

# CHESHIRE EAST COUNCIL

## REPORT TO: CABINET

---

<b>Date of Meeting:</b>	11 April 2011
<b>Report of:</b>	Head of Health and Wellbeing
<b>Subject/Title:</b>	Alcohol Harm Reduction and Minimum Unit Pricing
<b>Portfolio Holder:</b>	Cllr Andrew Knowles

---

### 1.0 Report Summary

- 1.1 The purpose of this paper is to provide an overview of the current position regarding minimum pricing for alcohol across Cheshire and Warrington and the wider region.
- 1.2 This paper makes the recommendation that progress towards reducing alcohol related harm would be accelerated by formally supporting (and working with others to advocate) the introduction of a 50p minimum price per unit of alcohol. The introduction of a local bylaw, or national legislation, is examined.
- 1.3 It is recognised that this is one aspect of any comprehensive plan to reduce alcohol harm in our communities.

### 2.0 Decision Requested

- 2.1 Note the findings outlined in this paper and acknowledge the clinical support for minimum unit pricing.
- 2.2 Endorse the introduction of a minimum price of 50p per unit across Cheshire and Warrington.
- 2.3 Endorse the continued pursuit of a bylaw supported by as many local authorities as possible, as well as active support and pursuit of the enactment of national legislation to implement a minimum unit price for alcohol, as part of a wider strategy to tackle alcohol harm.

### 3.0 Reasons for Recommendations

- 3.1 To reduce the negative impacts of alcohol harm, including the cost to people's health, the financial cost to the health system, alcohol related anti social behaviour and criminal activity.

### 4.0 Wards Affected

- 4.1 All

## **5.0 Local Ward Members**

### **5.1 All**

## **6.0 Policy Implications including – Carbon reduction - Health**

6.1 Alcohol is one of the leading causes of ill health amongst our local population. Around one third of our population are drinking at levels above the recommended limits. The health impacts of alcohol misuse include an increased use of general practice consultations, increased attendance at A&E, ambulance call outs, out patient and hospital admissions. The chronic effects of alcohol use include cirrhosis, coronary heart disease cancer and stroke. The letter of support attached as Appendix A is countersigned by a number of key clinicians.

## **7.0 Financial Implications (Authorised by the Borough Treasurer)**

7.1 There are no direct financial consequences in relation to this report. However, the cost to the PCT of dealing with alcohol misuse is £31,500,000 per annum, currently increasing by at least £500,000 a year.

## **8.0 Legal Implications (Authorised by the Borough Solicitor)**

8.1 Legislation enabling councils to introduce local byelaws is contained in Section 235 of the Local Government Act 1972. This provision requires byelaws to be made “for the good rule and government of the whole or any part of the borough and for the prevention and suppression of nuisances therein”, and they cannot be made for any purpose as respects any area if provision is made by, or may be made under, any other enactment. Byelaws, once made by a local authority, must be confirmed, before they are effective, and the confirming authority in this context is the Secretary of State. Section 2 of the Local Government Act 2000, often known as the “wellbeing” provision, also enables local authorities to do things which are considered likely to achieve the promotion or improvement of the economic, social or environmental well-being of their area. In doing so, they must have regard to the Sustainable Community Strategy which must be prepared under Section 4.

8.2 Concern related to alcohol misuse has led, apart from the work in Cheshire and Warrington, to the Executive Board of the Association of Greater Manchester Authorities (“AGMA”) setting up a task and finish group and commissioning a report on the possible implementation of a byelaw to impose a minimum unit price for alcohol. As at November 2010, an interim report has been prepared, and one of the issues covered is the scope which a byelaw in this context might have, and enforcement issues.

8.3 Whilst there is considerable support for the introduction of minimum alcohol pricing, it is important to ensure that the most effective legislating power is used, in order to minimise the likelihood of successful challenge, and maximise the ability to enforce it. Key issues to be taken into consideration if a byelaw is

considered are ensuring that any potential challenges of incompatibility with EU law based on anti-competition are fully addressed, that sufficient research supports the actual price level, and that the vital issue of enforceability is addressed, since a byelaw in only some areas of the country leads to obvious concerns in this regard. Given that the function of confirming a byelaw lies with Central Government, through the Secretary of State, these issues would have to be addressed both at the stage of making by the relevant local authorities, and confirmation by the Secretary of State.

- 8.4 The work currently ongoing by AGMA as well as the Cheshire and Warrington work seeks to address all these issues as well as to press for national legislation.
- 8.5 As the problem which a byelaw would seek to remedy is not confined to the region, but is country-wide, it is recommended that whilst the option of a byelaw, and the extent of support for it continues to be explored, the enactment of nationally applicable legislation by Central Government should also be an important focus of the Council's support and pressure.

## **9.0 Risk Management**

- 9.1 The introduction of a minimum unit price is contentious and can lead to negative press and public reaction. However, there is a growing lobby that is supportive of the proposed measures and across the North West local authorities are joining together to work towards a minimum unit price and a bylaw.

## **10.0 Background and Options**

- 10.1 *"Cheap alcohol is killing people and it's undermining our way of life.... price and access are two crucial factors affecting alcohol consumption. I recommend action taken on both but particularly on price. "*  
**[Sir Liam Donaldson, Chief Medical Officer 1998-2010]**
- 10.2 Support has been building for a minimum unit price for alcohol based on the evidence that demonstrates the severe impact alcohol harm has on communities and public services. Alcohol consumption in England has almost tripled over the last 60 years. In 2009 nearly 1 million people were admitted to hospital in the UK with alcohol related problems (over 9000 in Central and Eastern Cheshire PCT), with almost 7,000 deaths per year in England being directly related to alcohol. In addition 45% of all violent crime is alcohol related. In 2009 there were over 2700 alcohol related incidents in Cheshire East recorded by the Police, and nearly 25% of anti social behaviour incidents involved alcohol.
- 10.3 There is a clear relationship between price and consumption of alcohol. Price increases generally reduce heavy drinkers' consumption by a greater proportion than moderate drinkers, as heavy drinkers tend to choose cheaper drinks. It also impacts significantly on harm to young

people by reducing access to 'pocket money' priced drinks. It should be noted that Cheshire East is in the worst quartile nationally in relation to the numbers of under 18s admitted to hospital because of an alcohol specific cause.

- 10.4 A minimum unit price of 50p would reduce consumption of very cheap alcohol amongst "problem" and younger drinkers. It would put a stop to the 2 litre bottles of cider for £1.21 and 15 can packs of lager for £5. However, because minimum price is not a tax, consumers could still get a pint in the pub for £1.50 and a bottle of wine in the supermarket for £4.50. A minimum unit price would reduce the impact of alcohol harm on moderate drinkers, poorer communities, public services and the alcohol retail trade. The implementation of a by law to enforce a minimum unit price is one option to pursue.
- 10.5 A minimum unit price for alcohol is supported by the Government Health Select Committee, Professor Dame Sally Davies (Chief Medical Officer), Cheshire, Greater Manchester and Merseyside Directors of Public Health, the National Institute for Clinical Excellence, the Faculty of Public Health and Tesco. Over the course of 2010 there has been significant high level media coverage regarding a minimum unit price.
- 10.6 In August 2010 the **Prime Minister, David Cameron**, stated "*I think the idea of the councils coming together on this is a good one and we will certainly look at it very sympathetically...Where there can be local decisions we are very happy for that to happen*" (Manchester Evening News – 11<sup>th</sup> August 2010).
- 10.7 **James Brokenshire (Parliamentary Under Secretary for Crime Reduction, Home Office)** also stated "*If local circumstances point in that direction, that's something local authorities might wish to explore*". (Morning Advertiser – 15<sup>th</sup> September 2010).
- 10.8 As part of the Coalition Government's commitments in its 'Programme for Government' there have been national consultations regarding alcohol taxation and pricing and also on reviewing the Licensing Act. On 18<sup>th</sup> January the Home Office announced plans to introduce a new proposal that would prevent retailers from selling alcohol below the rate of duty plus VAT.
- 10.9 Appendix B provides a summary of key information.

## REGIONAL PROGRESS

- 10.10 The Cheshire and Warrington Health and Wellbeing Commission has agreed to support a minimum unit price for alcohol and the use of a bylaw to enforce this. It has agreed to establish a working group to examine the implications of pursuing a bylaw approach and is working with partners across the Northwest region to explore options. The Liverpool City Region Safer, Healthier Communities Board has also

agreed a consistent approach, as has the Association of Greater Manchester Authorities Executive.

- 10.11 The Cheshire and Warrington Leadership Board has given its support to minimum pricing.
- 10.12 This is part of an overarching strategy to reduce alcohol related harm (including crime and anti-social behaviour), to contribute to improving health and to reduce health inequalities across the region. For example, a Large Scale Change initiative has begun across the sub-region, to bring organisations together to tackle the impacts of alcohol related harm.
- 10.13 A minimum price per unit of alcohol would apply to both on and off licences i.e. pubs and licensed premises, plus supermarkets and off licences.
- 10.14 All Directors of Public Health in Cheshire and Warrington and the Primary Care Trust Boards in Merseyside have supported in principle a minimum unit price.

### **A Bylaw approach**

- 10.15 In the North West there is potential to act collaboratively to implement a bylaw which would introduce a minimum price. This would be most effective if a significant number of local authorities across a coherent geographic area agree their support for a bylaw. It is vital therefore that there is strong democratic support for such an approach.
- 10.16 This would be in accordance with the “Well Being Power” (outlined in Section 2 of the Local Government Act 2000) as it is an appropriate response and a means of improving public health and public order at a local level, where there is a shortfall in national legislation. In addition Section 235 of the Local Government Act 1972 makes it possible for a bylaw to be made “for the good rule and government of the whole or any part of the area and for the suppression of nuisances therein.”

### **CHALLENGES TO MINIMUM PRICING**

- 10.17 The legality of a local minimum price is untested, although the industry or any opponent of such a scheme could not pursue a legal challenge until a bylaw has been approved and implemented. If a local bylaw was successfully challenged it would be likely to strengthen the case for national legislation on pricing, although clearly the most effective approach should be chosen from the outset.
- 10.18 Public messaging needs to be developed to raise awareness of the benefits of a minimum unit price and the low impact on moderate drinkers. The process that was undertaken in this respect with tobacco legislation demonstrates that public opinion can be mobilised over time.

## **11.0 Access to Information**

The background papers relating to this report can be inspected by contacting the report writer:

Appendix A - Letter of Support for Minimum Unit Pricing

Appendix B - Key Information Alcohol Harm and Minimum Unit Pricing

Name: Guy Kilminster

Designation: Head of Health and Wellbeing

Tel No: 01270 686560

Email: [guy.kilminster@cheshireeast.gov.uk](mailto:guy.kilminster@cheshireeast.gov.uk)