Cunninghame House, Irvine.

17 October 2013

North Ayrshire Licensing Board

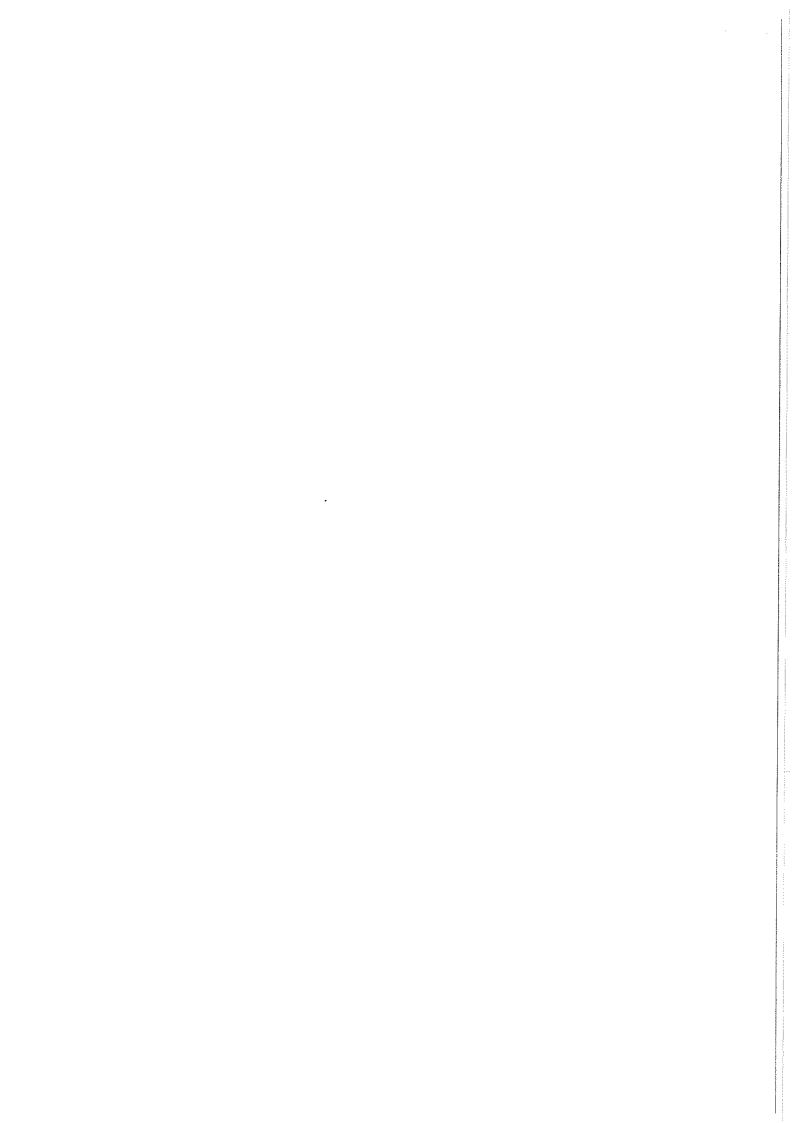
You are requested to attend a meeting of the North Ayrshire Licensing Board to be held in Committee Room 1, 3rd Floor, Cunninghame House, Irvine on MONDAY 21 OCTOBER 2013 at 10.00 am to consider the undernoted business.

Yours faithfully

Clerk to the Licensing Board

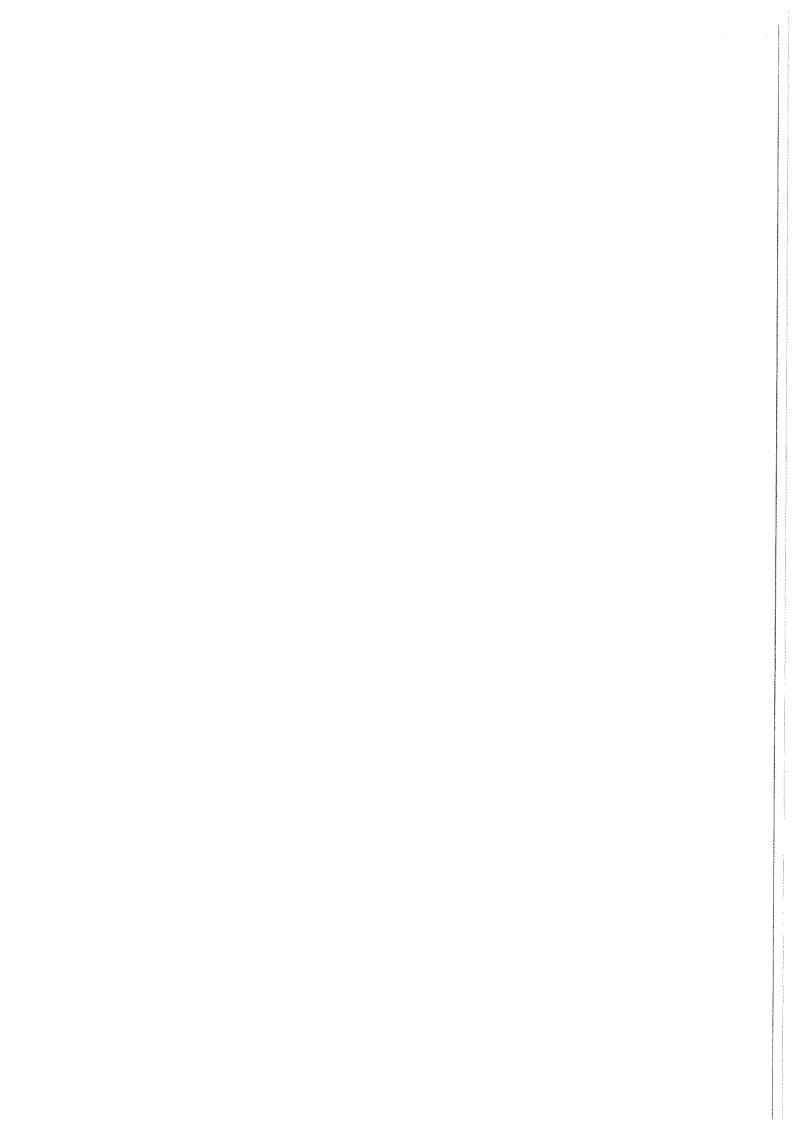
1. Draft Licensing Policy Statement 2013-2016

Discussion of draft Licensing Policy Statement 2013-2016 (copy enclosed)



Licensing Board

Sederunt:	Ronnie McNicol (Chair) Tom Marshall (Vice-Chair) Robert Barr John Bruce Ian Clarkson Ruth Maguire Alex McLean Alan Munro Donald Reid Robert Steel	Chair: Attending:
		Apologies:
		Meeting Ended:



Report

to

North Ayrshire Licensing Board

by

Solicitor (Licensing)

Subject:	Draft Licensing Policy Statement (LPS) 2013 - 2016.		
Purpose: To summarise the proposed procedure for and adopting the LPS.			
Recommendation:	That the Board discuss, amend and adopt a final version of the LPS.		

1. Background

At its Meeting on 30 September 2013 the Board gave initial consideration to a draft of its LPS.

The draft was then complete, except that it omitted:

Annex D - consultations with third parties prior to the LPS being drafted

Annex E - overprovision

2. Current Position

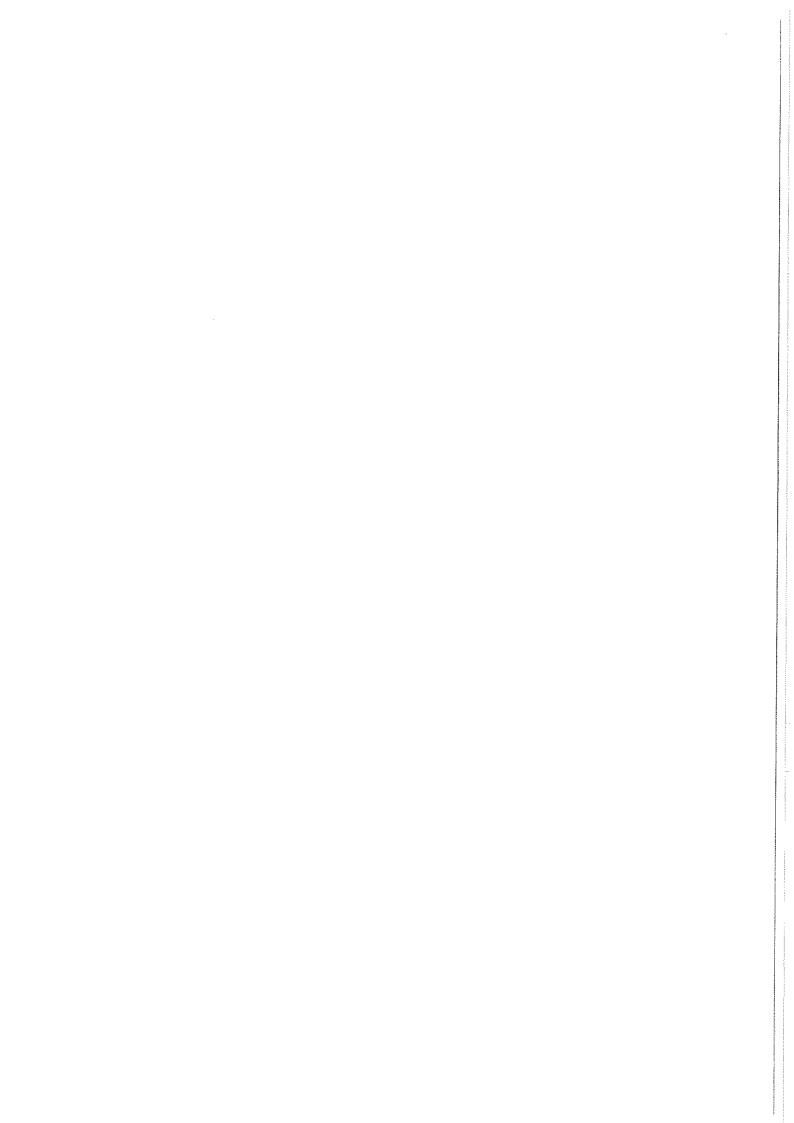
These parts are to be considered by the Board at a Special Meeting on Monday 21 October 2013, following a presentation by Andrew Fraser, Head of Democratic and Administration Services.

The Board should then discuss the whole draft LPS. The discussion may be in private if the Board so directs (2005 Act, Schedule 1, Paragraph 12(3)), although the adoption of the finalised LPS must be done in public, so the matter will be before the Board again at its next scheduled meeting (19 November), prior to the statutory deadline for adoption (30 November 2013). At that later meeting the Board will have a finalised draft, reflecting any amendments made by the Board.

3. Recommendation

The Board is invited:

- (a) to note this Report,
- (b) to consider, amend and agree the whole draft LPS,
- (c) continue to 19 November 2013 with a view to adopting a final version.



Annex D - Consultation on LPS and Overprovision Assessment

The 2005 Act makes separate requirements for consultation on:

- 1. Licensing Policy Statement (LPS)
- 2. Overprovision Assessment (OA)

1. LPS Consultation (Section 6(3)(b))

The Board must consult with:

- (a) the Local Licensing Forum;
- (b) Insofar as the Forum is not in fact representative of the interests which the Forum is required to be representative of:
 - (i) holders of Premises Licences and Personal Licences,
 - (ii) the Chief Constable for the police area in which the Forum's area is situated,
 - (iii) persons having functions relating to health, education or social work,
 - (iv) young people,
 - (v) persons resident within the Forum's area,

the Board must consult with such person or persons as appear to the Board to be representative of those interests;

(c) such other persons as the Board thinks appropriate.

In implementation of its duty, the Board consulted with the following by sending letters or memoranda in January 2013 inviting the recipients to make suggestions to the Board as to the form and content of the LPS and requesting comments by Friday 3 May.

- (a) Local Licensing Forum
- (b) Chief Executive, NHS Ayrshire & Arran
- (c) Chief Constable of Strathclyde Police
- (d) Strathclyde Fire & Rescue
- (e) All Community Councils in North Ayrshire,
- (f) South West Scotland Community Justice Authority
- (g) Chair, North Ayrshire Alcohol and Drug Partnership (NAADP)
- (h) NAC Senior Manager Building Standards
- (i) NAC Senior Environmental Health & Trading Standards Manager

In addition, a Public Notice summarising the purpose of the LPS and inviting comments was published on the Board's website in January 2013.

No representations were received from any party or member of the public, except for:

- (a) Local Licensing Forum
- (b) Chief Executive, NHS Ayrshire & Arran

These are summarised below.

2. OA Consultation (Section 7(3)(b))

The Board is required to consult:

- (a) the Chief Constable,
- (b) such persons as appear to the Board to be representative of the interests of—
 - (i) holders of Premises Licences in respect of Premises within the locality,
 - (ii) persons resident in the locality, and
- (c) such other persons as the Board thinks fit.

The Board considered that the consultation for the LPS satisfied this additional duty and took no other action to canvass views.

3. Response Summaries

The Responses are summarised below.

Respondents:

- (a) Local Licensing Forum
- (b) NHS Ayrshire & Arran

(a) Local Licensing Forum

The Forum raised three points, which had already been raised and discussed at the Joint Meeting between Board and Forum held under Section 10(3) on Monday, 22nd April, 2013.

- 1. Early Morning Opening
- 2. Festive Policy Extensions
- 3. Condition C10.3 (d) and (e)

Item 1 is addressed in the draft LPS (Paragraphs 7.5-7.10).

Item 2 was addressed by the Board at its meeting on 30 September 2013 when it adopted a policy for the forthcoming festive period.

Item 3 concerns the conditions which the Board applies in relation to the playing of pool, darts and other games in parts of the Premises which permit 'Children' (under 16). This is addressed by Paragraphs 3.17-3.18 of the LPS. Following the Forum's expression of concern, on 22 May 2013 the Board amended its Standard Conditions for Premises Licences and its Scheme of Delegations. The result is that a PLH can request dispensation from the relevant conditions, and this can be granted by the Clerk or Solicitor (Licensing) without a Board Hearing and without fee. The Board has a style application letter which PLHs seeking dispensation can use. As with any other delegation, any case might be referred to the Board, and this may happen if the arrangements proposed differ from those in the style.

The PLH requires to produce a plan showing where the pool table etc. is or is going to be. If dispensation is granted, a copy of the plan is issued by the Board, bearing an appropriate note and with a covering letter.

(b) NHS Ayrshire & Arran

The Health Board is a statutory consultee not only for the LPS but also for individual applications for Premises Licences and Major Variations.

Its response referred to paragraphs of the 2010-13 LPS. The comments here refer to the comparable provisions of the differently-numbered 2013-16 LPS, so it is shown here with a link to the newer LPS.

Where appropriate, the wording of the draft has been amended to reflect the representations.

The Health Board also provided the text and statistics which are document (c) in the Overprovision part of the LPS (Annex E).

Response:

"In preparing this response, we have considered the existing Licensing Policy Statement adopted in November 2010. The comments provided relate predominantly to the promotion of the Licensing Objectives with particular consideration given to the objective of protecting and improving public health, and are either related to existing content or provide comments for consideration intended to augment existing text.

Current	Draft			
2.4 & 2.7	2.4-2.7	Preventing crime and disorder We note under 2.7 the reference to premises being vigilant around age sales. We would concur with North Ayrshire Licensing Board regarding the problem of agent sales. We would wish the Licensing Board include adding agent sales in the list detailed in Para 2.4, and for the Licensing Board to require applicants to demonstrate how they was address this issue in order to strengthen the message around the nappropriateness of agent sales. One possible action would include the participation in bottle marking schemes to support the identification premises who may have engaged in agent sales. We know from the repeated episodic SALSUS surveys that study.		

		tobacco, alcohol and drug use among 13 & 15 Years olds, that there has been a reduction in 13 year olds in North Ayrshire who have ever had an alcoholic drink in 2010 compared to 2006 but the proportion of 15 year olds who have ever had a proper alcoholic drink is higher than the national average (84% in North Ayrshire compared to 77% nationally). The most common sources were shops, then older friends, off-licenses then relatives so the issue of access to alcohol for children is important.
2.10	2.15	Protecting and improving public health The harmful impacts of alcohol on health are very well known and we have included evidence of this for the Licensing Board. We welcome the specific reference that is made that a balance needs to be struck between having thriving licensed premises and the need to consider the health and wellbeing of patrons. We consider that the wider population should be included here since the association between alcohol and harm to others — through casual violence, domestic abuse, sexual assault, fetal alcohol harm — is well evidenced.
		We would like to see this section being more explicit around the role of licensed premises in promoting this licensing objective. Licence-holders can help achieve this in many ways. Ensuring that information and advice is available on sensible levels of drinking is easy to achieve. Licence-holders can also support public health activity in this area by participating in nationally recognised schemes/programmes such as: • Designated Driver Schemes • Alcohol awareness campaigns • Healthy Working Lives programme It is suggested that a co-ordinated approach to this activity is adopted,
		with local agencies such as NHS Ayrshire and Arran, North Ayrshire Council, North Ayrshire Alcohol & Drug Partnership and Scottish Police working with Licence-holders to ensure that any interventions are evaluated in terms of impact.
		Another aspect for improving public health relates to staff health and the encouragement of businesses, particularly those with licensed premises in this instance, to have a workplace alcohol policy, which raises awareness about alcohol and its potential negative impact upon health. Such a policy should detail procedures for dealing with situations when staff may have alcohol related problems and include information on support services. Staff should be able to access support (without fear of job loss) when a problem arises.
		The interlinked relationships between alcohol and other areas of life such as tobacco, drug use, sexual activity, gender based violence and personal safety should also be considered as part of this objective.
2.13	2.20	Protecting Children from Harm We welcome the range of responsibilities highlighted in this paragraph, especially the explicit recognition of the responsibilities of parents and other adults accompanying children.

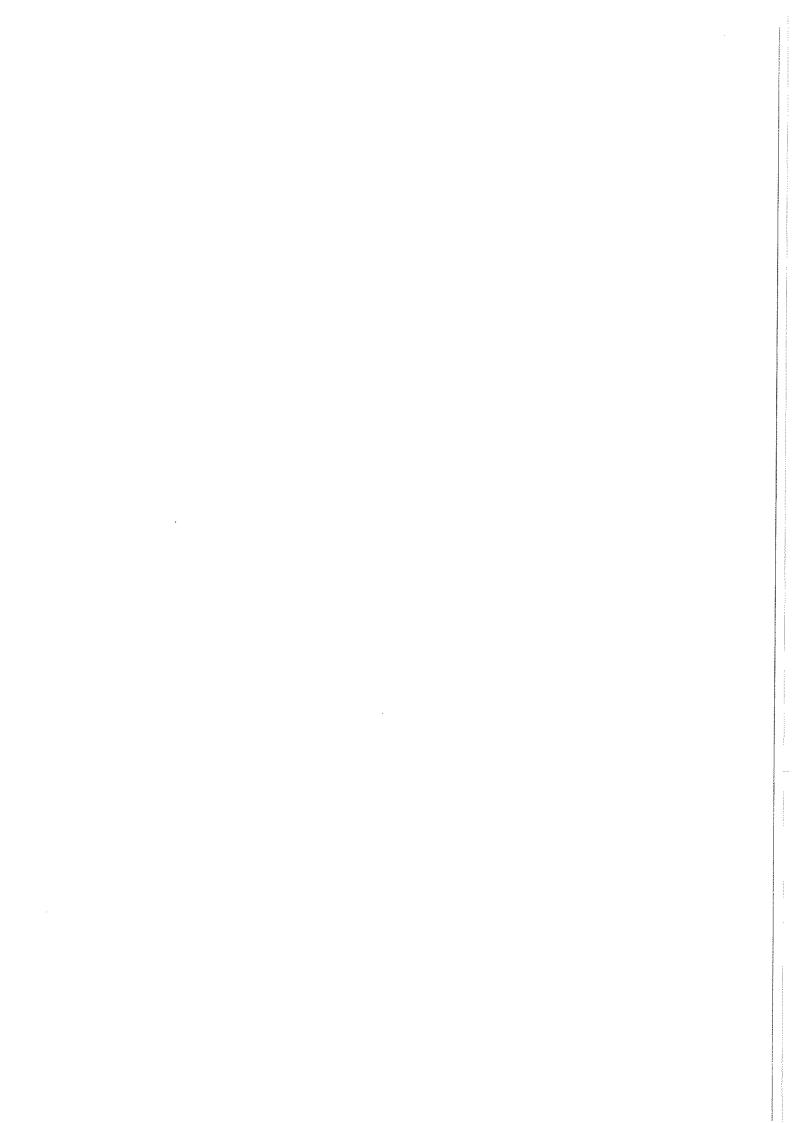
		We would wish support to be shown in the shift towards reducing overall population consumption as set out in the Scottish Government's framework Changing Scotland's relationship with alcohol. In particular we are concerned at the growing normalisation of alcohol availability at events and venues aimed at families with children of all ages. Our concerns include the effect this has on the overall availability and consumption of alcohol by adults responsible for children and young people. In addition, we know that children and young people's experience of alcohol is influenced by its use by parents and others within their community which in turn contributes to the culture of how alcohol is used and viewed in North Ayrshire.
		We are also concerned with the issue of under age drinking either illicitly or condoned since evidence highlights the vulnerability of children's brains up until early 20s to harm associated with alcohol consumption.
2.15	2.23	Home delivery We welcome the stipulations already in place to regulate the supply and purchase of alcohol through home delivery in upholding the licensing objectives.
		We would welcome the addition of stipulations that currently already apply both in an off and on sales context, namely that alcohol will not be sold to persons already intoxicated, recognising that there may be issues of safety and welfare to a potential purchaser, especially those who live alone.
		Home delivery may lead to the purchase of higher quantities of alcohol than would be achieved in a shop setting, where consideration may be given by the purchaser to the attitudes and perceived social norms of the shopping public.
		We would like the Board to note that, from verbal reports provided by patients who are receiving treatment and support for problematic alcohol use, home delivery is one of the options used for purchase of alcohol, primarily from independent local off-sales. The purchaser will either phone and arrange home delivery or use a local taxi service where the taxi driver buys the alcohol and then 'sells' onto the customer along with a charge for the taxi fare. It is our understanding that the latter arrangement breaches the law regarding alcohol sales and should be stopped.
Sec. 3	Annex H	Board Business - We have welcomed and benefited from the engagement we have had with the Board's staff.
Sec. 4	Sec. 3	Premises Licences - We have no comments we would wish to include on this section.
5.5	4.5	Management of Premises - Children and Young People on Licensed Premises - We recommend the addition of 'including no provision of food' at 5.5(b).
Sec. 6	7.11	Premises providing Late Night Entertainment - We are supportive of the curfew time of 12.30am and would not be in favour of extending licensing hours further.

Sec. 7	Sec. 5	Adult Entertainment - We welcome the statement regarding the Board's strong opposition to any form of adult entertainment and also welcome the inclusion of strict criteria to which premises must adhere if they wish to propose providing adult entertainment. The link between alcohol consumption and sexual behaviour which is later regretted is well recognised and supports the decisions made by the Board regarding adult entertainment.		
Sec. 8	Sec. 6	Plastic Glasses in late opening premises - We welcome the statement regarding the use of plastic glasses in late opening premises and the acceptance of the relationship between consumption of alcohol and violent crime.		
9.2	7.2(1)	Licensed Hours and Extended Hours - Off-Sales There is a significant body of evidence which highlights the link between alcohol availability and consumption. We would therefore strongly support no extension beyond the current 12 hours available for off-sales of alcohol.		
		There are a number of public health concerns we would wish to highlight about alcohol purchased from off-sales. The place of consumption is generally an unregulated environment (house, public space etc) so there are no controls around not serving people who are intoxicated. It is cheaper per unit than on-sales alcohol which can influence the amount consumed and frequency of consumption. Home measures tend to be larger than on-sales measures which can increase consumption either deliberately or unwittingly.		
		We would welcome the additional caveat of limiting hours in certain circumstances and would ask the Licensing Board to consider adding immediate health concerns as a consideration alongside antisocial behaviour.		
9.3	7.5-7.10	On sales - We support the continuation of the Licensing Board's position around earliest opening hour normally being 11am, and would not wish to lower this even in the circumstances outlined. We would ask the Licensing Board to clarify the nature of the evidence required to satisfy the Board that there is a demand. Whilst we accept alcohol is a legal drug which is enjoyed by many people		
		there are specific drinking patterns that are of concern, with early morning drinking being one of those.		
9.8	7.4	Policy on hours: normal trading - We support the continuation of the Licensing Board's position regarding terminal closing for the four categories outlined.		
9.9	7.13	Policy on Hours: extended Hours applications - We support the continuation of the Licensing Board's position regarding terminal closing for special events / occasions, both in the premises and nationally.		
9.16	7.19	Applications outside Policy - We support the continuation of the Licensing Board's position on the above. We have concerns about the creeping development practices evident in other areas of premises seeking an additional 1/2hr extension to gain business advantage, which in many		

		cases inevitably means similar premises in the vicinity seek equity. The health impact is that alcohol is then available for a longer period of time, contributing to the overall availability of alcohol within a 24hr period.
Sec. 10	Sec. 8	Occasional Licences - We support the continuation of the Licensing Board's position on the above.
		As a general point for consideration we do have concerns about the impact the granting of occasional licences has on the general availability of alcohol and the further expansion on the cultural norm of alcohol being available in ever-growing situations.
Sec. 11	Annex E	Overprovision - We advocate that the Licensing Board consider designating the whole of North Ayrshire as a zone rather than grouping communities together. This approach along with a vigorous overprovision assessment has had a significant impact for West Dunbartonshire Licensing Board.
		The data provided for your consideration we hope will be useful in informing North Ayrshire's Overprovision Assessment.
Sec. 12	Sec. 9	Members Clubs - We have some concerns around members clubs applying and being granted off-sales licences. The specific concerns relate to the enforcement of this element (sales to members and guests only) and the potential for higher levels of home consumption and consequent health impact given that prices charged may be lower than standard off sales prices.
Sec. 13		Garages - We support the continuation of the Licensing Board's position on the above which appears to be vigorous around provision of evidence of need. We do not view garages whose primary business is the sale of fuel for vehicles as being a necessary or desirable outlet for the sale of alcohol. The exemption would be where the garage is the only shop within a local community. We see this exemption mainly applying to highly remote and rural communities.
Sec. 14	Sec. 10	Personal Licences - We support the continuation of the Licensing Board's position on the above.
Sec. 15	Annex H	Licensing Standards Officers and Board and Council Staff - We have no comments we would wish to include on this section.

References:

- 1. Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2010- North Ayrshire
- 2. http://www.ama-assn.org/ama1/pub/upload/mm/388/harmful_consequences.pdf
- 3. Alcohol No ordinary Commodity Research and Public Policy (2nd edition) Chapter 9, Thomas Babor et al, Oxford University Press"



Annex E - Overprovision

1. Introduction

- 1.1. Section 7 obliges the Board to include in the LPS a statement as to the extent to which the Board considers there to be Overprovision of Licensed Premises, or Licensed Premises of a particular description, in any locality within the Board's area.
- 1.2. The issue of Overprovision arises when the Board is considering whether or not to grant applications for either a new Premises Licence or a Major Variation of an existing Licence. It is not relevant when dealing with Occasional Licences (Sections 7(5), 23(9) and 30(8)), and it did not did not apply during the Transitional Period (the period covering the move from the Licensing (Scotland) Act 1976 to the 2005 Act) to Premises with 'grandfather rights'.
- 1.3. In applications for a new Premises Licence, Section 23(5) is:
 - "23(5) The grounds for refusal are— ...
 - (e) that, having regard to the number and Capacity of-
 - (i) Licensed Premises, or
 - (ii) Licensed Premises of the same or similar description as the <u>Subject</u> Premises,

in the <u>locality</u> in which the Subject Premises are situated, the Board considers that, if the Application were to be granted, there would, as a result, be Overprovision of Licensed Premises, or Licensed Premises of that description, in the <u>locality</u>."

1.4. In applications for a Major Variation, Section 30(5)(d) is similar.

2. The Board's approach

2.1. Section 7(2) is:

"It is for the Licensing Board to determine the 'localities' within the Board's area for the purposes of this Act."

The Board has determined that there are 6 'localities' in its area (coinciding with the 6 'Neighbourhood Areas' used by the North Ayrshire Community Planning Partnership (CPP)):

- 1. North Coast (Skelmorlie, Largs, Isle of Cumbrae, Fairlie, Seamill & West Kilbride)
- 2. Three Towns (Ardrossan, Saltcoats & Stevenston)
- 3. Kilwinning (including Pennyburn, Blackland, Whitehurst Park, Woodside)
- 4. Irvine and Area (Irvine, Bourtreehill, Cunninghamhead, Dreghorn, Gateside, Girdle Toll, Springside & Torranyard)

- 5. Garnock Valley (Auchentiber, Barmill, Beith, Dalry, Glengarnock, Kilbirnie & Lugton)
- 6. Arran

These Areas contain a total of 38 Intermediate Zones ('IZs'). IZs are the areas commonly used to gather a wide range of government statistics.

- 2.2. The Assessment recognises that there are 6 Premises 'Function Types' (see Paragraph 7.2 in the main text of this LPS):
 - 1. Off-sales
 - 2. Entertainment venues (e.g. nightclubs)
 - 3. Other On-sales (e.g. public houses)
 - 4. Accommodation, meals, or refreshment
 - 5. Clubs with "Special Treatment" under Section 125
 - 6. Clubs without "Special Treatment" (what the Board calls 'Part K' Clubs)

Overprovision applies to all Function Types except FT5 (since Clubs which <u>are</u> eligible for "Special Treatment" under Section 125 are exempt from Overprovision : Section 125(2)(c)

- 2.3. The 2005 Act introduced a single 'Premises Licence' in place of:
 - (a) the seven separate types of Licence under the 1976 Act (e.g. 'Public House'), and
 - (b) the separate status of Registered Clubs (under the 1976 Act, Clubs were registered at the Sheriff Court instead of being Licensed by the Board).

It might be suggested that, because there is now a single type of Licence covering all sorts of Premises, it is not appropriate to have any regard to the 1976 Act's types.

The Board does not accept this:

- (a) the six Function Types reflect the different functions of Licensed Premises;
- (b) the vast majority of Premises which presently hold Licences under the 2005 Act already had licences under the 1976 Act (and so would already have been in a particular Function Type) and when these Premises applied for a 2005 Act Licence they did so (without exception) on a 'like for like' basis the Board was satisfied that in each case the Operating Plans and Layout Plans reflected substantially the existing Licensed activity;
- 2.4. The Board considers that its approach to the categorisation of different Premises is consistent with Paragraph 52 of the Guidance. However, it recognises that some Premises may not fit easily into a single category, e.g. a feature of the previous system was that the 'Public House Licence' covered both:
 - (a) Premises that concentrated on vertical drinking, and
 - (b) Premises where a substantial part of the business was the supply of food.

The Board would therefore be open to the suggestion that the overall scheme adopted by the Board might not adequately deal with particular Premises.

2.5. The consultation exercise on Overprovision has included Strathclyde Police. The Police have not identified any particular areas of concern in North Ayrshire.

It may well be the case that there is a higher rate of incidents of Crime, Disorder and Anti-social Behaviour in town centres, but it is not necessarily follow that there is a causal link between the presence of Licensed Premises and disorder. In any group of people, there will be a range of behaviours, from the majority who act lawfully and the minority who do not. While it may be that the minority are more likely to congregate in Premises which are poorly managed, the Board does not accept that the licensed trade generally should be demonised because of the acts of a minority. On the contrary, the Board considers that it is more appropriate to operate on a case-by-case basis:

- (a) the Police are automatically consulted in relation to new Premises Licence applications
- (b) the Police may supply a report on anti-social behaviour in the vicinity of proposed new Premises:
- (c) If the Police have a concern with <u>particular</u> Premises, the Police would be able to raise their concerns using the Section 36 Review Procedure, which might lead to Board action against the Premises Licence and the Personal Licence of anyone working on the Premises (e.g. the Premises Manager).
- 2.6. The Board's considers that its overall approach is consistent with the Guidance:
 - "16. A statement of policy should also make clear that licensing law is not the primary mechanism for the general control of nuisance and antisocial behaviour by individuals once they are no longer on the licensed premises and beyond the direct control of the individual, club or business holding the licence, certificate or authorisation concerned."
- 2.7. The Board takes the view that <u>general</u> statistics on crime and disorder should be treated with caution, but recognises that the incidence of crime and disorder is often associated with alcohol consumption. Accordingly the statistical indicators which the Board has taken into account in formulating its Policy on Overprovision include such statistics.

3. Description of Documents

- 3.1. Attached to this LPS are four documents which were considered by the Board in the preparation of this LPS:
 - (a) 'Premises Data (NALB-LPS 2013-16)'

- (b) 'Neighbourhood Areas (NALB-LPS 2013-16)'
- (c) 'Public Health Data (NALB-LPS 2013-16)'
- (d) 'MESAS Report (NALB-LPS 2013-16)'

(a) 'Premises Data (NALB-LPS 2013-16)'

3.2. This spreadsheet is a survey of the Board's area, based on a recent survey of the Licences which are currently in force (the situation changes day-by-day). The spreadsheet sets out (for each of the 6 Localities) information about the number and capacities of Premises of all relevant Function Types. For comparision it gives populations and capacity-per-thousand-people.

Capacity has different meanings depending on the form of sale (see Section 147):

On-sales capacity = numbers of customers

Off-sales capacity = square metres of display

It is possible that some premises may have to state both figures, e.g. some public houses sell offsales.

Even a convenience store should state its capacity in Question 7 of Operating Plan, as well as showing the location and dimensions of the area on its Layout Plan.

(b) 'Neighbourhood Areas (NALB-LPS 2013-16)'

3.3. This spreadsheet is a survey of the 6 Localities, giving (for each of the 38 IZs) population and measures for several health and social indicators. This uses a 'traffic light' system, where the various indicators are given a colour to indicate whether the particular IZ is significantly 'worse', no different, or 'better' than Scottish average:

red: Statistically significantly 'worse' than Scottish average

white: Statistically not significantly different from Scottish average

blue: Statistically significantly 'better' than Scottish average

The spreadsheet also includes a summary which indicates that 4 of the 6 Localities in North Ayrshire are, taking a broad view, significantly worse than the Scottish Average:

	Worse	Better
1. North Coast	6	35
2. Three Towns	59	9
3. Kilwinning	22	9

4. Irvine etc.	67	16
5. Garnock Valley	24	0
6. Arran	0	5

(c) 'Public Health Data (NALB-LPS 2013-16)'

3.4. This document (part of the NHS submission to the draft LPS) contains several figures (graphs) which overall support the conclusion that alcohol consumption causes significantly greater public health damage in North Ayrshire than it does in the rest of Scotland. The Board is anxious to address this problem and considers that a consistently enforced Overprovision Policy is necessary.

The figures are:

1	Time trends for 5-year moving averages of alcohol related deaths 1979-83 to 2006-10 in North Ayrshire
2	Deaths from alcohol-related conditions by Community Health Partnership (5-year average 2005 – 2009)
3	Hospital discharge rates for alcohol-related conditions by CHP (3-year average 2007-2009)
4	Alcohol related and attributable hospital discharge rates for those aged 15 to 24 by CHP (3-year average 2007 - 2009)
5	Hospital discharge rates for alcohol-related conditions within North Ayrshire by intermediate zone (3-year average 2007-2009)
6	Hospital discharge rates for alcohol-related conditions, Scotland and North Ayrshire compared to intermediate zone with highest rate of admissions
7	Time trend in life expectancy at birth in North Ayrshire 1981-1983 to 2008-2010
8	North Ayrshire CHP Life expectancy at birth by intermediate zone- males (5-year average 2003-2007)
9	North Ayrshire CHP Life expectancy at birth by intermediate zone - females (5-year average 2003 - 2007)
10	Standardised premature mortality rates under 75 years of age by sex for North Ayrshire, 2006 -2011
11	Percentage of 15-year old pupils who usually drink alcohol at least once a week by CHP (2006)

(d) 'MESAS Report (NALB-LPS 2013-16)'

MESAS ("Monitoring and Evaluating Scotland's Alcohol Strategy") is a work programme carried out by NHS Health Scotland, at the request of the Scotlish Government.

There are two main issues with the effect of alcohol on society

- (1) price
- (2) availability

The MESAS Report addresses both issues. The Board regards it is a valuable resource but there is an important reservation. The Board has no powers in relation to price. The issue of minimum alcohol pricing is a matter of political controversy. The Board is quasi-judicial body and it would not be appropriate for it to express a view one way or another.

However, the Board <u>is</u> entitled to control availability, by determining when Premises should be granted Licences or their capacities increased, and indeed is expected to do so, since the statute:

- (1) requires the Board to assess Overprovision (Section 7) and then
- (2) obliges the Board to refuse any Application where Overprovision would occur as a result of grant (Sections 23(5)(e) & 30(5)(d)).

4. Application of the Overprovision Assessment

- 4.1 The Board's approach is consistent with the Guidance (Paragraphs 54 to 57):
 - "54. Where a Licensing Board's policy statement has concluded that in a particular locality there is an overprovision of licensed premises, or licensed premises of a particular description, an application for a new premises licence or for the variation of an existing licence in that locality **should normally be refused** on the ground provided by Section 23(5)(e) of the Act, either:
 - · because it would simply add to the number of licensed premises; or
 - · because it would increase the number of premises of the relevant description,

depending on the approach which the Licensing Board has taken in the policy statement.

- 55. The application need not be the subject of an objection.
- 56. The effect of the policy is to create <u>a rebuttable presumption</u> against the grant of an application. Each application still requires to be determined on its own merits and there may be exceptional cases in which an applicant is able to demonstrate that grant of the application would not undermine the licensing objectives, or those objectives would not be undermined if the applicant's operating plan were to be modified or the grant of the licence made subject to appropriate conditions.
- 57. Because the application of the policy must leave room for exceptions, the policy statement should not set a numerical quota of licensed premises or premises of a particular description for any locality." (emphasis added)

Policy on Overprovision

- 4.2. The Board has considered the information referred to above (Paragraph 3 "Description of Documents"), and has had regard to the fact that the existing number of Premises:
 - (a) largely reflects the number of Premises which applied for 2005 Act Premises Licences during the Transitional Period,
 - (b) together with new Premises which have been granted Licences since,

The Board considers that there is Overprovision in <u>all</u> Localities of its area, and not only in the Localities which are predominantly 'red' in the 'traffic light' scheme. The present number of Licences reflects the Board's historical willingness to permit the number of Licensed Premises in the tourist areas of Arran, and to a lesser extent, the North Coast, to exceed the average for the rest of the Board's area. The Board takes the view that such an excess is not consistent with the Licensing Objective "protecting and improving public health".

- 4.3. When the Board requires to consider an Application for:
 - (a) a new Premises Licence (including a Provisional Premises Licence) or
 - (b) a Major Variation which would lead to an increase in capacity in an existing Premises Licence.

the Board will proceed as follows.

4.4. Procedure.

- (a) The Board will start by identifying the Locality containing the Premises and the Function Type;
- (b) it will then consider whether or not any of the 'Additional Factors' (listed in Paragraph 4.5 below) apply;
- (c) It will have a report supplying data on the existing number and capacities of this and <u>other</u> Premises in that Locality and Function Type, and (where relevant) stating which of the 'Additional Factors' may apply;
- (d) It will consider the Application with the presumptions (listed in Paragraph 4.6 below).

4.5. 'Additional Factors'

The likelihood that the Application will be granted or refused, will be influenced by the Locality and the Function Type:

- (a) Locality: an Application in these 4 Localities is especially unlikely to be granted: "Three Towns"; "Kilwinning"; "Irvine etc."; or "Garnock Valley";
- (b) Function Type: the Board is aware:
 - that a substantial proportion of alcohol is bought from off-sales shops and consumed in an unregulated environment (unlike a public house, there are no checks on the rate consumed, volume consumed, or the age of the consumer);
 - that disorder in or near on-sales is often contributed to by customers 'front-loading' by drinking at home or in public places;

Accordingly any application for Premises in Function Type 1 is especially unlikely to be granted;

- (c) Function Type: the Board is concerned with what may be characterised as the 'night-time economy', with members of the public visiting Premises, and travelling between Premises, where the consumption of alcohol is a substantial element of the night's events. Thus the presumption of refusal would apply to pubs, nightclubs, and 'Part K' Clubs (Function Types 2, 3 and 6);
- (d) Function Type: where the Premises are in Function Type 4 (On-Sales Premises whose principal function is the provision of accommodation, meals or non-alcoholic refreshment), the Board may regard the grant of a new Licence (or Variation of an existing one) as not calling for refusal, on the view that such Premises may not be a significant contributor to overall disorder; however since the Board accepts that the consumption of alcohol in any circumstances has the potential to injure health, and endorses the view that "alcohol is not an ordinary commodity", it may refuse the Application here also.

4.6. Presumptions

- (a) the existing number and capacities of Premises in that Locality and in that Function Type is already sufficient,
- (b) Overprovision would result if the Application was to be granted, and
- (c) the Application should be refused.

It would not be necessary, for the presumption of refusal to apply, for there to be any objection made by a third party.

It would always be open to the particular Applicant to seek to persuade the Board that the Application should be granted. The Assessment does not set rigid quotas.

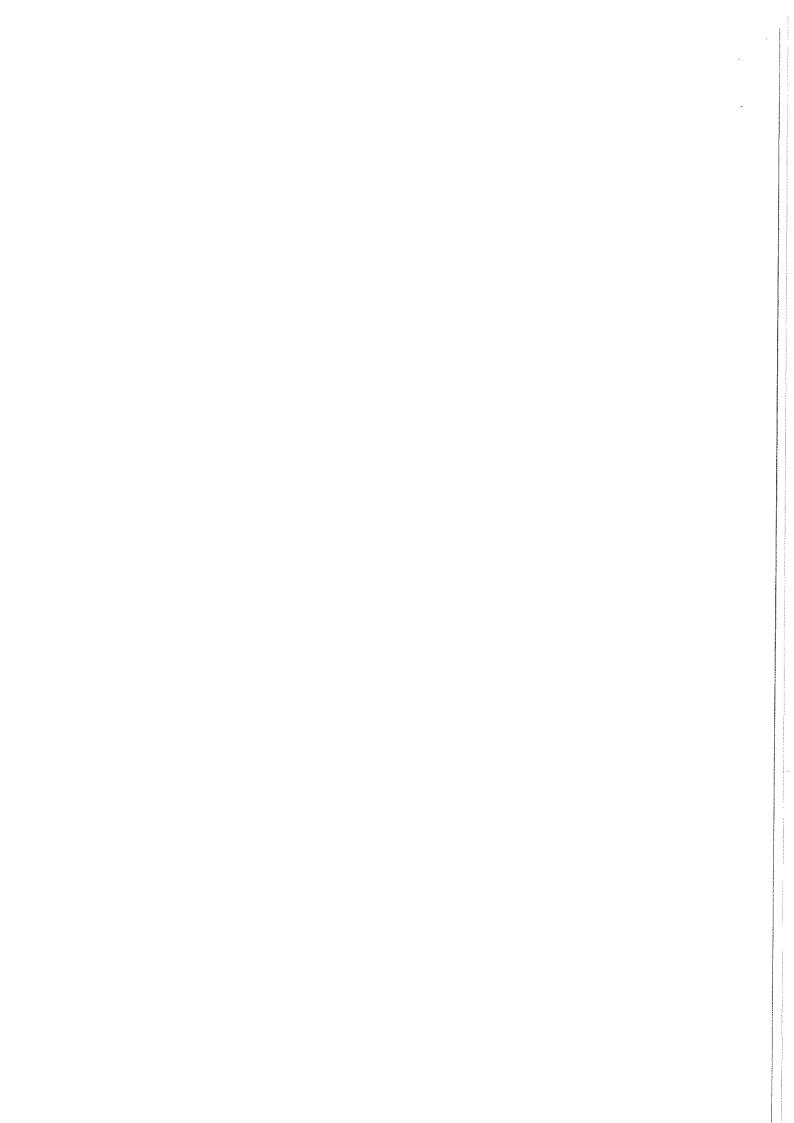
4.7. Subsequent Events

The Assessment should be regarded as varied as a result of subsequent events:

(a) If the Board sees fit to depart from the Policy in an individual case, then the Assessment should be regarded as varied, and the Board will take into account the fact that it has already been departed from;

for example, suppose that the original Assessment notes that there are 1,000 customers in a particular Locality; if the Board later grants an Application which increases the capacity to 1,100, a second Application for Premises in the same Locality will be approached by the Board on the view

- (i) that the Board has already changed its position;
- (ii) that the appropriate level is 1,100,
- (iii) that the second Application is even more likely to lead to Overprovision;
- (b) If capacity is reduced, as by the closure of Licensed Premises or the variation of an existing Licence; in the same example, if the Capacity in the locality fell to 900, the Board would approach a new Application on the basis that that the appropriate level was 900 and that the Locality was already at its Overprovision limit.



North Ayrshire Licensing Board - Licensing Policy Statement 2013-16 Document '(a) Premises Data (NALB-LPS 2013-16)'

Total population:

133,865

Total Premises (except FT=5)

348

Capacities:	Premises	On-sales	Off-sales
North Coast	82	9,111	401
Three Towns	89	7,492	932
Kilwinning	26	2,256	196
Irvine and area	91	14,573	1,536
Garnock Valley	50	4,412	1,057
Arran	45	4,231	332

Spread of Function Types:	FT1	FT2	FT3	FT4	FT6
North Coast	18	3	34	14	1
Three Towns	33	5	29	7	6
Kilwinning	9	0	14	1	1
Irvine and area	36	6	32	6	4
Garnock Valley	18	0	22	3	4
Arran	9	0	21	12	0

Population & Capacity ratios	per thousand (
Total ON-SALES capacity (customers)	42,075	314		
Total OFF-SALES capacity (sq.m.)	4,627	34.6		

	People	Prem/K	On/K	Off/K
North Coast	24,722	3.3	368	16
Three Towns	30,966	2.9	241	30
Kilwinning	15,081	1.7	149	13
Irvine and area	37,738	2.4	386	40
Garnock Valley	20,059	2.5	219	52
Arran	5,299	8.5	798	62

Sources:

- 1. Population from 'Scottish Neighbourhood Statistics' (SNS) 2011
- 2. NALB data on Premises Licences as at 7 October 2013

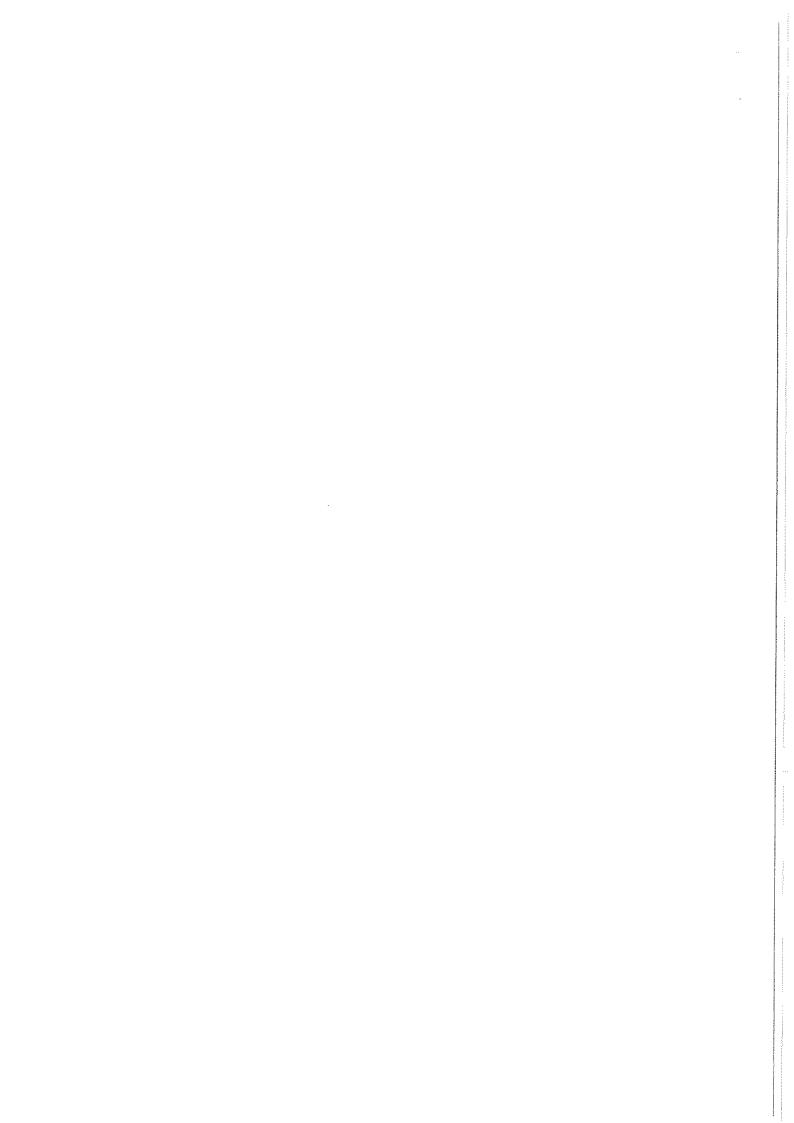
Function Types' (see LPS para. 7.2); generally

- 1. Off-sales Premises
- 2. On-sales Premises PRINCIPALLY providing entertainment (e.g. nightclubs)
- 3. Other on-sales Premises (e.g. public houses)
- 4. On-sales Premises principally providing accommodation/meals/non-alcoholic refreshment
- 5. Members' Clubs with Special Treatment (excluded from Overprovision)
- 6. Members' Clubs without Special Treatment

These figures disregard:

- 1. Clubs which are entitled to special treatment under section 125 (FT=5)
- 2. Gantries in on-sales premises

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North Ayrshire Licensing Board - Licensing Policy Statement 2013-16 (b) Neighbourhood Areas (NALB-LPS 2013-16)

	(1.	// weighbourhood Areas (with a	~ = v		, ,							
ŗ	Populatio	on	He	alth	an	d ot	her	soci	al in	dicat	tors	
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S02000869	3,781	Largs North	W	W	Ь	-b	b	b	(6)	b	W	ь
S02000866	5,199	Largs Central & Cumbrae		W	W						W	W
S02000868	3,738	Largs South	b	Ь	Ь	ю	Ъ	Ъ	b	b	W	W
S02000860	4,282	Fairlie and Rural	Ь	b	b	lb.	b-	b	b	l b	W	W
S02000858	4,440	West Kilbride & Seamill	b	ю	W	b	b	W	b	b	W	W
		- Marine Harris - Marine										
2. Three Tow	ns				·	**********				e verson me		
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S02000849	3,109	Ardrossan Central										
S02000855	4,281	Ardrossan North East	W	W						W	W	
S02000848	3,127	Saltcoats North West	W	Ь	W	Ь	b	W	Ь	W	W	W
S02000846	3,047	Saltcoats Central						- 0				
S02000852	4,607	Saltcoats North East						1		W		
S02000847	3,319	Stevenston North West	W	b	W							
S02000850	3,924	Stevenston Hayocks		W							W	
S02000844	2,562	Stevenston Ardeer									W	
3. Kilwinning		AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	Your in State		This Winger					Takin servina		//
S02000851	3,949	Kilw. West & Blacklands								b		
S02000857	3,809	Kilwinning Central & North	W	W							W	
S02000853	2,862	Kilwinning Pennyburn	W	W							W	W
S02000856	4,461	Kilw. Whitehirst Pk & Woodside	b	b	W	b	b	b	b	b	W	b
4. Irvine etc.	AND THE PROPERTY OF THE PROPER											
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S02000839	2,904	Irvine East	_	W						Ъ	W	
S02000835	2,769	Irvine Fullarton				I						
S02000836	2,759	Irvine Broomlands	W	W				1		W	W	
S02000837	2,389	Irvine Bourtreehill	W	W							W	
S02000833	3,003	Irvine Tarryholme	ь	b	W	b	b	b	b	b	b	ı
S02000843	4,120	Irvine Perceton & Lawthorn	W	W	W	b	þ	b	b	b	W	W
S02000845	3,480	Irvine Castlepark North						1				
S02000841	2,975	Irvine Castlepark South		W								
S02000840	2,904	Girdle Toll & Stanecastle	W	W		W	W	W		b	W	
S02000834	3,482	Dreghorn	W			W	W			W	W	W
S02000842	3,935	Springside & Rural	W	W					W	b.	W	W
5. Garnock Va				ı	T	was			Γ		7	1
S02000859	2,931	Dalry East and Rural	W	W	W	W	W	W	W		W	W
S02000861	3,072	Dalry West	W	W			W					
S02000862	3,931	Beith East and Rural	W	W	W	W	W	W	W		W	W
S02000864	3,104	Beith West	<u> W </u>	W		W	W		W		W	W
S02000865	3,052	Kilbirnie North	W	W						W	#	W
S02000863	3,969	Kilbirnie South & Longbar	<u> W </u>	W				4		W	7.	

w w b b b b w b w w

6. Arran

S02000832

5,299 Arran

Summary

1. North Coast	24,722	
2. Three Towns	30,966	and the second of the second
3. Kilwinning	15,081	
4. Irvine etc.	37,738	16
5. Garnock Valley	20,059	
6. Arran	5,299	Program Ething West 5

Total

133,865

Sources:

- 1. Population: Scottish Neighbourhood Statistics (SNS) 2011
- 2. Health and other social indicators:

The 'Traffic Light' indicators are taken from the NHS document -

"Health and Wellbeing Profiles 2010 Spine Pack" - "North Ayrshire CHP Health Summary", available on http://scotpho.org.uk/web/FILES/Profiles/2010/North%20Ayrshire%20spine%20chart%20pack.pdf

This document gives local measures compared with Scottish average, for over 50 indicators. The indicators shown here are considered by the Board to be most relevant to alcohol licensing:

- 1. Life expectancy males
- 2. Life expectancy females
- 9. Patients hospitalised with alcohol conditions
- 38. Population income deprived
- 39. Working age population employment deprived
- 40. Working age population claiming Jobseeker's Allowance
- 41. Dependence on out of work benefits or child tax credit
- 43. Crime rate
- 44. Prisoner Population
- 46. Patients hospitalised after an assault

The 'Traffic Light' system colours each indicator:

red: Statistically significantly 'worse' than Scottish average

white: Statistically not significantly different from Scottish average

blue: Statistically significantly 'better' than Scottish average

In 2 of the 38 IZs, Indicator 44 (Prisoner Population) is not available, and this is shown '#'.

North Ayrshire Licensing Board - Licensing Policy Statement 2013-16

Document '(c) Public Health Data (NALB-LPS 2013-16)'

North Ayrshire

3 May 2013



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Figure 2:	Deaths from alcohol-related conditions by Community Health Partnership (5-year average 2005 – 2009)
Tigure 3:	Hospital discharge rates for alcohol-related conditions by CHP (3-year average 2007-2009)
rigure 4:	Alcohol related and attributable hospital discharge rates for those aged 15 to 24 by CHP (3-year average 2007 - 2009)
Figure5:	Hospital discharge rates for alcohol-related conditions within North Ayrshire by intermediate zone (3-year average 2007-2009)
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Figure 7:	Time trend in life expectancy at birth in North Ayrshire 1981-1983 to 2008-2010
Figure 8:	North Ayrshire CHP Life expectancy at birth by intermediate zone- males (5-year average 2003-2007)
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Figure 10:	Standardised premature mortality rates under 75 years of age by sex for North Ayrshire, 2006 -2011
Figure 11:	Percentage of 15-year old pupils who usually drink alcohol at least once a week by CHP (2006)

quite large and these are likely to be less robust than at larger geographical levels such as NHS Board and nationally. Where looking at the data at small geographical levels, such as local authority and intermediate zone, it will always show differences as being used to look more closely at the data behind them. Some of the figures can demonstrate inequalities across North Ayrshire but when confidentiality and statistical robustness. Data are suppressed where numbers are too low. necessary, indicators are based on combined years in order to avoid the problems associated with small numbers such as The public health data presented in this mini report come from a range of sources, and the web links that reference each figure can be

2

within North Ayrshire. It highlights where alcohol issues are concentrated and links could be made to overprovision. health data, with information that indicates geographical differences between Scotland and North Ayrshire and between communities This mini report provides information to assist in the development of the Licensing Policy Statement. It contains locally relevant public

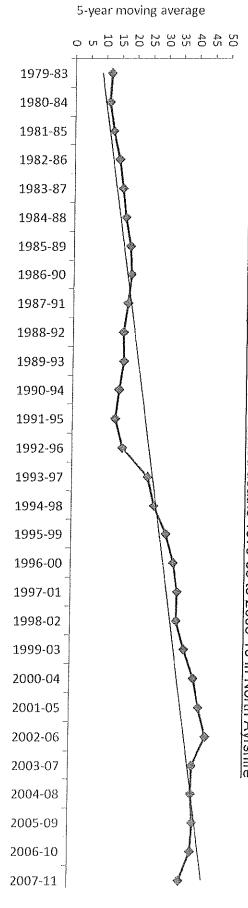


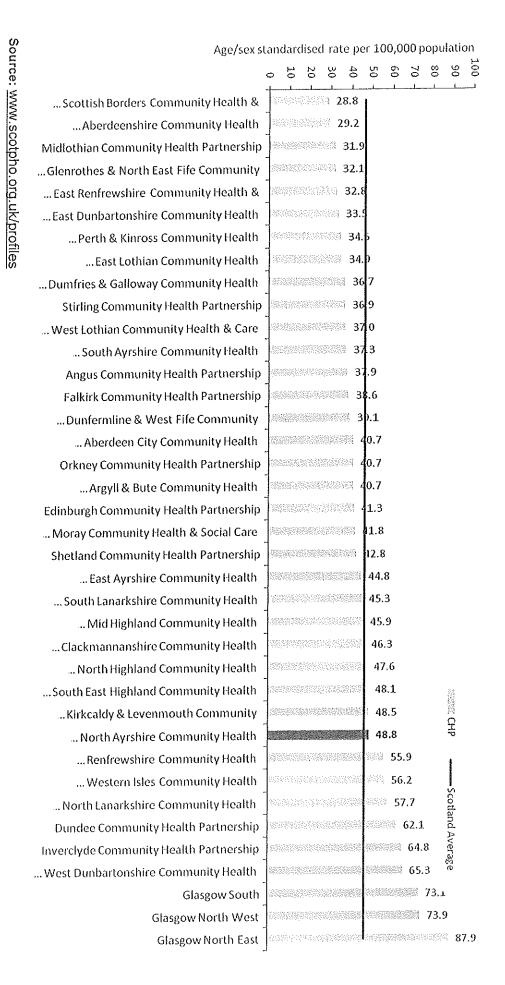
Figure 1: Time trends for 5-year moving averages of alcohol-related deaths 1979-83 to 2006-10 in North Ayrshire

codes 291, 303, 305.0, 425.5, 571.0, 571.1, 571.2, 571.3, 571.4, 571.5, 571.8, 571.9, E860 K73, K74.0, K74.1, K74.2, K74.6, K86.0, X45, X65, Y15] Source: www.gro-scotland.gov.uk/files2/.../alcohol-related-deaths/ard-2011-table3.pdf [includes 1) 1979-1999 International Classification of Disease (ICD)9 2000 onwards: ICD10 codes F10, G31.2, G62.1, I42.6, K29.2, K70,

Figure 1 demonstrates that over the last 28 years, the number of alcohol related deaths in North Ayrshire shows a continuous and gradually increasing trend. There are fluctuations for interval periods and this is probably due to the relatively small geographical area Figure 2: Deaths from alcohol-related conditions by Community Health Partnership (5-year average 2005 – 2009) of North Ayrshire. However, the trend line shows the upward direction for this public health issue.

conditions of 48.8 per 100,000 population.

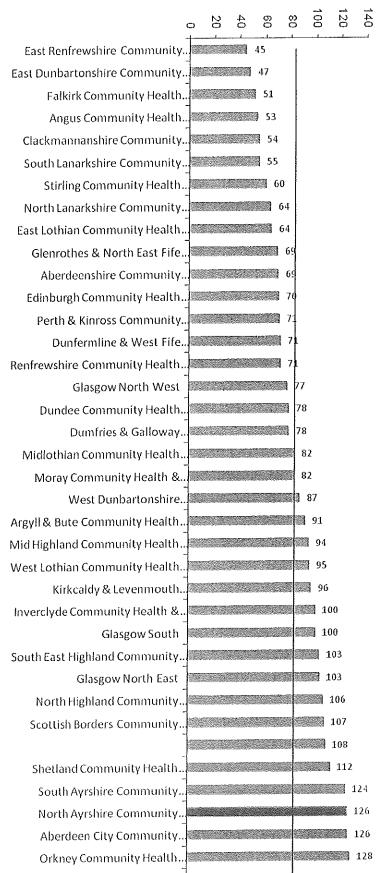
Figure 2 indicates that North Ayrshire is statistically similar to Scotland with an age sex standardised mortality rate from alcohol



600 008 400 200 ... East Dunbartonshire Community Health Angus Community Health Partnership 700.1 701.0 Stirling Community Health Partnership 702.7 Falkirk Community Health Partnership 709.6 ... East Renfrewshire Community Health & 737.5 ... Clackmannanshire Community Health ... Glenrothes & North East Fife Community 784 829 9 East Lothian Community Health Partnership 878.5 ...South Lanarkshire Community Health Edinburgh Community Health Partnership 894.3 9d1.2 ... Perth & Kinross Community Health 929.4 ... Aberdeenshire Community Health **Dundee Community Health Partnership** Samuel Productivities 952.4 Midlothian Community Health Partnership ... Scottish Borders Community Health & Care 962.0 ... Dunfermline & West Fife Community Health 096.5 1031.2 Renfrewshire Community Health Partnership 1039.3 ... North Lanarkshire Community Health 1043.4 ... West Lothian Community Health & Care 1117.0 Argyll & Bute Community Health Partnership ...Kirkcaldy & Levenmouth Community Health 1121.8 Glasgow North West 1126.8 1129.3 Shetland Community Health Partnership 1156.7 ... West Dunbartonshire Community Health ... Dumfries & Galloway Community Health 4 1170.7 ... Moray Community Health & Social Care 1174.0 Western Isles Community Health Partnership 1333.5 1351.7 Mid Highland Community Health Partnership 1365.5 Aberdeen City Community Health Partnership F 1366.2 ... South East Highland Community Health ...South Ayrshire Community Health 1370.0 Inverciyde Community Health Partnership 1413.5 Scotland Average ... North Highland Community Health 1430.7 1538.4 East Ayrshire Community Health Partnership ... North Ayrshire Community Health Orkney Community Health Partnership 1564.1 1628.7 Glasgow South Glasgow North East 1700.2

Figure 3 shows that North Ayrshire has a statistically significantly higher rate of hospitalisations for alcohol conditions, ranked 4th highest of the 38 CHPs in Scotland. Figure 4: Alcohol related and attributable hospital discharge rates for those aged 15 to 24 by CHP (3-year average 2007 - 2009)

European age sex standardised rate per 100,000 population aged 15-24



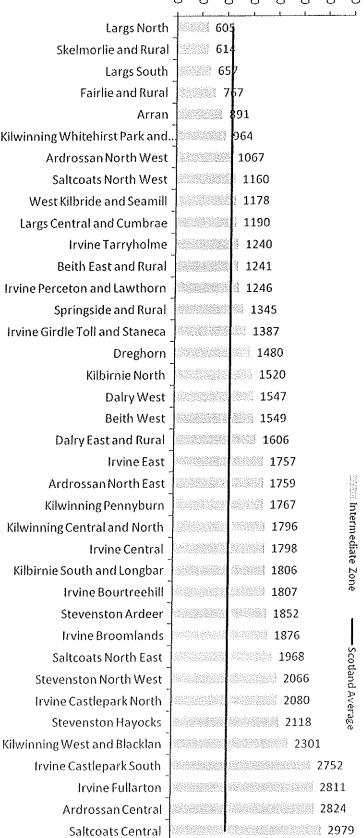
East Ayrshire Community Health..

Source: www.scotpho.org.uk/profiles

being hospitalised for alcohol related conditions

Figure 4- highlights that North Ayrshire is ranked as having the fourth highest rate of all the 38 CHPs in Scotland for 15 to 24 year olds



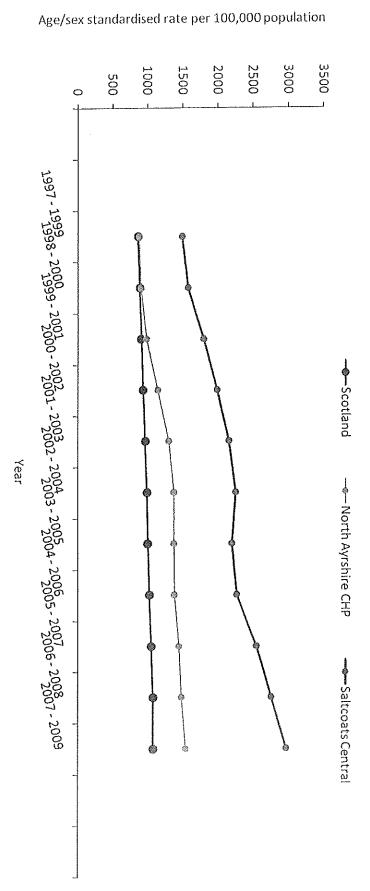


Source:www.scotpho.org.uk/profiles

alcohol, being much more common in people who drink more alcohol and this demonstrates the long term harm to individuals, alcoholic liver disease). However many other conditions (such as cancer of the oesophagus and breast cancer) are partly due to with the Scottish average of 1,008 per 100,000. The health impact of alcohol includes conditions wholly due to alcohol (such as communities and costs to the public sector The discharge rate of people with alcohol-related conditions ranges from 605 per 100,000 in Largs North to 2,979 in Saltcoats Central

knowledge, allows a very local level focus on issues such as overprovision of access to alcohol therefore likely to be The CHP Profiles can demonstrate inequalities but when looking at the data at sub-CHP level it will always show these as larger and less robust than at larger geographical levels. However this type of information when combined with local

Figure 6: Hospital discharge rates for alcohol-related conditions, Scotland and North Ayrshire compared to intermediate zone with highest rate of discharges



Source: www.scotpho.org.uk/profiles

Figure 6 indicates that Saltcoats Central is the intermediate zone with the highest rate of discharges for alcohol-related conditions per interventions and action particularly around overprovision of access to alcohol at the local level North Ayrshire and Scotland as a whole is 660 and 221 per 100,000 respectively. This type of data can inform local planning, 100,000 of the population and that this has increased by 1,483 per 100,000 in the 10 year period shown. The increase in the rate for

Life expectancy at birth

expect to live if the current age and sex specific mortality rates are applied throughout its life. Alcohol consumption above the alcohol (100 proof) for each adult over 16 years of age '. recommended safe limits reduces life expectancy. In Scotland the per capita consumption of alcohol sits at 11.9 litres of absolute Life expectancy at birth is used as an indicator of how healthy a community is; it is the mean number of years a baby born today can

of the UK. decline in mortality rates. However, over the last three decades the mortality rates have fallen more slowly in Scotland than in the rest for females in Ayrshire and Arran since 1981-83. These are substantial gains over a relatively short period of time, reflecting a steady Life expectancy at birth has been increasing over many decades in Scotland and has increased by 6.7 years for males and 5.3 years

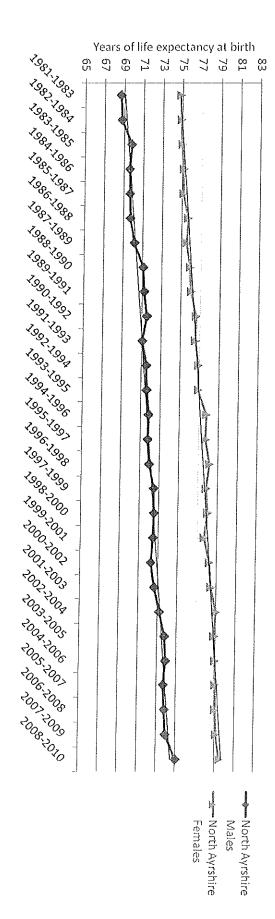


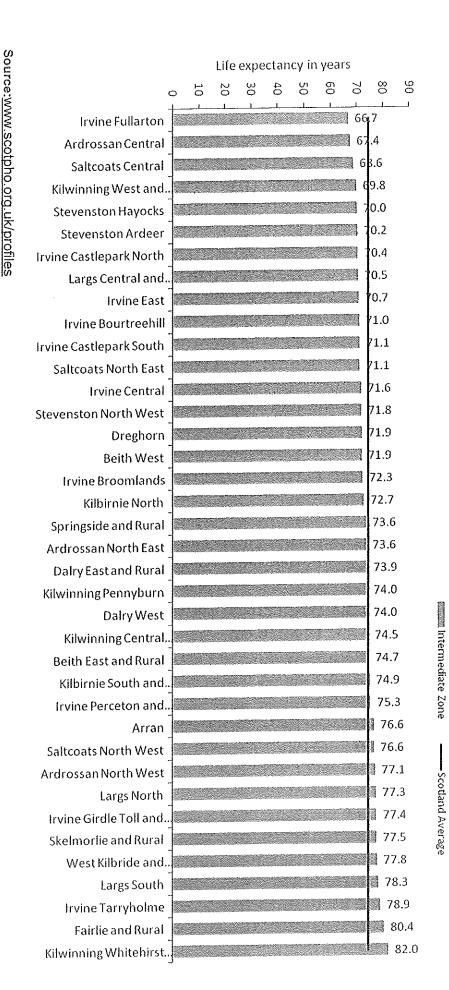
Figure 7: Time trend in life expectancy at birth in North Ayrshire, 1981-1983 to 2008-2010

Source: http://www.gro-scotland.gov.uk/statistics/theme/life-expectancy/scottish-areas/archive/index.html

http://www.alcoholinformation.isdscotland.org/alcohol_misuse/files/alcohol_stats_bulletin_2011_updated_110413.pdf]

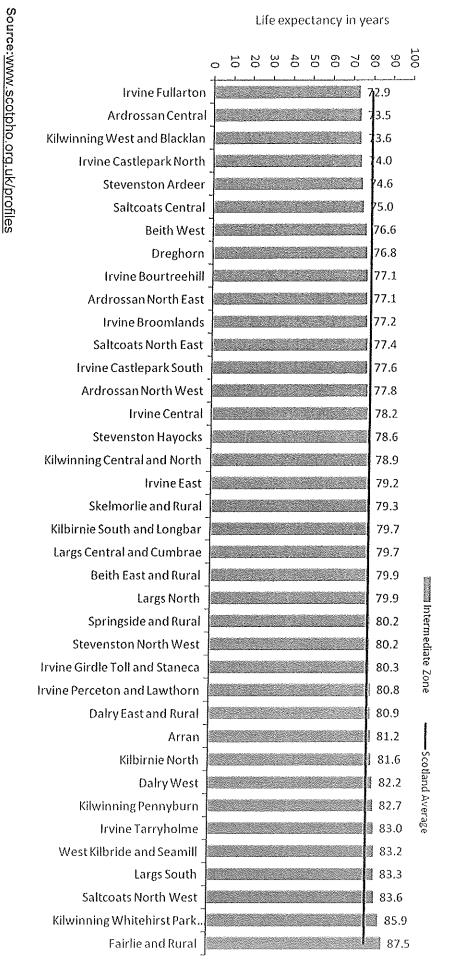
Alcohol Statistics Scotland 2011

Figure 8: North Ayrshire CHP Life expectancy at birth by intermediate zone- males (5-year average 2003 - 2007)



year difference between the most and least deprived intermediate zones. Caution should be used in interpreting these figures due to Figure 8 demonstrates the inequality in life expectancy at birth for males by intermediate zone across North Ayrshire, illustrating a <u>__</u>

Figure 9: North Ayrshire CHP Life expectancy at birth by intermediate zone - females (5-year average 2003 - 2007)

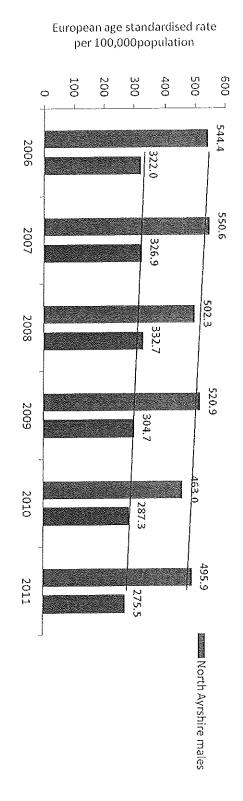


difference between the most and least deprived intermediate zones. As already noted, some of the figures can demonstrate inequalities Figure 9 demonstrates the inequality in life expectancy at birth for females by intermediate zone across North Ayrshire and a 15 year

Board and national. Although caution is advised, local knowledge can enhance the usefulness of the data to inform decision making always show differences as being quite large and these are likely to be less robust than at larger geographical levels such as NHS across North Ayrshire but when looking at the data at small geographical levels, such as local authority and intermediate zone, it will

Premature Mortality

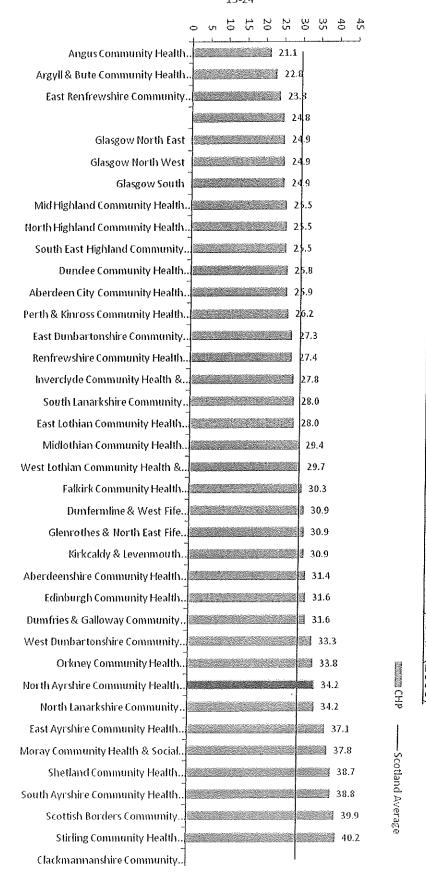
Figure 10: Standardised premature mortality rates under 75 years of age by sex for North Ayrshire, 2006 -2011



Source: http://www.gro-scotland.gov.uk/statistics/theme/vital-events/deaths/age-standardised-rates.html#tables

decreasing in North Ayrshire but at a slower rate in the more deprived areas in North Ayrshire. Mortality rates are decreasing across Scotland but at a slower rate than in the other UK countries. The rates are differences and, although there are fluctuations across the time period of 2006 to 2011, there is evidence of mortality rates decreasing Standardised premature mortality relates to deaths occurring under the age of 75. Figure 10 shows that there are clear gender

Figure 11: Percentage of 15-year old pupils who usually drink alcohol at least once a week by CHP (2006)



European age sex standardised rate per 100,000 population aged

people drinking alcohol at least once a week. Figure 11 indicates that, in 2006, North Ayrshire CHP ranked 9th highest of all the 38 CHPs in Scotland in relation children and young

Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) – North Ayrshire Report 2010

Scottish Government. The local reports present survey information at local level on smoking, drinking and drug use among 13 and 15 These surveys are part of the biennial series of secondary school surveys on smoking, drinking and drug use commissioned by the

people are highlighted below. response rate (proportion of questionnaires returned) was 93 percent. Some of the salient points around alcohol issues and young Nine schools In North Ayrshire were invited to take part in the SALSUS survey, six accepted with a total of 915 pupils participating.

Prevalence of alcohol use

their age to try drinking alcohol to see what it was like than the national average. In relation to trying alcohol, 45% of 13 year olds and 80% of 15 year olds thought it was okay for someone In North Ayrshire, 45% of 13 year olds and 84% of 15 year olds reported that they had drunk all of a proper alcoholic drink, this is higher

Type of alcohol consumed

alcoholic drink. Across all pupils who had drunk alcohol in the last week, the most common type of drink was beer, lager or cider (80% had drunk this in the week before the survey), followed by spirits, and liqueurs etc (64%). Pupils who had drunk alcohol in the week before the survey were asked whether or not they had consumed various categories of

Availability of alcohol

reported purchasing alcohol from were: shops (29%); friends (23%); off-licences (15%); and relatives (13%). Fifty seven percent of 13 year olds who had ever had an alcoholic drink and 36% of 15 year olds who had ever had an alcoholic drink reported that they never buy alcohol. Among 15 year olds who had ever had an alcoholic drink, the most common sources that pupils

club in the 4 weeks prior to the survey Of those who had ever had an alcoholic drink, 1% of 13 year olds and 10% of 15 year olds had managed to buy alcohol in a pub, bar or

Source: http://www.drugmisuse.isdscotland.org/publications/abstracts/salsus_national10.htm

alcohol-related harm at a local authority area level. a central cost of £3.6bn. This national methodology has been applied to local data to provide estimates of the cost of In 2010 the Scottish government produced 'The Societal Cost of Alcohol Misuse in Scotland for 2007' which estimated

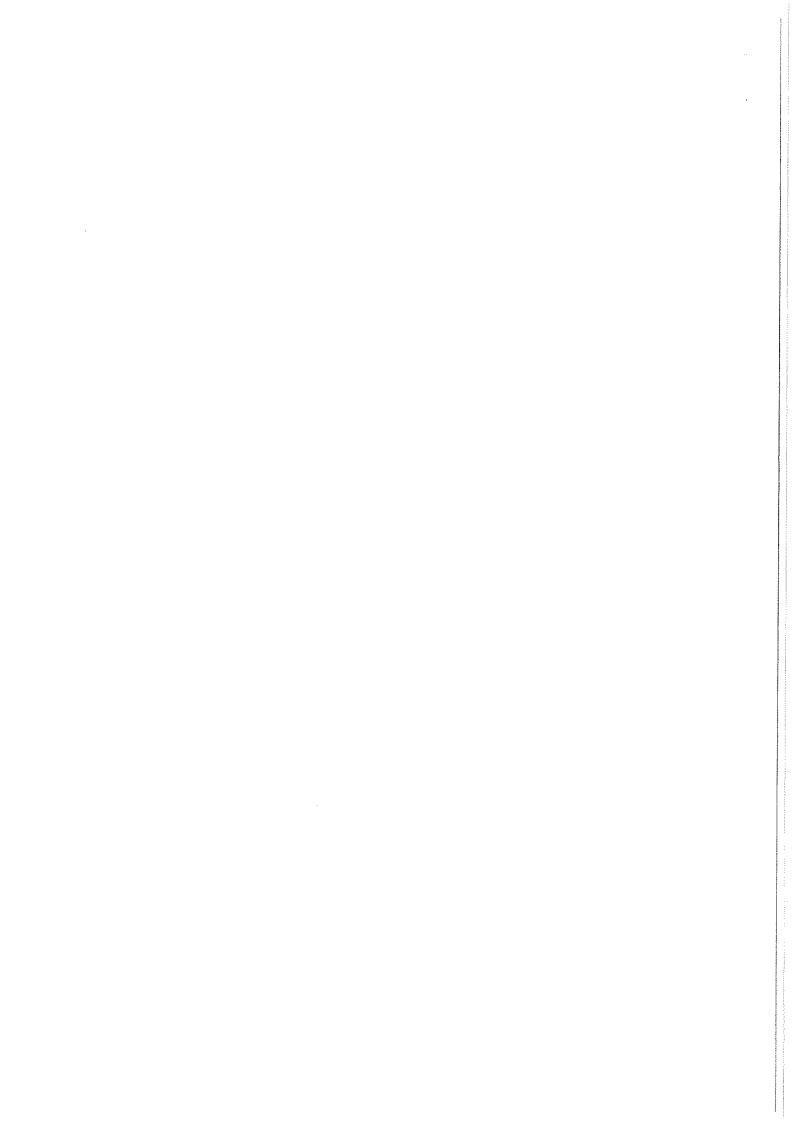
Scotland website: www.alcohol-focus-scotland.org.uk/licensing of social care and productive capacity costs, and for further details of health and crime costs, please see Alcohol Focus This factsheet provides a summary of the estimated cost of alcohol-related harm to North Ayrshire. For breakdowns

NORTH AYRSHIRE - COST OF ALCOHOL HARM BREAKDOWN

JOR NE SOCIAL CARE PRODUCTIVE CAPACITY: THALT SERVICE. TOTAL COST: きない。とは £23.28m 558.60m £8.00m 1000 OH Service Health 17% Social Care ₩ 44 88

excluded from the overall total, but are believed to be somewhere in the range of £34.17m-£62.49m for North Ayrshire. people who experience premature mortality from alcohol-related diseases. As these costs are hard to estimate accurately they have been The above total cost does not include wider social costs that estimate the value of non-paid work and intangible social costs associated with

Alcohol Focus Scotland



North Ayrshire Licensing Board - Licensing Policy Statement 2013-16 Document '(d) MESAS Report (NALB-LPS 2013-16)'

The most recent report was published in December 2012 and includes (NALB emphasis added *thus*):

"Alcohol Consumption

The volume of pure alcohol sold per adult in Scotland increased between 1994 and 2005, followed by a broadly stable trend to 2009. Analysis of the most recent data shows that per adult sales decreased by 5% between 2009 and 2011. Although a similar decline was observed in England & Wales, the decline between 2010 and 2011 was greater in Scotland. Nonetheless, *per adult sales of pure alcohol in Scotland remain a fifth higher than in England & Wales*. This difference is largely attributable to higher sales of lower priced spirits (particularly vodka) through the off-trade in Scotland.

Alcohol-Related Harm

Mortality rates in Scotland are over two and a half times higher than they were in the early 1980s and remain nearly twice as high as those in England & Wales. In recent years a number of key indicators in alcohol-related morbidity and mortality have begun to show falls. However, these falls need to be interpreted with some caution as they are not necessarily consistent across all age groups, nor by gender or diagnosis. In addition, alcohol-related harm in Scotland is disproportionately experienced by those from more deprived areas (for both morbidity and mortality), although this inequality has also started to decline. Alcohol-related harm extends beyond health. In 2011, 50% of prisoners report being drunk at the time of their offence, while alcohol was a known factor in 73% of homicides (where the alcohol/drug status of the offender was known). Although there have been sustained improvements in many high level indicators of alcohol-related harm in Scotland in recent years (such as morbidity and mortality), for some indicators, alcohol-related harm is not improving as rapidly as for others or is worsening.

Per adult alcohol sales by market sector, 1994-2011

The volume of pure alcohol sold per adult through the off-trade in Scotland increased from 5.2L in 1994 to 7.7L in 2011, an overall increase of 48%. In contrast, on-trade sales per adult decreased by 30% over the same time period, from 5.0L in 1994 to 3.5L per adult. <u>Thus, of the total volume of pure alcohol sold in Scotland in 2011, 69% was sold through the off-trade, compared with 51% in 1994 (Figure 4.3).</u>

Across Great Britain, alcohol purchasing patterns have changed considerably over the past 15-20 years. The increase in alcohol sales in the decade from the mid-1990s to the mid-2000s was driven by an increase in wine sales and an increase in off-trade sales. In contrast, on-trade sales have steadily declined, coinciding with reductions in the volume of beer sales. Consequently, the market share of wine approximately doubled between 1994 and 2011 in both Scotland and England & Wales and the off-trade now accounts for about two-thirds of all alcohol sold in both areas."

