

NHS Grampian Public Health Response to Aberdeen City Council Overprovision Consultation Dr Tara Shivaji Consultant in Public Health Medicine NHS Grampian

NHS Grampian, Public Health Directorate appreciates the opportunity to comment on the Aberdeen City Licensing Board Overprovision Policy Statement for off sales premises.

In the 35th City Voice questionnaire, respondents were asked what should influence the Aberdeen City Licensing Board in the development of the next Statement of Licensing Policy. The three most frequently selected answers were the number of existing premises, the location of proposed new premises and the proximity to existing licensed premises, suggesting that the development of an overprovision policy statement is both necessary and, must be a central part of new Statement of Licensing Policy.

We wholeheartedly support the proposal to designate the whole Licensing Board area as one locality for the purpose of assessing off-sales overprovision. The Scottish Transport Survey 2016 identified that shopping was the second most common reason making a journey in Scotland. Most journeys are made by car, the average journey distance was 9km¹. It is clear that people's lives, their shopping habits and therefore the patterns of purchasing alcohol from off sales premises can extend over large areas. Of the existing stores in operation in Aberdeen City, we have identified at least ten which offer a home delivery service accessible to the entire city population.

In Aberdeen, like the rest of Scotland, patterns of alcohol sales and consumption are changing. Three quarters of alcohol is sold in Scotland was from off sales². The 13th City Voice questionnaire identified of the City residents who drink, the place where they most regularly drink alcohol is at home. One third of 13th City Voice respondents confirmed that they pre-load alcohol prior to going out in the City. We consider that a robust overprovision policy would assist in reducing alcohol related harms and promoting the public health objective in this changing climate.

The list of off sales premises provided, as at December 2017, identifies 198 off sales premises with an overall capacity of 7,156m². The heat map illustrated at

http://accabdn.maps.arcgis.com/home/webmap/viewer.html?webmap=7ba881dab62 146109a1cb852021dd8d1 provides detail of the location of these premises but does not provide an indication of the alcohol display area or the type of premises. To aid our response to the Licensing Board questions we have categorised the licensed premises and provided similar style maps. See Appendix 1.

Do you think the current provision of off-sales premises as shown in the map is: a) Too many; b) About right; c) Insufficient.

Too many.

Whilst there is no definition or numerical threshold for judging whether there are too many or too few off sales premises. We would highlight the link between alcohol pricing, availability (in terms of number of premises), alcohol consumption and health harms. The relationship between price and availability is also described by Aberdeen City residents as factors which contributed to their own personal increased alcohol consumption in the 13th City Voice questionnaire.

The harms associated with the consumption of alcohol bought from off sales premises can be divided into short and long term harms.

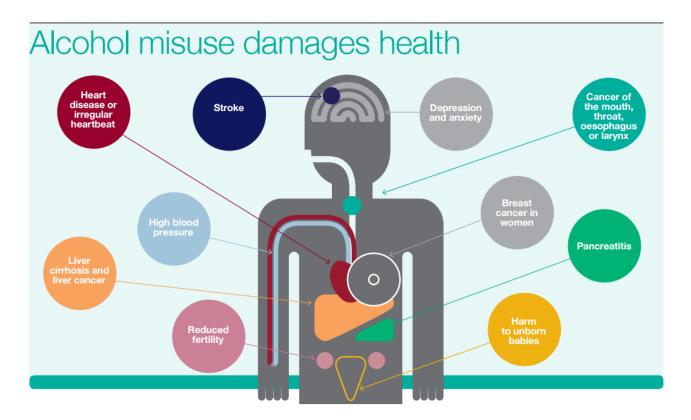
The short term harms include the effects of domestic violence, child neglect and suffering. Much of these effects take place in the home environment or behind closed doors. Of the children supported by Aberdeen City Social work services during 2017, 13% involved concerns about alcohol use. This is expected to be an under estimate as parental alcohol and its impact may not be easy to identify. In the Health Impact Assessment 2017, representatives of childline told us³:

"Alcohol may not be the main presenting issue to us ...but very often alcohol is somewhere in the picture"

In the long term, regularly consuming alcohol above recommended levels increases the risk of developing physical and mental health conditions.

Specific examples the impact of alcohol on health are provided in an appendix to this document. I would like to draw the Licensing Board's attention to the rising number of alcohol related deaths occurring in the City, most of which occur as a result of alcohol liver disease or cirrhosis. It is of particular concern that the rate of hospital admissions due to alcohol liver disease and, in particular the rate of patients newly diagnosed with alcohol liver disease has risen over the past decade in the City. Rates of hospital admissions for all alcohol related causes are above the Scottish average.

Alcohol also contributes to the development of conditions like cancer, high blood pressure, depression and anxiety⁴.



The 2017 Director of Public Health Annual Report for NHS Grampian identified that one in three adults in Aberdeen city were drinking alcohol at levels that increase their risk of experiencing health harms in the future.

Citizen's Panel 13 confirms that most the majority of people purchase alcohol from off sales premises. NHS Grampian are of the view that purchase of alcohol from off sales is a significant driver of the high levels of harm seen in the area. There is a correlation between neighbourhoods with high rates of alcohol related harm and outlet density⁵. We conclude that a compelling case for the overprovision of off sales exists.

Considering the location of the off sales premises in operation during December 2017, 96% of Aberdeen City residents live within a ten minute walk of at least one premises (appendix 2).

The 35th City Voice Questionnaire found that over three quarters of respondents felt that there were enough places to buy alcohol from in Aberdeen City. 10% of respondents reported that there were too many.

If you feel there are too many, do you think there are too many of:

- a) Premises of a particular type
- b) Premises of a particular size
- c) Off-sales premises in general

NHS Grampian is of the opinion that there are too many off sales premises in general.

The 13th City Voice survey identified that the majority of respondents bought alcohol from an off sales of some description. Price and convenience have consistently been found to be the main drivers of purchase of alcohol from off sales in Aberdeen City. Over 90% of respondents to the local questionnaire buy alcohol together with other items.

In 2017, Aberdeen City Health and Social Care Partnership conducted a Health Impact Assessment on the Statement of Licensing Policy on behalf of the Local Licensing Forum. Respondents confirmed that because alcohol was available in places where they went to perform other tasks (top up electricity payments, purchase bread and milk), there was a high chance that they would spontaneously also purchase alcohol. The impulse purchasing of alcohol is not restricted or limited to premises of a particular type or premises of a particular size.

The alcohol recovery groups interviewed as part of the impact assessment identified that corner shops or small convenience stores often stocked products which appealed to people with an alcohol dependency. Appealing product are low priced and of high strength. These products are also stocked in supermarkets. When making a decision about where to purchase a drink, a person with alcohol dependency would consider price, convenience and the relationship they had with workers in the shop. Complicit relationships between individuals with alcohol dependence and shop workers were described in large supermarkets as well as corner shops. There is no evidence to suggest that the size of the shop or the business model makes any difference to the purchasing decision of a person with alcohol dependence.

If the Licensing Board determine there is overprovision, do you think there should be any exceptions to this policy under the following licensing objectives: a) Preventing crime and disorder; b) Securing public safety; c) Preventing public nuisance; d) Protecting and improving public health; e) Protecting children & young persons from harm.

A robust overprovision policy will provide grounds for refusal, however, each application still requires to be determined on its own merits and there may be exceptional cases where an applicant can demonstrate that the grant of an application or the variation of an existing licence to increase capacity would not undermine the licensing objectives. The Board should expect applicants to provide robust and reliable evidence to support their application sufficient to demonstrate that the grant of their application would outweigh the presumption against grant in terms of any Overprovision Statement.

There may be specific occurrences where an applicant is seeking to open a shop service a new housing development or another community that does not have local shopping facilities. It is NHS Grampian's view that the Licensing Board's pursuit of the public health objective must focus on the sale of alcohol rather than the public health merit of providing fresh fruit and vegetables to a community. NHS Grampian recognises that in some instances, the economic viability of a shop may depend on providing alcohol off sales. We would encourage the board to look for evidence within the proposed operating plan that limit impulse purchase of alcohol as means by which the public health objective could be pursued.

We would not view increased employment opportunities as contributing to Protecting and Improving public health. We do not agree that the revoke or surrender of a licence would automatically lead to a successful application for a new licence.

Do you have any other comments on off-sales overprovision?

The 35th Citizens Voice Panel survey identified that over three quarters of respondents were not aware of the then existing off sales overprovision policy statement. We would encourage the board to adopt an active communication strategy to inform the public of its position.

Community councils who participated in the 2017 health impact assessment would be an important stakeholder to involve. They reported a high level of interest in licensing matters and decisions. As statutory consultees, it is important that they are aware of developments in Aberdeen City Licensing Board Policy and how it impacts on their local area.

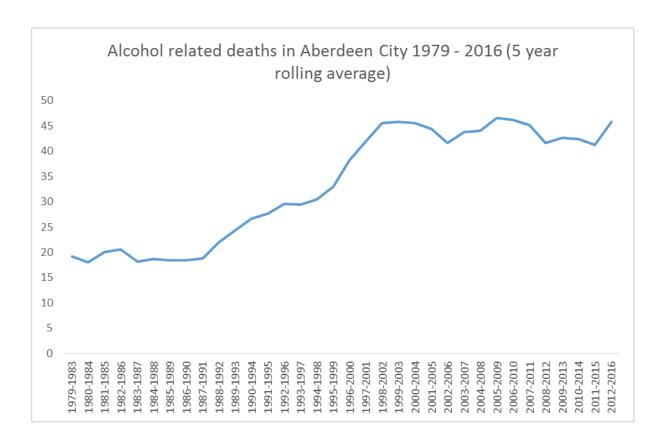
Aberdeen City Council Statement of Licensing Policy 2013 - 2016 Areas for review

- 1. Significant entertainment: clarification of definition. (20.8)
- 2. Protecting and Improving Public Health: inclusion of examples of controls/actions that contribute to this objective to maintain consistency with other sections (Section 27)
- 3. Home delivery of alcohol: This is not covered by the current statement of Licensing Policy so it would be good to see this included along with examples of conditions that will be applied.
- 4. It would be helpful to have a list of all conditions that can be applied, mandatory and non-mandatory conditions which may be considered (6.1)
- 5. Occasional licence applications feel it appropriate that the section on how alcohol might be sold in educational establishments should be further developed. (11.2 & 11.5)
- 6. Reference to other documents that could influence the SLP, including the LOIP, The Health Impact Assessment conducted by the Local Licensing Forum and the commitment of Aberdeen City to achieve child friendly status,
- 7. Change in terminology regarding drinking to use the term low risk drinking
- 8. Hours of trading we would wish to a continuation of the 3am on terminal hour. 20.3, 20.4)

Appendix 1 Summary Health Statistics

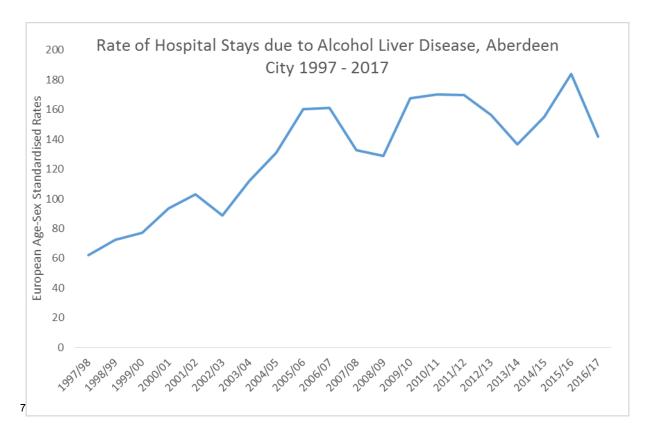
In 2016 there were 56 alcohol-related deaths recorded in Aberdeen city, the highest number for a decade. Looking at the long term trends, it would appear that the trend is turning upwards.

Figure 1 Alcohol related deaths 5 year rolling average Aberdeen City⁶



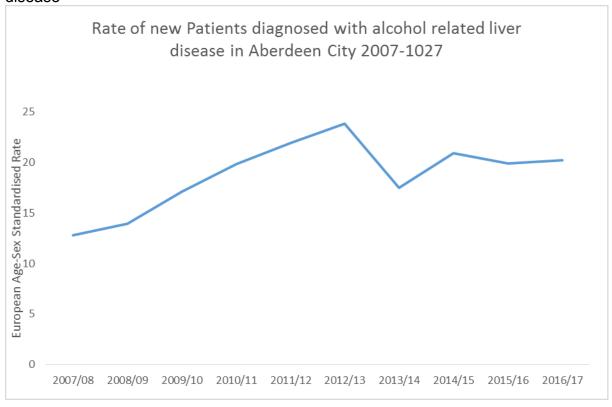
Between half and two thirds of alcohol related deaths in Aberdeen City are due to alcohol related liver disease. There has been a steady rise in the rate of hospital stays due to alcohol liver disease in Aberdeen City over the past 20 years.

Figure 2 Rate of Hospital Stays due to Alcohol Liver Disease



Of particular concern is the rise in the rate of new patients diagnosed with this condition in the City over the past 10 years.

Figure 3: Rate of patients hospitalised and newly diagnosed with alcohol related liver disease



Whilst not all of these individuals are dependent on alcohol, most will have consumed large amounts of alcohol over a long period of time.

A health impact assessment commissioned by the Aberdeen City Licensing Forum in 2017 identified that individuals with alcohol dependence and problematic drinking behaviours preferentially buy alcohol from off sales rather than on sales premises^{4a}

Referrals to the integrated alcohol service have not fallen over the last 3 years. Referrals are received from all postcode sectors of Aberdeen City. Around 700 people access help each year. There is considerable variation in the referral rates of local areas.

¹ Scottish transport Survey available at https://www.transport.gov.scot/publications/

² http://www.healthscotland.scot/media/1460/alcohol-sales-in-scotland-2016 english.pdf

³A Health Impact Assessment of the Aberdeen City Licensing Board Statement of Licensing Policy, November 2017 Aberdeen City Local Licensing Forum

⁴ Public Health England available at https://publichealthmatters.blog.gov.uk/2015/06/17/alcohol-some-encouraging-trends/

⁵ http://www.alcohol-focus-scotland.org.uk/media/65042/Alcohol-outlet-density-and-harm-report.pdf

⁶ National Records of Scotland. **2017**. *Alcohol-related deaths in Scotland*, 1979 to 2016. [online] Available at: https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/alcohol-related-deaths

⁷ Information Services Division. **2016**. *Alcohol-related hospital statistics Scotland 2015/16*. NHS National Services Scotland. [online] Available at: https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2016-10-25/2016-10-25-ARHS-Report.pdf