

CHESHIRE EAST COUNCIL

Cabinet

Date of Meeting:	24 th June 2013
Report of:	Head of Health Improvement
Subject/Title:	Alcohol Harm Reduction and Minimum Unit Pricing
Portfolio Holder:	Cllr Janet Clowes

1.0 Report Summary

- 1.1 The purpose of this paper is to provide an overview of the current position regarding minimum unit pricing for alcohol across Cheshire and Warrington and the wider region.
- 1.2 The 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 minimum price per unit of alcohol.
- 1.3 It is recognised that this is only one aspect of any comprehensive plan to reduce alcohol harm in our communities and that there are many other tools that should be considered as well to help address the problem, for example restrictions on advertising, brief interventions, education and licensing.

2.0 Recommendations

It is recommended that Cabinet endorse

- 2.1 the principle of the introduction of a minimum unit price for alcohol across Cheshire and Warrington and the wider North West region; and
- 2.2 the pursuit of a byelaw 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, businesses and the public sector and the alcohol related anti social behaviour and criminal activity that impacts upon our communities. Reducing alcohol related harm is a priority within the Cheshire East Joint Health and Wellbeing Strategy.

4.0 Wards Affected

4.1 All

5.0 Local Ward Members

5.1 All

6.0 Policy Implications

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. Leading clinicians across Cheshire and Merseyside including the Chairmen of Cheshire East's two Clinical commissioning Groups and the Director of Public Health, support a minimum unit price.

7.0 Financial Implications

- 7.1 There are no direct financial consequences in relation to this report. However, there are significant indirect costs related to the misuse of alcohol.
- 7.2 'The Cost of Alcohol to the North West Economy' a report published in May 2012 by North West Employers and Drink Wise North West identified the costs to the public sector and businesses in Cheshire East at £119 million per annum. This included costs to the Health Service of £28.9 million, £34 million in the criminal justice system, a £46 million cost to the economy and business and £9 million to Social Services.
- 7.3 The former Central and Eastern Cheshire PCT estimated its costs of dealing with alcohol misuse at £31,500,000 per annum, increasing by at least £500,000 a year.
- 7.4 Leighton Hospital in May 2012 publicised its alcohol related hospital admissions cost as £8.5 million a year.
- 7.5 The Police, Fire Service and Local Authority face costs associated with dealing with alcohol related incidents, for example accidents, fires, domestic violence and anti-social behaviour.
- 7.6 Cheshire Constabulary have recently estimated the Cheshire East costs of alcohol related anti social behaviour as £365,000 a year; domestic violence incidents that result in an arrest cost £1.3 million with additional costs of court proceedings being £342,000.
- 7.7 Local businesses can be affected by days lost due to alcohol related sickness, as well as by alcohol fuelled criminal damage.

8.0 Legal Implications

- 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.
- 8.2 When consideration was initially given in 2011 to a possible byelaw, Section 2 of the Local Government Act 2000, often known as the “wellbeing” provision, which enabled local authorities to do things which were considered likely to achieve the promotion or improvement of the economic, social or environmental well-being of their area, was in force. This has subsequently been repealed and replaced by Section 1 of the Localism Act 2011; the “general power of competence”. This allows local authorities to do anything that individuals generally may do, and applies to even things which are unlike anything the authority may do apart from Section 1, and that are unlike anything that other public bodies may do. It is intended to be a wider power than the wellbeing provision in the 2000 Act; it is subject to the restrictions contained in Section 2, and its use may be coupled with the byelaw power in the 1972 Act.
- 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. Nationally applicable legislation is the best approach, as it would ensure consistency. Key issues to be taken into consideration if a byelaw is considered as an alternative 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 cross border trading 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 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 continue to be an important focus of the Council’s support and pressure.
- 8.5 The Scottish Government are currently introducing a minimum unit price. The Scotch Whisky Association has been defeated in the first stage of its legal challenge to the Scottish parliament, and it has been reported that this judgment is supported by the European Commission.

However the judgment was only handed down on 3 May, and appeal is possible, so this may not be the end of the challenge, the outcome of which would have an impact on England also.

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 byelaw.
- 9.2 There is a risk of legal challenge from the drinks industry (as has occurred in Scotland), but this cannot take place until after the Secretary of State has approved the byelaw and it is implemented. This could incur costs for the Authority. If a number of authorities are working collaboratively these could be reduced in each case.

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 2010-2011 there were 1.2 million people admitted to hospital in the UK with alcohol related problems (over 9000 in the former Central and Eastern Cheshire PCT). Some 7,000 deaths per year in England are 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. As price increases, it generally reduces 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 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 and the Faculty of Public Health.

- 10.5 In March 2012 the Government's National Alcohol Strategy was published proposing a Minimum Unit Price of 45p. Although the consultation closed in October there has not yet been any response from the Government with regard to its plans.

REGIONAL PROGRESS

- 10.6 The Cheshire and Warrington Health and Wellbeing Commission agreed to support a minimum unit price for alcohol and the use of a byelaw to enforce this. It established a working group in 2011 to examine the implications of pursuing a byelaw approach and worked with partners across the Northwest region to explore options. A draft model byelaw has been prepared as part of this work.
- 10.7 The Cheshire and Warrington Leadership Board has previously given its support to minimum unit pricing.
- 10.8 The Liverpool City Region Cabinet has recently (24th May) reaffirmed its commitment to the principle of a minimum unit price, pursuing political support for a byelaw through the individual authorities and working with other sub-regions to co-ordinate support and implementation of a byelaw.

A Byelaw approach

- 10.9 In the North West there is potential to act collaboratively to implement a byelaw 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 byelaw. It is vital therefore that there is strong democratic support for such an approach.
- 10.10 The introduction of minimum unit pricing through a byelaw will make a significant difference to levels of alcohol harm, but will need to be supported through the continuation of existing measures (such as brief interventions) and consideration of other additional actions. Examples might include restricting the advertising of alcohol, improving education and information programmes and reviewing how changes to licensing legislation could be used.

CHALLENGES TO MINIMUM PRICING

- 10.11 The legality of a local minimum unit price is untested, although the industry or any opponent of such a scheme could not pursue a legal challenge until a byelaw has been approved and implemented. If a local byelaw 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.

10.12 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:

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