


APPENDIX 2


Chair
Sunderland Health and Wellbeing Board
Sunderland City Council
Sunderland Civic Centre
Sunderland
SR2 7DN

Tom Terrett
Assistant Head of Street Scene
(Public Protection and Regulatory Services)
Commercial Development Directorate
Sunderland City Council
Jack Crawford House
Commercial Road
Sunderland
SR2 8QR

15th August 2015

Health and Wellbeing Board - Response to Statement of Licensing Policy consultation

The Sunderland Health and Wellbeing Board (HWBB) received a copy of the consultation at its meeting on 24th July. The HWBB has as its overall aim “to achieve the best possible health and wellbeing for the people of Sunderland” and licensing policy plays an important part in achieving this vision. In the last year, the HWBB included alcohol and best start in life amongst its list of immediate priorities and licensing plays a fundamental part of achieving improvement in outcomes in these areas.

The HWBB have signed up to the regional alcohol declaration and included its support to the lobby for minimum unit pricing for alcohol. In this context, the role that licensing has to play is central to achieving these commitments.

For Sunderland to achieve its potential, in spite of reducing public resources, we need to address issues which place a burden on the City. Alcohol related harm impacts upon a range of frontline services across the City including the NHS, Police, Ambulance Service, Licensing teams and Social Services.

It is estimated that the irresponsible use of alcohol costs the city around £92.49 million per year; with the greatest costs being borne by workplaces (£32 million) and local NHS services (£27 million). It should be noted that this does not take account the health and social consequences suffered by individuals, their families, and the wider community.

The HWBB welcomes the inclusion of the health related impact data from but would strongly recommend that this should be strengthened to reflect the true need of and impact on of population.

Sunderland residents experience significant health problems as a result of alcohol and have some of the highest rates in the country for alcohol-related hospital admissions, premature deaths and ill health caused by alcohol. The rate of alcohol-related hospital admissions among the Sunderland population is the third highest among 152 upper tier local authority populations. These admissions comprise of those that are wholly attributable to alcohol such as alcoholic poisoning or alcoholic liver disease (1,700 people admitted in Sunderland in

2012/13), and those where a proportion of admissions can be attributed to alcohol e.g. type 2 diabetes or stroke (a further 2,700 people admitted in 2012/13).

Sunderland is in the top (worst) 10% of the 152 upper tier local authority populations for:

- Alcohol-specific mortality (persons & males)
- Alcohol-related hospital admissions (persons)
- Alcohol-specific hospital admissions in young people aged under 18
- Admissions for alcohol related conditions narrow (persons & males)
- Admissions for alcohol related alcoholic liver disease conditions (persons)
- Admissions for alcohol related mental and behavioural disorders due to the use of alcohol conditions narrow (persons and male)

The HWBB would recommend that a set of measures that be introduced in to Sunderland over the next 12 months, that support our vision for the health of the City and ensure new approaches are investigated to minimise the adverse impact of alcohol on the health of local people.

At present, health is not a separate licensing objective; under the current Licensing law health considerations are only considered to be relevant where they relate to one of the existing four licensing objectives which are:

- the prevention of crime and disorder,
- public safety,
- the prevention of public nuisance and
- the protection of children from harm,

However, many Local Authorities use these objectives to curtail the irresponsible supply of alcohol, thus reducing alcohol harm.

There is clear international evidence from a number of countries, including France, the USA and Canada that decreased availability of alcohol results in decreased alcohol consumption in the population; this is true when availability is restricted either by physical means or by price. Where changes have been robustly measured and assessed, it can be seen that the effects happen at local, regional and national levels and lead to substantive reductions in alcohol related morbidity and mortality.

The burdens of alcohol related harm on public health, society and the economy within Sunderland are amongst the highest in the UK, and fall disproportionately on the most disadvantaged members of our community. It would therefore be remiss of any responsible authority not to try to intervene and make meaningful reductions to the unacceptable and unfair toll of ill health and premature mortality related to the inappropriate use of alcohol.

Potential Policy Options

Minimum unit price (MUP) remains the best evidenced and most cost-effective regulatory intervention for alcohol harm reduction. The HWBB has strongly supported MUP and was disappointed by the reluctance of the previous UK coalition government to follow through on its stated commitment around MUP. As a consequence, local authority licensing panels and their constituent 'responsible authorities' (RAs) are likely to be the major influence on the availability of alcohol in both on-trade and off-trade sectors in a local area.

The HWBB is aware that the licence application process is essentially a "permissive system" whereby unless successful objections are tabled by one of more RAs, all applications are effectively approved, regardless of how seemingly inappropriate they might be seen to be. The difficulties of making successful challenges to new licence applications combined with the already high concentration of outlets in many areas, have prompted local councils to explore a number of innovative new policies which either place local area based 'enhanced

restrictions' on new licence applications or seek to modify existing licences through voluntary arrangements or mediated through expedited licence reviews, where concerns have arisen. The two policies which have received most attention are 'cumulative impact policies' and late night levys.

As many LAs throughout England are beginning to demonstrate, these policy approaches have begun to address the excessive burden of alcohol harms and need not be especially onerous in terms of additional workload for licensing teams. They can even also have positive effects on the profitability of night-time economies (as higher value activity and establishments are encouraged). As an LA with one of the highest burdens attributable to alcohol, it is increasingly indefensible for Sunderland not to actively explore these types of policy options with a view to deciding on what would be most suitable for local introduction.

The HWBB would therefore encourage the licensing authority to explore options for more proactive approaches to licensing within its policy including late night levys and cumulative impact policies.

Conclusion & Recommendation

The HWBB welcome the inclusion of a vision statement and the description of the impact of alcohol on health in Sunderland and would further recommend:

- 1) The vision statement reflects the views of all three Leadership Boards for the City – the Health and Wellbeing Board, the Economic and Leadership Board and the Education and Skills Board - and also the Safer Sunderland.
- 2) A Public Health statement embedded into the document which should be strengthened to reflect the true need of and impact on of population.
- 3) A set of measures that will be introduced in to Sunderland over the next 12 months, that support our vision for the health of the City and ensure new approaches are investigated to minimise the adverse impact of alcohol on the health of local people.
- 4) A commitment from the licensing authority to explore options for more proactive approaches to licensing within its policy including late night levys and cumulative impact policies.



Chair of Sunderland Health and Wellbeing Board

Acting Director of Public Health
Sunderland City Council
Sunderland Civic Centre
Sunderland
SR2 7DN

Assistant Head of Street Scene
(Public Protection and Regulatory Services)
Commercial Development Directorate
Sunderland City Council
Jack Crawford House
Commercial Road
Sunderland
SR2 8QR

Submitted via email to licensing@sunderland.gov.uk

14th August 2015

Director of Public Health - Response to Statement of Licensing Policy consultation

I welcome the inclusion of the vision statement set out in sections 1.7 and 1.8 of the document, but would strongly recommend that this should reflect the views of all three Leadership Boards for the City – the Health and Wellbeing Board, the Economic and Leadership Board and the Education and Skills Board - and also the Safer Sunderland. This would be in keeping with the Local authority's statutory responsibility for public health across the City.

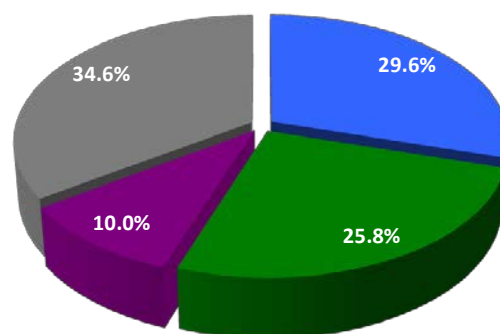
In April 2013, Sunderland City Council assumed its duties in relation to public health, and is therefore responsible for delivering improvements against all of the indicators within the Public Health Outcomes Framework; these include measure in four domains as follows: the wider determinants of health, healthcare public health and preventing premature mortality, health improvement, and health protection. The Sunderland Statement of Licensing Policy should support improvements against the indicators within the Public Health Outcomes Framework, but in particular should seek to drive improvement against indicators of alcohol harm-related hospital admissions and mortality from liver disease.

For Sunderland to achieve its potential, in spite of reducing public resources, we need to address issues which place a burden on the city. Alcohol related harm impacts upon a range of frontline services across the City including the NHS, Police, Ambulance Service, Licensing teams and Social Services.

It is estimated that the irresponsible use of alcohol costs the city around £92.49 million per year; with the greatest costs being borne by workplaces (£32 million) and local NHS services (£27 million). It should be noted that this does not take account the health and social consequences suffered by individuals, their families, and the wider community.

Figure 1 Sunderland Cost Breakdown for 2013/ 14

NHS:	£27.34m
CRIME & LICENSING:	£24.21m
SOCIAL SERVICES:	£9.25m
WORKPLACE:	£32.04m
OVERALL COST⁺:	£92.49m



⁺Total cost excludes crime related healthcare costs. The crime cost used for the adjacent pie chart is £23.86m

Recorded crime has been rising slowly for the last couple of years and the proportion of total crime that is related to alcohol continues to rise. As the consumption of alcohol in the home increases, the impact of alcohol becomes less visible and more hidden. For example, in Sunderland in 2014/ 15 there were 6,389 domestic abuse incidents; 1,457 of these incidents were recorded as domestic violence crimes and of these, 50% were alcohol related.

I welcome the inclusion of the health related impact data from 1.9 to 1.13 but would strongly recommend that this should be strengthened to reflect the true need of and impact on of population. Sunderland residents experience significant health problems as a result of alcohol and have some of the highest rates in the country for alcohol-related hospital admissions, premature deaths and ill health caused by alcohol. The rate of alcohol-related hospital admissions among the Sunderland population is the third highest among 152 upper tier local authority populations. These admissions comprise of those that are wholly attributable to alcohol such as alcoholic poisoning or alcoholic liver disease (1,700 people admitted in Sunderland in 2012/13), and those where a proportion of admissions can be attributed to alcohol e.g. type 2 diabetes or stroke (a further 2,700 people admitted in 2012/13).

Sunderland is in the top (worst) 10% of the 152 upper tier local authority populations for:

- Alcohol-specific mortality (persons & males)
- Alcohol-related hospital admissions (persons)
- Alcohol-specific hospital admissions in young people aged under 18
- Admissions for alcohol related conditions narrow (persons & males)
- Admissions for alcohol related alcoholic liver disease conditions (persons)
- Admissions for alcohol related mental and behavioural disorders due to the use of alcohol conditions narrow (persons and male)

The map in Appendix 1 shows the rate of alcohol related hospital admissions and alcohol specific admissions by GP Practice overlaid on directly age-standardised alcohol related hospital admissions rate by 100,000. This clearly illustrates that Sunderland has many areas where admission rates are significantly higher or higher than the Sunderland average.

At present, health is not a separate licensing objective; under the current Licensing law health considerations are only considered to be relevant where they relate to one of the existing four licensing objectives which are:

- the prevention of crime and disorder,
- public safety,
- the prevention of public nuisance and
- the protection of children from harm,

However, many Local Authorities use these objectives to curtail the irresponsible supply of alcohol, thus reducing alcohol harm.

I would recommend the inclusion, over the next 12 months, of a set of measures that support our vision for the City and ensure new developments seek to minimise the adverse impact of alcohol on the health of local people and the resulting demand for health services.

There is clear international evidence from a number of countries, including France, the USA and Canada that decreased availability of alcohol results in decreased alcohol consumption in the population; this is true when availability is restricted either by physical means or by price. Where changes have been robustly measured and assessed, it can be seen that the effects happen at local, regional and national levels and lead to substantive reductions in alcohol related morbidity and mortality.

The burdens of alcohol related harm on public health, society and the economy within Sunderland are amongst the highest in the UK, and fall disproportionately on the most disadvantaged members of our community. It would therefore be remiss of any responsible authority not to try to intervene and make meaningful reductions to the unacceptable and unfair toll of ill health and premature mortality related to the inappropriate use of alcohol.

Potential Policy Options

Minimum unit price (MUP) remains the best evidenced and most cost-effective regulatory intervention for alcohol harm reduction. Sunderland City Council has strongly supported MUP and was disappointed by the reluctance of the previous UK coalition government to follow through on its stated commitment around MUP. As a consequence, local authority licensing panels and their constituent 'responsible authorities'¹ (RAs) are likely to be the major influence on the availability of alcohol in both on-trade and off-trade sectors in a local area.

Regarding availability, it is important to note that the licence application process is essentially a "permissive system" whereby unless successful objections² are tabled by one of more RAs, all applications are effectively approved, regardless of how seemingly inappropriate they might be seen to be. As highlighted in the NE Alcohol Behaviour & Perceptions Survey [...], there is negligible public perceived need for more licensed premises. The difficulties of making successful challenges to new licence applications combined with the already high concentration of outlets in many areas, have prompted local councils to explore a number of innovative new policies which either place local area based 'enhanced restrictions' on new licence applications or seek to modify existing licences through voluntary arrangements or mediated through expedited licence reviews, where concerns have arisen. The two policies which have received most attention are 'cumulative impact policies' and late light levys. While the relative novelty of these measures means that evidence of their impact remains at an early stage, there have been promising indications that they are able to make a meaningful impact without detracting from the viability (in some cases enhancing it) of the night-time economy. While the following sections concentrate on these two policies it is important to note, perhaps unsurprisingly that combinations of policy measures are more effective than isolated initiatives.

¹ Current 'responsible authorities who are statutory consultees for all new licence applications are: Police, Fire service, Health and safety, Environmental health, Child protection services, Trading standards, Planning, The licensing authority Regional health authority

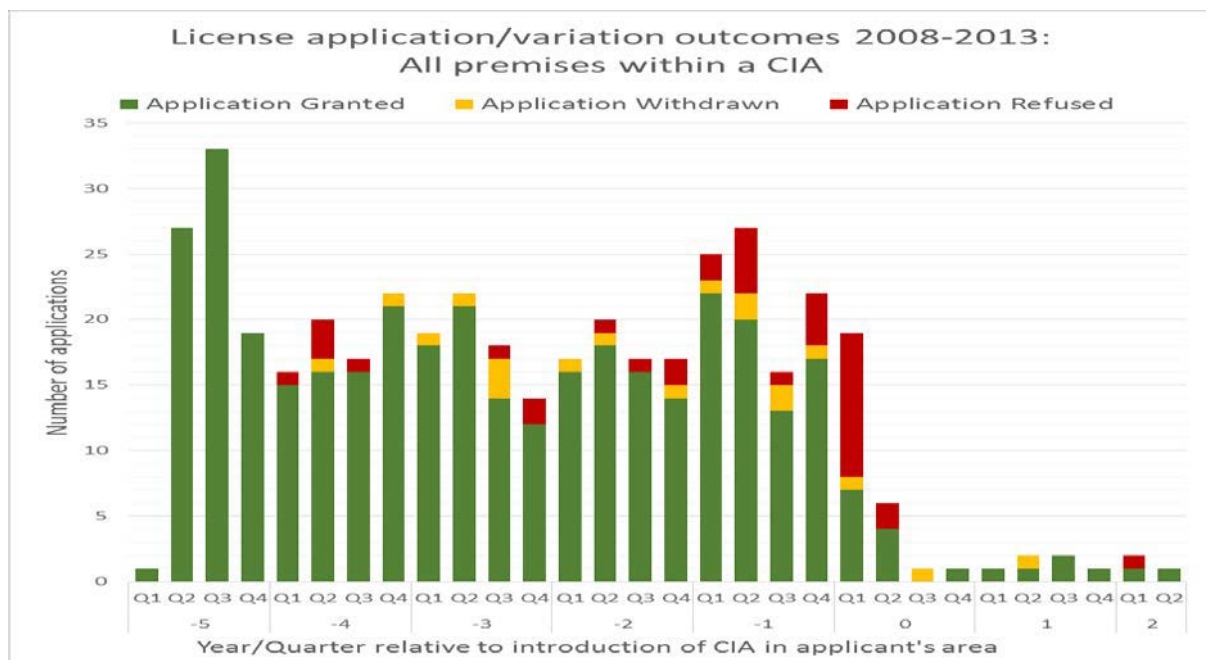
Cumulative Impact Policies:

While cumulative impact policies (or CIPs) are not mentioned specifically in the Licensing Act, the powers to introduce them are set out in statutory guidance issued under section 182 of the 2003 Act. They offer licensing authorities a tool to restrict the number of licensed premises in a specifically defined area if they evidence that a concentration of premises is having a cumulative impact on the promotion of one or more of the current licensing objectives, such as preventing public nuisance or crime and disorder. As such they effectively place the onus of proof on the applicant, who then needs to demonstrate, to the satisfaction of a review panel, that their specific proposal will not compromise licensing objectives. In practice, this has had the effect of discouraging applications where the likelihood of success is low (e.g. city centre areas with an already high concentration of outlets and established 'trouble hot-spots'). It has also prompted applicants to give serious consideration as to how best to 'upgrade' the quality of their application and discourages in particular the pubs known as 'vertical drinking establishments', in favour of more upmarket restaurants and wine bars. A major city in the North East of England has attributed much of its success in 're-branding' its city centre to the operation of a CIP³.

Of course, the successful introduction and operation of a CIP still requires the pro-active scrutiny of licence applications and the rationale for its introduction needs to be based on the risks of licensing objectives being compromised. In the London borough of Islington, where there has been a long established CIP, the initial increased workload involved in the scrutiny of applications, started to fall away quite sharply (see Figure 2) as the less responsible applications were discouraged and the message got through that in order for an application to succeed, there needed to be substantive consideration of how best to ensure that it was unlikely to compromise licensing objectives. Some of the means through which applicants have sought to do this have included:

- i. Voluntarily undertaking to set a minimum unit price threshold
- ii. Enrolling all staff on quality server training programmes.

Figure 2: Licence applications in period preceding the introduction of a cumulative impact policy: increases in refusals and withdrawn applications with little chance of success.



Sample Outputs: Use of CIZs in Islington, London (Courtesy of Martineau F & Lock K *et al* LSHTM, 2013)

³ Base on in depth interviews with police and licensing personnel about Newcastle's CIP which has been in place since 2011/12.

Late Night Levys:

A late night levy enables licensing authorities to raise a surplus fee from establishments which are licensed to sell alcohol late at night in the authority's area (e.g. 12am to 6am), as a means of raising a contribution towards the costs of policing and environmental services. The precise level at which it is set relates to the size and profitability of the premises and can be anything from £300.00 to £3000.00+. As a more recent development even than CIP, the policy has yet to be rigorously evaluated although they current pilots are the subject of a national research programme. Early feedback from pilot areas has been encouraging however for three reasons: firstly, the initial opposition from stakeholders quickly subsided, especially in areas with high levels of night-time disorder (where increased police presence was very welcome). Secondly, the facility to offer reductions in the level at which the levy has set has been an additional vehicle for encouraging voluntary improvements in practice (e.g. undertaking not to offer multiple-purchase discounts). Thirdly, late night levys can also complement other polices well which seek to achieve the same ends.

The case for pro-active approaches

CIPs and late night levies are only two examples of policy measures which can be employed as part of a more pro-active approach that councils can take towards improving the commercial alcohol environment and reducing associated harms. The current absence of a specific fifth licensing objective around 'the protection of public health' need not be a significant obstacle to introducing improvements which will have the effect of reducing the more irresponsible patterns of hazardous and harmful drinking. Another output of the current national research programme, has been to show that many councils which have traditionally had high rates of alcohol related hospital admissions, have been the most pro-active in their policy approaches and this has already began to impact on their morbidity data (unpublished research in submission, based on a national home office dataset combined with LAPE data).

As a many LAs throughout England are beginning to demonstrate, there are several viable policy approaches to begin to address the excessive burden of alcohol harms, which need not be especially onerous in terms of additional workload for licensing teams and can even have positive effects on the profitability of night-time economies. As an LA with one of the highest burdens attributable to alcohol, it is increasing indefensible for Sunderland not to actively explore the options which would be most suitable for introduction here.

North East Alcohol Behaviour and Perceptions Survey for Sunderland

In 2013 Balance (North East Office for Alcohol) conducted the North East Alcohol Behaviour and Perceptions Survey for Sunderland. The Survey provides a detailed snapshot of Sunderland residents' behaviour and attitudes in regard to alcohol. The survey included a section on the availability of alcohol, to gather information on how North East residents perceive issues surrounding the acceptability and ease of buying alcohol.

Main findings from the Sunderland residents were that:

- Only 1% of Sunderland residents said that *there are not enough places that sell alcohol*
- 48% said *opening hours should be shortened*, a higher proportion when compared to the North East as a whole at 37%
- 53% felt that the hours that retail outlets are allowed to sell alcohol they are *fine as they are* but 42% of would like to see *restrictions* compared to the North East as a whole at 32%
- When asked to what extent they agreed or disagreed that *the more freely alcohol is available the more people will drink*, 74% said they *agreed*

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol in various different settings across Sunderland:

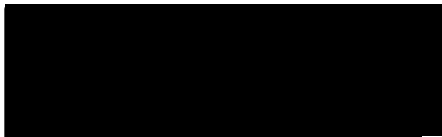
- over two in three residents (68%) feel that it is *unacceptable* to be able to buy alcohol in the foyer of a multiplex cinema
- two in five (39%) of residents feel it is *unacceptable* to be able to buy alcohol at a bed and breakfast
- 88% of residents feel that it is *unacceptable* to be able to buy alcohol at a hairdressing salon
- 95% of residents feel it is *unacceptable* to be able to buy alcohol at a soft play area.
- 85% of residents feel it is *unacceptable* to be able to buy alcohol at a motorway service station
- four in five (79%) feel that it is *unacceptable* to be able to buy alcohol at a garage forecourt

The information in the independent survey is also broken down across Sunderland using Community Forum Area (CFA) to provide data at a local level. Areas highlighted in red are significantly higher than the North East. Further analysis can be found in appendix 2.

Conclusion & Recommendations

I welcome the inclusion of a vision statement and the description of the impact of alcohol on health in Sunderland and would further recommend:

- 1) A vision statement that reflects the views of all three Leadership Boards for the City – the Health and Wellbeing Board, the Economic and Leadership Board and the Education and Skills Board - and also the Safer Sunderland. This would be in keeping with the Local authority's statutory responsibility for public health across the City.
- 2) A Public Health statement embedded into the document, and would strongly recommend that this Public Health statement should be strengthened to reflect the true need of and impact on of population.
- 3) A set of measures that will be introduced in to Sunderland over the next 12 months, that support our vision for the City and ensures new developments seek to minimise the adverse impact of alcohol on the health of local people and the resulting demand for health services.

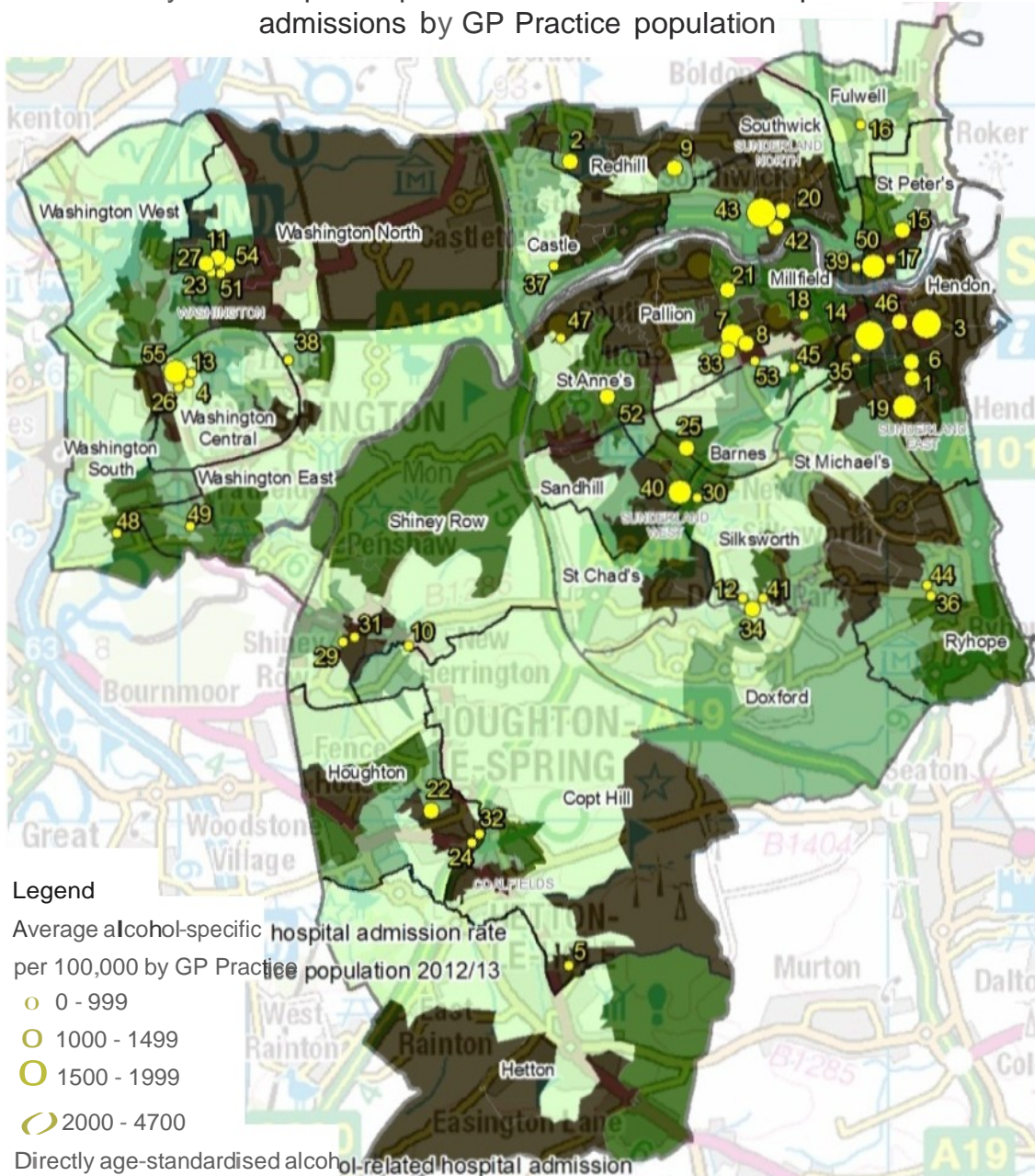



Acting Director of Public Health


Acting Public Health Consultant

Appendix 1 -Sunderland rate of alcohol-related hospital admissions

Sunderland -rate of alcohol-related hospital admissions by lower super output area and rate of alcohol-specific admissions by GP Practice population



Legend

Average alcohol-specific hospital admission rate per 100,000 by GP Practice population 2012/13

- 0 - 999
- 1000 - 1499
- 1500 - 1999
- 2000 - 4700

Directly age-standardised alcohol-related hospital admission rate per 100,000 by lower super output area 2010/11 to 2012/13

- Significantly higher than Sunderland average
- Higher than Sunderland average
- Lower than Sunderland average
- Significantly lower than Sunderland average



Data source: Bill Ancill: Alcohol in the North East, based on hospital episode statistics. Map produced by Sunderland City Council

Appendix 2 - North East Alcohol Behaviour and Perceptions Survey for Sunderland

Methodology

A total of 2,714 face to face interviews were achieved across the North East region, 1058 of which were with Sunderland residents. A minimum of 200 interviews were conducted in each Community Forum Area (CFA) within Sunderland, to provide data at a local level. **Sunderland and CFA** figures highlighted in **red** are significantly higher than the North East total whilst those highlighted in **blue** are significantly lower.

Q1) Views on the number of places where alcohol can be bought

Respondents were asked for their opinions on the availability of alcohol in their area.

Sunderland Overall

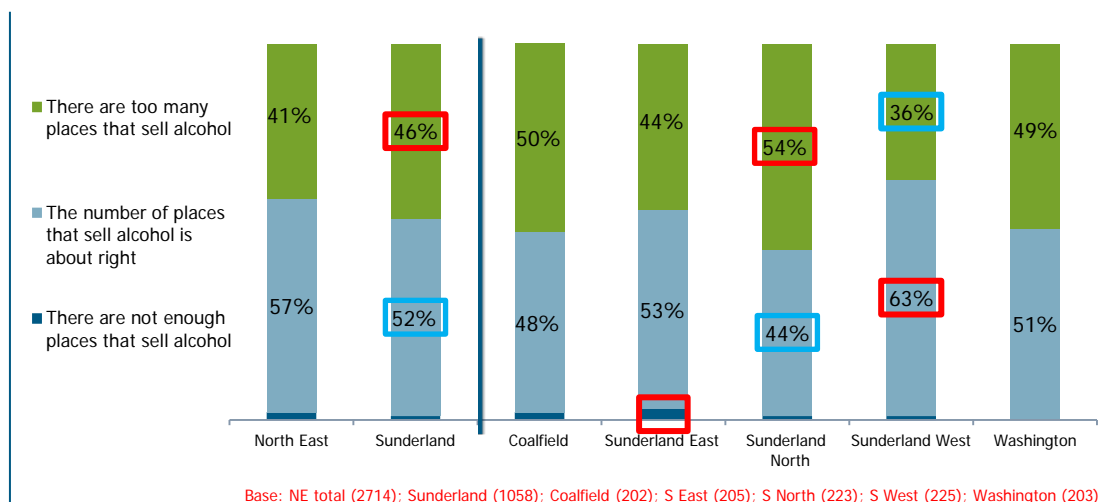
When asked about the availability of alcohol in their area, approximately half (52%) of all **Sunderland** residents said they felt that *the number of places that sell alcohol is about right*. A slightly lower proportion (46%) said *there are too many places that sell alcohol* and only 1% said that *there are not enough places that sell alcohol*.

The findings for the North East overall indicate that the view that *there are too many places that sell alcohol* is more prevalent within **Sunderland**.

By Community Forum Area - Data at a CFA level indicates that:

- **Sunderland North** residents, in particular, feel that there are *too many places that sell alcohol*
- On the other hand, this perception is much lower in **Sunderland West**

Figure 1: Which of these statements best describes your views on the availability of alcohol in your area?



Q2 Opening hours of pubs and clubs

Respondents were asked for their opinions on pub and club opening hours.

Sunderland Overall

When asked about opening hours of pubs and clubs, just under half (48%) of all **Sunderland** residents said *opening hours should be shortened*, a higher proportion when compared to the North East as a whole (37%).

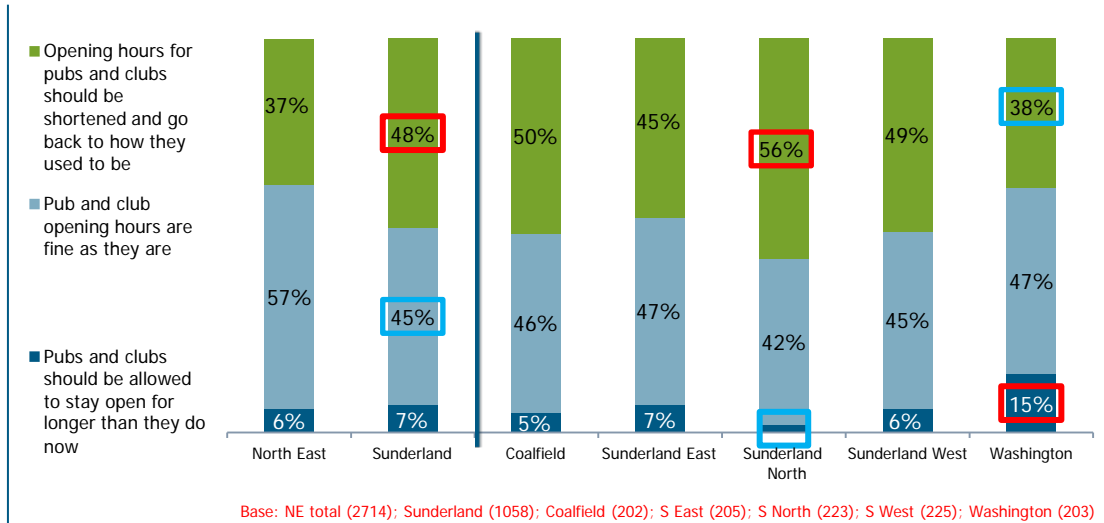
By Community Forum Area

Data at a CFA level indicates that:

- **Sunderland North** residents, in particular, feel that *opening hours should be shortened*

- **Washington**, on the other hand, contains a higher proportion of residents who think *pubs and clubs should be able to stay open longer than they do now*

Figure 2: Which of these statements best describes your views on pub and club opening hours?



Q3 Retail outlets selling alcohol

Respondents were asked for their opinions on the hours that retail outlets are allowed to sell alcohol.

Sunderland Overall

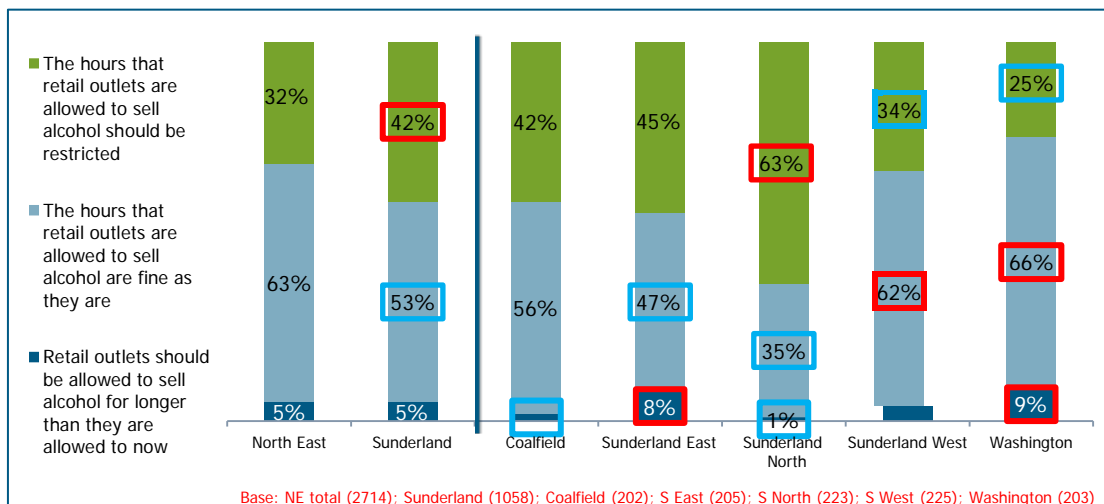
When asked about the hours that retail outlets are allowed to sell alcohol, the majority of **Sunderland** residents (53%) felt that they are *fine as they are*. A sizeable proportion of residents (42%) would, however, like to see *restrictions* and this perception is more prevalent within **Sunderland** than it is in the North East as a whole (32% of NE residents would like to see *restrictions*).

By Community Forum Area

Data at a CFA level indicates that there is some variation in attitudes in regard to the hours that retail outlets are allowed to sell alcohol:

- Support for *restrictions* is most prevalent within **Sunderland North**
- The view that things *are fine as they are* predominates in **Coalfield, Sunderland West and Washington**

Figure 3: Which of these statements best describes your views on the hours that retail outlets are allowed to sell alcohol?



Q4 Availability of alcohol and drinking habits

Sunderland Overall

When asked to what extent they agreed or disagreed that *the more freely alcohol is available the more people will drink*, the majority of **Sunderland** residents surveyed (74%) said they *agreed*; approximately one in five (22%) *disagreed*.

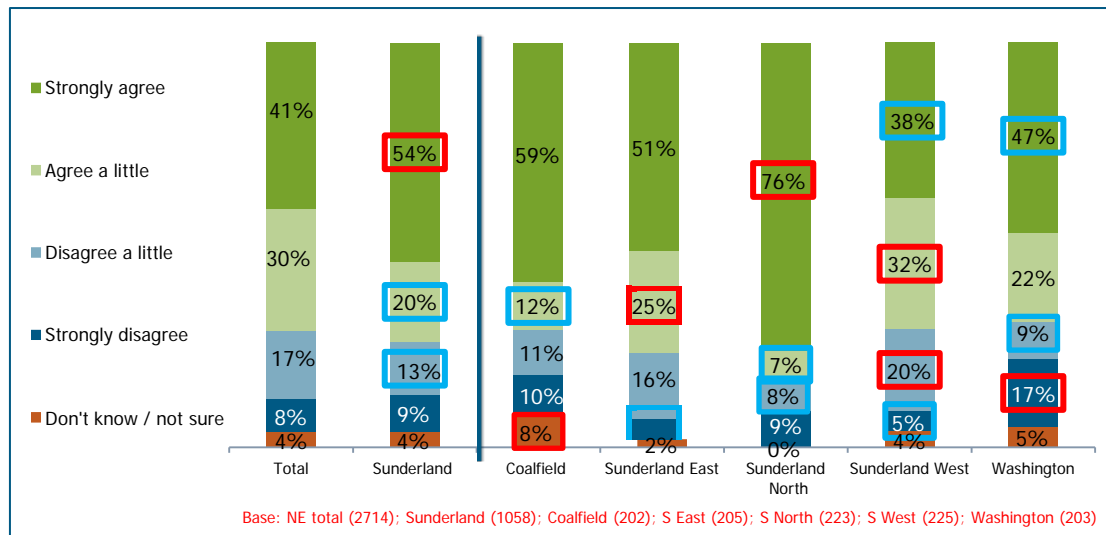
In comparison to the North East picture, *strength* of agreement is greater within **Sunderland**, although the level of *overall agreement* is consistent with that seen in the wider region.

By Community Forum Area

Data at a CFA level indicates that:

- **Sunderland North** residents feel most strongly that there is a link between the availability of alcohol and consumption patterns
- Whilst *overall levels of agreement* in the other four CFAs are broadly consistent with the **Sunderland** picture, *strength of agreement* is lower in **Sunderland West** and **Washington**

Figure 4: To what extent do you agree or disagree with the following statement? The more freely alcohol is available to buy, the more alcohol people will drink



Q5 Acceptability of buying alcohol... In the foyer of a multiplex cinema

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol in the foyer of a multiplex cinema.

Sunderland Overall

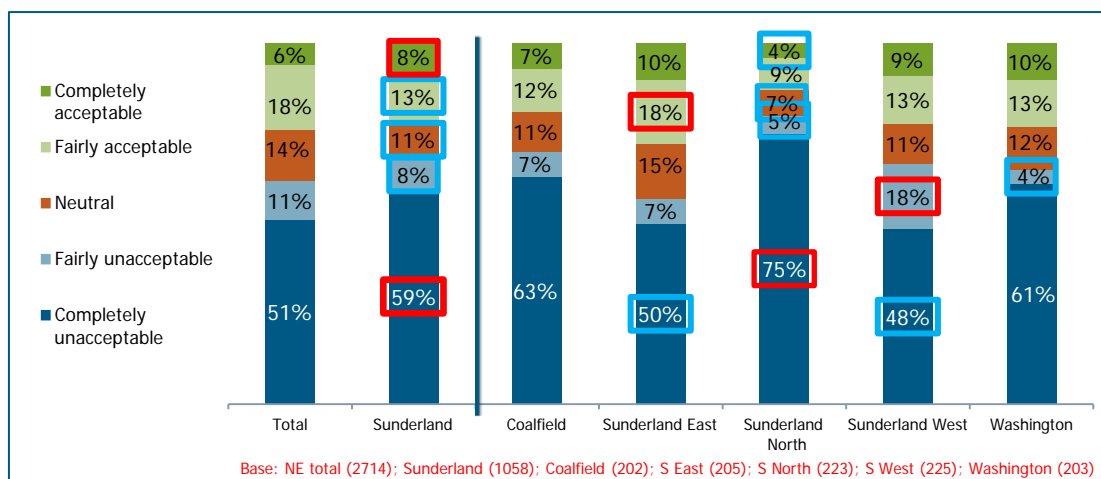
The 2013 findings show that over two in three **Sunderland** residents (68%) feel that it is *unacceptable* to be able to buy alcohol in the foyer of a multiplex cinema - higher than the proportion in the North East as a whole (62% *unacceptable*).

By Community Forum Area

Data at a CFA level indicates that:

- The overall perceptions of residents in **Coalfield**, **Sunderland West** and **Washington** are generally in line with the overall picture in **Sunderland** (the proportions stating *acceptable* and *unacceptable* are comparable)
- **Sunderland East** residents are more likely than other **Sunderland** residents to regard the availability of alcohol at a multiplex cinema as *acceptable*
- Whilst **Sunderland North** residents are more likely to regard it as *unacceptable*

Figure 5: In your view, how acceptable or unacceptable is it to be able to buy alcohol in the foyer of a multiplex cinema?



Q6 Acceptability of buying alcohol... At a bed and breakfast

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol at a bed and breakfast.

Sunderland Overall

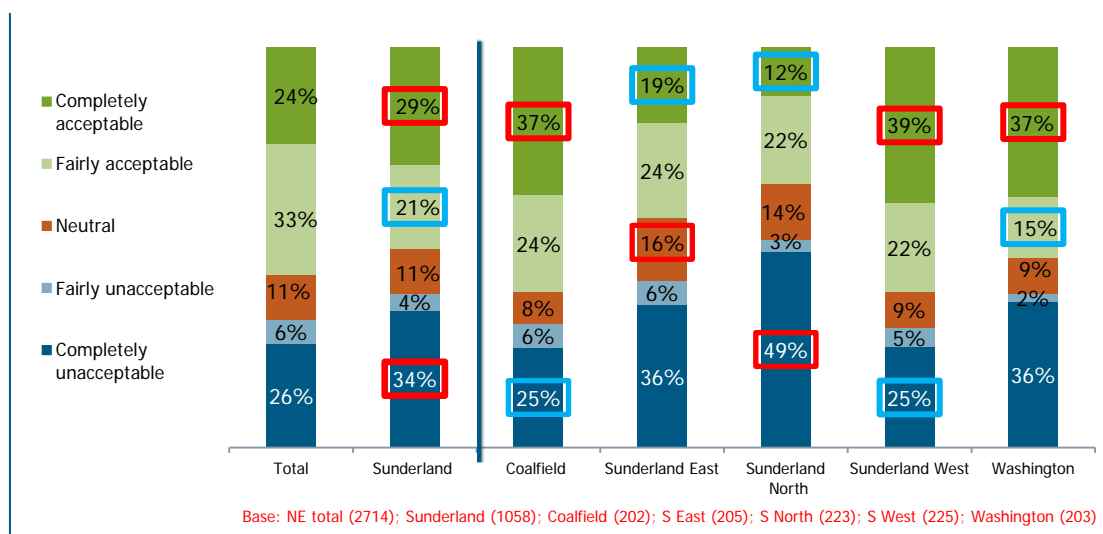
The 2013 findings show that half (50%) of **Sunderland** residents feel that it is *acceptable* to be able to buy alcohol at a bed and breakfast; approximately two in five (39%) feel it is *unacceptable*. In comparison to the North East as a whole, **Sunderland** residents are less likely to regard the availability of alcohol in a bed and breakfast as *acceptable* (NE: 57% *acceptable*).

By Community Forum Area

Data at a CFA level indicates that perceptions in regard to how acceptable it is to be able to buy alcohol at a bed and breakfast vary across the five areas:

- **Coalfield** and **Sunderland West** residents are more likely to regard the availability of alcohol at a bed and breakfast as *acceptable*
- Support for this is, however, lower in **Sunderland East** and **Sunderland North**
- Overall perceptions in **Washington** are generally in line with the overall **Sunderland** picture (the proportions stating *acceptable* and *unacceptable* are comparable), although *strength of opinion* is greater amongst supporters

Figure 6: In your view, how acceptable or unacceptable is it to be able to buy alcohol at a bed and breakfast?



Q7 Acceptability of buying alcohol... At a hairdressing salon

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol at a hairdressing salon.

Sunderland Overall

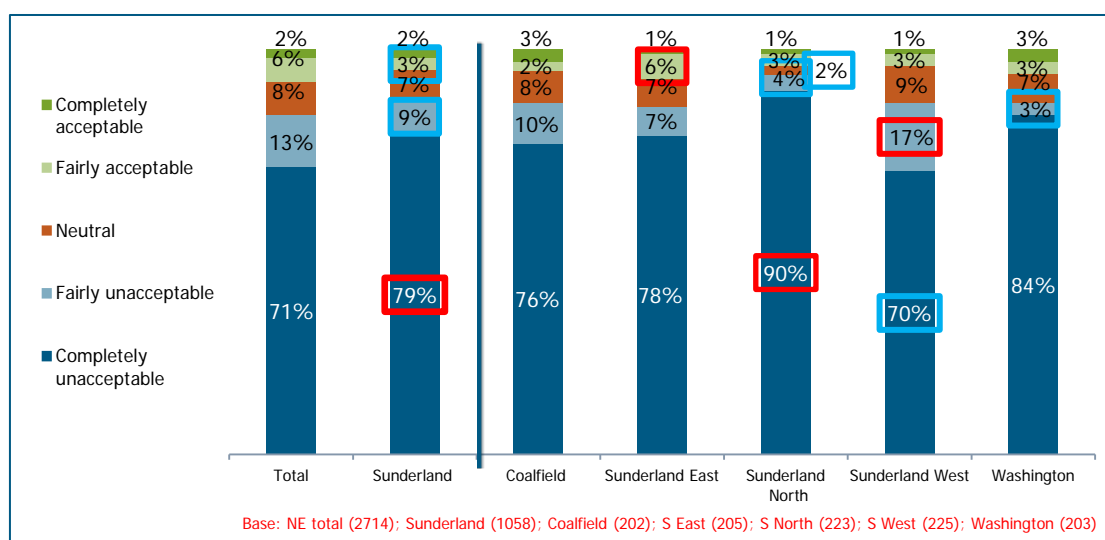
The 2013 findings show that 88% of **Sunderland** residents feel that it is *unacceptable* to be able to buy alcohol at a hairdressing salon. This is higher than the North East average of 84%.

By Community Forum Area

Data at a CFA level indicates that:

- Residents in **Sunderland North** feel most strongly that it is *unacceptable* to be able to buy alcohol at a hairdressing salon
- Whilst there is some variation in *strength of opinion*, the overall views of residents in the four other CFAs are broadly in line with the overall **Sunderland** picture

Figure 7: In your view, how acceptable or unacceptable is it to be able to buy alcohol at a hairdressing salon



Q8 Acceptability of buying alcohol... At a soft play area

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol at a soft play area.

Sunderland Overall

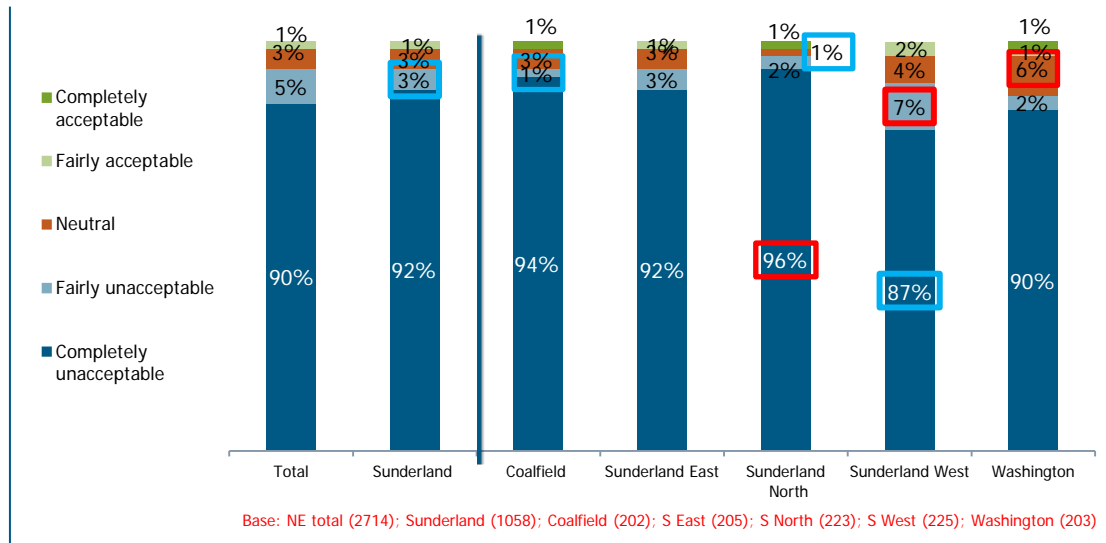
The 2013 data indicates that the vast majority of **Sunderland** residents (95%) feel it is *unacceptable* to be able to buy alcohol at a soft play area. This is in keeping with the views of residents in the rest of the region (NE: 95% *unacceptable*). Views in this regard are broadly consistent across the different segments of the **Sunderland** population.

By Community Forum Area

Data at a CFA level indicates that:

- The majority view in all five CFAs is that it is *unacceptable* to be able to buy alcohol at a soft play area
- **Sunderland North** residents feel most strongly about this issue

Figure 8: In your view, how acceptable or unacceptable is it to be able to buy alcohol at a soft play?



Q9 Acceptability of buying alcohol... At a motorway service station

Respondents were asked, in their view, how acceptable or unacceptable it is to be able to buy alcohol at a motorway service station.

Sunderland Overall

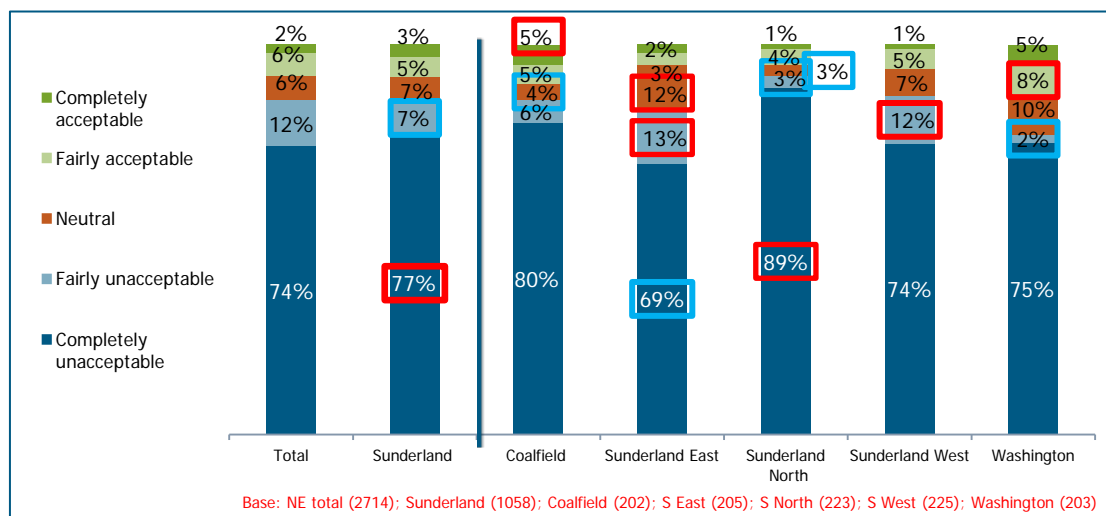
Within **Sunderland** as a whole, 85% of residents feel it is *unacceptable* to be able to buy alcohol at a motorway service station and fewer than one in ten (8%) feel it is *acceptable*. This is in line with perceptions within the North East as a whole (86% *unacceptable*; 8% *acceptable*). Whilst the majority view across the **Sunderland** population is that the availability of alcohol at a motorway service station is *unacceptable*.

By Community Forum Area

Data at a CFA level indicates that:

- The majority view in all five CFAs is that it is *unacceptable* to be able to buy alcohol at a motorway service station
- This perception is especially strong within **Sunderland North**, whilst slightly weaker in **Washington**

Figure 9: In your view, how acceptable or unacceptable is it to be able to buy alcohol at a motorway service station?



Q10 Acceptability of buying alcohol... At a garage forecourt

Respondents were asked, in their view, how acceptable it is to be able to buy alcohol at a garage forecourt.

Sunderland Overall

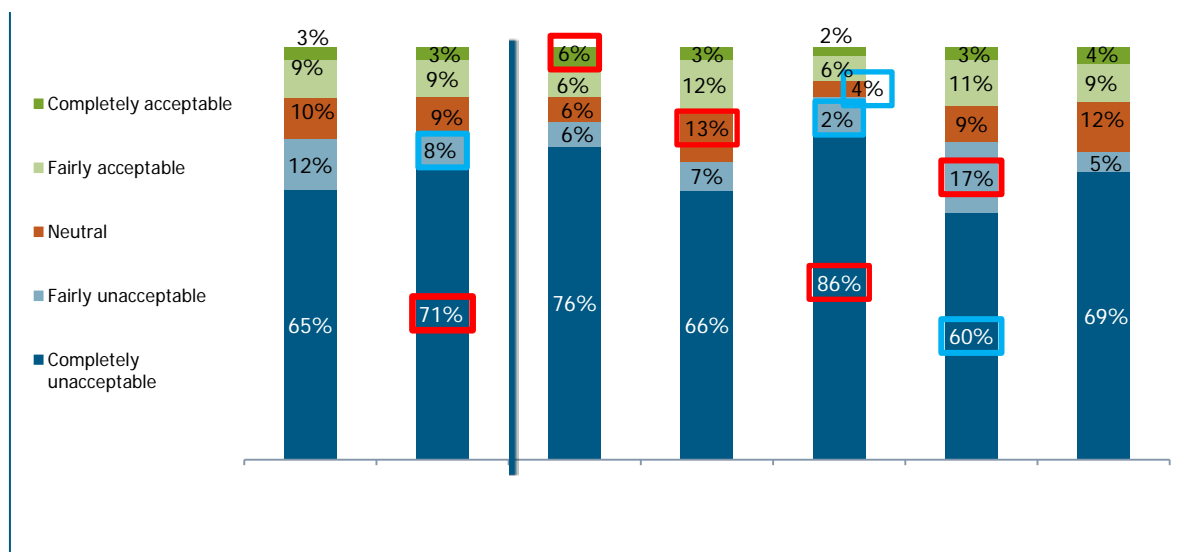
Figures for **Sunderland** overall show that approximately four in five (79%) feel that it is *unacceptable* to be able to buy alcohol at a garage forecourt, which is consistent with feeling in the wider region (NE: 78% *unacceptable*). *Strength of opinion* on the matter is, however, greater within **Sunderland**.

By Community Forum Area

Data at a CFA level indicates that:

- The majority view in all five CFAs is that it is *unacceptable* to be able to buy alcohol at a garage forecourt
- This perception is especially strong within **Sunderland North**, whilst weaker in **Sunderland East** and **Sunderland West**

Figure 10: In your view, how acceptable or unacceptable is it to be able to buy alcohol at a garage forecourt?



Total Sunderland Coalfield Sunderland East Sunderland North Sunderland West Washington

Base: NE total (2714); Sunderland (1058); Coalfield (202); S East (205); S North (223); S West (225); Washington (203)

Response from the Safer Sunderland Partnership Licensing Act 2003 Statement of Licensing Policy 2016-2021

Comments from community safety with regard to the proposed statement of licensing policy to be emailed to: licensing@sunderland.gov.uk by 16th August

Overall, we welcome the fact that the policy has been strengthened from previous versions. We have made comments below which we believe will further strengthen the policy, around all 4 of the licensing objectives for: the prevention of crime and disorder; public safety; the prevention of public nuisance; and the protection of children from harm.

Our comments relate to the page numbers and section/para numbers on the version of the policy that is out for consultation as follows:

Page 1:

Section 1.3 – add Sunderland Safeguarding Children’s Board

Page 2: Introduction

We welcome the inclusion of sections 1.9-1.13 on some of the health related impact of alcohol. Despite lobbying, public health isn’t a licensing objective, but there are links with the other licensing objectives and we understand that public health colleagues will be feeding back their views on how they feel the policy can be strengthened from a public health perspective. We also know that Balance North East hold a lot of local data that could be used within the policy to provide more context and highlight areas of particular need or concern where we have pockets of problems such as high rates of alcohol-related hospital admissions or alcohol related disorder. They have super output area data for hospital stats, ambulance data etc. to provide a better indication of issues at a smaller geographical area. Stephen Potts (People Directorate) also has the Cardiff data on alcohol related assaults which will be useful if you contact him. For example, you would consider adding some of the Cardiff data from A&E data on alcohol related assaults that have taken place within Sunderland for the 12 months data (August 2013 to July 2014) which has found:

- The 18-24 age group for males accounts for the majority of alcohol related assault A&E attendances
- Saturday and Friday nights account for the majority of alcohol related assault
- The locations where the majority of alcohol related assaults have occurred are in the street (44%) and Pub/Club (29%)
- The city centre wards have the highest rate of reported alcohol related assaults

This section would also benefit from some reference to the changing trend in people’s drinking habits/patterns towards pre-loading on cheap alcohol before going out (and usually purchased cheaply from off-licenses and supermarkets). How will our revised Licensing Policy recognise this shift in drinking patterns? Again, Balance North East would be able to provide you with information for Sunderland and the region to set the current context.

The introduction section of the policy would also benefit from making links to other relevant plans the council/city has around needing to have a diverse evening economy and how the licensing policy can be used to promote and enhance this vision. For example, we now have Keel Square in the city centre so how can we ensure the policy does not allow this area to be saturated with ‘vertical drinking’-type licensed premises as the city will want to ensure this area of the city remains family-friendly and still achieve a “café society” feel. How could the policy be used to support this? Would

it need a DPPO (with a footnote to say that in 2017 DPPOs will be replaced with public space protection orders under the new ASB tools and powers?). How can the policy be used to attract the right tenants - i.e. café/restaurants rather than pubs and nightclubs?

If you included data in the context to include what % of Sunderland residents don't drink alcohol, or drink monthly or less (available from Balance), then it would link into the need for the city's night time offer to meet a wide range of needs, so you'd be able to say in the policy that we want to encourage a wide and diverse mix of venues, entertainment and events.

Page 3: Consultation and Guidance

The section under consultation and guidance seems to list very few partners and partnerships and we would question why the consultation hasn't been more widely circulated to a number of organisations and groups who would have valid views. For example, we have noted that the following haven't been included in terms of being formally consulted:

- Safer Sunderland Partnership
- Economic Leadership Board
- The Cultural Partnership
- The Health and Wellbeing Board
- The Sunderland Safeguarding Adult Board
- The partnerships listed above are significant partnerships in the city and they would then be able to feed the consultation to their member organisations to respond in their own right. Alcohol will impact on these partnerships in a variety of contexts. For example, for Safer Sunderland, tackling substance misuse is a citywide strategic priority for the partnership. For the Economic Leadership Board, they will want to ensure the policy helps to ensure a diverse evening economy and will want to see how the licensing policy can be used to promote and enhance this for the city
- Balance North East – as the North East Alcohol Office
- Health partners including City Hospital Sunderland; Sunderland CCG; NEAS etc. given the impact that alcohol has on their services
- The University and College are also key institutions with a role and a stake in how the city is managed in this regard, and their students are key users of the night time economy
- Nexus
- The licensing committee and sub-committee
- Elected members in their role as community leaders but also through the place boards, and through the relevant portfolio holders for public health, community safety, safeguarding, children, economy etc.

Page 4: Scope of the Policy

Under section 3.2 the second bullet point says 'supply of hot food or drink'...is 'drink' alcohol or non-alcoholic – we assume the latter? Also, we know that alcohol-related disorder often takes place around take-ways. Can the policy include a provision to help address this e.g. *"the licensing authority will not generally permit the sale of alcohol from 'takeaway' premises that are licensed for late night refreshment, due to the inherent potential for late night alcohol fuelled crime, disorder and ASB. Applicants seeking approval to sell alcohol from 'takeaway' premises will need to clearly ensure that their activities will not lead to such problems."*

Page 10

Should there not be some reference to DPPOs within this policy (and their future replacement under the new ASB tools and powers – to make reference that in 2017 these will become obsolete and will need replacing with public space protection orders)... for example for the policy to state that we, as a city, support their use, state their purpose and where they currently are in the city... and to say that we would expect any licensed premises (on and off) who operate in a DPPO area to have measures in place that support the aims of the DPPO so that their customers don't contribute to alcohol-related disorder / anti-social drinking etc.

Under section 11.1, it would help if a list of the 'relevant' offences were included in an appendix to the policy for ease of reference.

Pages 11-13: Policy relating to premises licenses and club premises certificates

Section 11.4 – replace “known criminal” with “individual with criminal conviction”

We welcome the use of the 'Reason' sections within the policy which helps to clarify why there is a policy statement included and there are areas within the policy where these reasons can be further strengthened – these are picked up in specific comments further on.

Under the section on drugs, and where drugs are referenced throughout the whole of the policy, it should also reference novel psychoactive substances to support the council's and partners views that we take a stance against their use.

Section 12.10 would benefit from having the 'policy' and 'reason' approach the same way you have under sections 12.8 and 12.9. The 'policy' could be “The council will expect licensees to be familiar with the Home Office Drug Strategy Booklet entitled Safer Clubbing (ISBN 1840827807) or subsequent editions”... and the 'Reason' being that the council has duties to prevent crime and disorder under the Crime and Disorder Act 1998 and tackling substance misuse is a key priority for the statutory Safer Sunderland Partnership.

We would ask that the section on street cafes be extended to also reference external areas which premises use for smoking since the change in legislation around smoking in public places?... as we now have a lot more people from licensed premises who stand outside to smoke... so the policy should include something around expecting licensed premises to have measures in place so that their customers don't cause anti-social drinking outside, or glass breakages. For example, the policy could state that the Licensing Authority has a number of concerns with respect to the development of external areas to licensed premises, and will consider imposing conditions to improve the management of the outside area or prohibiting or restricting the use of these areas in order to promote the public nuisance objective.

Page 12: Access for the disabled

Under para 12.8 and 12.9. This section needs to be strengthened. The Equality Act 2010 places a duty to make reasonable adjustments on organisations providing goods, facilities and services (including the hospitality industry). 'Reasonable adjustments' should allow a disabled person to use the service in as close a way as possible to someone without a disability. This would include access / removal of physical barriers. The duty is anticipatory...therefore the businesses should be thinking about the possible barriers to use of their services and proactively making adjustments in advance. What is deemed 'reasonable' however will rely on the nature and size of the organisation.

In the Licensing Act you will need to check what the council's role would be in relation to ensuring licensees are meeting their legal duties, and therefore this will determine whether para 12.8 should be worded more strongly. However, para 12.9 definitely needs strengthening. Kirsty McNally is the equalities expert in our service and she has suggested amending para 12.9 to say the following:

12.9 Reason

The council works within the Equality Act 2010 and recognises the duty to make reasonable adjustments for disabled people. Equality law recognises that bringing about equality for disabled people may mean changing the way in which services are delivered, providing extra equipment and/or the removal of physical barriers.

(The second sentence is the wording used by the EHRC).

Page 14: Licensing Hours

In the section under licensing hours, I feel it should include the expectations around opening hours - is there any reason why we shouldn't be suggesting a 03:00am max closing time – or be encouraging a voluntary good practice approach to close at 03:00am? Many other areas licensing policies have frameworks of opening and closing times which apply to applications for new and variations for longer hours or additional licensing activities. In a climate of reduced resources, it would help ensure the streets have sufficient time to be cleaned before the shops open again the next day. It may also assist the police are reducing their additional costs around changes of shifts and policing the city centre into the early hours. That way, for new licensing applications it might help if they were limited to certain hours. Whilst this wouldn't be legally binding, it would provide a guide to potential license holders when they are developing their applications.

Pages 15-17: Children

The section on children should be significantly strengthened to include information around the council having a legal duty to safeguard children and that the risk of harm to children will be a paramount consideration when determining applications and will have particular regard to the view of the Sunderland Safeguarding Children's Board.

I think this section should also be saying that all applications will be expected to include in their operating schedule, a statement of measures they will take to protect children from harm.

Under 14.2, additional controls that could be included in the list could be:

- To ensure adequate supervision is in place for entertainment specifically aimed at children
- Have in place safe recruitment policies and practices and should obtain enhanced checks with the DBS for all staff working with children

It is vitally important that the licensing policy makes reference to child sexual exploitation given that it is a citywide strategic priority, and licensed premises can play a key role in identifying risks, signs and symptoms. You should include the following information (and you can ensure this is approved by Northumbria Police and the SSCB Business Manager, Lynne Thomas)....

- *Alcohol is also often a factor in child sexual exploitation, where young people may be encouraged or coerced to drink, or alcohol may be a factor in risk taking behaviour by young people who drink irresponsibly and then get involved in activities that otherwise they would not. Nationally, evidence has been found of the sexual exploitation of children taking place on licensed premises, or licensed premises being used for the purposes of grooming and enticement.*

- *Under the Licensing Act 2003, a premises licence may be at risk if the premise does not take action to protect children. Under Section 182 of the Licensing Act 2003 license holders and delegated managers have a legal responsibility to make sure those under 18 are protected from 'physical, psychological and moral harm'. Licensed premises will need to demonstrate that reasonable steps have been taken to manage the risk (i.e. that due diligence has been shown) then this could protect a business. Information is contained on the Sunderland Safeguarding Children Board website about what to do if you have concerns about a child or young person <http://sunderlandscb.proceduresonline.com>*
- *Sunderland Safeguarding Children Board (SSCB) has a CSE communications strategy to raise awareness of the warning signs of child sexual exploitation and how to report concerns. The SSCB wants businesses to take responsibility for managing the risk of child sexual exploitation on their premises and report it in accordance with the SSCB Multi-Agency Safeguarding Children Procedures. The CSE communications strategy is aimed at a range of target audiences including businesses.*
- *The SSCB works with other statutory authorities and will engage with the licensing trade to promote risk management in relation to child sexual exploitation. The SSCB and its partner agencies provide advice to assist licensees to identify risk and report concerns at different types of licensed premises so that children remain safe and businesses operate responsibly. The SSCB in conjunction with the Licensing Authority encourages license holders and operators of licensed premises: (i) to ensure that they are fully aware of the signs of child sexual exploitation and to understand that the sexual exploitation of a child is sexual abuse and a crime and (ii) to raise the awareness of their staff about child sexual exploitation and provide intelligence to the appropriate authorities about concerns and about perpetrators who may be operating in their areas.*

In addition, within this section of Children, we know that Balance North East have campaigned to reduce the amount of alcohol advertising near to schools, children's homes or wherever there are vulnerable children and young people etc. We feel the policy should include something around licensed premises helping to address this by not displaying or promoting alcohol advertising near to schools and known sites for vulnerable? (e.g. children's homes for 'looked after children')

Under the section on the Portman group Code of Practice, should the form of words not be a bit stronger, so instead of recommending they comply with the code and alert bulletins, the policy should say *"The Licensing Authority will expect the Code of Practice and retail alert bulletins be fully implemented"*.

Under 14.7 there is a reference to para 1.8. This needs to be amended as the licensing address is in currently para 1.14 on the licensing policy draft

In the 'Under 18 Discos/Events, it is important to recognise that licensed premises should be aware of risks around child sexual exploitation and to be alert to those risks in the vicinity of their venues when they hold under 18 events (as children and young people may be groomed in the vicinity of such events). In this respect, under the bullet point in 14.8, where it lists who should be notified of any under 18 events at least 28 days in advance, it would be advisable to also include the Sunderland Safeguarding Children's Board in addition to the police and council.

There is nothing in the policy that relates to proxy sales of alcohol and the delivery of alcohol to residential properties. We would like to see something added to the policy that states that adequate procedures should be in place to ensure that all members of staff working at the premises are routinely trained and regularly reminded of their responsibilities in relation to the issue of proxy sales of alcohol, and should ensure that all reasonable steps and procedures are in place and

implemented to prevent adults purchasing alcohol for those underage. Steps should also be in place to ensure that any designated premises supervisors and members of staff involved with the delivery of alcohol to residential addresses are made fully aware of their responsibilities to ensure that no alcohol is sold to persons underage, proxy sales etc..

For example, around delivery of alcohol, we would advise that the policy could say... *"It is expected that applicants who intend to sell or supply alcohol by delivery will include provision in their operating schedules to set out how they will ensure that they do not:*

- *Serve alcohol to a person who appears to be drunk*
- *Serve alcohol to a person who is aged under 18 years old*
- *Serve alcohol to a person who it is believed will pass it on to a person under 18 years old*
- *Take payment for the alcohol at the place where it is served – sales should be pre-paid only*

Page 16-18: under 18 events

The second bullet point refers to SIA registered security personnel. Given this section of the policy is around under 18 events we would expect the policy to include;

- The need for SIA staff to be DBS checked. Newcastle's licensing policy has the following included and we would like to see this included in the Sunderland policy, as follows: *"Where entertainment is to be provided specifically for children, and where it is likely that a child will be left in the care of a person employed by or contracted to the management of the premises for that purpose, or left in the care of a person using that premises for the provision of children's entertainment, the Licensing Authority expects that enhanced checks with the Disclosure and Banning Service (DBS) (formerly the Criminal Records Bureau) are carried out for the persons providing the entertainment to, or supervising the children. It may impose this requirement by way of condition, either through the review process, or in the event of the application being subject to representations".*
- We would advise that the door staff are trained in safeguarding awareness either through the Sunderland Safeguarding Children's Board or through the vulnerability training provided to the night time economy staff by Northumbria Police – and so any new personnel are trained.
- The 4th bullet point says that alcohol should not be on display – can this be extended to also include cigarettes?
- The 6th bullet point references checking around alcohol and other illegal substances being brought into the premises. Again this should also reference novel psychoactive substances (and also at the top of page 18).
- The second bullet point at the top of page 18 talks about toilet checks being carried out – should this include a check of waste bins for evidence of discarded alcohol containers and drug paraphernalia?

Page 18: Mixed Age Events

Such events can be risk areas for grooming children and so staff working in licensed premises need to be aware of the risks and signs to look out for and what to do if they have a concern around CSE. The comments I have made on CSE above in reference to the under 18 events, also need to be cross-referenced here as they also apply to mixed age events.

Again, we would advise the policy also references the need to ensure that staff are trained in safeguarding and awareness of CSE through the Sunderland Safeguarding Children's Board in addition to any vulnerability training they have already had provided to them by Northumbria Police.

Page 19: Integrating Strategies

Under 15.2 on the multi-agency events group, is this something that the SSCB should also be involved in?

Page 19: Crime prevention

For 16.2 where it says that the council 'encourages' on-licences premises to be active members of pubwatch – we would question why this can't be included as a condition of the licence; or alternatively, be made into a condition if the licence is up for review following any issues with them upholding the licensing objectives around crime prevention or public safety? The approach applies to the toughened glass in 16.3 so we would like to see this also applied in the context of pubwatch membership in 16.2.

Page 20: Promotion of Racial Equality

Section 18.1 – It is important that this section should apply to all equalities issues not just race relations and should refer to the current equalities legislation. Kirsty McNally has advised amendments are needed to this section of the policy from an equalities perspective and states that the Policy should have **an Equality Analysis** associated with it – Kirsty will advise you on how to do this, but all council policies should have an equalities impact assessment/analysis. She would suggest the following text in italics replaces that which is currently there for the equality section:

The Council, in pursuing its functions under the Licensing Act, will comply with the Equality Act 2010 and Public Sector Equality Duty. The Equality Act 2010 bans unfair treatment and promotes equal opportunities in the workplace and in wider society. It protects everyone from unfair treatment through covering nine key protected characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

The Act also places the Public Sector Equality Duty on Local Authorities and other public bodies. The Duty requires public authorities, in the exercise of their functions, to have 'due regard' to the three aims of the Duty:

- Eliminate discrimination, harassment and victimisation and any other conduct that is prohibited by or under the Act.*
- Advance equality of opportunity between people who share a relevant protected characteristic and people who do not share it.*
- Foster good relations between people who share a protected characteristic and those who do not share it.*

Section 20.4 – where it says 'unless information to the contrary is available to the council'... it would be worth referencing here that this could include recorded police data and the 'Cardiff' data on alcohol-related violence, which might provide evidence linking increases in incidents to a specific licenced premise.

Page 21: Enforcement

Under 21.2 – are all of the responsible authorities well represented on this? And so they should all be listed here.

Page 21: Reviews

Under 22.4 (second bullet point) we would question why there is no reference to the SSCB here if there are concerns relating to the safety of children?

Page 22

There is nothing in the licensing policy on irresponsible drinks promotions or mention of Minimum Unit Pricing and we feel that we should be including a strong message on this in terms of our stance as a local authority which we know is supported by the SSP, HWBB, SSCB, SSAB, APB, Police, Public Health etc (following the national consultation on MUP). Sunderland should be encouraging a voluntary code of good practice in relation to drinks promotions including pricing, the same way that Newcastle does. For example, Newcastle includes the following form of words in their licensing policy and we would suggest Sunderland includes the same....

"We know that low cost alcohol sold in on and off trade premises increases alcohol consumption which can lead to crime and disorder issues. The Licensing Authority through this policy would like to encourage the responsible consumption of alcohol and where there is evidence that the licensing objectives are being compromised or are likely to be compromised, the Licensing Authority will consider imposing controls on drinks promotions to deal with localised problems. These controls could include restricting the sale of super strength beer, lager and cider, or the requirement to charge a minimum cost per drink as part of a package of measures to deal with problems.

There is strong evidence that setting a minimum unit price will have an impact on reducing alcohol consumption. The Licensing Authority would therefore like to encourage all licensed premises to apply a minimum unit price of 50p to all alcohol products sold under their premises licence. Where the premises are found to be selling alcohol below this price and there are problems associated with the premises that are negatively impacting on the licensing objectives, a responsible authority may bring review proceedings. Following the review, the Licensing Committee may decide to impose a condition in relation to the pricing of alcohol in order to uphold the licensing objectives.

Rather than having to resort to controls of this kind, the Licensing Authority would like to encourage a voluntary code of good practice in relation to drinks promotions including pricing, and to encourage licence holders and others working at the premises to familiarise themselves with the mandatory conditions relating to drinks promotions. These conditions prevent drinking games, provision of unlimited or unspecified quantities of alcohol for free or for a fixed or discounted price. Examples of irresponsible drinks promotions are provided in the Good Practice Guide for Licensed Premises.

If you are in any doubt please speak with Northumbria Police or the Licensing Authority before you organise a specific promotion."

Page 26: Conditions relating to the prevention of crime and disorder

Point 2: Text/radio equipment; Sunderland Street Pastors should also be referenced here as they are linked up to the same radio network in the night time economy.

Point 6: Text/radio equipment; refers to notifying any incident of crime and disorder to the police. This should also include notifying any child safeguarding concerns to the police as well.

We feel there needs to be something included around training. For example the policy should include mandatory training on child sexual exploitation; safeguarding and vulnerability... so they

have at least trained one person per XXX people on duty at all times when the public are present?
This would also apply to page 39 – for the conditions relating to the prevention of harm to children. This would apply to door staff and staff within the premises.

Page 29 Proof of Age

Should point 27 also reference proxy sales?

Page 39: conditions relating to the prevention of harm to children

Again, should this not include training on child sexual exploitation... so they have at least trained one person per XXX people on duty at all times when there is entertainment especially for children?

Page 41-43: mandatory conditions

We feel this section should include something about not serving to someone who is already intoxicated /appears to be drunk.

Point 7; we should be saying that they should serve the smallest measure as standard unless the customer asks for a larger measure. This applies to pages 45, 47 and 50

Point 9: - again, proxy sales should be specifically mentioned here.

Page 47: off licenses

Again, we feel this section should include something about not serving to someone who is already intoxicated /appears to be drunk.

Point 3: - again, proxy sales should be specifically mentioned here.

From [REDACTED] [@balancenortheast.co.uk](mailto:[REDACTED]@balancenortheast.co.uk)

Sent: 21 July 2015 11:37

To: Licensing

Subject: Comments on draft Statement of Licensing Policy

Dear Sir / Madam,

Overall, the licensing document looks very comprehensive. Balance would make the following comments / suggestions for further strengthening it:

- In the section on Protection of Children (pages 15-16), it would be useful to include a point about the importance of avoiding alcohol advertising near to schools and known sites for vulnerable (e.g. 'looked after children')
- In the section on Licensing Hours (page 14), it might be worthwhile including some kind of expectation around opening hours – so for example, suggesting that it would be preferable if new licensing applications were limited to certain hours. This clearly wouldn't be legally binding, but might guide potential license holders with their applications.
- Local data isn't used to any great extent to highlight areas of particular need (e.g. those neighbourhoods with the highest rates of alcohol-related hospital admissions). Balance could provide SOA level Hospital Episode Statistics data, Ambulance data etc. if required, to illustrate the picture at a sub-locality level.
- Given that Public Health is now a responsible authority in the licensing process, it would be useful to include some kind of 'public health statement' to highlight the detrimental impact that alcohol has from a public health perspective. Although the Licensing Act doesn't include a public health objective, we believe that it's important to frame some of the key issues (e.g. high rates of hospital admissions, alcohol-related mortality etc.) from a public health perspective – it might be appropriate to do this in an appendix to the document, backed up with the type of local data outlined above. In the longer term, this could be of use in negotiating with potential applicants and in raising awareness of some of the public health issues, which often counteract the more positive influences generated by a well- developed night-time economy.

We hope this is helpful – please don't hesitate to contact me if you'd like to discuss these comments in more detail, or if we can assist with any of the suggestions (e.g. additional data) outlined above. Thanks and best wishes,



