

Written response from NHS Ayrshire & Arran

Thank you for your recent enquiry, made on behalf of the Local Government and Regeneration Committee, requesting the following information:

- the extent of NHS Ayrshire & Arran's relationship with our local licensing boards;
- how much information we provide to licensing boards;
- the extent to which alcohol-related health harms are brought to the attention of the licensing board;
- the extent to which the information provided to licensing boards is in our judgement influencing licensing decisions.

Primary, secondary and tertiary prevention of alcohol-related harm is strategically led in NHS Ayrshire & Arran by our three Alcohol and Drug Partnerships (ADPs), one covering each of our partner local authority populations (North, East and South Ayrshire). Our three ADPs at present jointly fund a senior pan-Ayrshire public health post. This has enabled a sustained focus on working within our local licensing systems to: raise awareness of the association between alcohol availability, consumption and harm in the population; advocate for a reduction of alcohol availability in the population; and support licensing boards in achieving their objective to protect and improve population health.

The remit of this role includes reviewing all¹ alcohol licence applications submitted to North, East and South Ayrshire licensing boards. Each application is assessed in terms of its relative potential to increase the availability of alcohol, and so alcohol-related harm, in the population. Where the application is judged to increase availability in an area with high levels of alcohol-related harm, a representation in writing and through attendance at the licensing board meeting is made to this effect. Routinely published information on alcohol-related mortality and hospital admission rates are provided as part of these representations. This post also enables us to link to our three alcohol licensing boards through representation on the Alcohol Licensing Fora of North, East and South Ayrshire.

In addition, the post-holder annually convenes a meeting of the three licensing clerks. This provides a more informal opportunity to consider the health intelligence licensing boards require to achieve their objective of protecting and improving public health.

Finally, as part of the consultation for their 2013-2016 Licensing Policy Statements, each licensing board requested health intelligence to inform their assessment of overprovision. In response, reports were compiled and submitted by our Alcohol and Drug Partnerships, including: a brief review of the evidence of what works to reduce alcohol-related health and social harm; data relevant to the five licensing objectives (including geographical mapping of harms to highlight areas of particular concern); and public consultation findings.

¹ Occasional licenses are not notified to health as there is no mandatory requirement that licensing boards consult on these.

The extent to which the provision of the above information is influencing the decision-making of licensing boards is difficult to assess. The association between the availability of alcohol in the population and average harm levels is not a readily apparent concept. Board members have made comments which reveal an individual level perspective which does not appear to appreciate the impact of increased availability on consumption and harm at a population level (e.g. "How will the refusal of this off-license application stop Jane Smith from buying alcohol from other licensed premises in her area?"). There also appears to be a tension between a desire amongst board members to embrace opportunities for economic regeneration and the five licensing objectives they are tasked with achieving. The balance in this tension will inevitably be influenced, amongst other things, by the values and opinions of individual board members. What can objectively be stated in response to this question is, that despite advocacy for the reduction of availability in areas with high levels of alcohol related harm, 92% of alcohol licences applied for in East Ayrshire in 2014 were granted, with a corresponding figure of 100% in South Ayrshire. The percentage of applications granted in North Ayrshire in 2014, where they have declared the area as overprovided, was slightly lower at 80%.