



Scottish Borders Local Licensing Forum

# Alcohol Profile 2014/15



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## **Acknowledgements**

Thank you to all staff involved in providing the data to develop this report and Erin Murray, Research and Policy Officer, Scottish Borders Council for analytical support. This report was prepared by Susan Walker, Alcohol & Drugs Partnership Support Team on behalf of the Scottish Borders Local Licensing Forum.



## Executive Summary

This is the third report by the Local Licensing Forum (LLF) which aims to collectively present information available for 2014-15 from national research as well as local data from Police Scotland, NHS Borders, Scottish Borders Council and Scottish Fire & Rescue Service. The aim of the Alcohol Profile is to support the Scottish Borders Licensing Board by providing evidence to support decision making and inform development of future Licensing Policy Statement.

### Overview of harm

For the first time a matrix has been presented which compares key datasets that are consistent with the Licensing Objectives. This shows Galashiels North, West and Langlee as the areas most affected by alcohol related harm.

### Overprovision

Analysis of the number of off-sale premises has been carried out to support an Overprovision Statement in the forthcoming Licensing Board Policy Statement has been carried out. This has shown that Kelso South and Galashiels North have the highest rate of off-sales.

### Preventing Crime and Disorder/Preventing Public Nuisance/Securing Public Safety

18% of the antisocial behaviour incidents recorded by Police were alcohol related. This has reduced over the three years for which we have collected data. Galashiels and Hawick Central continue to have the largest number of alcohol related incidents. 22% of accidental dwelling fires had alcohol/drugs as a contributing factor, this is an increase on the previous years, however numbers are relatively low.

### Protecting and Improving Public Health

Scottish Borders has downward trends in relation to alcohol related hospital stays and emergency attendances where alcohol was a contributing factor. However, there are areas in Scottish Borders with a higher rate of alcohol related hospital stays than Scotland. The areas with the highest rates are Galashiels West, Galashiels North, Hawick West End and Langlee.

### Protecting Children and Young People from Harm

Both nationally and locally there is a downward trend in underage drinking. 19% (97) of Borders 15 year olds surveyed reported that they drank at least once a week.

### Community views

Community members were asked about the number of places to buy alcohol in their local area through a local survey;

- 68% felt the number of places to buy alcohol in their local area was about right; 14% felt there were too many.

# Overview of Harm: Scottish Borders

This matrix provides an overview of the level of harm (using standard deviation) across Scottish Borders.

Standard deviation is a statistical term which calculates how close or far a value/result is to the average.

The matrix shows there are a number of areas where they are well above the norm in terms of harm including **Galashiels North, Galashiels West and Langlee.**

Key	Meaning
	'Extreme Good' More than 1 standard deviation below the average
	'Good' Within 1 standard deviation below the average
	'Not Good' Within 1 standard deviation above the average
	'Extreme Not Good' More than 1 standard deviation above the average

Intermediate Geography	Alcohol Related Emergency Attendances as Rate per 1000 (2014-15)	Alcohol related hospital stays per 100,000 (2013-14)	Deaths from alcohol conditions per 100,000 (2009-2013)	Rate of Alcohol Related ASB Incidents per 1000 (2014-15)	Number Off Sale Premises per 1000 (2015)
Berwickshire Central	2.0	174.1	10.0	3.1	0.6
Berwickshire East	3.8	488.5	11.8	8.9	0.7
Berwickshire West	3.1	138.1	0.0	4.8	0.6
Burnfoot and area	9.6	778.3	20.4	20.0	0.3
Cheviot East	3.2	177.2	0.0	3.7	0.5
Cheviot West	1.4	222.7	12.5	1.4	0.3
Coldstream and area	7.5	802.7	29.2	11.6	0.7
Duns	4.9	336.9	0.0	19.2	1.6
Earlston, Lauder and Stow area	5.8	362.2	10.5	10.5	0.8
Ettrick, Yarrow and Yair	2.6	435.0	7.6	6.2	0.3
Eyemouth	7.0	975.8	30.8	23.5	1.0
Galashiels North	18.2	1449.5	30.1	72.7	1.9
Galashiels South	8.1	739.3	21.4	47.5	1.3
Galashiels West	18.0	1489.8	27.1	75.5	1.0
Hawick Central	8.3	678.5	14.8	56.9	1.7
Hawick North	9.4	723.6	10.7	25.8	1.5
Hawick West End	12.2	1289.9	16.5	30.4	0.7
Innerleithen and Walkerburn area	5.5	435.8	19.1	10.5	1.0
Jedburgh	7.1	407.5	14.8	18.2	0.8
Kelso North	12.0	527.3	9.8	10.0	0.3
Kelso South	5.9	763.8	19.5	34.9	2.2
Langlee	17.8	1239.6	44.3	40.5	0.7
Melrose and Tweedbank area	7.5	288.4	11.2	12.4	0.9
Newcastleton and Teviot area	3.3	122.6	0.0	4.8	0.3
Peebles North	5.6	864.2	28.9	24.4	1.6
Peebles South	5.5	527.2	4.7	8.8	0.3
Selkirk	10.2	613.5	12.1	20.3	0.9
St Boswells and Newtown area	7.0	256.9	11.3	13.2	0.7
West Linton and Broughton area	1.5	324.2	0.0	3.4	0.6
<b>Scottish Borders</b>	<b>7.6</b>	<b>566.0</b>	<b>13.4</b>	<b>19.5</b>	<b>0.9</b>



# Introduction

This Scottish Borders Alcohol Profile (Profile) reports on the most recent data available for the financial year 2014-15. It is produced by the Local Licensing Forum as a resource detailing evidence of alcohol related harm relevant to the Licensing Objectives and to support Licensing Board members in the following areas:

- Development of 'Statement of Licensing Policy'
- Development of 'Statement of Overprovision'
- Support decisions in upholding the five Licensing Objectives

The Licensing Board is to put in measures to minimise the harm from alcohol to individuals and communities within Scottish Borders. Licensing Board members do this by upholding the Licensing Objectives - see Appendix 1.

## New areas for Alcohol Profile

This Profile has developed in collaboration over the previous three years with Licensing Board Members. In an attempt to streamline the Profile, the detailed data previously supplied in appendices have been removed. Definitions of data have been provided in Appendix 1. A survey was carried out in September 2015<sup>1</sup> which highlighted additional data requirements requested by the Licensing Board. This included:

- Benchmarking\*
- Test Purchasing
- Problematic Areas (Matrix)

In addition the following areas have been included:

- Impact of Marketing
- Community Views

\*Benchmarking is included for national indicators where available comparing Scottish Borders with 7 other local authority areas. These areas are Moray, Stirling, East Lothian, Mid Lothian, Angus, Highland, Argyll and Bute.

## Data Sources

Various sources have been used to compile this Profile including Scottish Government, Health Scotland, Centre for Research on Environment Society and Health (CRESH), Alcohol Focus Scotland, NHS Borders, Police Scotland, Scottish Borders Council, and Scottish Fire and Rescue Service. Local data systems allow the ongoing reporting to the Licensing Board and Local Licensing Forum.

<sup>1</sup> Alcohol Profile Survey: October 2015, Borders Local Licensing Forum

### Why is alcohol licensed?

- Alcohol is not an ordinary product, it is a legal drug that can cause a range of harms.
- Alcohol plays a part in many health and social problems – not just to the drinker but also to those around them, including families, neighbours and the wider community.
- Evidence shows that the easier it is to buy alcohol, the more people will drink.

That is why controls are needed on how, where and when alcohol is sold.

Alcohol Licensing in your Community, Alcohol Focus Scotland 2015



## A whole population approach

A range of health problems can be seen as a result of excessive consumption of alcohol. Acute intoxication (drunkenness) or poisoning can be seen after a single episode of excessive consumption, while other long-term health related problems can occur, such as damage to the liver and brain. Alcohol use is also associated with certain cancers. Alcohol sold in Scotland today is **more affordable, more available and more heavily marketed than at any time over the last 30 years**. The result is that too many of us are drinking too much. The more we drink, the more the health and social problems caused by alcohol increase. The impact is not just on the person who drinks – family, friends, colleagues and strangers can be harmed by someone else’s alcohol use.

It is for these reasons that alcohol policies are required that focus on the whole population, not just problematic drinkers. If we all drink less, then harms will reduce.

## Effective Alcohol Policy

International evidence shows that the most effective policies aimed at the whole population to reduce the harmful use of alcohol are:

- alcohol control measures (price and availability)
- drink-driving laws
- brief interventions for harmful and hazardous drinkers

The interventions with the weakest evidence base for reducing alcohol harm include self-regulation of alcohol marketing, voluntary codes of retail practice, and information/education approaches<sup>2</sup>.

## Licensing Boards role in reducing harm from alcohol

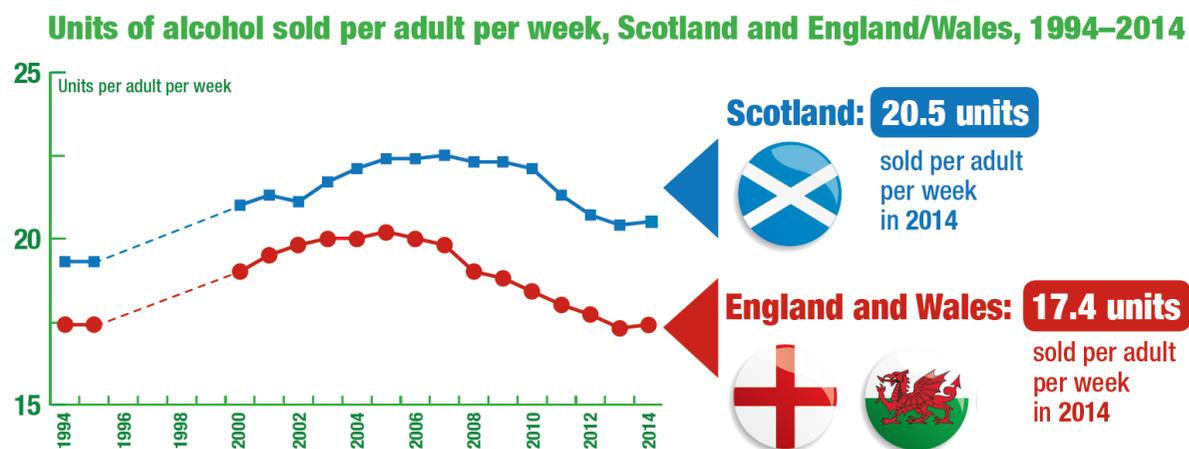
No one organisation or structure can solely be responsible for delivering a Whole Population Approach. It is therefore important for Licensing Board to consider what contribution it can make. Licensing Boards are in place to regulate and minimise the harm not only around public disorder but to public health (whole population). They do this by controlling availability in their local communities including the number and type of alcohol outlets, opening hours and conditions of sale.

Developments in licensing legislation recognise that there is a need to not only take into account public disorder but also public health hence the additional Licensing Objective on Protecting and Improving Public Health.

<sup>2</sup><http://www.alcohol-focus-scotland.org.uk/media/86446/whole-population-approach-briefing.pdf>

## National Overview - Alcohol Sales

- The **downward trend in the amount of alcohol sold per adult in Scotland may be flattening**<sup>3</sup>. The trend is mainly due to more alcohol being sold through supermarkets and off-licences in 2014 compared with recent years.
- **The majority of alcohol (72%) was sold through off-sales**, this is the highest market share since recording began in 1994.
- Alcohol sales in Scotland were 18% higher than in England & Wales in 2014. This was mainly due to **higher sales of lower priced alcohol through supermarkets and off-licences, particularly spirits**.



**Almost three-quarters  
of alcohol was sold  
in supermarkets  
and off-licences**



<sup>3</sup> Monitoring and Evaluating Scotland's Alcohol Strategy: Annual Update of Alcohol Sales and Price Band Analyses, <http://www.healthscotland.com/documents/25918.aspx>



## High level overview of National Alcohol Statistics

### Alcohol-related crime in Scotland 2012/13<sup>4</sup>

- Two thirds of young offenders were drunk at the time of their offence.
- In 6 out of 10 cases (59%) of violent crime, the victim said the offender was under the influence of alcohol.
- In the past 10 years, half of those accused of murder were under the influence of alcohol and/or drugs at the time of the murder.

### Alcohol consumption in Scotland 2014<sup>5</sup>

- Nearly 1 in 4 men (23%) and around 1 in 6 (17%) women drink at harmful or hazardous levels.

### Alcohol-related deaths in Scotland 2014<sup>6</sup>

- Although alcohol-related deaths have declined in recent years by 35% since 2003, rates remain higher than they were in the early 1980s and higher than those in England and Wales.

### Alcohol-related Hospital Stays in Scotland 2014-15<sup>7</sup>

- There were 35,059 alcohol-related hospital stays in 2014/15.
- Rates were highest in the 55-59 age group for men and 50-54 age group for women.
- Rates were nearly 8 times higher for people living in the most deprived areas compared with the least deprived.

<sup>4</sup> Scottish Crime and Justice Survey 2012/13 <http://www.gov.scot/Publications/2014/03/9823/0>

<sup>5</sup> Scottish Health Survey 2014 <http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey>

<sup>6</sup> Alcohol Related Deaths 2014, NRS <http://nationalrecordsofscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/alcohol-related-deaths/main-points>

<sup>7</sup> Alcohol Related Hospital Statistics 2014 Scotland, ISD <http://nationalrecordsofscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/alcohol-related-deaths/main-points>

# Density of alcohol linked to ill-health and premature death 2015<sup>8</sup>

- Neighbourhoods with the highest alcohol outlet density have double the alcohol related death rate.

## Harm to others

The wide range of harm experienced by another persons drinking was recently evidenced in a report<sup>9</sup>. The findings showed:

- 1 in 2 people had reported being harms as a result of someone else's drinking.
- 1 in 3 people report having heavy drinkers in their lives.
- People under 35yrs are four times more likely to experience harm from others in a public setting (street, public space, cars, workplace).
- Those who know heavy drinkers are more likely to experience harm from others in private settings (home, family, neighbours, private parties).



private spaces  
stress  
family breakdown  
money problems  
domestic violence  
child neglect



public spaces  
noise  
accidents  
harassment  
violence  
drink-driving

<sup>8</sup>Neighbourhood Alcohol and Tobacco Outlets (2014), CRESH <http://cresh.org.uk/webmap/>

<sup>9</sup>Unrecognised and Under-reported: the impact of alcohol on people other than the drinker in Scotland (2014), Alcohol Focus Scotland

# Overprovision

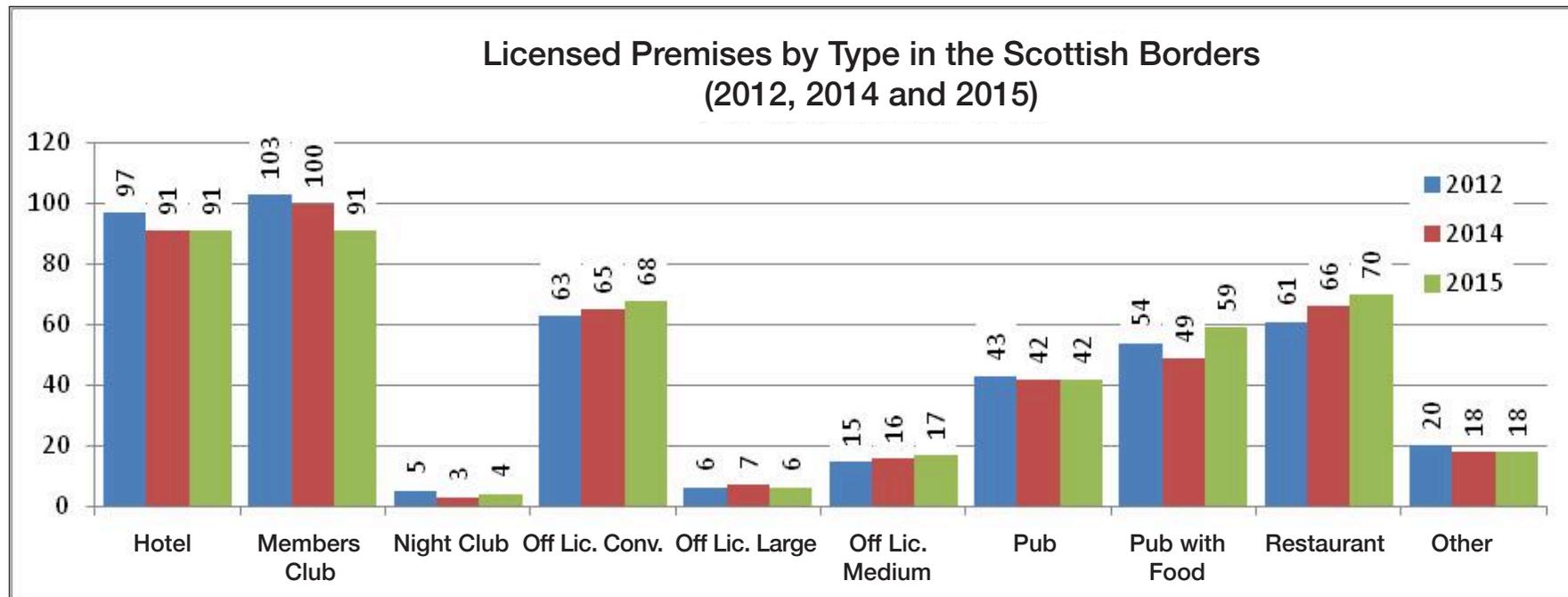
## Overview of Licensed Premises in Scottish Borders

Due to the ongoing changes in premises, data is captured at a point in time to provide a snapshot of information on licensed premises<sup>10</sup>.

Data has shown:

- A total of 466 licensed premises in Borders (2% increase from previous year)
- Increase in off-sales premises from 88 in the previous year to 91
- Increase in restaurants from 66 in previous year to 70

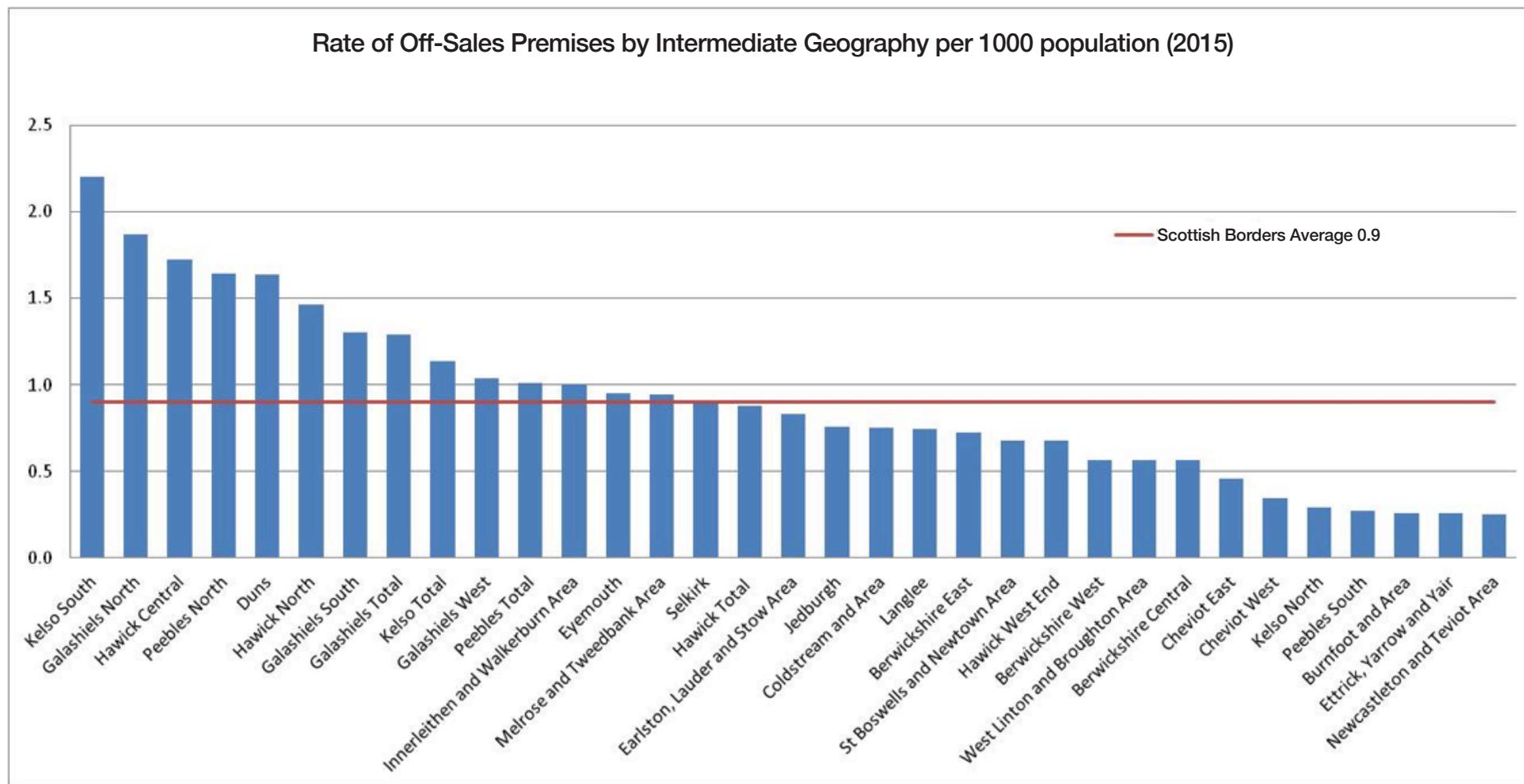
Members clubs have varied the terms of their licence, removing the members club status, in order to allow open access to non-members. This has resulted in moving most of them into the Pub with Food Category.





## Off sales

The majority of alcohol is sold in off-sale premises. The average rate per 1000 population of exclusively off-sales (e.g. excluding pubs with license for off-sales) is 0.9. The table below shows Kelso South and Galashiels North have the highest rate of off-sales per head of population.



## Scottish Government Liquor Licensing Statistics 2013-14

The most up to date data available from Scottish Government Liquor Licensing Statistics 2013-14 show the number of applications received and results of premises licences reviewed in Scottish Borders and across the Benchmarking Family.

Liquor Licensing Statistics (Scotland) 2013-14 <sup>11</sup>	Borders	Highland	Stirling	Moray	East Lothian	Mid Lothian	Angus	Agyll & Bute
Premises Licenses in Force on 31 March 2014	456	1,197	408	315	288	208	324	601
On sale	360	883	294	232	197	141	250	444
Off sale only	96	314	114	83	91	67	74	157
<b><i>Applications received during 2013-14:</i></b>								
On sale	2	19	9	2	3	4	5	11
Off sale only	2	10	5	1	2	7	4	11
Applications refused by Board	-	-	-	-	-	-	-	-
Applications granted by Board	4	19	11	-	5	11	9	22
<b><i>Applications for review of premises licence resulting in:</i></b>								
Written warning	2	2	1	-	-	-	3	-
Variation	-	2	-	-	-	1	-	-
Suspension	4	-	-	2	1	-	2	-
Revocation	6	2	-	1	-	1	1	-
No action	5	-	1	-	7	1	1	2

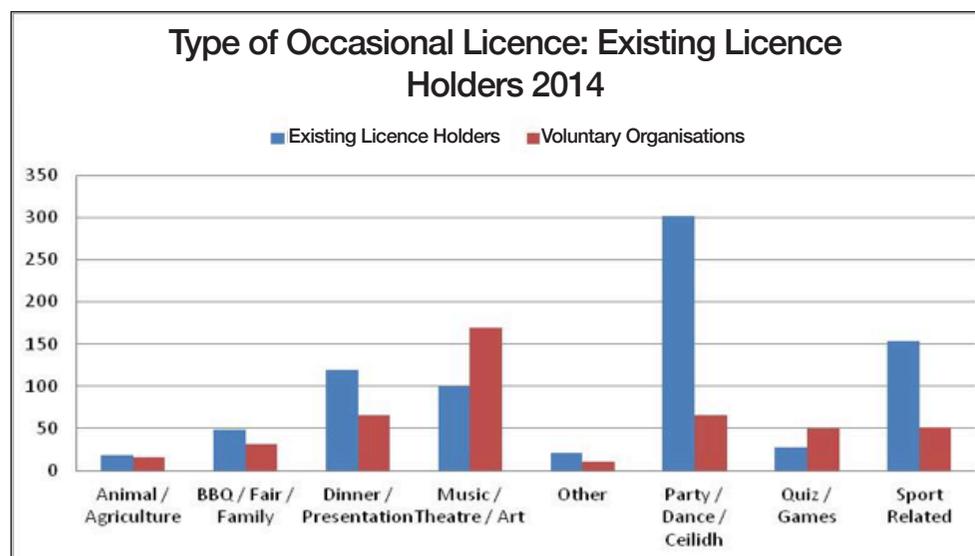
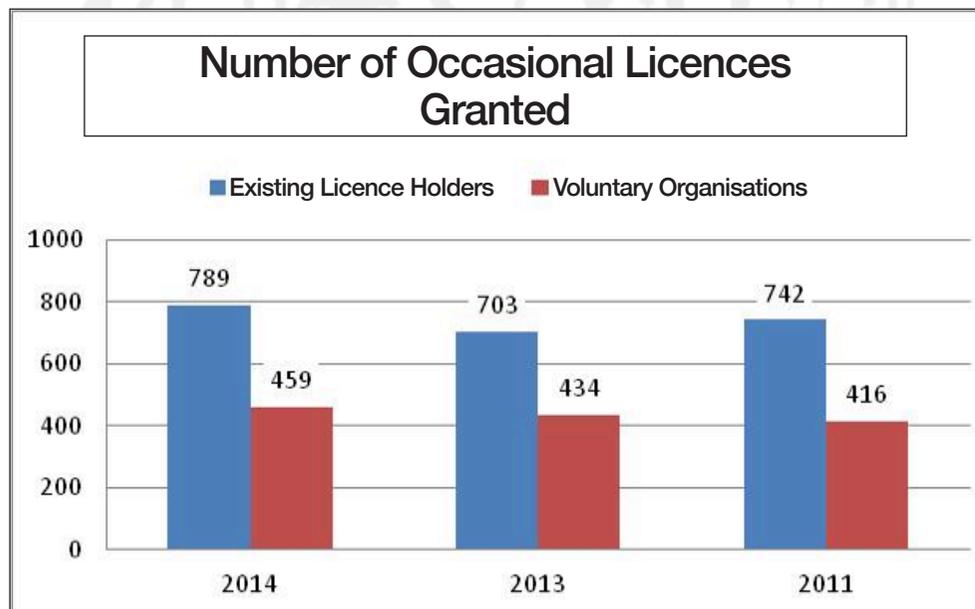
<sup>11</sup>On Sale (e.g. Pub, Night Club, Hotel, Restaurant, Members Club)  
Off Sale (e.g. Supermarket, Convenience Store)

## Occasional Licences

An occasional licence authorises the temporary sale of alcohol on premises that are normally unlicensed. There are two different types of occasional licence; one that is applied for by existing licence holders and another applied for by voluntary organisations. Occasional licences will **add to the overall availability of alcohol in a local area and can impact on the licensing objectives.**

Data for 2014 showed:

- A **10% overall increase** in availability of alcohol through occasional licenses (1248) compared with 2013.
  - o 12% increase granted to existing licence holders (789)
  - o 6 % increase granted to voluntary organisations (459)
- **Increase in the total occasional licences that allowed children or young people** at the event (64% in 2014, 57% in 2011)





## Overprovision Summary

Licensing historically was designed for on-sales and the majority of tools that came with legislation were not designed for off-sales. However, a tool that can be used effectively for off-sales is overprovision where a Licensing Board can refuse new premises or extra capacity.

Licensing Boards across Scotland have traditionally assessed overprovision of premises over small areas, mainly in town centres. However today most alcohol is sold in off-sales (72%) and people travel further to buy alcohol. Licensing boards should assess overprovision that reflects current purchasing and consumption patterns. By carefully controlling the overall availability of alcohol, an effective overprovision policy can help to prevent and reduce alcohol problems; enhance community life, improve health and well-being and boost local productivity and economic performance<sup>12</sup>.

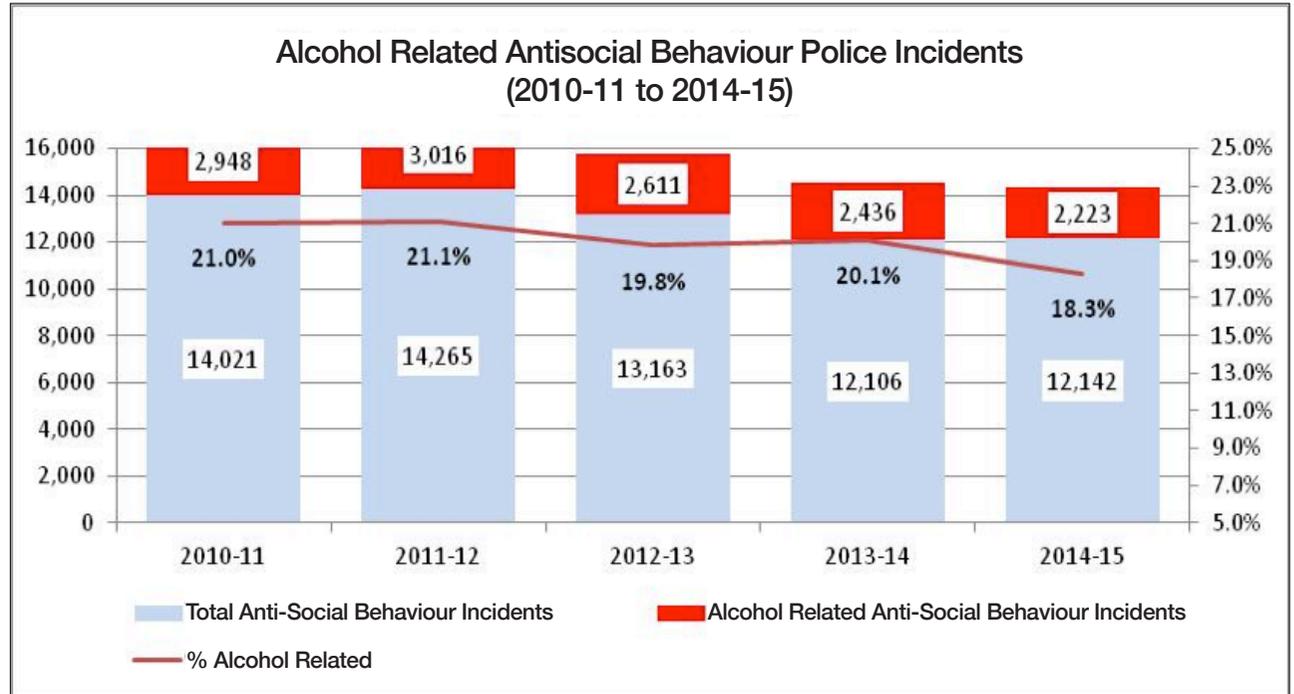
Analysis of the number of off-sale premises has been carried out to support an Overprovision Statement in the forthcoming Licensing Board Policy. This has shown that **Kelso South and Galashiels North have the highest rate of off-sales**. Licensing Board members may wish to consider this data alongside the Police and Health data to decide whether any **new applications for off-sales in those areas would be considered overprovision**.

Based on the increase of Occasional Licences, the potential for overprovision should be closely monitored given these applications contribute to overall availability of alcohol.

<sup>12</sup>Good Licensing Practice: Developing an effective overprovision policy, Alcohol Focus Scotland 2013

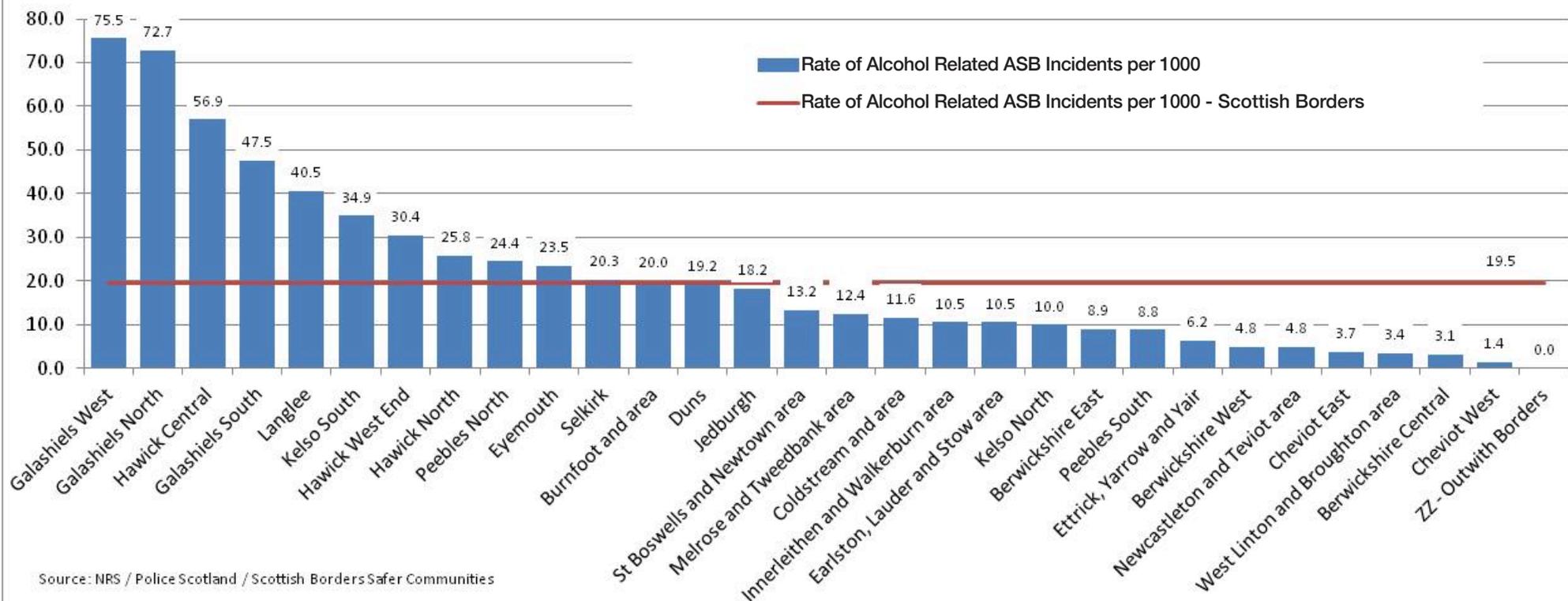
# Preventing Crime and Disorder/Preventing Public Nuisance/Securing Public Safety

- **18% of the ASB incidents were alcohol related.**  
This figure has reduced over the previous five years.
- **A reduction in the average number** of alcohol related incidents per month from 251 in 2011/12 to 185 in 2014/15.
- The majority (72%) of alcohol related incidents occur at the weekend (Friday – Sunday), an increase from 65% in the previous year.



- The areas with the highest rate of alcohol related incidents are shown below and continue to show Galashiels and Hawick Central as problematic areas for alcohol related incidents.

## Rate of Alcohol Related Antisocial Behaviour Incidents for 2014-15 by Intermediate Zone

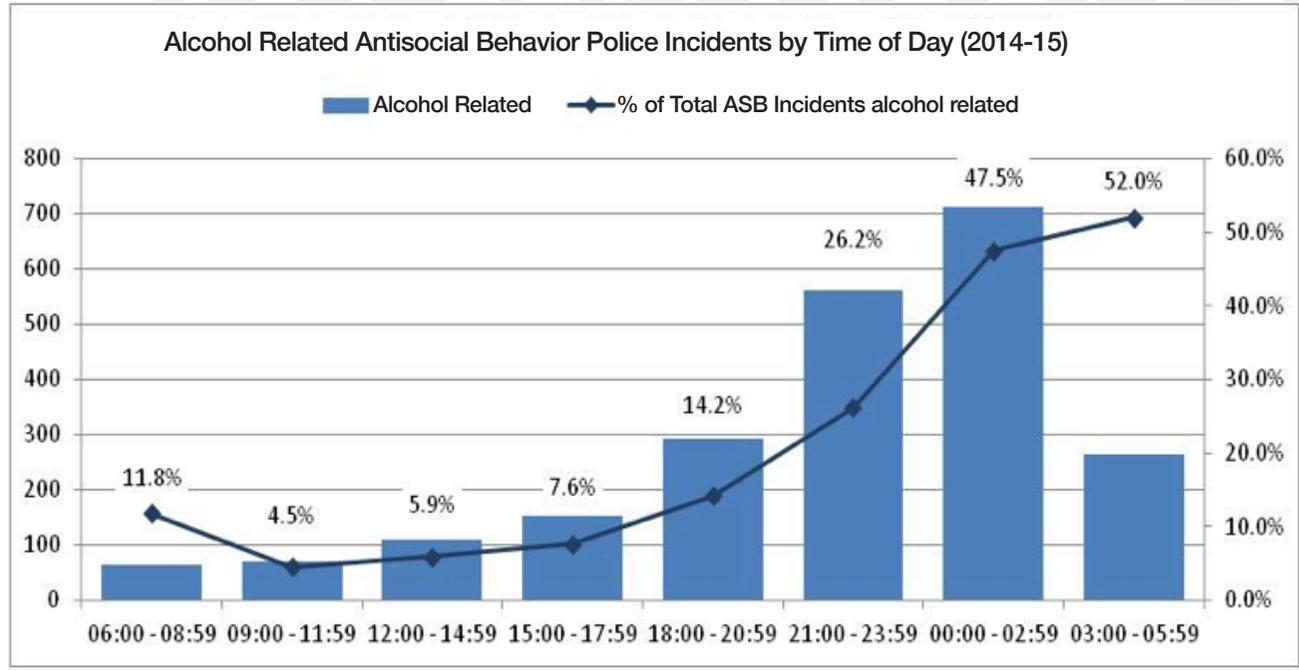




- The number of alcohol related incidents is highest between midnight and 3.00am accounting for 47.5% of the total antisocial behaviour incidents.

In addition:

- 22% (203) of domestic abuse incidents had alcohol recorded as contributing factor.
- 169/241 (70%) of those people subject to statutory supervision by Criminal Justice Social Work had current or previous problematic alcohol use (February 2012 – October 2014).



### Preventing Crime & Disorder/Summary

Alcohol continues to play a significant part in Police related business with 18% of antisocial behaviour incidents involving alcohol however there has been a reduction in the average number of alcohol related incidents per month. Although these types of incidents are occurring on a daily basis, 72% of all alcohol related incidents occur at the weekend with the largest number of incidents occurring between midnight and 3am. Galashiels West/North and Hawick Central continue to have the largest number of alcohol related incidents.

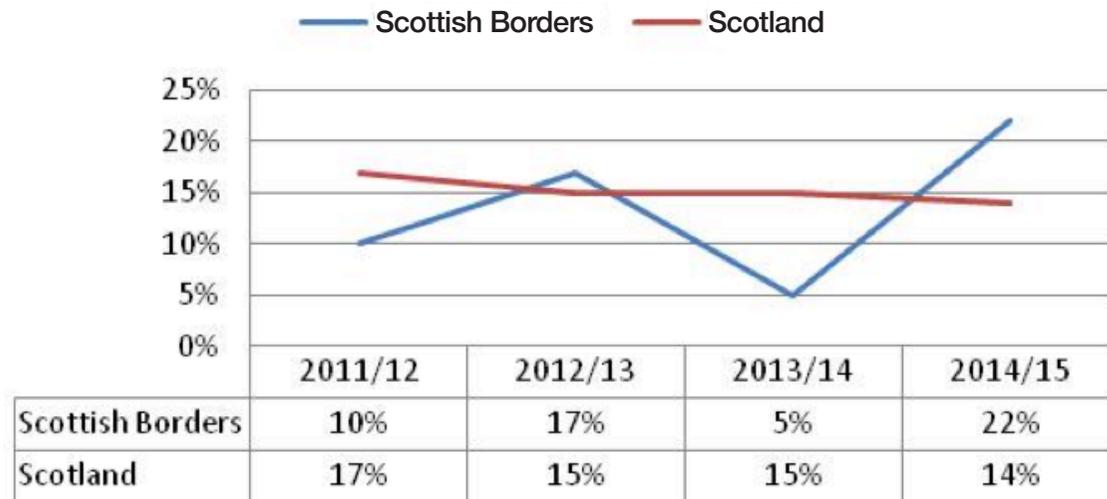
# Securing Public Safety

## Accidental Dwelling Fires: Scottish Fire and Rescue Service 2014/15

- For 2014/15, Scottish Borders had 18 accidental dwelling fires where alcohol/drugs were suspected. 22% of total fires.
- This was above the national average (14%) and also the highest proportion of fires since 2011/12 however caution should be noted with the low numbers in Scottish Borders.
- The 18 fires resulted in three casualties and zero fatalities.

22% of fires last year had alcohol/drugs as contributing factor.

### Accidental Dwelling Fires: Suspected Alcohol/Drug Use

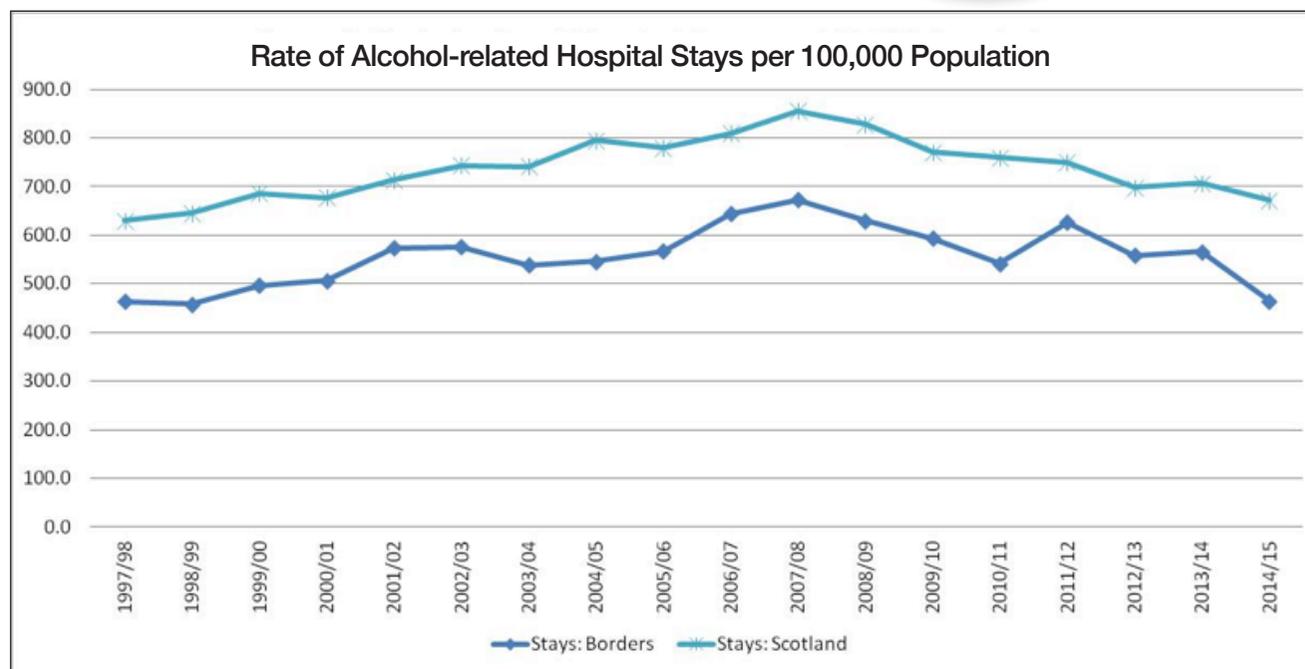


# Protecting and Improving Public Health

## Alcohol Related Hospital Stays

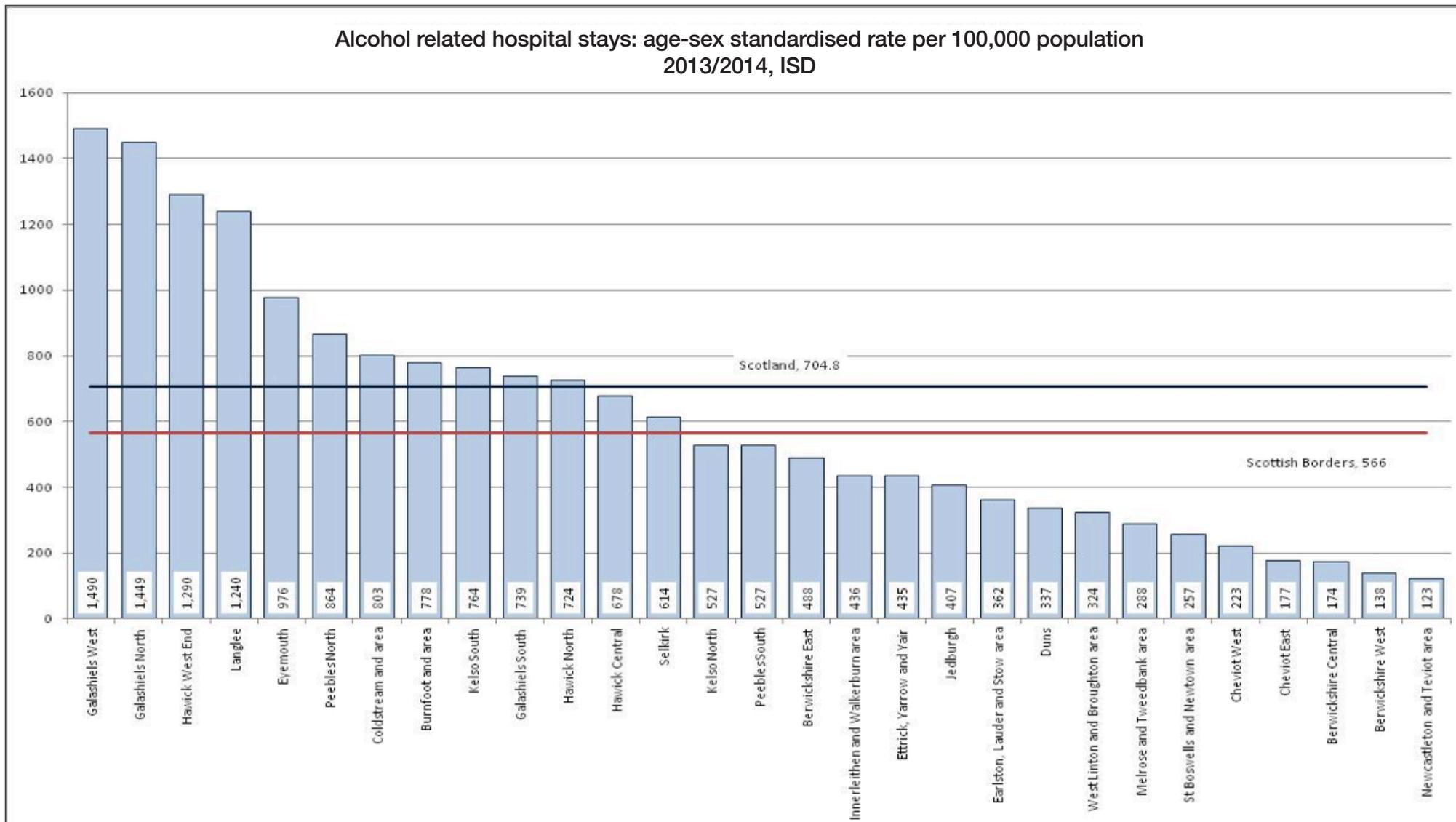
- Alcohol-related general hospital stays are continuing to decrease overtime for Scottish Borders in line with national data.<sup>13</sup>
- In 2014/15, the rate of hospital stays was 464.6 per 100,000 population. This is a decrease from the previous year and overall reduction in rates seen since 2007/08 and reflects Scotland figures.

1 in 4 males and 1 in 4 females drink to hazardous or harmful levels



<sup>13</sup> Alcohol Related Hospital Statistics, ISD, 2014

The most up to date data for hospital stays by intermediate Geography is 2013/14. Although the Scottish Borders has lower rates of alcohol related hospitalisations compared to Scotland there are areas in the Scottish Borders where the rate is higher. These are Galashiels West, Galashiels North, Hawick West End, Langlee, Eyemouth and Peebles North.



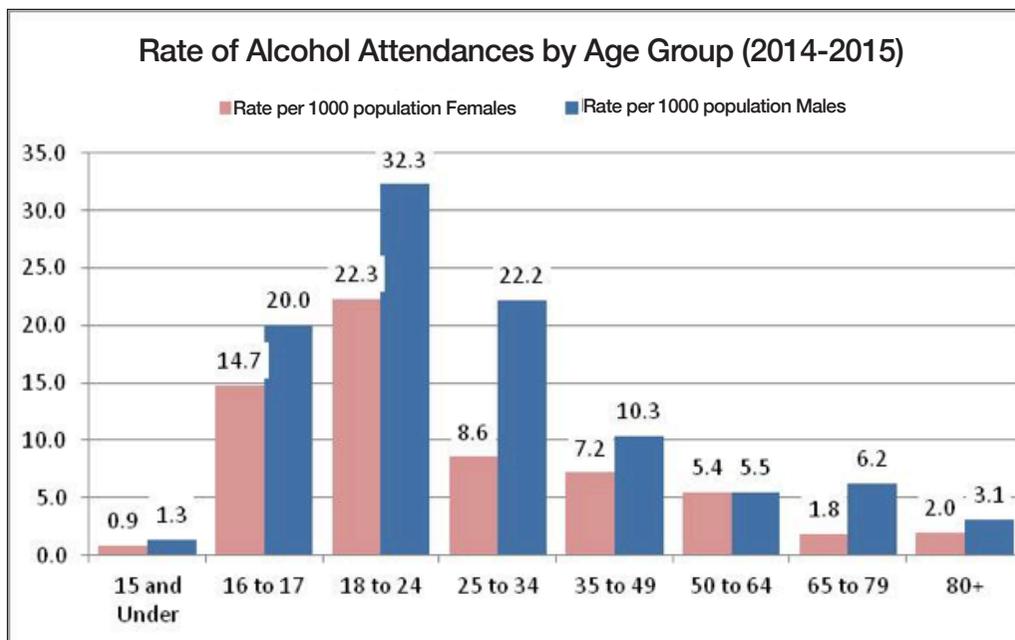
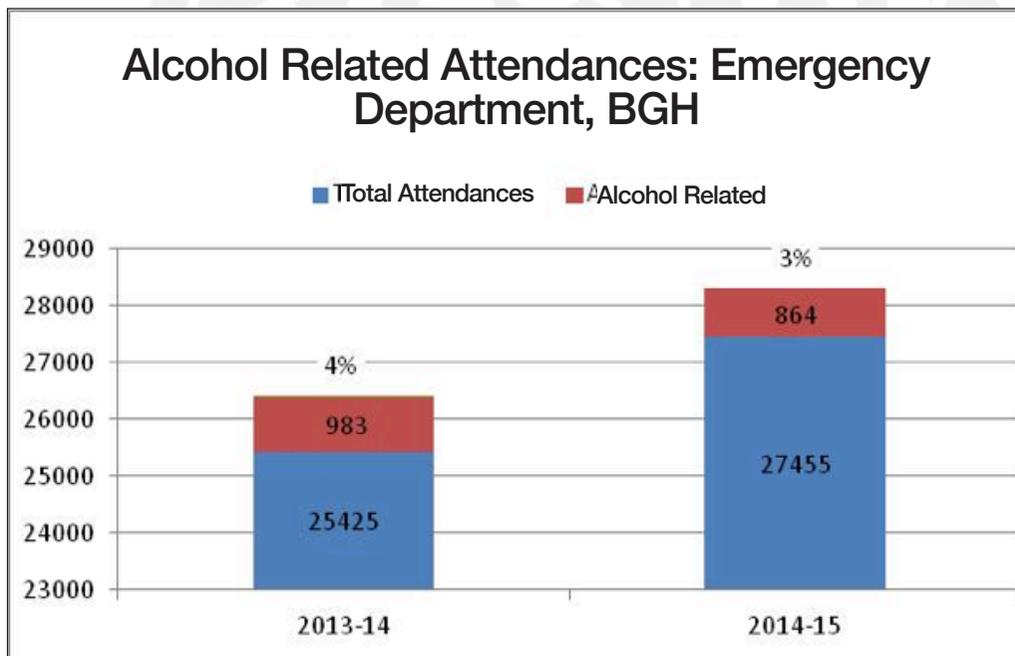
## Emergency Department, Borders General Hospital Statistics (2014-15)

- For 2014/15, there was an increase in the total attendances to the Emergency Department (ED) of Borders General Hospital (BGH).

- However, there was a **decrease in the number (864) and percentage (3%) of alcohol related attendances.**

Of the alcohol related attendances:

- 18-24 year olds had the highest rate** of alcohol attendances for both males and females.
- Galashiels North, West and Langlee** was more than double the average rate of alcohol related at ED relating to alcohol.
- July had the highest number of alcohol attendances in 2014/15 with a lower number of attendances between September and November. This data however varies year on year with no consistent pattern.

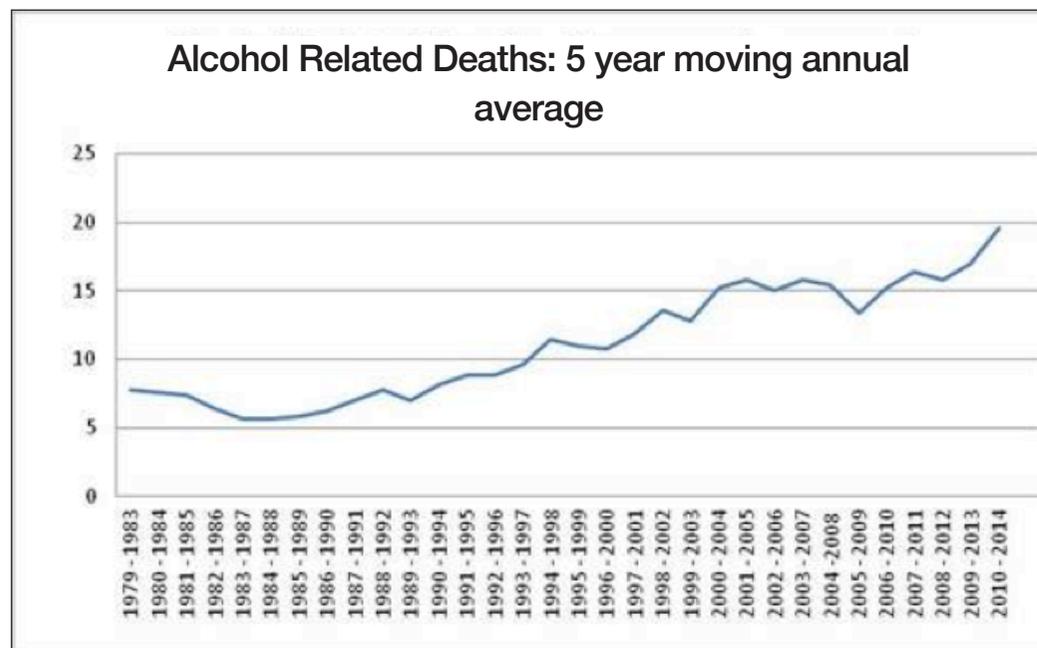
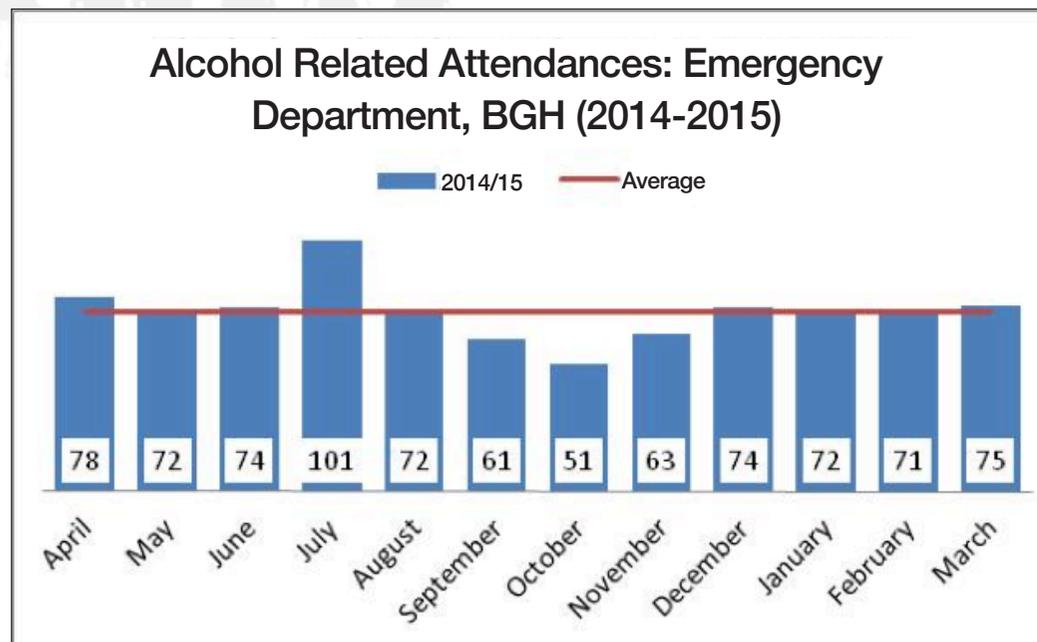


## Alcohol Related Deaths: 2000 - 2014

- In 2014, there were 25 alcohol-related deaths, an increase of 9 (56%) compared with 16 in 2013, and the highest annual total since 1997. These figures fluctuate from year to year.
- The 5-year moving annual average shows an **increasing trend for Scottish Borders.**

## Summary

Scottish Borders has downward trends in relation to alcohol related hospital stays and emergency attendances where alcohol was a contributing factor. However, there are areas in Scottish Borders with more alcohol related hospital stays compared to Scotland. The areas with the highest rates being **Galashiels West, Galashiels North, Hawick West End and Langlee.** Recent data also shows an increasing trend in alcohol related deaths.



# Protecting Children & Young People from Harm

## Test Purchasing

- Over the past two years there have been 64 licensed premises tested for sale of alcohol to under 18s.
- Four first time failures were noted in 2013/14 with no failures noted for 2014/15.

	2013/14	2014/15
No of premises tested	38	26
On sales	0	2
Off sales	38	24
No of 1st time fails	4	0
No of 2nd time fails	0	0

Source: Police Scotland

Over 50,000 children in Scotland live with a problem drinker

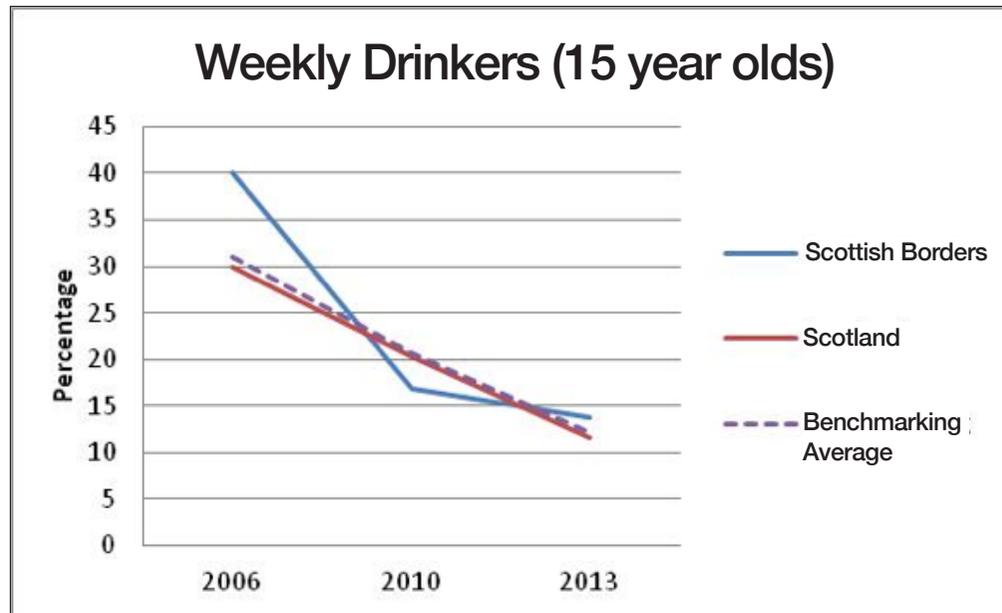
## Children & Young Peoples Alcohol Consumption

- **Regular use of alcohol in children and young people has fallen and is at an all time low.** 96 (14%) of 15 year olds surveyed reported drinking in the previous week. However this is slightly above the benchmarking average (12%).

Source: SALSUS

- The proportion of 13 -15 year olds who think it is okay to try alcohol/get drunk to see what it's like has dropped over time between 2010 and 2013.

Source: SALSUS

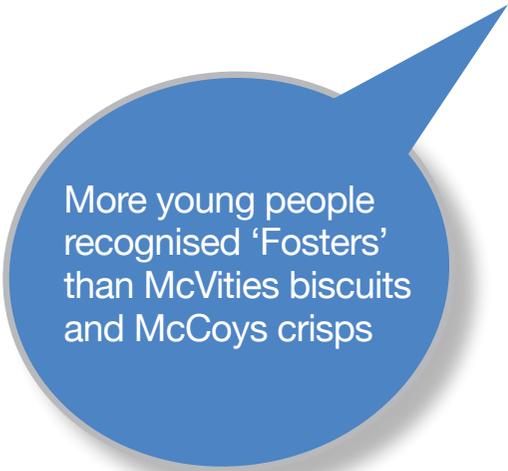




## Marketing

Millions of pounds are spent by the alcohol industry every year marketing their products. This includes TV, cinema, billboards, online, social networks, magazines, newspapers, shops, pubs, sports sponsorship, music and arts festivals.

As a result children and young people are growing up surrounded by positive messages about drinking. Evidence has also shown that **exposure to alcohol marketing, increases the likelihood that young people will start to drink, drink at an earlier age and to drink more if they are already drinking.** Recent research also showed that 9 in 10 children across England and Scotland correctly identified 'Fosters' as an alcohol product and brand recognition was higher for 'Fosters' than McVities' biscuits, McCoys' crisps and Ben & Jerry's icecream.<sup>14</sup>



More young people recognised 'Fosters' than McVities biscuits and McCoys crisps

### Protecting Children & Young People from Harm Summary

It is positive to note the reduction in the number of children and young people drinking regularly and low numbers attending the Emergency Department, BGH where alcohol is contributing factor. However Occasional Licences continue to have a large percentage allowing children and young people access. This should continue to be monitored closely by the Licensing Board.

<sup>14</sup>Childrens Recognition of Alcohol Marketing (2014), Cogent Research & Analysis Ltd.

## Community Views on Alcohol

The Scottish Borders Household Survey was carried out in 2015. Within this survey communities were asked about the number of places where you can buy alcohol in their local area.

- 68% of respondents felt this was about right
- 14% of respondents felt this was too many

In addition a survey was carried out by two trade members of LLF from Kelso & Hawick to capture views via Facebook on alcohol.

- 136 responses were received with an even spread throughout all age groups.
- 53% had not heard of the LLF, 73% were aware of the Licensing Standards Officer and 89% were aware of the Licensing Board.

When asked about the number of places to buy alcohol in their local area;

- 79% felt the number of **off-sales** was about right; 12% felt there were too many.
- 62% felt the number of **on-sales** was about right; 27% felt there were too few.

When asked about the closing time for different licensed premises;

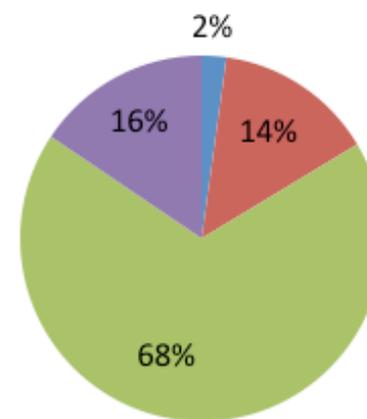
- 77% felt 10.00pm was about right for off-sales.
- 65% felt 1.00am for bars was about right; 22% felt this was too early.
- 46% felt 2.00am for nightclubs in Kelso and Hawick were too early; 43% felt this was about right.
- 67% felt 3.00am for nightclubs in Galashiels was about right; 29% felt this was too late.

When asked about drinking at home or prior to going out;

- 70% noted that the cost of going out for a drink was an influencing factor as well as convenience and changing lifestyles.
- 80% noted that they had bought their alcohol from a large supermarket.

### Do you feel that the number of places to buy alcohol in your local area is?

■ Too Few   ■ Too many   ■ About right   ■ Dont know



## Appendix 1 - Definitions

### Licensing Objectives

- Preventing crime and disorder
- Securing public safety
- Preventing public nuisance
- Protecting and improving public health
- Protecting children and young people from harm

### Alcohol Related Police Antisocial Behaviour (ASB) Definition

Antisocial behaviour is an act committed by a person or a course of conduct by any person, which causes or is likely to cause alarm or distress to at least one other person. The person harmed cannot live in the same household as the perpetrator and the conduct includes speech.

Examples of antisocial behaviour include:

- acts within the community like fighting, drunken behaviour, fire raising and noise,
- acts directed at individuals like assault, social network abuse and harassment,
- acts where there is an environmental impact like littering, fly tipping and damaging property and other
- acts in the community having a general negative impact such as racing cars, drug misuse and drinking in public i.e. underage drinking, drunk and incapable and using controlled drugs which all can cause alarm

The definition of an alcohol related Police ASB incident is 'those incidents that were marked by Police officers indicating that alcohol was a contributing factor to the incident'.

### Intermediate Geographies

There are 29 intermediate geographies in the Scottish Borders with a population between 2,500 and 6,000 which represent communities as best as possible. Comparing the data over intermediate geographies helps to identify if there are particular issues in localities and also if any remedial action is possible.

### Accidental Dwelling Fires

An accidental dwelling fire is a fire that has taken place in a person's home with no malicious or deliberate action taken place. The Scottish Fire & Rescue Service record where they suspect that a contributory factor to an accidental fire was due to a person being impaired because of suspected use of alcohol and/or drugs.

### Alcohol Guidelines

New guidelines have been developed to keep health risks from drinking alcohol to a low level.

Weekly Guideline:

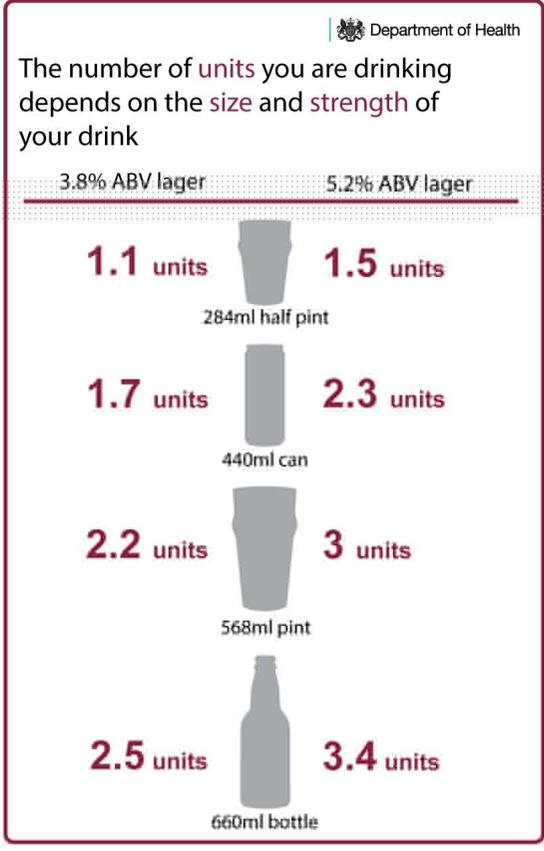
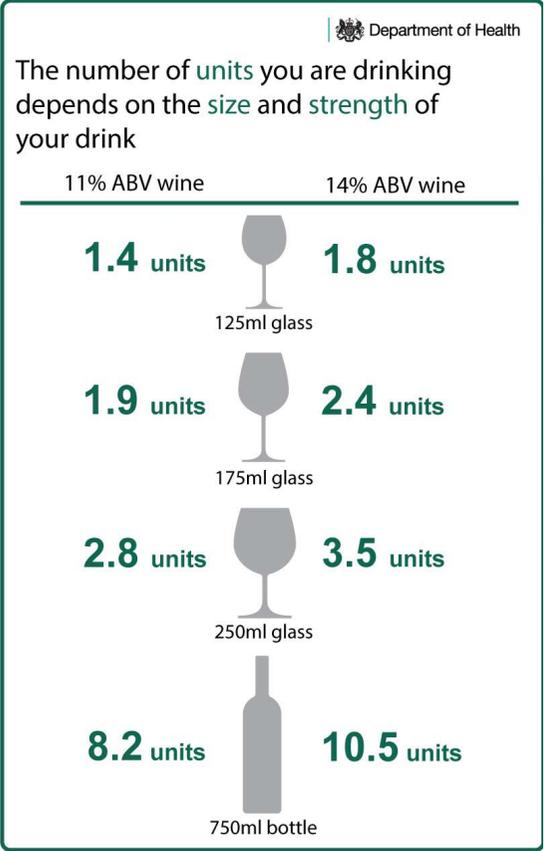
- For men and women you are safest not to drink regularly more than 14 units per week
- If you do drink as much as 14 units per week, it is best to spread this evenly over 3 days or more (avoid binge drinking).

Single Drinking Occasion:

- Limit the total amount you drink on one occasion;
- Drink slowly, drink with food and alternate with water;
- Avoid risky places and activities, make sure you have people you know around and ensure you get home safely.

Pregnancy and drinking:

- If you are pregnant or planning a pregnancy, the safest approach is not to drink alcohol at all.

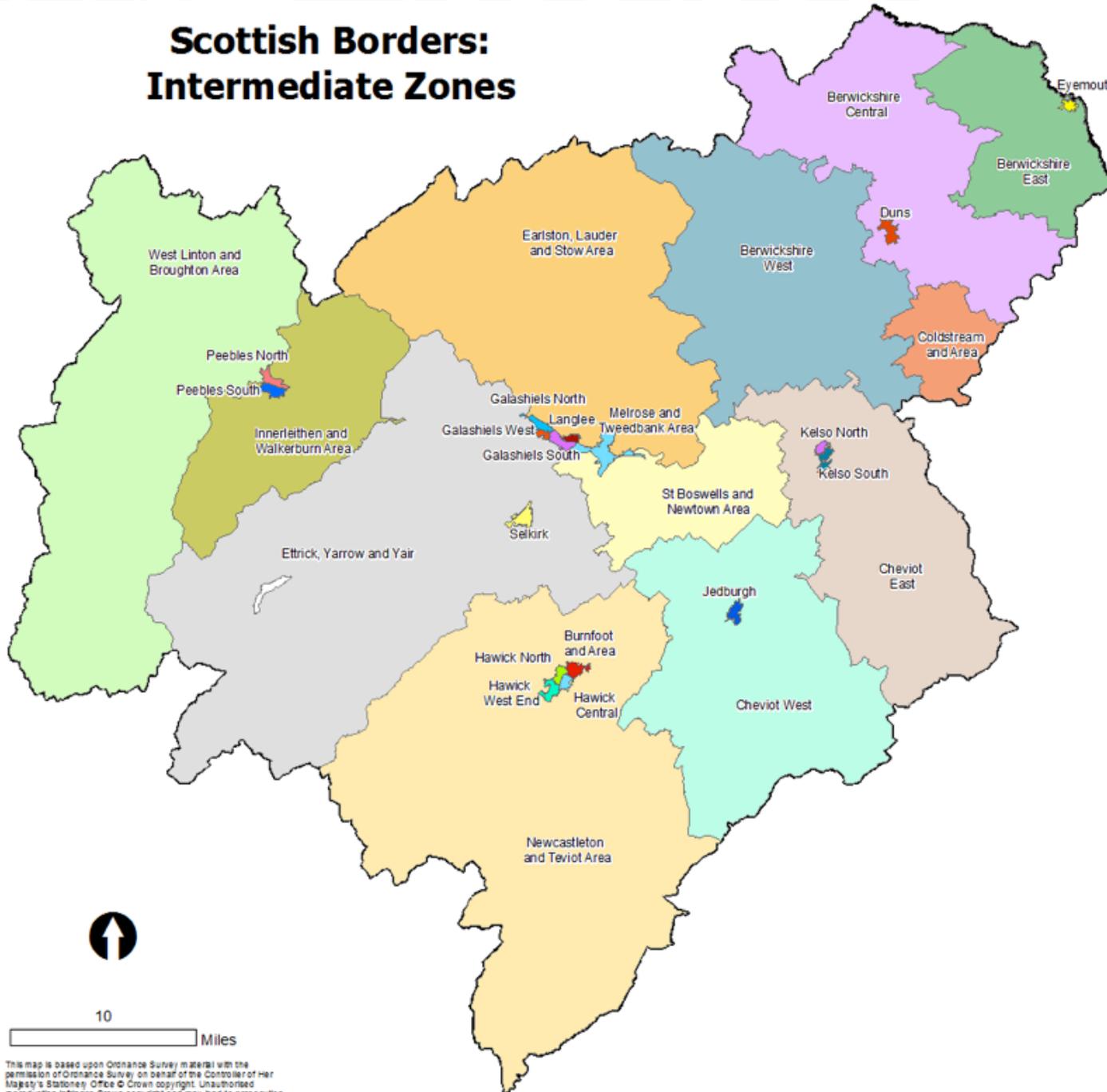


**Alcohol related attendances, Emergency Department, Borders General Hospital**

Nationally available data on alcohol related hospital stays report only on patients admitted to the acute wards within the hospital. The data does not include patients who have attended Emergency Department (ED), Borders General Hospital (BGH) and are discharged directly from this department.

Therefore ED data is collected by health professionals during the triage process where it is assessed if alcohol is a contributing factor to the patient's attendance to enhance the national data. This includes activity in ED for those who are discharged directly from the department and those who are subsequently admitted to acute wards.

# Scottish Borders: Intermediate Zones



## Intermediate Zones (2001 based)

- Berwickshire Central
- Berwickshire East
- Berwickshire West
- Burnfoot and Area
- Cheviot East
- Cheviot West
- Coldstream and Area
- Duns
- Earliston, Lauder and Stow Area
- Ettrick, Yarrow and Yair
- Eyemouth
- Galashiels North
- Galashiels South
- Galashiels West
- Hawick Central
- Hawick North
- Hawick West End
- Innerleithen and Walkerburn area
- Jedburgh
- Kelso North
- Kelso South
- Langlee
- Melrose and Tweedbank Area
- Newcastleton and Teviot Area
- Peebles North
- Peebles South
- Selkirk
- St Boswells and Newtown Area
- West Linton and Broughton Area

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This report has been written by Susan Walker, Alcohol & Drugs Partnership Support Team and Erin Murray, Scottish Borders Council on behalf of the Local Licensing Forum.

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