | 29 | 32 | 48 | 21 | 19 | *** | 5 | *** |
| | Male | <9 | <14 | 64 | 185 | 195 | 165 | 219 | 162 | 90 | <16 | 14 | *** |
| | **Total** | **9** | **15** | **79** | **207** | **224** | **197** | **267** | **183** | **109** | **16** | **19** | *** |
| **St. Helens** | Female | 6 | *** | 17 | 27 | 42 | 26 | 44 | 12 | *** | *** | *** | 0 |
| | Male | 5 | <23 | 131 | 126 | 161 | 213 | 251 | 112 | <40 | <26 | <13 | 7 |
| | **Total** | **11** | **24** | **148** | **153** | **203** | **239** | **295** | **124** | **42** | **27** | **13** | **7** |
| **Warrington** | Female | *** | *** | 8 | 19 | 28 | 18 | 9 | 12 | *** | *** | 0 | 0 |
| | Male | <7 | <23 | 74 | 149 | 110 | 145 | 145 | 66 | <18 | <8 | *** | *** |
| | **Total** | **7** | **23** | **82** | **168** | **138** | **163** | **154** | **78** | **20** | **9** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | 5 | 10 | 19 | 8 | 13 | *** | 0 | 0 | 0 |
| | Male | *** | <12 | <25 | 57 | 57 | 100 | 127 | 124 | <56 | 15 | *** | *** |
| | **Total** | *** | **12** | **26** | **62** | **67** | **119** | **135** | **137** | **57** | **15** | *** | *** |
| **Total:** | | **50** | **144** | **896** | **1,403** | **1,532** | **1,622** | **1,838** | **1,150** | **536** | **145** | **73** | **46** |

# APPENDIX C - NEEDLE & SYRINGE PROGRAMME – NEW CLIENTS EXCLUDING STEROID

## 16. NEEDLE & SYRINGE PROGRAMME - NEW CLIENTS EXCLUDING STEROID

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 51 | 14.0% | 312 | 86.0% | 363 |
| **Cheshire West & Chester** | 60 | 11.0% | 486 | 89.0% | 546 |
| **Halton** | 32 | 11.5% | 247 | 88.5% | 279 |
| **Knowsley** | 44 | 9.8% | 407 | 90.2% | 451 |
| **Liverpool** | 510 | 12.0% | 3,739 | 88.0% | 4,249 |
| **Sefton** | 186 | 16.7% | 929 | 83.3% | 1,115 |
| **St. Helens** | 193 | 14.3% | 1,152 | 85.7% | 1,345 |
| **Warrington** | 107 | 12.2% | 771 | 87.8% | 878 |
| **Wirral** | 70 | 10.1% | 623 | 89.9% | 693 |
| **Total** | 1,253 | 12.6% | 8,666 | 87.4% | 9,919 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 7 | 15 | 12 | 10 | *** | *** | *** | 0 | 0 |
| | Male | *** | 8 | <40 | 44 | 67 | 67 | 50 | <20 | <15 | *** | 0 | *** |
| | **Total** | *** | **8** | **40** | **51** | **82** | **79** | **60** | **20** | **16** | *** | **0** | *** |
| **Cheshire West & Chester** | Female | 0 | *** | 7 | 10 | 16 | 9 | 10 | *** | *** | 0 | 0 | 0 |
| | Male | 10 | <8 | 47 | 61 | 85 | 90 | 101 | <50 | <24 | 7 | 5 | *** |
| | **Total** | **10** | **10** | **54** | **71** | **101** | **99** | **111** | **52** | **25** | **7** | **5** | *** |
| **Halton** | Female | 0 | 0 | *** | 11 | 9 | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <51 | 66 | 50 | <39 | <25 | <14 | <8 | 0 | 0 | 0 |
| | **Total** | **0** | *** | **52** | **77** | **59** | **40** | **26** | **15** | **8** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 6 | 8 | 6 | 5 | 8 | 6 | *** | *** | *** | *** |
| | Male | *** | 5 | 75 | 91 | 70 | 45 | 52 | 28 | <9 | <13 | <7 | <14 |
| | **Total** | *** | **5** | **81** | **99** | **76** | **50** | **60** | **34** | **9** | **13** | **7** | **14** |
| **Liverpool** | Female | *** | *** | 37 | 56 | 75 | 92 | 132 | 57 | 34 | 15 | 5 | *** |
| | Male | <16 | <57 | 402 | 574 | 617 | 621 | 649 | 496 | 233 | 45 | 20 | <14 |
| | **Total** | **16** | **58** | **439** | **630** | **692** | **713** | **781** | **553** | **267** | **60** | **25** | **15** |
| **Sefton** | Female | *** | *** | 14 | 22 | 25 | 28 | 46 | 21 | 20 | *** | 5 | *** |
| | Male | <7 | <12 | 37 | 117 | 148 | 143 | 203 | 150 | 84 | <18 | 13 | *** |
| | **Total** | **7** | **12** | **51** | **139** | **173** | **171** | **249** | **171** | **104** | **18** | **18** | *** |
| **St. Helens** | Female | 6 | *** | 17 | 28 | 45 | 27 | 46 | 13 | *** | *** | *** | 0 |
| | Male | 5 | <23 | 132 | 131 | 169 | 217 | 266 | 121 | <48 | <27 | <14 | 7 |
| | **Total** | **11** | **24** | **149** | **159** | **214** | **244** | **312** | **134** | **49** | **28** | **14** | **7** |
| **Warrington** | Female | *** | *** | 11 | 19 | 28 | 19 | 9 | 12 | *** | *** | 0 | 0 |
| | Male | <7 | <23 | 79 | 153 | 119 | 147 | 149 | 67 | <20 | <9 | *** | *** |
| | **Total** | **7** | **24** | **90** | **172** | **147** | **166** | **158** | **79** | **21** | **9** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | 8 | 10 | 20 | 9 | 13 | *** | *** | 0 | 0 |
| | Male | *** | <11 | <38 | 68 | 62 | 102 | 133 | 131 | <57 | <19 | *** | *** |
| | **Total** | *** | **12** | **39** | **76** | **72** | **122** | **142** | **144** | **58** | **19** | *** | *** |
| **Total:** | | **57** | **155** | **995** | **1,474** | **1,616** | **1,684** | **1,899** | **1,202** | **557** | **156** | **76** | **48** |

## 17. AGENCY NEEDLE & SYRINGE PROGRAMME - NEW CLIENTS EXCLUDING STEROID

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | *** | 4.1% | <75 | 95.9% | 74 |
| **Cheshire West & Chester** | 29 | 11.8% | 217 | 88.2% | 246 |
| **Halton** | 9 | 4.0% | 214 | 96.0% | 223 |
| **Knowsley** | *** | 8.0% | <24 | 92.0% | 25 |
| **Liverpool** | *** | 6.3% | <16 | 93.8% | 16 |
| **Sefton** | *** | 1.8% | <57 | 98.2% | 57 |
| **St. Helens** | 14 | 12.3% | 100 | 87.7% | 114 |
| **Warrington** | 5 | 12.5% | 35 | 87.5% | 40 |
| **Wirral** | 10 | 12.7% | 69 | 87.3% | 79 |
| **Total** | 74 | 8.5% | 800 | 91.5% | 874 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | *** | 0 | 0 |
| | Male | 0 | 5 | 19 | 11 | <17 | 10 | 5 | *** | *** | *** | 0 | 0 |
| | **Total** | **0** | **5** | **19** | **11** | **17** | **10** | **5** | *** | *** | *** | **0** | **0** |
| **Cheshire West & Chester** | Female | 0 | *** | 6 | *** | 8 | 5 | *** | *** | 0 | 0 | 0 | 0 |
| | Male | 9 | *** | 33 | <40 | 43 | 33 | <24 | <24 | 9 | *** | *** | *** |
| | **Total** | **9** | **7** | **39** | **41** | **51** | **38** | **24** | **24** | **9** | *** | *** | *** |
| **Halton** | Female | 0 | 0 | *** | *** | *** | 0 | 0 | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <50 | <65 | <43 | 27 | 18 | <13 | *** | 0 | 0 | 0 |
| | **Total** | **0** | *** | **50** | **66** | **43** | **27** | **18** | **13** | *** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | 5 | *** | <8 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | *** | **5** | **5** | **8** | *** | *** | **0** | **0** | **0** |
| **Liverpool** | Female | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | *** | *** | 0 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | *** | *** | *** | **0** | *** | *** | **0** | **0** | **0** |
| **Sefton** | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 |
| | Male | 0 | *** | *** | 9 | 11 | 11 | 10 | 6 | 0 | *** | *** | 0 |
| | **Total** | **0** | *** | *** | **9** | **11** | **11** | **10** | **6** | *** | *** | *** | **0** |
| **St. Helens** | Female | 0 | *** | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | *** | <12 | <15 | <17 | <18 | <25 | <13 | <8 | *** | *** | 0 |
| | **Total** | **0** | *** | **12** | **15** | **17** | **18** | **26** | **13** | **8** | *** | *** | **0** |
| **Warrington** | Female | 0 | *** | *** | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 |
| | Male | 0 | 0 | <12 | 5 | 9 | *** | 5 | *** | *** | 0 | *** | 0 |
| | **Total** | **0** | *** | **12** | **5** | **9** | *** | **5** | *** | *** | **0** | *** | **0** |
| **Wirral** | Female | 0 | *** | *** | *** | 0 | *** | *** | 0 | 0 | *** | 0 | 0 |
| | Male | 0 | 0 | <15 | <14 | 12 | *** | <9 | 11 | *** | *** | *** | *** |
| | **Total** | **0** | *** | **15** | **15** | **12** | **5** | **9** | **11** | *** | *** | *** | *** |
| **Total:** | | **9** | **21** | **155** | **165** | **169** | **120** | **105** | **78** | **33** | **12** | **<7** | *** |

## 18. PHARMACY NEEDLE & SYRINGE PROGRAMME – NEW CLIENTS EXCLUDING STEROID

### GENDER

| | Female | % | Male | % | Total |
|---|---|---|---|---|---|
| **Cheshire East** | 48 | 16.4% | 244 | 83.6% | 292 |
| **Cheshire West & Chester** | 32 | 10.0% | 287 | 90.0% | 319 |
| **Halton** | 23 | 41.1% | 33 | 58.9% | 56 |
| **Knowsley** | 42 | 9.8% | 388 | 90.2% | 430 |
| **Liverpool** | 509 | 12.0% | 3,726 | 88.0% | 4,235 |
| **Sefton** | 185 | 17.4% | 876 | 82.6% | 1,061 |
| **St. Helens** | 183 | 14.5% | 1,080 | 85.5% | 1,263 |
| **Warrington** | 102 | 12.2% | 736 | 87.8% | 838 |
| **Wirral** | 61 | 9.8% | 564 | 90.2% | 625 |
| **Total** | 1,185 | 13.0% | 7,934 | 87.0% | 9,119 |

### AGE GROUP

| | | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cheshire East** | Female | *** | 0 | *** | 7 | 13 | 12 | 10 | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <22 | 33 | 53 | 57 | 46 | <18 | <12 | 0 | 0 | *** |
| | **Total** | *** | *** | **22** | **40** | **66** | **69** | **56** | **18** | **13** | **0** | **0** | *** |
| **Cheshire West & Chester** | Female | 0 | 0 | *** | 7 | 8 | *** | 8 | *** | *** | 0 | 0 | 0 |
| | Male | *** | *** | <18 | 27 | 49 | <63 | 81 | <27 | <15 | 5 | *** | 0 |
| | **Total** | *** | *** | **18** | **34** | **57** | **64** | **89** | **28** | **16** | **5** | *** | **0** |
| **Halton** | Female | 0 | 0 | 0 | <10 | 8 | *** | *** | *** | *** | 0 | 0 | 0 |
| | Male | 0 | 0 | *** | *** | 8 | <12 | <7 | *** | *** | 0 | 0 | 0 |
| | **Total** | **0** | **0** | *** | **11** | **16** | **13** | **8** | *** | *** | 0 | **0** | 0 |
| **Knowsley** | Female | 0 | 0 | 6 | 8 | 6 | *** | 7 | 6 | *** | *** | *** | *** |
| | Male | *** | 5 | 74 | 90 | 66 | <44 | 45 | 25 | <8 | <12 | <7 | <14 |
| | **Total** | *** | **5** | **80** | **98** | **72** | **46** | **52** | **31** | **9** | **13** | **7** | **14** |
| **Liverpool** | Female | *** | *** | 37 | 55 | 75 | 92 | 132 | 57 | 34 | 15 | 5 | *** |
| | Male | <16 | <56 | 400 | 574 | 613 | 619 | 649 | 492 | 232 | 45 | 20 | <14 |
| | **Total** | **16** | **58** | **437** | **629** | **688** | **711** | **781** | **549** | **266** | **60** | **25** | **15** |
| **Sefton** | Female | *** | *** | 14 | 22 | 25 | 28 | 46 | 21 | 19 | *** | 5 | *** |
| | Male | <7 | <10 | 33 | 109 | 138 | 132 | 193 | 145 | 84 | <15 | 12 | *** |
| | **Total** | **7** | **11** | **47** | **131** | **163** | **160** | **239** | **166** | **103** | **15** | **17** | *** |
| **St. Helens** | Female | 6 | *** | 17 | 27 | 42 | 26 | 44 | 12 | *** | *** | *** | 0 |
| | Male | 5 | <21 | 123 | 122 | 157 | 209 | 250 | 112 | <40 | <26 | <13 | 7 |
| | **Total** | **11** | **22** | **140** | **149** | **199** | **235** | **294** | **124** | **42** | **27** | **13** | **7** |
| **Warrington** | Female | *** | *** | 8 | 19 | 28 | 18 | 9 | 12 | *** | *** | 0 | 0 |
| | Male | <7 | <23 | 70 | 148 | 110 | 144 | 144 | 65 | <18 | <9 | *** | *** |
| | **Total** | **7** | **23** | **78** | **167** | **138** | **162** | **153** | **77** | **20** | **9** | *** | *** |
| **Wirral** | Female | 0 | *** | *** | 5 | 10 | 19 | 8 | 13 | *** | 0 | 0 | 0 |
| | Male | *** | <10 | <23 | 56 | 52 | 100 | 127 | 123 | <55 | 15 | *** | *** |
| | **Total** | *** | **10** | **24** | **61** | **62** | **119** | **135** | **136** | **56** | **15** | *** | *** |
| **Total:** | | **48** | **135** | **848** | **1,320** | **1,461** | **1,579** | **1,807** | **1,131** | **529** | **144** | **71** | **46** |

## APPENDIX D - NON STRUCTURED TREATMENT MONITORING – AGENCIES

### GENDER

| Code | Agency | Female | % | Male | % | Total |
|---|---|---|---|---|---|---|
| KNW1041 | Knowsley Integrated Recovery Service | 8 | 57.1% | 6 | 42.9% | 14 |
| LIV1002 | Armistead City | 22 | 8.1% | 249 | 91.9% | 271 |
| LIV1003 | Community Voice | 45 | 28.1% | 115 | 71.9% | 160 |
| LIV1004 | Genie in the Gutter | 51 | 26.8% | 139 | 73.2% | 190 |
| LIV1005 | Armistead Street | <174 | 98.9% | *** | 1.1% | 175 |
| LIV1006 | The Basement | 180 | 18.9% | 773 | 81.1% | 953 |
| LIV1007 | Whitechapel Centre | 160 | 46.2% | 186 | 53.8% | 346 |
| LIV1008 | Dare to Care | 29 | 25.9% | 83 | 74.1% | 112 |
| LIV1009 | Action on Addiction - SHARP Liverpool | 211 | 44.9% | 259 | 55.1% | 470 |
| LIV1010 | TSP Hope Club | 23 | 13.0% | 154 | 87.0% | 177 |
| LIV1011 | Art and Soul (Spider Project) | 160 | 31.7% | 344 | 68.3% | 504 |
| LIV1012 | Addaction Liverpool Recovery Services | 32 | 25.4% | 94 | 74.6% | 126 |
| LIV2014 | Aintree Hospital | 454 | 31.3% | 996 | 68.7% | 1450 |
| LIV2015 | Alder Hey Hospital | 46 | 80.7% | 11 | 19.3% | 57 |
| LIV2018 | Brownlow Practice | 58 | 28.7% | 144 | 71.3% | 202 |
| LIV2020 | LCAS - Liverpool Royal UH | 266 | 33.0% | 539 | 67.0% | 805 |
| SEF1047 | Lifeline Sefton North | 67 | 42.4% | 91 | 57.6% | 158 |
| SEF1048 | Lifeline Sefton South | 106 | 31.6% | 229 | 68.4% | 335 |
| WIR1043 | St Catherines Health Centre | 229 | 25.8% | 660 | 74.2% | 889 |
| WIR1046 | TSP Hope Club Wirral | 17 | 27.0% | 46 | 73.0% | 63 |
| WIR1049 | TSP Second Chance Project | *** | 11.1% | <17 | 88.9% | 18 |
| WIR2016 | ARCH AIP Wirral | 190 | 18.8% | 819 | 81.2% | 1009 |
| WIR2019 | Response Wirral | 28 | 66.7% | 14 | 33.3% | 42 |
| WIR2021 | TSP Birkenhead | 32 | 31.7% | 69 | 68.3% | 101 |
| WIR2022 | TSP Moreton | 41 | 47.1% | 46 | 52.9% | 87 |
| WIR2023 | TSP Rockferry | 23 | 35.9% | 41 | 64.1% | 64 |
| WIR2024 | TSP Seacombe | 51 | 37.8% | 84 | 62.2% | 135 |
| WIR2025 | TSP Woodchurch | 41 | 39.8% | 62 | 60.2% | 103 |

| Agency Code | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65+ | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **KNW1041** | 0 | 0 | *** | *** | 0 | *** | *** | *** | *** | 0 | 0 | *** | 14 |
| **LIV1002** | 0 | 36 | 83 | 62 | 33 | 21 | 13 | 12 | 5 | *** | 0 | *** | 271 |
| **LIV1003** | 0 | *** | *** | 6 | 14 | 16 | 27 | 47 | 22 | 16 | 6 | *** | 160 |
| **LIV1004** | 0 | 0 | *** | 10 | 12 | 34 | 42 | 38 | 29 | 14 | 8 | *** | 190 |
| **LIV1005** | *** | *** | 12 | 23 | 40 | 40 | 35 | 17 | 5 | 0 | 0 | 0 | 175 |
| **LIV1006** | *** | 49 | 144 | 154 | 121 | 145 | 112 | 106 | 68 | 25 | 16 | <10 | 953 |
| **LIV1007** | *** | *** | 7 | 9 | 22 | 45 | 75 | 88 | 56 | 22 | 14 | 6 | 346 |
| **LIV1008** | 0 | 0 | 9 | 18 | 21 | 19 | 23 | 11 | *** | *** | *** | *** | 112 |
| **LIV1009** | 0 | 0 | 7 | 40 | 81 | 81 | 84 | 73 | 55 | 23 | 16 | 10 | 470 |
| **LIV1010** | 0 | *** | 20 | 29 | 18 | 33 | 23 | 27 | 21 | *** | *** | *** | 177 |
| **LIV1011** | 0 | 0 | 13 | 39 | 69 | 91 | 86 | 84 | 67 | 29 | 20 | 6 | 504 |
| **LIV1012** | 0 | *** | 9 | 10 | 9 | 18 | 37 | 20 | 12 | *** | 6 | *** | 126 |
| **LIV2014** | *** | <12 | 34 | 55 | 97 | 112 | 183 | 206 | 198 | 164 | 127 | 261 | 1,450 |
| **LIV2015** | 57 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 57 |
| **LIV2018** | 0 | *** | *** | 9 | 18 | 25 | 41 | 39 | 34 | 19 | 7 | 5 | 202 |
| **LIV2020** | *** | *** | 11 | 32 | 50 | 88 | 132 | 129 | 120 | 76 | 61 | 101 | 805 |
| **SEF1047** | 0 | *** | 7 | 10 | 13 | 22 | 40 | 20 | 23 | 10 | 10 | *** | 158 |
| **SEF1048** | 0 | 0 | 8 | 13 | 26 | 41 | 86 | 94 | 45 | 16 | <7 | *** | 335 |
| **WIR1043** | *** | 10 | 67 | 90 | 101 | 84 | 156 | 128 | 99 | 58 | 36 | 59 | 889 |
| **WIR1046** | 0 | 0 | *** | 8 | 11 | 10 | 13 | 10 | 6 | *** | 0 | 0 | 63 |
| **WIR1049** | 0 | 0 | *** | 0 | *** | *** | 0 | 5 | *** | *** | 0 | 0 | 18 |
| **WIR2016** | *** | 74 | 223 | 187 | 130 | 115 | 121 | 81 | 40 | 24 | 8 | <7 | 1,009 |
| **WIR2019** | <42 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 42 |
| **WIR2021** | 0 | *** | 6 | 9 | 16 | 11 | 19 | 15 | 16 | *** | *** | *** | 101 |
| **WIR2022** | 0 | 0 | *** | 8 | 10 | 5 | 19 | 9 | 11 | 15 | *** | 7 | 87 |
| **WIR2023** | 0 | *** | *** | 5 | 9 | 8 | 8 | 12 | 5 | *** | *** | *** | 64 |
| **WIR2024** | 0 | *** | 5 | 9 | 17 | 15 | 28 | 22 | 21 | 8 | *** | 5 | 135 |
| **WIR2025** | 0 | *** | *** | *** | 10 | 11 | 26 | 14 | 16 | 5 | 5 | 8 | 103 |

| Agency | | Advice and Information (General) | Brief Intervention | Total |
|---|---|---|---|---|
| **KNW1041** | Knowsley Integrated Recovery Service (CRI) | 7 | 8 | 15 |
| **LIV1002** | Armistead City | 88 | 395 | 483 |
| **LIV1003** | Community Voice | 44 | 650 | 694 |
| **LIV1004** | Genie in the Gutter | 398 | 2,864 | 3,262 |
| **LIV1005** | Armistead Street | 102 | 1,141 | 1,243 |
| **LIV1006** | The Basement | 856 | 22 | 878 |
| **LIV1007** | Whitechapel Centre | 0 | 7,397 | 7,397 |
| **LIV1008** | Dare to Care | 0 | 326 | 326 |
| **LIV1009** | Action on Addiction - SHARP Liverpool | 224 | 3,647 | 3,871 |
| **LIV1010** | TSP Hope Club | 204 | 712 | 916 |
| **LIV1011** | Art and Soul (Spider Project) | 4,133 | 3,888 | 8,021 |
| **LIV1012** | Addaction Liverpool Recovery Services | 134 | 299 | 433 |
| **LIV2014** | Aintree Hospital | 0 | 1,944 | 1,944 |
| **LIV2015** | Alder Hey Hospital | 0 | 55 | 55 |
| **LIV2018** | Brownlow Practice | 73 | 695 | 768 |
| **LIV2020** | LCAS - Liverpool Royal UH | 0 | 832 | 832 |
| **SEF1047** | Lifeline Sefton North | 0 | 205 | 205 |
| **SEF1048** | Lifeline Sefton South | 0 | 464 | 464 |
| **WIR1043** | St Catherines Health Centre | 78 | 1,214 | 1,292 |
| **WIR1046** | TSP Hope Club Wirral | 457 | 43 | 500 |
| **WIR1049** | TSP Second Chance Project | 45 | 59 | 104 |
| **WIR2019** | Response Wirral | 7 | 98 | 105 |
| **WIR2021** | TSP Birkenhead | 58 | 243 | 301 |
| **WIR2022** | TSP Moreton | 57 | 297 | 354 |
| **WIR2023** | TSP Rockferry | 33 | 60 | 93 |
| **WIR2024** | TSP Seacombe | 141 | 166 | 307 |
| **WIR2025** | TSP Woodchurch | 10 | 260 | 270 |
| | Total: | 7,149 | 27,984 | 35,133 |

| Agency Code | Community Alcohol Team | Detox or Rehab Service | Drug Services | Education Service | Fire Service | Hospital A&E or other NHS | Housing / Homeless | Job Centre /Employment Services | Local & Other Support Providers | Police Service | Psychiatry or Psychological Services | Social Services | Welfare Advice Agency | Other | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **LIV1002** | 0 | *** | *** | 0 | 0 | 5 | 5 | 0 | *** | *** | 0 | 0 | *** | 16 | 35 |
| **LIV1003** | 0 | *** | 0 | *** | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | *** | *** |
| **LIV1004** | *** | 30 | 61 | 23 | 0 | 7 | 18 | 6 | 9 | 0 | 18 | 0 | 6 | *** | 181 |
| **LIV1005** | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | *** | *** | *** | *** | 0 | 0 | 9 |
| **LIV1006** | 0 | 13 | *** | *** | 0 | 13 | 732 | 9 | 11 | 0 | *** | *** | 0 | 44 | 831 |
| **LIV1007** | 34 | 28 | 49 | 13 | 8 | 98 | 190 | 96 | 78 | 14 | 69 | 37 | 94 | 100 | 908 |
| **LIV1009** | 0 | 0 | 37 | *** | 0 | *** | 0 | *** | *** | 0 | *** | 0 | 0 | 0 | 47 |
| **LIV1010** | 0 | 0 | *** | 22 | 0 | 0 | *** | 12 | *** | 0 | 0 | 0 | 0 | *** | 42 |
| **LIV1011** | 0 | 0 | *** | 0 | 0 | 0 | 6 | *** | 0 | 0 | 0 | 0 | 0 | *** | 16 |
| **LIV1012** | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** |
| **LIV2014** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | <978 | 978 |
| **LIV2018** | 0 | 0 | 9 | *** | 0 | 42 | 0 | 0 | 0 | 0 | *** | 9 | 0 | 100 | 162 |
| **LIV2020** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 400 | 400 |
| **WIR1043** | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | 6 |
| **WIR1046** | *** | 0 | 0 | 31 | 0 | 0 | *** | 27 | 11 | 0 | 0 | 0 | *** | 20 | 94 |
| **WIR1049** | 0 | 0 | *** | *** | 0 | 0 | 0 | 11 | 19 | 0 | 0 | 0 | *** | 7 | 44 |
| **WIR2021** | 0 | 0 | 0 | 6 | 0 | 16 | *** | *** | 8 | 0 | *** | *** | 0 | 81 | 118 |
| **WIR2022** | *** | *** | *** | 0 | 0 | 0 | *** | *** | 9 | 0 | 0 | 0 | 0 | 62 | 83 |
| **WIR2023** | *** | 0 | 0 | *** | *** | 0 | *** | *** | *** | 0 | 0 | *** | 0 | 15 | 28 |
| **WIR2024** | 0 | 0 | *** | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | 0 | *** | 106 | 115 |
| **WIR2025** | *** | 5 | *** | *** | *** | 5 | *** | 0 | 14 | 0 | 0 | 0 | *** | 35 | 68 |

| Agency Code | Regular Employment | Pupil / Student | Long term sick or disabled | Homemaker | Unemployed and seeking work | Not receiving benefits | Unpaid voluntary work | Retired from paid work | Other | Not Known / Blank |
|---|---|---|---|---|---|---|---|---|---|---|
| **KNW1041** | *** | 0 | *** | *** | 6 | 0 | 0 | *** | 0 | *** |
| **LIV1002** | 23 | 51 | 9 | 0 | 36 | 0 | 0 | *** | 0 | 151 |
| **LIV1003** | *** | 0 | 97 | *** | 33 | *** | 8 | *** | *** | 12 |
| **LIV1004** | *** | 0 | 105 | 0 | 18 | *** | 0 | *** | 0 | 62 |
| **LIV1005** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 175 |
| **LIV1006** | 11 | *** | 301 | *** | 299 | 137 | *** | *** | 93 | 102 |
| **LIV1007** | *** | 0 | 239 | 5 | 15 | *** | *** | *** | *** | 78 |
| **LIV1008** | 0 | *** | 0 | *** | 17 | 0 | 0 | *** | 0 | 91 |
| **LIV1009** | 34 | 0 | 9 | *** | 73 | 0 | 0 | *** | 155 | 195 |
| **LIV1010** | *** | 0 | *** | *** | 131 | 0 | *** | 0 | 0 | 40 |
| **LIV1011** | 23 | *** | 286 | *** | 58 | 8 | 6 | 8 | 16 | 94 |
| **LIV1012** | 7 | 0 | 57 | 0 | 43 | *** | *** | 0 | *** | 13 |
| **LIV2014** | 146 | 8 | 0 | 0 | 1,018 | 0 | 0 | 0 | 219 | 59 |
| **LIV2015** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 57 |
| **LIV2018** | 5 | *** | 0 | 0 | 115 | 0 | 0 | 0 | 76 | *** |
| **LIV2020** | 44 | 5 | 0 | 0 | 634 | 0 | 0 | 0 | 58 | 64 |
| **SEF1047** | 23 | *** | 47 | *** | 63 | *** | 0 | *** | *** | 14 |
| **SEF1048** | 39 | *** | 60 | *** | 201 | *** | 0 | 5 | 10 | 13 |
| **WIR1043** | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | 0 | 887 |
| **WIR1046** | *** | 0 | *** | 0 | 48 | 0 | *** | 0 | 0 | 7 |
| **WIR1049** | 0 | 0 | *** | 0 | 12 | 0 | 0 | 0 | *** | *** |
| **WIR2016** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1,009 |
| **WIR2019** | *** | 40 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| **WIR2021** | 8 | *** | 11 | 0 | 48 | *** | 0 | 0 | *** | 30 |
| **WIR2022** | 10 | 0 | *** | 0 | 17 | 0 | *** | *** | 8 | 48 |
| **WIR2023** | 5 | 0 | *** | 0 | 28 | 0 | 0 | *** | *** | 23 |
| **WIR2024** | 15 | 0 | 6 | *** | 56 | 0 | 0 | *** | *** | 52 |
| **WIR2025** | 5 | 0 | 10 | 0 | 58 | 0 | 0 | 5 | *** | 21 |

PARENTAL STATUS

| Agency | | All the children live with client | Some of the children live with client | None of the children live with client | Not a parent | Client declined to answer | Not Stated |
|---|---|---|---|---|---|---|---|
| **KNW1041** | Knowsley Integrated Recovery | 5 | 0 | *** | *** | 0 | 7 |
| **LIV1002** | Armistead City | 0 | 0 | 11 | 165 | 6 | 89 |
| **LIV1003** | Community Voice | 17 | 7 | 68 | 51 | 6 | 11 |
| **LIV1004** | Genie in the Gutter | 6 | 6 | 73 | 43 | 0 | 62 |
| **LIV1005** | Armistead Street | 0 | 0 | 0 | 0 | 0 | 175 |
| **LIV1006** | The Basement | 8 | *** | 394 | 444 | 16 | 87 |
| **LIV1007** | Whitechapel Centre | 19 | 27 | 123 | 94 | *** | 80 |
| **LIV1008** | Dare to Care | 11 | *** | 5 | 5 | *** | 89 |
| **LIV1009** | Action on Addiction - SHARP Liverpool | 76 | *** | 46 | 153 | *** | 193 |
| **LIV1010** | TSP Hope Club | 5 | 8 | 45 | 77 | *** | 40 |
| **LIV1011** | Art and Soul (Spider Project) | 43 | 13 | 143 | 209 | *** | 95 |
| **LIV1012** | Addaction Liverpool Recovery Services | 7 | 6 | 40 | 56 | *** | 16 |
| **LIV2014** | Aintree Hospital | 53 | *** | 156 | 1138 | 6 | 96 |
| **LIV2015** | Alder Hey Hospital | 0 | 0 | 0 | 0 | 0 | 57 |
| **LIV2018** | Brownlow Practice | *** | 0 | 116 | 60 | 18 | *** |
| **LIV2020** | LCAS - Liverpool Royal UH | 23 | *** | 78 | 635 | *** | 64 |
| **SEF1047** | Lifeline Sefton North | 17 | 9 | 54 | 50 | *** | 26 |
| **SEF1048** | Lifeline Sefton South | 28 | 19 | 95 | 100 | 0 | 93 |
| **WIR1043** | St Catherines Health Centre | 0 | 0 | 0 | 0 | 0 | 889 |
| **WIR1046** | TSP Hope Club Wirral | 7 | *** | 6 | 41 | 0 | 7 |
| **WIR1049** | TSP Second Chance Project | *** | *** | 7 | 7 | 0 | *** |
| **WIR2016** | ARCH AIP Wirral | 0 | 0 | 0 | 0 | 0 | 1009 |
| **WIR2019** | Response Wirral | 0 | 0 | *** | 41 | 0 | 0 |
| **WIR2021** | TSP Birkenhead | 9 | 8 | 23 | 30 | 0 | 31 |
| **WIR2022** | TSP Moreton | 10 | *** | 22 | *** | 0 | 48 |
| **WIR2023** | TSP Rockferry | *** | 0 | 15 | 21 | *** | 24 |
| **WIR2024** | TSP Seacombe | 16 | 9 | 30 | 28 | 0 | 52 |
| **WIR2025** | TSP Woodchurch | 0 | 0 | 0 | 0 | 0 | 103 |

## ACCOMMODATION STATUS

Figures for the last recorded accommodation status by each agency during 2013/14

| Agency | | NFA - urgent housing problem | Housing problem | No housing problem | Blank - Not recorded |
|---|---|---|---|---|---|
| **KNW1041** | Knowsley Integrated Recovery Service | 0 | 0 | 12 | *** |
| **LIV1002** | Armistead City | 4 | 10 | 176 | 81 |
| **LIV1003** | Community Voice | 10 | 19 | 120 | 11 |
| **LIV1004** | Genie in the Gutter | 5 | 35 | 88 | 62 |
| **LIV1005** | Armistead Street | 0 | *** | 0 | 174 |
| **LIV1006** | The Basement | 744 | 54 | 70 | 85 |
| **LIV1007** | Whitechapel Centre | 7 | 263 | 0 | 76 |
| **LIV1008** | Dare to Care | 0 | *** | 19 | 90 |
| **LIV1009** | Action on Addiction - SHARP Liverpool | *** | 19 | 257 | 193 |
| **LIV1010** | TSP Hope Club | 5 | 38 | 95 | 39 |
| **LIV1011** | Art and Soul (Spider Project) | 23 | 25 | 364 | 92 |
| **LIV1012** | Addaction Liverpool Recovery Services | 3 | 30 | 79 | 14 |
| **LIV2014** | Aintree Hospital | 29 | 36 | 1,370 | 15 |
| **LIV2015** | Alder Hey Hospital | 0 | 0 | 0 | 57 |
| **LIV2018** | Brownlow Practice | 21 | 135 | 42 | *** |
| **LIV2020** | LCAS - Liverpool Royal UH | 49 | 10 | 693 | 53 |
| **SEF1047** | Lifeline Sefton North | 5 | 20 | 130 | *** |
| **SEF1048** | Lifeline Sefton South | 24 | 27 | 282 | *** |
| **WIR1043** | St Catherines Health Centre | 0 | *** | *** | 886 |
| **WIR1046** | TSP Hope Club Wirral | *** | *** | 51 | 7 |
| **WIR1049** | TSP Second Chance Project | 0 | *** | 15 | *** |
| **WIR2016** | ARCH AIP Wirral | 0 | 0 | 0 | 1,009 |
| **WIR2019** | Response Wirral | 0 | *** | 39 | 0 |
| **WIR2021** | TSP Birkenhead | 7 | 21 | 44 | 29 |
| **WIR2022** | TSP Moreton | *** | *** | 35 | 47 |
| **WIR2023** | TSP Rockferry | *** | 6 | 32 | 23 |
| **WIR2024** | TSP Seacombe | *** | 9 | 71 | 51 |
| **WIR2025** | TSP Woodchurch | *** | 10 | 68 | 21 |

## APPENDIX E – NEEDLE & SYRINGE PROGRAMME – AGENCIES

### GENDER

| Code | Agency | Female | % | Male | % | Total |
|---|---|---|---|---|---|---|
| **CHE3029** | Catherine House Crewe (CWP) | 21 | 3.8% | 537 | 96.2% | 558 |
| **CHE3030** | Barnabas Centre Macclesfield (CWP) | 5 | 3.8% | 127 | 96.2% | 132 |
| **CHW3027** | Aqua House Chester (CWP) | 30 | 5.6% | 502 | 94.4% | 532 |
| **CHW3028** | Unity House Ellesmere Port (CWP) | 60 | 9.9% | 549 | 90.1% | 609 |
| **CHW3045** | Turning Point Northwich | *** | 11.4% | <34 | 88.6% | 35 |
| **HAL3031** | Ashley House Halton (CRI) | 17 | 3.1% | 532 | 96.9% | 549 |
| **KNW3041** | Knowsley Integrated Recovery Service | *** | 4.8% | <80 | 95.2% | 83 |
| **LIV3034** | Gateway SES (Addaction) | *** | 0.6% | <155 | 99.4% | 155 |
| **LIV3035** | Croxteth SES (Addaction) | *** | 3.1% | <96 | 96.9% | 98 |
| **LIV3044** | Armistead Pump | 6 | 6.3% | 90 | 93.8% | 96 |
| **SEF3036** | Bootle Oriel Road | 7 | 10.6% | 59 | 89.4% | 66 |
| **SEF3037** | Southport SES | *** | 4.3% | <23 | 95.7% | 23 |
| **SEF3047** | Lifeline Sefton North | 0 | 0.0% | 114 | 100.0% | 114 |
| **SEF3048** | Lifeline Sefton South | *** | 7.1% | <13 | 92.9% | 14 |
| **SHL3038** | St Helens CDT (Addaction) | 29 | 3.7% | 759 | 96.3% | 788 |
| **WAR3039** | Pathways Warrington CDT (CRI) | 21 | 3.2% | 641 | 96.8% | 662 |
| **WIR3040** | The Lodge Wirral (CWP) | 30 | 2.3% | 1,297 | 97.7% | 1,327 |

### AGE GROUP

| Code | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **CHE3029** | *** | 25 | 139 | 128 | 110 | 63 | 45 | 25 | 17 | *** | *** | 0 | 558 |
| **CHE3030** | 0 | 0 | 22 | 27 | 29 | 18 | 17 | 9 | 7 | *** | *** | 0 | 132 |
| **CHW3027** | 7 | 8 | 113 | 107 | 100 | 70 | 69 | 35 | 15 | <8 | *** | 0 | 532 |
| **CHW3028** | 5 | 10 | 108 | 153 | 132 | 85 | 60 | 33 | 18 | *** | *** | *** | 609 |
| **CHW3045** | 0 | 0 | *** | 12 | 6 | 7 | *** | *** | *** | 0 | 0 | 0 | 35 |
| **HAL3031** | *** | 5 | 99 | 151 | 116 | 72 | 56 | 38 | 10 | 0 | *** | 0 | 549 |
| **KNW3041** | 0 | *** | 15 | 18 | 14 | 10 | 16 | 5 | *** | 0 | 0 | 0 | 83 |
| **LIV3034** | *** | *** | 13 | 19 | 39 | 30 | 20 | 12 | 12 | 6 | *** | *** | 155 |
| **LIV3035** | 0 | 0 | <8 | 21 | 17 | 13 | 17 | 13 | 10 | *** | 0 | 0 | 98 |
| **LIV3044** | 0 | *** | 30 | 30 | 14 | 6 | 7 | *** | *** | 0 | 0 | 0 | 96 |
| **SEF3036** | 0 | 0 | *** | 9 | 14 | 5 | 13 | 11 | *** | *** | *** | *** | 66 |
| **SEF3037** | 0 | 0 | *** | 6 | 8 | 5 | *** | *** | 0 | *** | 0 | 0 | 23 |
| **SEF3047** | 0 | *** | 9 | 19 | 21 | 24 | 15 | 12 | 6 | *** | *** | *** | 114 |
| **SEF3048** | 0 | 0 | 0 | *** | *** | *** | 5 | *** | *** | 0 | 0 | 0 | 14 |
| **SHL3038** | 0 | 22 | 150 | 162 | 159 | 102 | 104 | 55 | 22 | <12 | *** | 0 | 788 |
| **WAR3039** | 0 | 14 | 145 | 163 | 138 | 71 | 62 | 49 | 16 | *** | *** | *** | 662 |
| **WIR3040** | *** | 30 | 268 | 333 | 245 | 167 | 130 | 90 | 39 | 15 | *** | *** | 1,327 |

| Code | Name | 2013-04 | 2013-05 | 2013-06 | 2013-07 | 2013-08 | 2013-09 | 2013-10 | 2013-11 | 2013-12 | 2014-01 | 2014-02 | 2014-03 | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **CHE3029** | Catherine House Crewe (CWP) | 134 | 94 | 0 | 67 | 92 | 119 | 145 | 124 | 96 | 147 | 125 | 129 | **1,272** |
| **CHE3030** | Barnabas Centre Macclesfield (CWP) | 23 | 23 | 24 | 27 | 15 | 34 | 22 | 32 | 20 | 16 | 22 | 26 | **284** |
| **CHW3027** | Aqua House Chester (CWP) | 150 | 117 | 127 | 137 | 127 | 114 | 130 | 85 | 82 | 96 | 112 | 140 | **1,417** |
| **CHW3028** | Unity House Ellesmere Port (CWP) | 128 | 118 | 151 | 154 | 151 | 146 | 183 | 119 | 98 | 149 | 142 | 162 | **1,701** |
| **CHW3045** | Turning Point Northwich | | | | | | | | | | | | 48 | **48** |
| **HAL3031** | Ashley House Halton (CRI) | 83 | 122 | 104 | 96 | 85 | 66 | 52 | 70 | 75 | 68 | 40 | 36 | **897** |
| **KNW3041** | Knowsley Integrated Recovery Service (CRI) | 0 | 0 | *** | *** | 11 | 19 | 14 | 13 | 8 | 21 | 20 | 33 | **141** |
| **LIV3034** | Gateway SES (Addaction) | 29 | *** | *** | 30 | 38 | 38 | 21 | 17 | 16 | 25 | 14 | 20 | **252** |
| **LIV3035** | Croxteth SES (Addaction) | 24 | 39 | 22 | 35 | 40 | 36 | 67 | 27 | 39 | 40 | 27 | 31 | **427** |
| **LIV3044** | Armistead Pump | 38 | 30 | 12 | 7 | 6 | 5 | 17 | 11 | 12 | <8 | *** | 0 | **144** |
| **SEF3036** | Bootle Oriel Road (CRI) | 33 | 48 | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **82** |
| **SEF3037** | Southport SES (CRI) | 11 | 8 | 11 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **30** |
| **SEF3047** | Lifeline Sefton North | 0 | 0 | 0 | *** | *** | 0 | 13 | 30 | 33 | 36 | 43 | 33 | **189** |
| **SEF3048** | Lifeline Sefton South | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | *** | *** | 11 | *** | **20** |
| **SHL3038** | St Helens CDT (Addaction) | 0 | 41 | 100 | 169 | 26 | 158 | 228 | 221 | 218 | 122 | 142 | 184 | **1,609** |
| **WAR3039** | Pathways Warrington CDT (CRI) | 107 | 112 | 108 | 107 | 83 | 86 | 95 | 75 | 49 | 81 | 68 | 87 | **1,058** |
| **WIR3040** | The Lodge Wirral (CWP) | 317 | 297 | 294 | 279 | 277 | 275 | 259 | 240 | 202 | 305 | 291 | 303 | **3,339** |

## APPENDIX F – NEEDLE & SYRINGE PROGRAMME – PHARMACIES

### GENDER

| Code | Pharmacy | Female | % | Male | % | Total |
|---|---|---|---|---|---|---|
| **CHE0175** | Clear Pharmacy | 20 | 10.4% | 172 | 89.6% | 192 |
| **CHE0616** | Boots The Chemists Ltd | 0 | 0.0% | *** | 100.0% | *** |
| **CHE0632** | Rowlands Pharmacy | 0 | 0.0% | 10 | 100.0% | 10 |
| **CHE0803** | Boots The Chemists Ltd (Sandbach) | *** | 10.0% | <20 | 90.0% | 20 |
| **CHE0805** | Mannings Chemist | *** | 16.7% | <6 | 83.3% | 6 |
| **CHE0816** | Co-op Healthcare Ltd (209 Park Ln, Macclesfield) | *** | 8.3% | <46 | 91.7% | 48 |
| **CHE0822** | Co-op Pharmacy (76 Sunderland St, Macclesfield) | 24 | 19.7% | 98 | 80.3% | 122 |
| **CHE0840** | Assan Pharmacy Ltd T/A Cohens Chemist | 22 | 15.2% | 123 | 84.8% | 145 |
| **CHE0849** | The Weston Pharmacy (R H Swinn Ltd) | 8 | 27.6% | 21 | 72.4% | 29 |
| **CHE0857** | Co-op Healthcare Ltd | *** | 25.0% | <7 | 75.0% | 8 |
| **CHE0874** | Lloyds Pharmacy Ltd | *** | 3.8% | <25 | 96.2% | 26 |
| **CHE0876** | Lloyds Pharmacy Ltd | *** | 16.7% | <22 | 83.3% | 24 |
| **CHE0877** | Lloyds Pharmacy Ltd | 6 | 12.2% | 43 | 87.8% | 49 |
| **CHE0878** | Lloyds Pharmacy Ltd | 15 | 17.9% | 69 | 82.1% | 84 |
| **CHE0883** | AJ Hodgson T/A London Road pharmacy | 0 | 0.0% | 9 | 100.0% | 9 |
| **CHE6610** | Boots UK Ltd (Crewe) | 0 | 0.0% | 9 | 100.0% | 9 |
| **CHE7006** | Salus Pharmacy | 21 | 30.4% | 48 | 69.6% | 69 |
| **CHW0016** | Boots The Chemists Ltd | 35 | 11.8% | 262 | 88.2% | 297 |
| **CHW0254** | J Cubbin & Sons Ltd | 0 | 0.0% | 6 | 100.0% | 6 |
| **CHW0258** | Pondas Chemists Limited | *** | 5.9% | <17 | 94.1% | 17 |
| **CHW0340** | Andrews Pharmacy | *** | 11.1% | <9 | 88.9% | 9 |
| **CHW0377** | Swettenham Chemists | 12 | 13.3% | 78 | 86.7% | 90 |
| **CHW0462** | Co-op Healthcare Ltd | 9 | 22.0% | 32 | 78.0% | 41 |
| **CHW0628** | Lloyds Pharmacy | *** | 9.5% | <20 | 90.5% | 21 |
| **CHW0801** | Lloyds Pharmacy | *** | 15.8% | <18 | 84.2% | 19 |
| **CHW0875** | Lloyds Pharmacy Ltd | 6 | 15.8% | 32 | 84.2% | 38 |
| **CHW0879** | Sainsburys Pharmacy | *** | 22.2% | <8 | 77.8% | 9 |
| **CHW3043** | Superdrug Pharmacy | 25 | 14.4% | 149 | 85.6% | 174 |
| **CHW3051** | Vittoria Healthcare (T/A Owen's Pharmacy) | 5 | 9.3% | 49 | 90.7% | 54 |
| **CHW3052** | Vittoria Healthcare (T/A Westminster Park Pharmacy) | *** | 33.3% | *** | 66.7% | *** |
| **CHW3064** | Co-op Healthcare Ltd | 0 | 0.0% | 8 | 100.0% | 8 |
| **HAL4051** | Castlefields Health Centre | 24 | 41.4% | 34 | 58.6% | 58 |
| **HAL4146** | Murdishaw Pharmacy | 0 | 0.0% | *** | 100.0% | *** |
| **KNW3303** | Boots the Pharmacy, The Halewood centre | 12 | 14.1% | 73 | 85.9% | 85 |
| **KNW3315** | Newtown Pharmacy, 1 Newtown Gardens | 33 | 10.3% | 287 | 89.7% | 320 |
| **KNW3323** | Rowlands Pharmacy (Previously GF O'Briens), | 7 | 7.1% | 92 | 92.9% | 99 |
| **LIV4022** | Lloyds (St Oswalds Street) | 26 | 7.8% | 309 | 92.2% | 335 |

| | | | | | | |
|---|---|---|---|---|---|---|
| **LIV4023** | Riverside HC (Park Street) | 16 | 28.1% | 41 | 71.9% | 57 |
| **LIV4025** | Boots (Boaler Street) | 52 | 14.4% | 308 | 85.6% | 360 |
| **LIV4026** | Boots Long Lane Fazakerley | *** | 2.6% | <39 | 97.4% | 39 |
| **LIV4027** | McCanns (Lark Lane) | 32 | 21.1% | 120 | 78.9% | 152 |
| **LIV4028** | Melwood (Deysbrook Lane) | 8 | 34.8% | 15 | 65.2% | 23 |
| **LIV4030** | Boots (London Road) | 144 | 9.0% | 1460 | 91.0% | 1604 |
| **LIV4033** | Rowlands (Garston) | *** | 1.6% | <121 | 98.4% | 122 |
| **LIV4034** | Lloyds (Townsend Lane) | 73 | 16.4% | 373 | 83.6% | 446 |
| **LIV4036** | Rowalnds (Speke HC) | 6 | 10.9% | 49 | 89.1% | 55 |
| **LIV4037** | Lloyds (Muirhead Ave. East) | 14 | 13.0% | 94 | 87.0% | 108 |
| **LIV4099** | Rowlands (Lodge Lane) | 20 | 10.0% | 181 | 90.0% | 201 |
| **LIV4100** | Normans (Walton Road) | 84 | 15.8% | 446 | 84.2% | 530 |
| **LIV4124** | Lloyds (Prospect Point) | 105 | 9.1% | 1055 | 90.9% | 1160 |
| **LIV4127** | Belle Valle Pharmacy (LN Chemist) | *** | 4.3% | <45 | 95.7% | 46 |
| **LIV4134** | Lloyds (West Derby Road) | 37 | 11.8% | 276 | 88.2% | 313 |
| **SEF4001** | Aintree (Molyneux Way) | *** | 12.5% | <30 | 87.5% | 32 |
| **SEF4003** | Bispham Pharmacy (Bispham Road, Southport) | 7 | 9.5% | 67 | 90.5% | 74 |
| **SEF4004** | Haddens Pharmacy (Litherland Road, Bootle) | 15 | 8.5% | 161 | 91.5% | 176 |
| **SEF4005** | Higgins Pharmacy (77 Crosby Road North) | *** | 5.6% | <70 | 94.4% | 71 |
| **SEF4006** | Lloyds Pharmacy (125 Knowsley Road) | 8 | 9.0% | 81 | 91.0% | 89 |
| **SEF4008** | Lloyds Pharmacy (Crosby Road North, Waterloo) | *** | 14.3% | <14 | 85.7% | 14 |
| **SEF4009** | Merton Pharmarcy (Stanley Road) | 29 | 14.8% | 167 | 85.2% | 196 |
| **SEF4010** | Netherton Pharmacy (Durham Avenue) | *** | 6.9% | <28 | 93.1% | 29 |
| **SEF4011** | Lloyds Pharmacy (290 Knowsley Road) | 14 | 15.2% | 78 | 84.8% | 92 |
| **SEF4012** | Bridge Pharmacy (Bridge Road) | 7 | 6.0% | 109 | 94.0% | 116 |
| **SEF4013** | Boots  Pharmacy (Liverpool Road) | 6 | 15.8% | 32 | 84.2% | 38 |
| **SEF4052** | Boots (Cambridge Rd Southport) | 0 | 0.0% | *** | 100.0% | *** |
| **SEF4053** | Davey's (Randall Drive) | 26 | 20.0% | 104 | 80.0% | 130 |
| **SEF4056** | Superdrug (Eastbank Street Southport) | 73 | 18.6% | 320 | 81.4% | 393 |
| **SEF4057** | Boots (Seaforth) | 8 | 5.4% | 139 | 94.6% | 147 |
| **SEF4058** | Rowlands (Upper Aughton Rd Birkdale) | 0 | 0.0% | 15 | 100.0% | 15 |
| **SEF4139** | Boots (South Road Waterloo) | 0 | 0.0% | 10 | 100.0% | 10 |
| **SEF4140** | Cohens (Marion Square) | 23 | 16.7% | 115 | 83.3% | 138 |
| **SEF4152** | Churchtown Pharmacy | *** | 25.0% | *** | 75.0% | *** |
| **SHL4063** | Rowlands (Newton-Le-Willows) | 22 | 33.8% | 43 | 66.2% | 65 |
| **SHL4119** | Lloyds (11 Junction Lane, Sutton Oak) | 11 | 7.6% | 134 | 92.4% | 145 |
| **SHL4122** | Lloyds (Duke Street, St Helens) | 25 | 19.5% | 103 | 80.5% | 128 |
| **SHL4141** | Rowlands (Thatto Heath) | 15 | 26.8% | 41 | 73.2% | 56 |
| **SHL4143** | Millennium Centre Pharmacy (St Helens) | 136 | 13.1% | 900 | 86.9% | 1036 |
| **WAR4070** | Co-op Pharmacy (Fearnhead Cross) | 7 | 4.7% | 141 | 95.3% | 148 |
| **WAR4071** | Rowlands Pharmacy (Thelwall Lane) | 29 | 13.2% | 191 | 86.8% | 220 |
| **WAR4072** | Co-op Pharmacy (The Baths - previously Bold Street) | 49 | 11.7% | 369 | 88.3% | 418 |

| | | | | | | |
|---|---|---|---|---|---|---|
| **WAR4073** | Lloyds Pharmacy (Earl Street) | 24 | 19.8% | 97 | 80.2% | 121 |
| **WIR4076** | Rowlands (Market Street, Birkenhead) | 30 | 11.2% | 238 | 88.8% | 268 |
| **WIR4077** | Lee's Pharmacy (Wood Church) | *** | 16.7% | <12 | 83.3% | 12 |
| **WIR4079** | Rowlands (Moreton) | *** | 4.1% | <48 | 95.9% | 49 |
| **WIR4080** | Couper & Coulter (296 Old Chester Rd, Rock Ferry) | 10 | 12.5% | 70 | 87.5% | 80 |
| **WIR4081** | Tree Tops Pharmacy (Bromborough) | 0 | 0.0% | *** | 100.0% | *** |
| **WIR4087** | Wilsons (West Kirby) | *** | 25.0% | *** | 75.0% | *** |
| **WIR4088** | Boots (Bedford Road, Rock Ferry) | 15 | 15.0% | 85 | 85.0% | 100 |
| **WIR4090** | Victoria Pharmacy (New Brighton) | 0 | 0.0% | 15 | 100.0% | 15 |
| **WIR4097** | Egremont Pharmacy (Wallasey) | *** | 2.9% | <33 | 97.1% | 34 |
| **WIR4105** | Lloyds Pharmacy (Arrowe Park) | 0 | 0.0% | 21 | 100.0% | 21 |
| **WIR4106** | Boots Pharmacy (Hoylake Road, Birkenhead) | 7 | 36.8% | 12 | 63.2% | 19 |
| **WIR4108** | Wyn Ellis Pharmacy (Poulton Road, Wallasey) | 0 | 0.0% | 35 | 100.0% | 35 |
| **WIR4135** | Claughton Pharmacy (Birkenhead) | 6 | 11.8% | 45 | 88.2% | 51 |
| **WIR4149** | Birkenhead Pharmacy (Laird Street) | 8 | 30.8% | 18 | 69.2% | 26 |
| **WIR4150** | Morsy Lewis Pharmacy (Fender Way, Beechwood) | 0 | 0.0% | 7 | 100.0% | 7 |
| **WIR4153** | MedicX Pharmacy | 7 | 6.4% | 102 | 93.6% | 109 |

## AGE GROUP

| Code | 0 - 17 | 18 - 19 | 20 - 24 | 25 - 29 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 + | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **CHE0175** | 0 | 0 | <6 | 29 | 41 | 55 | 40 | 14 | 7 | 0 | 0 | *** | 192 |
| **CHE0616** | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | *** |
| **CHE0632** | 0 | 0 | 0 | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 | 10 |
| **CHE0803** | 0 | *** | *** | *** | 8 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 20 |
| **CHE0805** | 0 | 0 | 0 | 0 | *** | 0 | *** | 0 | *** | 0 | 0 | 0 | 6 |
| **CHE0816** | 0 | 0 | 0 | 5 | 14 | 11 | 12 | *** | *** | 0 | 0 | 0 | 48 |
| **CHE0822** | 0 | 0 | <10 | 14 | 24 | 24 | 25 | 14 | 12 | 0 | 0 | *** | 122 |
| **CHE0840** | *** | 0 | *** | 20 | 38 | 28 | 32 | 13 | 7 | 0 | 0 | *** | 145 |
| **CHE0849** | 0 | 0 | *** | 5 | 7 | 9 | 5 | *** | *** | 0 | 0 | 0 | 29 |
| **CHE0857** | 0 | 0 | 0 | 0 | *** | *** | *** | *** | *** | 0 | 0 | 0 | 8 |
| **CHE0874** | 0 | 0 | *** | *** | 14 | 5 | *** | *** | 0 | 0 | 0 | 0 | 26 |
| **CHE0876** | 0 | 0 | *** | 5 | *** | 6 | *** | *** | *** | 0 | 0 | 0 | 24 |
| **CHE0877** | 0 | 0 | *** | 9 | 12 | 12 | 8 | *** | *** | 0 | 0 | 0 | 49 |
| **CHE0878** | 0 | 0 | 6 | 15 | 30 | 11 | 14 | 6 | *** | 0 | 0 | 0 | 84 |
| **CHE0883** | 0 | 0 | 0 | *** | *** | 0 | *** | *** | 0 | *** | 0 | 0 | 9 |
| **CHE6610** | 0 | 0 | 0 | *** | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 9 |
| **CHE7006** | 0 | 0 | *** | 14 | 25 | 13 | 6 | 5 | *** | 0 | 0 | 0 | 69 |
| **CHW0016** | *** | *** | 16 | 23 | 41 | 74 | 94 | 25 | 13 | *** | *** | 0 | 297 |
| **CHW0254** | 0 | 0 | 0 | 0 | 0 | *** | *** | *** | 0 | 0 | 0 | 0 | 6 |
| **CHW0258** | 0 | 0 | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 | 17 |

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **CHW0340** | 0 | 0 | 0 | 0 | *** | *** | *** | 0 | *** | 0 | 0 | 0 | 9 |
| **CHW0377** | 0 | 0 | 0 | 5 | 8 | 26 | 15 | 19 | 11 | <8 | *** | 0 | 90 |
| **CHW0462** | 0 | 0 | *** | *** | 13 | 7 | 9 | *** | 0 | 0 | 0 | 0 | 41 |
| **CHW0628** | 0 | 0 | *** | *** | 12 | *** | *** | 0 | *** | 0 | 0 | 0 | 21 |
| **CHW0801** | 0 | 0 | 0 | 0 | *** | *** | 7 | *** | *** | 0 | 0 | 0 | 19 |
| **CHW0875** | 0 | 0 | 0 | 6 | 15 | 6 | 6 | *** | *** | *** | 0 | 0 | 38 |
| **CHW0879** | 0 | 0 | 0 | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 9 |
| **CHW3043** | *** | 0 | *** | 15 | 31 | 46 | 54 | 15 | 5 | *** | *** | 0 | 174 |
| **CHW3051** | 0 | 0 | 0 | 9 | 8 | 10 | 17 | 7 | *** | 0 | *** | 0 | 54 |
| **CHW3052** | 0 | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 0 | 0 | *** |
| **CHW3064** | 0 | 0 | 0 | 0 | 0 | *** | *** | *** | 0 | 0 | 0 | 0 | 8 |
| **HAL4051** | 0 | 0 | *** | 11 | 16 | 15 | 8 | *** | *** | 0 | 0 | 0 | 58 |
| **HAL4146** | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | 0 | *** |
| **KNW3303** | *** | *** | *** | *** | 11 | *** | 8 | 11 | 5 | 13 | 6 | 18 | 85 |
| **KNW3315** | *** | *** | 72 | 86 | 48 | 37 | 49 | 16 | *** | *** | 0 | *** | 320 |
| **KNW3323** | 0 | *** | 16 | 20 | 22 | 9 | 13 | 11 | *** | *** | *** | 0 | 99 |
| **LIV4022** | 0 | 0 | 32 | 68 | 69 | 32 | 37 | 55 | 33 | *** | *** | *** | 335 |
| **LIV4023** | 0 | 0 | *** | *** | 6 | 15 | 13 | 12 | 5 | *** | 0 | 0 | 57 |
| **LIV4025** | *** | 5 | 18 | 48 | 33 | 103 | 87 | 31 | 26 | 6 | *** | *** | 360 |
| **LIV4026** | 0 | 0 | 8 | 5 | 5 | *** | 6 | 8 | *** | *** | 0 | 0 | 39 |
| **LIV4027** | 0 | *** | 14 | 16 | 21 | 12 | 17 | 46 | 18 | *** | *** | 0 | 152 |
| **LIV4028** | 0 | 0 | *** | 7 | 8 | *** | *** | *** | *** | *** | 0 | 0 | 23 |
| **LIV4030** | 5 | 27 | 201 | 323 | 368 | 247 | 230 | 139 | 42 | 8 | 9 | 5 | 1,604 |
| **LIV4033** | 0 | *** | 22 | 45 | 28 | 8 | 6 | 10 | *** | 0 | 0 | 0 | 122 |
| **LIV4034** | 0 | *** | 9 | 42 | 53 | 104 | 116 | 77 | 33 | 8 | *** | *** | 446 |
| **LIV4036** | 0 | *** | 9 | 15 | 11 | 6 | 7 | *** | *** | *** | 0 | 0 | 55 |
| **LIV4037** | 0 | *** | 8 | 20 | 21 | 22 | 16 | 14 | *** | *** | 0 | 0 | 108 |
| **LIV4099** | *** | *** | 26 | 29 | 37 | 33 | 24 | 33 | 7 | 6 | *** | 0 | 201 |
| **LIV4100** | *** | *** | 21 | 37 | 65 | 89 | 142 | 103 | 37 | 21 | *** | 7 | 530 |
| **LIV4124** | 5 | 16 | 135 | 150 | 195 | 197 | 242 | 123 | 88 | *** | <8 | 0 | 1,160 |
| **LIV4127** | 0 | 0 | 10 | 11 | 6 | 12 | *** | *** | *** | *** | 0 | 0 | 46 |
| **LIV4134** | *** | 0 | 14 | 23 | 53 | 69 | 70 | 44 | 25 | 14 | 0 | 0 | 313 |
| **SEF4001** | *** | 0 | *** | 5 | *** | 5 | 7 | 0 | *** | *** | *** | 0 | 32 |
| **SEF4003** | 0 | *** | 12 | 23 | 11 | 14 | 6 | *** | *** | *** | *** | 0 | 74 |
| **SEF4004** | 0 | *** | 9 | 28 | 29 | 28 | 46 | 26 | 5 | *** | *** | 0 | 176 |
| **SEF4005** | *** | 0 | 11 | 27 | 7 | 10 | *** | 6 | *** | *** | *** | 0 | 71 |
| **SEF4006** | 0 | 0 | *** | 7 | 15 | 13 | 14 | 18 | 17 | *** | 0 | 0 | 89 |
| **SEF4008** | *** | 0 | 0 | 7 | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 14 |
| **SEF4009** | *** | *** | 5 | 14 | 30 | 36 | 63 | 33 | 5 | *** | *** | 0 | 196 |
| **SEF4010** | 0 | *** | *** | 9 | 7 | *** | 6 | *** | 0 | *** | 0 | 0 | 29 |
| **SEF4011** | 0 | 0 | *** | 9 | 7 | 16 | 25 | 19 | 11 | *** | *** | 0 | 92 |
| **SEF4012** | 0 | 0 | 5 | 26 | 21 | 20 | 21 | 12 | 9 | *** | *** | 0 | 116 |
| **SEF4013** | 0 | 0 | *** | 0 | *** | 12 | 16 | *** | 0 | *** | *** | 0 | 38 |
| **SEF4052** | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | *** |
| **SEF4053** | 0 | *** | *** | 8 | 13 | 8 | 41 | 43 | 11 | 0 | *** | 0 | 130 |
| **SEF4056** | *** | 5 | 21 | 75 | 93 | 50 | 62 | 55 | 20 | 7 | *** | *** | 393 |
| **SEF4057** | 0 | *** | 15 | 20 | 25 | 28 | 25 | 21 | 9 | *** | *** | 0 | 147 |
| **SEF4058** | 0 | 0 | 0 | *** | *** | 5 | 0 | 0 | 0 | *** | 0 | 0 | 15 |
| **SEF4139** | 0 | *** | 0 | *** | *** | *** | *** | *** | 0 | 0 | *** | 0 | 10 |
| **SEF4140** | *** | 0 | *** | 5 | *** | 17 | 38 | 31 | 32 | *** | 6 | *** | 138 |
| **SEF4152** | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | *** | 0 | 0 | 0 | *** |
| **SHL4063** | *** | 0 | *** | 8 | 28 | 9 | 11 | *** | *** | *** | 0 | 0 | 65 |

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **SHL4119** | *** | *** | 17 | 19 | 24 | 36 | 34 | 7 | *** | *** | *** | *** | 145 |
| **SHL4122** | *** | *** | 13 | 22 | 28 | 23 | 26 | 10 | *** | *** | 0 | 0 | 128 |
| **SHL4141** | 0 | 0 | *** | 7 | 15 | 7 | 16 | 8 | *** | 0 | 0 | 0 | 56 |
| **SHL4143** | 8 | 20 | 120 | 112 | 137 | 190 | 251 | 115 | 37 | 27 | 13 | 6 | 1,036 |
| **WAR4070** | *** | 6 | 17 | 26 | 43 | 11 | 29 | 11 | *** | 0 | 0 | *** | 148 |
| **WAR4071** | *** | *** | 24 | 41 | 33 | 21 | 56 | 32 | 7 | *** | *** | 0 | 220 |
| **WAR4072** | 5 | 15 | 32 | 97 | 47 | 114 | 58 | 31 | 8 | 9 | *** | *** | 418 |
| **WAR4073** | 0 | *** | 15 | 17 | 27 | 29 | 20 | 9 | *** | 0 | *** | 0 | 121 |
| **WIR4076** | *** | *** | 8 | 17 | 35 | 56 | 62 | 58 | 24 | *** | 0 | *** | 268 |
| **WIR4077** | 0 | *** | 0 | *** | *** | 5 | *** | 0 | *** | 0 | *** | 0 | 12 |
| **WIR4079** | 0 | *** | 5 | *** | *** | *** | *** | 12 | 6 | 7 | *** | 0 | 49 |
| **WIR4080** | 0 | *** | 0 | 11 | *** | 15 | 16 | 24 | 7 | *** | 0 | 0 | 80 |
| **WIR4081** | 0 | 0 | *** | 0 | 0 | 0 | 0 | *** | *** | 0 | 0 | 0 | *** |
| **WIR4087** | 0 | 0 | 0 | *** | *** | 0 | *** | *** | 0 | 0 | 0 | 0 | *** |
| **WIR4088** | 0 | 0 | *** | 10 | 5 | 32 | 19 | 26 | 5 | 0 | 0 | 0 | 100 |
| **WIR4090** | 0 | 0 | 0 | 6 | *** | 0 | 0 | *** | 0 | *** | *** | 0 | 15 |
| **WIR4097** | 0 | *** | 0 | *** | 5 | *** | 12 | 7 | *** | *** | 0 | 0 | 34 |
| **WIR4105** | 0 | 0 | 0 | *** | *** | *** | *** | *** | 6 | *** | 0 | 0 | 21 |
| **WIR4106** | 0 | 0 | *** | 5 | *** | *** | 5 | *** | 0 | *** | 0 | 0 | 19 |
| **WIR4108** | 0 | 0 | 0 | *** | 5 | *** | 14 | 9 | *** | *** | 0 | 0 | 35 |
| **WIR4135** | 0 | *** | *** | *** | *** | 11 | 14 | 9 | 7 | 0 | 0 | *** | 51 |
| **WIR4149** | 0 | 0 | *** | *** | *** | 5 | *** | 5 | *** | *** | 0 | 0 | 26 |
| **WIR4150** | 0 | 0 | *** | *** | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 7 |
| **WIR4153** | 0 | *** | 10 | 18 | 18 | 17 | 22 | 12 | 6 | *** | *** | 0 | 109 |

| Code | Name | 2013-04 | 2013-05 | 2013-06 | 2013-07 | 2013-08 | 2013-09 | 2013-10 | 2013-11 | 2013-12 | 2014-01 | 2014-02 | 2014-03 | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **CHE0175** | Clear Pharmacy | 47 | 36 | 37 | 48 | 42 | 31 | 34 | 38 | 25 | 6 | 55 | 50 | **449** |
| **CHE0616** | Boots The Chemists Ltd | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **** |
| **CHE0632** | Rowlands Pharmacy | 41 | 29 | <30 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **100** |
| **CHE0803** | Boots The Chemists Ltd (Sandbach) | 14 | 10 | 13 | 21 | 27 | 15 | 19 | 17 | <10 | 11 | *** | 0 | **160** |
| **CHE0805** | Mannings Chemist | *** | 6 | 6 | 5 | *** | 0 | *** | *** | *** | *** | 0 | 0 | **33** |
| **CHE0816** | Co-op Healthcare Ltd (209 Park Ln, Macclesfield) | 54 | 64 | 57 | 59 | 41 | 35 | 31 | 36 | 33 | 30 | 31 | 35 | **506** |
| **CHE0822** | Co-op Pharmacy (76 Sunderland St, Macclesfield) | 110 | 106 | 94 | 103 | 86 | 89 | 101 | 93 | 87 | 107 | 103 | 102 | **1,181** |
| **CHE0840** | Assan Pharmacy Ltd T/A Cohens Chemist | 103 | 115 | 129 | 137 | 105 | 101 | 63 | 81 | 79 | 68 | 71 | 90 | **1,142** |
| **CHE0849** | The Weston Pharmacy (R H Swinn Ltd) | 6 | 5 | 5 | 7 | 12 | 9 | *** | <7 | 6 | 7 | 8 | 8 | **82** |
| **CHE0857** | Co-op Healthcare Ltd | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **9** |
| **CHE0874** | Lloyds Pharmacy Ltd | 32 | 20 | 19 | 9 | 14 | 19 | 9 | 10 | 11 | <7 | *** | 11 | **162** |
| **CHE0876** | Lloyds Pharmacy Ltd | 0 | *** | 0 | *** | 5 | *** | *** | 11 | *** | *** | *** | 7 | **35** |
| **CHE0877** | Lloyds Pharmacy Ltd | 14 | 18 | 42 | 54 | 55 | 49 | 59 | 65 | 42 | 37 | 34 | 30 | **499** |
| **CHE0878** | Lloyds Pharmacy Ltd | 31 | 12 | 0 | 0 | 14 | 9 | 40 | <9 | 11 | 0 | *** | 12 | **140** |
| **CHE0883** | AJ Hodgson T/A London Road pharmacy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 39 | 69 | **108** |
| **CHE3030** | Barnabas Centre Macclesfield (CWP) | 23 | 23 | 24 | 27 | 15 | 34 | 23 | 32 | 20 | 16 | 22 | 26 | **285** |
| **CHE6610** | Boots UK Ltd (Crewe) | 0 | *** | 0 | *** | *** | 0 | 0 | 0 | 0 | *** | 0 | *** | **11** |
| **CHE7006** | Salus Pharmacy | 14 | 25 | 30 | 36 | 44 | 32 | 34 | 33 | 27 | 21 | 32 | 54 | **382** |
| **CHW0016** | Boots The Chemists Ltd | 115 | 138 | 110 | 94 | 71 | 53 | 65 | 68 | 111 | 166 | 90 | 143 | **1,224** |
| **CHW0254** | J Cubbin & Sons Ltd | 0 | *** | 7 | 7 | 8 | 8 | 8 | *** | 0 | 0 | 0 | 0 | **42** |
| **CHW0258** | Pondas Chemists Limited | *** | *** | 5 | 10 | 11 | 13 | 9 | 21 | 21 | 22 | 17 | 15 | **149** |
| **CHW0340** | Andrews Pharmacy | 7 | *** | 12 | 17 | 0 | 0 | *** | 0 | *** | *** | *** | 0 | **51** |
| **CHW0377** | Swettenham Chemists | 104 | 107 | 82 | 82 | 94 | 71 | 77 | 65 | 75 | 87 | 91 | 109 | **1,044** |
| **CHW0462** | Co-op Healthcare Ltd | 58 | 27 | 18 | 18 | 19 | 9 | 9 | *** | *** | *** | *** | 0 | **166** |
| **CHW0628** | Lloyds Pharmacy | 7 | 8 | 5 | 8 | 5 | 9 | 6 | *** | *** | 6 | 8 | *** | **71** |
| **CHW0801** | Lloyds Pharmacy | 6 | 9 | 7 | 8 | 8 | <7 | *** | 0 | 0 | 0 | 0 | 0 | **44** |
| **CHW0875** | Lloyds Pharmacy Ltd | 25 | 25 | 27 | 36 | 17 | 19 | 20 | 24 | 20 | 23 | 32 | 27 | **295** |
| **CHW0879** | Sainsburys Pharmacy | <12 | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **12** |
| **CHW3043** | Superdrug Pharmacy | 62 | 72 | 50 | 54 | 73 | 70 | 70 | 96 | 109 | 134 | 121 | 153 | **1,064** |
| **CHW3051** | Vittoria Healthcare (T/A Owen's Pharmacy) | 22 | 42 | 59 | 81 | 77 | 80 | 55 | 42 | 50 | 47 | 23 | 0 | **578** |
| **CHW3052** | Vittoria Healthcare (T/A Westminster Park Pharmacy) | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **** |
| **CHW3064** | Co-op Healthcare Ltd | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *** | *** | *** | *** | 0 | **13** |
| **HAL4051** | Castlefields Health Centre | 0 | 5 | *** | *** | 7 | 7 | 14 | 7 | *** | 7 | 0 | 0 | **58** |
| **HAL4146** | Murdishaw Pharmacy | 0 | 0 | 0 | 0 | *** | 0 | 0 | 0 | 0 | 0 | 0 | *** | **** |
| **KNW3303** | Boots the Pharmacy, The Halewood centre | 23 | 29 | 19 | 21 | 32 | 15 | 8 | 14 | *** | 28 | 24 | *** | **217** |
| **KNW3315** | Newtown Pharmacy, 1 Newtown Gardens | 64 | 59 | 70 | 67 | 36 | 65 | 57 | 60 | 40 | 44 | 63 | 50 | **675** |
| **KNW3323** | Rowlands Pharmacy (Previously GF O'Briens), | 24 | 22 | 16 | 19 | 32 | 44 | 36 | 31 | 14 | 26 | 19 | 0 | **283** |
| **LIV4022** | Lloyds (St Oswalds Street) | 24 | 29 | 15 | 12 | 25 | 25 | 76 | 32 | 32 | 27 | 21 | 42 | **360** |
| **LIV4023** | Riverside HC (Park Street) | 11 | 5 | 6 | *** | 5 | *** | *** | 8 | *** | *** | 5 | 9 | **59** |
| **LIV4025** | Boots (Boaler Street) | 42 | 48 | 24 | 32 | 44 | *** | 50 | 32 | <28 | 32 | 27 | 36 | **393** |
| **LIV4026** | Boots Long Lane Fazakerley | *** | 6 | 13 | *** | *** | 5 | 5 | 9 | *** | 10 | 7 | 5 | **70** |
| **LIV4027** | McCanns (Lark Lane) | 13 | 24 | 17 | 19 | 6 | 13 | 21 | 15 | 15 | 15 | 17 | 19 | **194** |

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **LIV4028** | Melwood (Deysbrook Lane) | *** | 6 | *** | *** | *** | *** | *** | *** | *** | *** | *** | *** | **28** |
| **LIV4030** | Boots (London Road) | 168 | 159 | 181 | 180 | 179 | 159 | 153 | 161 | 126 | 193 | 164 | 170 | **1,993** |
| **LIV4033** | Rowlands (Garston) | 12 | 10 | 21 | 16 | 20 | 14 | 21 | 17 | 13 | 16 | 13 | 30 | **203** |
| **LIV4034** | Lloyds (Townsend Lane) | 52 | 49 | 32 | 57 | 29 | 0 | 37 | 45 | 35 | 44 | 52 | 59 | **491** |
| **LIV4036** | Rowlands (Speke HC) | *** | *** | *** | 0 | 0 | 12 | 7 | 12 | 9 | *** | 5 | 7 | **62** |
| **LIV4037** | Lloyds (Muirhead Ave. East) | 10 | 8 | 10 | 14 | 9 | 13 | 14 | 13 | 8 | 11 | 12 | 13 | **135** |
| **LIV4099** | Rowlands (Lodge Lane) | 13 | 30 | 15 | 20 | 14 | 0 | 17 | 29 | 20 | 25 | 20 | 13 | **216** |
| **LIV4100** | Normans (Walton Road) | 44 | 52 | 52 | 62 | 62 | 46 | 43 | 42 | 30 | 42 | 44 | 42 | **561** |
| **LIV4124** | Lloyds (Prospect Point) | 110 | 115 | 109 | 111 | 139 | 130 | 112 | 107 | 84 | 121 | 96 | 97 | **1,331** |
| **LIV4127** | Belle Valle Pharmacy (LN Chemist) | 8 | *** | 12 | 6 | *** | 0 | 7 | 6 | *** | 6 | *** | 0 | **58** |
| **LIV4134** | Lloyds (West Derby Road) | 19 | 23 | 32 | 30 | 32 | 39 | 37 | 36 | 26 | 25 | 22 | 21 | **342** |
| **SEF4001** | Aintree (Molyneux Way) | 9 | 5 | *** | 9 | 5 | 10 | *** | 9 | *** | 6 | 9 | *** | **77** |
| **SEF4003** | Bispham Pharmacy (Bispham Road, Southport) | 11 | 12 | 17 | 10 | 17 | 21 | 19 | 7 | 21 | 26 | 19 | 19 | **199** |
| **SEF4004** | Haddens Pharmacy (Litherland Road, Bootle) | 14 | 36 | 40 | 56 | 41 | 37 | 30 | 40 | 32 | 42 | 37 | 46 | **451** |
| **SEF4005** | Higgins Pharmacy (77 Crosby Road North) | 13 | 14 | 9 | 25 | 11 | *** | 0 | 5 | 0 | 18 | 8 | *** | **108** |
| **SEF4006** | Lloyds Pharmacy (125 Knowsley Road) | 9 | 12 | 15 | 22 | 20 | 0 | 19 | 11 | 23 | 30 | 21 | 26 | **208** |
| **SEF4008** | Lloyds Pharmacy (Crosby Road North, Waterloo) | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 | *** | 0 | *** | **20** |
| **SEF4009** | Merton Pharmarcy (Stanley Road) | 20 | 30 | <16 | 43 | 25 | *** | 29 | 59 | 45 | 73 | 102 | 32 | **473** |
| **SEF4010** | Netherton Pharmacy (Durham Avenue) | 21 | 15 | 13 | 14 | 0 | 8 | 13 | *** | 7 | 17 | 7 | *** | **117** |
| **SEF4011** | Lloyds Pharmacy (290 Knowsley Road) | 12 | 27 | 16 | 33 | <7 | 10 | *** | 9 | 7 | 8 | 18 | 25 | **175** |
| **SEF4012** | Bridge Pharmacy (Bridge Road) | *** | 17 | 8 | 22 | 16 | 0 | 17 | 9 | <8 | 30 | 9 | 16 | **151** |
| **SEF4013** | Boots Pharmacy (Liverpool Road) | *** | *** | 6 | 20 | 22 | 26 | 17 | 11 | 11 | 8 | 5 | 12 | **142** |
| **SEF4052** | Boots (Cambridge Rd Southport) | 0 | 0 | 0 | 0 | 0 | 0 | *** | 0 | *** | 0 | *** | 0 | ******* |
| **SEF4053** | Davey's (Randall Drive) | 13 | 12 | 12 | 16 | 8 | *** | 8 | *** | 5 | 8 | 55 | 97 | **237** |
| **SEF4056** | Superdrug (Eastbank Street Southport) | 40 | 31 | 36 | 38 | 34 | 0 | 0 | 0 | 36 | 213 | 245 | 282 | **955** |
| **SEF4057** | Boots (Seaforth) | 24 | 14 | 13 | 16 | 20 | 0 | 0 | 30 | 15 | *** | *** | 15 | **151** |
| **SEF4058** | Rowlands (Upper Aughton Rd Birkdale) | 0 | *** | *** | 5 | *** | 0 | 0 | *** | 0 | *** | 0 | 0 | **16** |
| **SEF4139** | Boots (South Road Waterloo) | *** | *** | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **10** |
| **SEF4140** | Cohens (Marion Square) | 8 | 11 | 8 | 10 | 14 | 0 | 21 | 10 | 16 | 6 | 59 | 63 | **226** |
| **SEF4152** | Churchtown Pharmacy | 0 | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | ******* |
| **SHL4063** | Rowlands (Newton-Le-Willows) | *** | *** | *** | *** | 5 | 7 | *** | 5 | 10 | 6 | 12 | 11 | **66** |
| **SHL4119** | Lloyds (11 Junction Lane, Sutton Oak) | 14 | 13 | 12 | 9 | 6 | 11 | 11 | 22 | 10 | 12 | 15 | 12 | **147** |
| **SHL4122** | Lloyds (Duke Street, St Helens) | 13 | 7 | 6 | 11 | 6 | 11 | 8 | 15 | 14 | 10 | 11 | 17 | **129** |
| **SHL4141** | Rowlands (Thatto Heath) | 5 | *** | *** | *** | *** | 0 | 6 | 5 | 11 | 7 | 7 | 8 | **57** |
| **SHL4143** | Millennium Centre Pharmacy (St Helens) | 73 | 81 | 77 | 86 | 85 | 72 | 71 | 76 | 103 | 91 | 114 | 115 | **1,044** |
| **WAR4070** | Co-op Pharmacy (Fearnhead Cross) | 8 | 20 | 16 | 10 | 21 | 17 | 13 | 16 | 7 | 11 | 5 | 7 | **151** |
| **WAR4071** | Rowlands Pharmacy (Thelwall Lane) | 17 | 26 | 18 | 23 | 27 | 13 | 18 | 18 | 6 | 13 | 14 | 27 | **220** |
| **WAR4072** | Co-op Pharmacy (The Baths - previously Bold Street) | 30 | 23 | 26 | 31 | 32 | 50 | 35 | 35 | 39 | 32 | 40 | 46 | **419** |
| **WAR4073** | Lloyds Pharmacy (Earl Street) | 6 | 12 | 15 | 6 | 12 | 17 | 10 | 12 | 6 | 10 | *** | 13 | **123** |
| **WIR4076** | Rowlands (Market Street, Birkenhead) | 21 | 21 | 18 | 18 | 21 | 21 | 15 | 16 | 26 | 31 | 33 | 30 | **271** |
| **WIR4077** | Lee's Pharmacy (Wood Church) | *** | *** | *** | *** | *** | 0 | 0 | 0 | 0 | 0 | 0 | *** | **12** |
| **WIR4079** | Rowlands (Moreton) | 5 | *** | *** | 6 | *** | *** | 6 | *** | *** | 6 | *** | *** | **50** |

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **WIR4080** | Couper & Coulter (296 Old Chester Rd, Rock Ferry) | 6 | 10 | 6 | 8 | 10 | 10 | *** | 5 | 7 | 8 | *** | *** | **80** |
| **WIR4081** | Tree Tops Pharmacy (Bromborough) | *** | 0 | 0 | 0 | *** | 0 | *** | 0 | 0 | 0 | 0 | 0 | **** |
| **WIR4087** | Wilsons (West Kirby) | 0 | *** | *** | 0 | 0 | 0 | 0 | 0 | *** | *** | 0 | *** | **6** |
| **WIR4088** | Boots (Bedford Road, Rock Ferry) | 12 | 6 | *** | 6 | 8 | 9 | 10 | 13 | 13 | 8 | 8 | 7 | **104** |
| **WIR4090** | Victoria Pharmacy (New Brighton) | *** | *** | *** | *** | *** | *** | 0 | 0 | 0 | *** | *** | *** | **17** |
| **WIR4097** | Egremont Pharmacy (Wallasey) | 5 | *** | *** | 7 | *** | *** | *** | *** | *** | *** | *** | 5 | **36** |
| **WIR4105** | Lloyds Pharmacy (Arrowe Park) | *** | *** | *** | *** | *** | *** | *** | *** | *** | 0 | 0 | *** | **24** |
| **WIR4106** | Boots Pharmacy (Hoylake Road, Birkenhead) | 0 | 7 | *** | *** | *** | *** | *** | *** | 0 | *** | *** | *** | **21** |
| **WIR4108** | Wyn Ellis Pharmacy (Poulton Road, Wallasey) | *** | *** | *** | 8 | *** | *** | *** | *** | 5 | *** | *** | 5 | **37** |
| **WIR4135** | Claughton Pharmacy (Birkenhead) | *** | *** | 11 | *** | 6 | 6 | 6 | 5 | *** | *** | 5 | 5 | **56** |
| **WIR4149** | Birkenhead Pharmacy (Laird Street) | *** | *** | *** | *** | *** | *** | 0 | *** | *** | *** | *** | 0 | **27** |
| **WIR4150** | Morsy Lewis Pharmacy (Fender Way, Beechwood) | *** | 0 | *** | 0 | 0 | *** | *** | 0 | *** | *** | *** | 0 | **<10** |
| **WIR4153** | MedicX Pharmacy | 8 | 9 | 6 | 5 | 15 | 7 | *** | 9 | 9 | 14 | 14 | 13 | **112** |

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