Response to proposed NSW Liquor Regulation 2018

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1. St Vincent’s Health Australia (SVHA) - Our experience with alcohol related-reform and violence

St Vincent's Health Australia (SHVA) welcomes the opportunity to provide comment on the proposed 2018 Liquor Act Regulation amendments.

St Vincent’s Health Australia operates public, private and aged care health services including two major tertiary public hospitals in the heart of Melbourne and Sydney. St Vincent’s has delivered specialist alcohol dependence treatment services (residential and outpatient) for more than 50 years, making us one of Australia’s oldest public services of this kind.

Due to the location of our public hospitals near the entertainment and central business districts in both cities, St Vincent’s Health Australia has extensive experience with the impacts of alcohol-fuelled violence and harms related to alcohol addiction. We know first-hand that the large volume of trauma and injuries presenting to our emergency departments as a result of alcohol is not only devastating for the victims of violence and their families, but comes at a huge cost to our hospital services and the community as a whole.

St Vincent’s Health Australia knows that alcohol-related violence can be prevented and its impact on all in our community reduced. The abuse of alcohol and the impacts of its harm on individuals, families and communities remains a major health issue. The evidence supporting restrictions on alcohol availability is compelling – the costs of doing nothing are very high; and the benefits of reducing harm substantial.

Every day we treat the health impacts of harmful consumption of alcohol across the lifespan. All Australians share the costs of alcohol-related harm – as family members, friends, colleagues and taxpayers. This includes:

- Disability and brain injury from early exposure to alcohol including harmful drinking in adolescence and maternal alcohol use in pregnancy.
- Injuries and trauma from alcohol-related accidents and violence (public and domestic) treated in our emergency departments, trauma wards, operating theatres and intensive care units.
- Chronic illness from long term alcohol consumption including cancers, heart and liver disease, cognitive impairment and dementia, and mental illness, as well as alcohol dependence itself.

In Sydney, St Vincent’s Hospital’s experience shows that the suite of alcohol reforms are working very effectively to reduce alcohol related hospital presentations; since their introduction in 2014, the St Vincent’s Intensive Care Unit (ICU) has not witnessed a single death related to an alcohol-related assault."

In the hospital's Plastic and Reconstructive Surgery Department, there were 145 cases of serious facial fractures in the two years before the laws were brought in, 119 related to alcohol. In the two years since, this number plummeted to 58 cases, with only 37 related to alcohol.

This type of evidence clearly shows how important it is to get the regulatory and alcohol harm settings right, as it helps reduce the harm and costs of alcohol related harm in communities.
2. Our response to the 2018 proposed amendments to the Liquor Act 2008

Our view is any liquor regulatory framework in place must be independent of all commercial interests to ensure that the State’s liquor regulatory framework puts public health first. Striving for balance between public health and economic growth is a key principle which must underpin the NSW Liquor Act.

The following comments on the proposed 2018 Liquor Act Regulation amendments reflect the views of our expert clinicians and researchers and draws on the experience of St Vincent’s Hospital Sydney in working with the NSW Government on liquor licensing reforms in Sydney's entertainment precinct. We have provided feedback on those proposed changes that are applicable to our work in delivering health care to the community.

Community Impact Statements

Clause 118

SVHA does not support the proposed change to remove the requirement for licensees to complete a Community Impact Statement (CIS). The proposed amendment is not in line with the objectives of the Liquor Act 2008. Similarly, SVHA understands the current review of CIS has not finished. To change this regulation prior to the findings of this review is premature and is not evidence-based.

The proposed change will not strengthen the participation of all stakeholders and the community in licensing matters, but instead will have the following consequences:

1) Delayed notice to community/stakeholders of licensing application – minimises the voice of community and stakeholders such as health services, police, local community groups and individuals in the process as their views will be obtained “after” a licensing application is lodged; and

2) Increase workload on un-resourced community - shifts the onus of impact of licenses on the safety and harm of community away from the licensee to unduly on community and individuals (some of which are not as resourced as the licensee) and shifts responsibility from the licensee to consider the impact of their premises on the community.

Notifications radius for advertising requirements

Clause 20 (1)

This proposed amendment to increase the notification distance from 100m to 200m is insufficient and in our view will not fully capture the affected community. Individuals can experience harm within the primary trade area of licensed premises so the true impact of a licensed premises has to be considered geographically rather than by a prescribed measure of distance outlined in the regulation.

Shifting the focus of licensee to consider the impact of their licensed premise from the immediate street, is likely to result in more meaningful engagement between the licensee and the wider community about the proposed licensed venue.
Other persons to be notified of application

Clause 22

Community stakeholders and the general public should be encouraged and supported to effectively engage in liquor licensing matters. The views of experts and their evidence should always be considered. SVHA supports liquor licensing processes which engage and actively seek input from both licensees and community in the application process from the outset, particularly the local consent authority, local government organisations, police and local health services including hospitals, Aboriginal health services, domestic violence and gambling help services, and all neighbouring premises within the primary trade areas.

Fees, authorisations and processes and responsible service of alcohol training

SVHA is broadly supportive of any proposed regulatory changes which will strengthen training for industry staff in the responsible service of alcohol as well as incident reporting as it may assist in the management of high-risk licensed premises, however further investigation of this proposed change is in our opinion warranted as there is some evidence of increased harm from increased policing of illicits. Independent monitoring and enforcement is required, including real-time reporting of breaches.

In relation to proposed amendments relating to small bars, SVHA is not aware of any evidence the Government has drawn on which demonstrates that smaller bars (100 patrons or less, restaurants) has a different impact on a community in relation to alcohol harm. Until such evidence is provided and or gathered, it is our view that such bars should not be treated differently under the Act and should still be required to participate in the Community Impact Statement process.

3. Conclusion

SVHA welcomes the opportunity to provide feedback on the proposed 2018 Liquor regulation changes. Our feedback is based on our frontline experience of dealing with the impacts of alcohol-fuelled violence and harms related to alcohol addiction.

Striking the balance between public safety, public health with liquor regulations that allow NSW to attract new businesses is central to minimising levels of harm and costs to community of alcohol-fuelled violence.

SVHA upholds that effective engagement of key stakeholders and the wider community during the licensing application process is an important prerequisite to ensure decisions about liquor licensing are independent, informed by evidence, and objective.

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