

SCOTTISH BORDERS LOCAL LICENSING FORUM

MINUTE of MEETING of the SCOTTISH BORDERS LICENSING FORUM held in Committee Room 1, Council Headquarters, Newtown St Boswells on 28 March 2012 at 4.10 p.m.

Present: M. Ballantyne (Convener) A. Craig, G. Todd, A. Vickery, S. Walker, Inspector K Simpson.
Also Present: Councillor G. Turnbull.
Apologies: S. Bell, H. Davies, Dr. M. Kehoe, J. Swanson, I. Tunnah, E. Whitehead
In Attendance: Legal and Licensing Services Manager (A. Isles), Committee and Elections Officer (K. Mason).

QUORUM

1. The meeting was inquorate. Any decisions made would be subject to ratification at the next meeting.

**DECISION
NOTED.**

MINUTE

2. A Note of Meeting of 25 January 2012 had been circulated.

**DECISION
NOTED.**

3. With reference to paragraph 1 of the Minute, the Legal and Licensing Services Manager suggested that the terms of reference be changed and the Quorum should be 1/3 of the Membership.
4. With reference to paragraph 4 of the Minute, Inspector Simpson advised that the 13 discussions which had taken place with licensees referred to low level incidents at which advice had been given on preventative measures to prevent applications for premises licence reviews being lodged.
5. With reference to paragraph 6 of the Minute, Susan Walker advised that a steering group had been formed to progress matters relating to the alcohol data project. Erin Murray would assist in gathering statistical information and explore the use of capturing other important data. The Minute of the Meeting of 21 March 2012 forms an appendix to this minute.

LICENSING OBJECTIVES

6. (a) Preventing Crime and Disorder
Inspector Simpson referred to recent applications made by the Police asking for review of premises and personal licences and of the actions taking by the Licensing Board.
- (b) Protecting and Improving Public Health
Susan Walker referred to the cocaine initiative and of her contact with Pubwatch in Eyemouth who would come back to her with dates for a session. She also referred to the promotion of responsible drinking during Rugby Sevens and Local Common Ridings. Inspector Simpson advised there had been a meeting with

festival committee organisers relating to the approaches in regard to responsible drinking. All organisers had a part to play in this. Discussions took place in relation to Occasion Licence applications and Inspector Simpson advised that all applications were scrutinised and there was normally a real purpose for the applications.

Protecting Children from Harm

- (c) Further Test Purchase exercises were planned for early April. The Police had recently intervened in a planned event which had been identified on Face Book for which tickets had been on sale, this had been pulled. Another properly organised event was planned for which a Public Entertainment Licence would be applied for and an Alcohol Policy would also be in place. It was noted that landowners also needed to be made aware of risks when these events were held. Public Halls were now aware of licensing requirements.

**DECISION
NOTED.**

The meeting concluded at 5.00 p.m.

LOCAL LICENSING FORUM
28 MARCH 2012
APPENDIX

Minutes of Alcohol Data Project Meeting: 21st March 2012
Committee Room 4, SBC Headquarters, Newtown St. Boswells

In attendance:

Kenny Simpson Safer Communities Team Manager
Cllr George Turnbull, Licensing Board Member
Cllr John Paton-Day, Licensing Board Member
Davie Allan, Acting Service Manager, SAS
Colin Bruce, Group Commander, Fire Service
Graham Forsyth, Lothian & Borders Police
Anne Isles, Deputy Clerk, SBC
Ian Tunnah, Licensing Standards Officer, SBC
Lynda Mays, Service Manager, NHS Borders Addiction Services
Erin Murray, Data Analysis, Interpretation and Research Officer, SBC
Susan Walker, Development Officer, Alcohol & Drugs Partnership

Apologies: Mike Kehoe, NHS Borders Addictions Service

1. Background and aim of alcohol data project

KS welcomed everyone to the first meeting of this group and set out the background and aims of the project.

As part of the Alcohol Strategy, The Licensing (Scotland) Act 2005 commenced on 1st Sept 2009, and was the biggest overhaul of licensing arrangements. In particular for the first time Licensees are required to ensure they have a responsibility to consider the health of the population under the specific objective "Protecting & Improving Public Health".

Alongside this, the Alcohol Bill, which came into force in November 2011, stated that health boards for the first time would be consulted as part of the licensing process.

More recently a key driver has been the 'Re-thinking Alcohol Licensing' report, which was published September 2011. This document calls upon licensing boards to determine the locality for the assessment of overprovision and define areas for assessing overprovision for which statistics are available. For other public bodies it states that, as far as possible, local data is made available to licensing boards on an ongoing basis, in an accessible format that supports them in the drafting on the new licensing policy and overprovision statement that is evidence-based.

AI confirmed that the next Licensing Policy will be in place by October 2013, and therefore the group would need to work towards having a report in place by April 2013 to allow consultation with board members.

KS noted that currently there is a general sense that alcohol has a large impact on public services but the data to back this up is not reflecting this due to poor recording.

2. Example of work carried out for city of Edinburgh to support assessment of overprovision

KS and SW met up with Jim Sherval (Specialist in Public Health) to find out more about how the City of Edinburgh had supported their Licensing Board to identify further localities within the area where there may be overprovision of certain types of licensed premises.

Their work focussed heavily on off-sales and was able to identify that just under 80% of the Edinburgh population lived within 400 metres of an off sales outlet. Other statistics that they looked at included health, police and fire data. From this piece of work, a statement has now been put into the Licensing Policy in Edinburgh where it notes that any license application or variation around off-sales capacity within the area would be considered in fine detail and further reports to determine the application would be sought. KS noted that this has already been tested in Edinburgh where Tesco applied for a Tesco Metro in the Craigmiller area. It was rejected on the basis of overprovision, and after Tesco sought legal advice came back with the compromise that they would not sell anything over 5.5% abv.

EM confirmed that if we are able to provide the same data as Jim then she would be able to use GIS in a similar manner.

A formal request for data on the quantity of alcohol that Tesco sells in the Borders has now been submitted by KS and he awaits feedback.

3. Locality Scope

EM noted that if we can get data with postcodes she is then able to map to a data zone and therefore this can be made anonymous and publicly shared.

There are 130 data zones in Borders with 29 **intermediate geographies** which EM recommended would represent the community. The group agreed that this would be the locality that would be used.

4. Identify stats already available to be used

- Alcohol consumption and dependence:

SW noted that data was available via Scottish Health Survey and also through a local needs assessment.

- Alcohol related deaths and hospital admissions

This is also available via ISD and Scotpho and SW agreed to send this through to EM.

- Number and type of licensed premises:

AI confirmed the data that is currently available includes the number of licensed premises (437) however there will be some work carried out by Licensing Dept to cleanse the data

and put onto new software. This should take no more than 6 months to do. This would include refining the data to identify what types of premises there are.

EM noted that she would need the location of all premises and a categorised list of types of premises including where an off-sale is a supermarket.

It was also important to ensure if the premise is actually operating, as there are many licensed premises that are not.

Action: Provide the Licensed Premises data to EM (IT)

5. Identify areas where data can be captured

The consensus from the group was to try and gather data that is available now from their respective areas and send electronically to EM so that it allows some work to be carried out to see what the current situation is.

The group agreed to look at scoping the months of June and October to try and capture accurate data from all agencies. This would allow a look at how the festivals impact on services and highlight the extent of data capture deficiencies.

Police: A system is currently in place called STORM that records every incident the police deal with. This has a flag that you can mark where the incident is alcohol related, however KS noted that this is only used about 20-24%. When you drill into the ASBU statistics it rises to 60-64%.

EM also noted that if the board wanted hotspots, then incident data would need to be recorded. GF agreed that incident data is available and can be provided by Police.

Action:

Police Storm Data and ASBU Data will be provided to EM (KS)

Police incident data around licensed premises will be provided to EM (GF)

Fire: CB agreed to review their system (FSEC) to see if there was any historical data where alcohol is noted and also to capture data during the two months.

Historical alcohol-related Fire data would be provided (if available) to EM (CB)

SAS: Currently where ambulance staff deals with a call they will collate the incident postcode and also the patients postcode. They are also able to tick a box where alcohol is involved. EM noted that this would be very helpful as would gender and age. DA agreed to see if there was some historical data within the data warehouse and would speak to teams about reinforcing the need for good quality data capture during the months identified.

Action: Historical alcohol-related ambulance data to be provided to EM (DA)

A&E: Data from A&E is only partly available. Trak, which is the system used in their department, can only record one diagnosis, so where alcohol is involved but not the main diagnosis this is not captured. SW noted however that health boards are required to start collating this data and has met with Planning & Performance about this field. P&P agreed to move this forward and were aware of the timescales. KS noted that A&E had not responded to the invite, but SW suggested she contact them separately to meet with them in their work area.

Action: Meet with A&E Charge Nurse and Consultant to discuss data capture (SW)

Other: AI noted that the board would be interested in both incidents related to public safety and also improving public health. 1-4 women and just under 1-3 men are exceeding the sensible drinking guidelines and therefore too many people are drinking too much too often. Controlling availability is something that the Licensing Board can act upon however it was recognised that controlling availability is only part of the solution to reducing alcohol related harm. Attitudes and price were outwith the scope of this group.

EM noted that the more historical data that is available the better and would be required electronically ERMurray@scotborders.gov.uk

AOB

SW asked if Domestic Abuse stats where alcohol was a contributing factor could be included. KS agreed to look into this.

KS agreed to ask a member of his team for support with admin

Date of next meeting

Wednesday 18th April 2pm, Committee Room 4, SBC

Scope for Scottish Borders Local Licensing Forum: Alcohol Related Data Project

This document has been produced to capture and outline the proposed alcohol data collection project and will address the following aspects of the project:

- What the project is aiming to achieve and rationale behind this
- What the project will produce, how this will be obtained and used
- What organisations will be involved on the steering group
- Possible risks to the project
- Timescales
- How/when it will be evaluated to assess achievement of key aims

1. Rationale

The key drivers for this work arise from the 'Re-thinking Alcohol Licensing' report which was published September 2011. This document outlines a new approach in licensing, one which moves away from focusing on decision making at the individual level to place greater focus on the collective affect of licensing across whole areas. This results in Licensing Board Policy having increased importance as a tool for supporting local strategies on reducing alcohol related harm.

The greater availability of alcohol through on and off sales, longer licensing hours and increased affordability is associated with increasing alcohol related harm. The impact of the sale or supply of alcohol on overall public health must now be a consideration by Licensing Boards when creating licensing policy. To allow such policies to be evidence based, public bodies have a duty to ensure the availability of alcohol related data is accessible and in a useable format for Licensing Boards.

This data must be relating to the five licensing objectives highlighted below and available on an ongoing basis.

- Preventing Crime and disorder
- Securing Public safety
- Preventing public nuisance
- Protecting and Improving Public Health
- Protecting Children from harm

2. Overall Aim of the Project

The overall aim of this project will be to provide the evidence base to inform and strengthen local licensing policy including the overprovision statement in line with the policy review and allow informed decision making.

3. Objectives

- Provide meaningful alcohol related data in a useable format to the Scottish Borders Licensing Board.
- Review the definition of areas and localities to be considered when assessing overprovision and ensure that statistical evidence can be collated accordingly.
- Create systems to allow ongoing reporting of data to Scottish Borders Licensing Board
- Inform Scottish Borders Licensing Board to support and strengthen it's commitment to public health objective

4. Outcomes (Linked to ADP Core Outcome)

An evidence-based licensing policy will contribute to the achievement of the following high level outcomes:

- Community Safety: Communities and individuals are safe from alcohol offending and anti-social behaviour
- Local Environment: People live in positive, health-promoting local environments where alcohol is less readily available
- Prevalence: Fewer adults and children are drinking at levels or patterns that are damaging to themselves or others

5. Steering Group

A steering group will be convened with membership from the following organisations within the Scottish Borders:

- Local Licensing Forum
- Licensing Board
- Safer Communities Team
- Alcohol & Drugs Partnership
- NHS Borders

- Scottish Borders Council
 - Business Consultancy Unit
 - Social Work Department
 - Licensing Unit
- Lothian & Borders Police
- Scottish Ambulance Service
- Fire Service
- Social Work Service

6. Risks

Risk	Risk Management
All relevant stakeholders not fully signed up to process	Ensure effective communication with all relevant stakeholders to help gain approval of the Licensing Board and LLF
Time and capacity constraints resulting in delayed timescales	Agree programme of meetings, specific timeframes for actions to be achieved, and designated leads/deputies at start of project
Poor quality data	Agree data gathering pilot to assess the quality, accuracy and validity of information gathered; identify areas for improvement; and agree actions to address these.

7. Timescales

February – March: convene steering group, identify data required and systems to capture this

April – June: 3 month data capture pilot.

July – August: Gather, analyse and interpret data and present draft findings to Scottish Borders Licensing Board to inform their licensing policy to be reviewed.