REPORT TO: DUNDEE CITY LICENSING BOARD - 20TH FEBRUARY 2014

REPORT ON: OVERPROVISION ASSESSMENT UNDER LICENSING (SCOTLAND) ACT 2005

REPORT BY: CLERK TO THE LICENSING BOARD

**REPORT NO: 71-2014** 

#### 1.0 PURPOSE OF REPORT

1.1 To advise the Board of options to enable it to assess to what extent there may be an overprovision of licensed premises within its area under Section 7 of the Licensing (Scotland) Act 2005.

### 2.0 RECOMMENDATIONS

- 2.1 That the Board considers the following options:-
  - 2.1.1 A statement that there may be overprovision of licensed premises generally, or licensed premises of a particular description
    - throughout the whole of the Board's area; or
    - in specified localities within the Board's area; or,
  - 2.1.2 A declaration that there is no overprovision either of licensed premises generally, or licensed premises of a particular description, in any locality within the Board's area;
- 2.2 In the event that the Board decides that there may be overprovision in terms of Paragraph 2.1.1 above, that it is remitted to the Clerk to carry out a consultation under Section 7(3) and (4) of the 2005 Act and to report thereon to the Board at its June 2014 meeting.

### 3.0 FINANCIAL IMPLICATIONS

3.1 In terms of Regulation 13 of the Licensing (Fees) (Scotland) Regulations 2007 [SSI 2007/553], the total fees payable for licences are to be broadly equivalent to the expenses incurred by the Board and Council in administering the 2005 Act in their area, therefore there should be no financial implications arising from the contents of this report.

### 4.0 BACKGROUND

- 4.1 Section 7 of the 2005 Act requires every Licensing Board to consider to what extent (if any) there is overprovision of licensed premises (either generally or of a particular description) in any locality within their area. This is referred to as "the overprovision assessment" and is to be included in the Board's three-yearly Statement of Licensing Policy.
- 4.2 In its Statements of Licensing Policy for 2010-2013 and 2013-2016, the Board took the view that it had yet to be presented with sufficient evidence to enable it to state that there is any such overprovision in Dundee. The most recent articulation of this is found at Section 3, Page 7 of the 2013-2016 policy statement -

"There is, at present, insufficient evidence to allow the Board to conclude with any degree of certainty that there are any localities in its area which are overprovided for to the extent that this would support a basis for refusing future applications. However, further research will be undertaken by the Clerk with all relevant agencies (Police, Health Board, community groups, etc) to obtain more detailed data for the localities identified, such as crime statistics, hospital admissions for alcohol-related reasons, etc. If any of this evidence supports a re-examination of the issue of overprovision in any particular locality, the Board is empowered to amend its policy. The Board has been advised by the Dundee City Alcohol & Drug Partnership that a detailed report on the subject of overprovision will be produced in the early part of 2014. The Board intends to revisit the issue at that stage."

4.3 The Dundee City ADP made a detailed presentation to the Board at its meeting on 16 January 2014, whereupon the Board instructed the Clerk to prepare a report setting out its options regarding overprovision.

### 5.0 DISCUSSION OF IMPLICATIONS AND OPTIONS ARISING FROM ADP REPORT

- 5.1 It is, of course, open to the Board to conclude that, notwithstanding the material contained in the ADP Report, there is no overprovision in any localities in Dundee, in which event the current process will be at an end. Alternatively, the Board could decide that there may be overprovision either of all types of licensed premises, or premises of a particular description, in all or part of the city. (For the purposes of this discussion, it is suggested that any distinction drawn is between on-sales premises (including those with an off-sales facility) and off-sales premises), although it will be practically impossible to determine whether alcohol consumption in any particular locality is largely attributable to one type of premises as opposed to another. Nevertheless, the Board is under a statutory duty to consider overprovision based upon the evidence available.
- 5.2 The ADP Report contained a table showing a summary of its principal statistical findings relating to alcohol related health harm and alcohol related crime by reference to Local Community Planning Partnership (LCPP) areas which are coterminous with the electoral wards for the Board's area. The table also shows licensed premises by LCPP area and is reproduced at APPENDIX 1 to this report.
- 5.3 The table's figures would suggest that all or most alcohol-related harm is connected to five of the eight areas listed. The Maryfield area has the highest level of alcohol-related crime by location of offence, but this is undoubtedly due to the fact that the City Centre (usually regarded for licensing purposes as being the area within the Inner Ring Road) falls within that area. Of the five areas referred to above, the North East area has below average figures for alcohol-related offences (both in relation to location of offence and residence of the offender), although it is above average on specific health harm indicators and some alcohol-related crime (by residence of offender)..
- 5.4 The ADP Report recommends on the basis of level of alcohol related harm that the whole City should be considered as overprovided for. However, if the Board is not persuaded to look at a city-wide finding of overprovision, then individual LCPP areas should be considered to be overprovided. The key indicators in this regard are those highlighted in red in the table at APPENDIX 1 which are either at or above the City average for the categories of harm which they represent. The ADP Report specifically asks the Board to find overprovision in the first five areas on the list, namely:-
  - Maryfield;
  - Coldside;
  - Lochee;
  - East End;
  - North East.

- Although these LCPP areas are relatively large, this would not, however, prevent Board members from narrowing down the larger areas by using their local knowledge of the relative location of licensed premises within these areas, eg to suggest that any finding of overprovision be restricted to a particular part of an LCPP area. To this end, the relative concentrations of licences in every LCPP area are shown at APPENDICES 3-10 to this report. These are also shown by reference to the Community Regeneration Areas (CRA's) within each LCPP area/ward (with the exception of The Ferry and the West End). The use of the CRA's may be a practical alternative the Board might consider in this regard. Figures for alcohol-related harm in the CRA's are shown in APPENDICES 2A and 2B. As can be seen from the data provided, the CRA's have generally above average levels in virtually all of the indicators of both crime and health matters and the maps of these areas tend to suggest that they contain the majority of licences in each LCPP/ ward area.
- As mentioned in Paragraph 5.3 above, the City Centre falls within the Maryfield LCPP/ward area. Not surprisingly, the City Centre contains the highest number of on-sales premises in any part of the City. It is therefore suggested that the Board adopts the usual practice in licensing matters and treats the City Centre as a separate area for the purpose of the overprovision assessment. The Board could decide that the whole of the area in the City Centre is overprovided with all types of licences or simply licences of particular kinds of operation. The practice of some other Boards had been to recognise the distinct nature of city centre areas by, for instance, limiting overprovision policies to premises which operate as a traditional public house where alcohol consumption is the principal attraction and other similar "vertical" drinking establishments such as entertainment venues. This type of approach could leave the City Centre open to premises which wish to operate as restaurants, hotels, etc. where the Board is satisfied that such premises would not increase the existing levels of harm, would fill any gap in existing service provision or would enhance the City Centre area for residents and visitors alike.
- 5.7 Taking all of the above into account, it is for the Board (in the event that it considers that there may be overprovision) to decide whether to go with a city-wide definition or to base its decision on individual localities as suggested in Paragraphs 5.2 to 5.5. If the latter option is chosen, this would be without prejudice to the Board's right to look at overprovision in the context of individual applications outwith these localities on a case-by-case basis in much the same way as is done at the moment. (Indeed, even within any localities declared to be overprovided for, the Board would have to hear any applications for licences and decide whether the policy should apply to these.)
- 5.8 If the Board decides to proceed with any of the options set out in Paragraph 2.1.2 above, it is necessary to hold a consultation under Section 7(3) and (4) of the 2005 Act. The persons whom the Board must consult are:-
  - the Chief Constable;
  - the relevant health board;
  - such persons as appear to the Board to be representative of the interests of -
  - holders of premises licences in respect of premises within the locality;
  - (ii) persons resident in the locality, and

such other persons as the Board thinks fit.

5.9 It is recommended that it be remitted to the Clerk to make the necessary arrangements for any such consultation and that this might run until mid-May, 2014 with a final report being submitted to the Board at its meeting on 12th June, 2014.

The ADP Report had suggested that occasional licences and extensions to licensing hours be included in any finding of overprovision which the Board is minded to make. However, it is the opinion of the Clerk that whilst acknowledging the validity of the ADP Report's arguments to support this suggestion, this would not be legally competent. Section 7(5) of the 2005 Act specifically excludes occasional licences from an overprovision assessment. Also, the grounds for refusal of applications for occasional licences and extended hours do not make any reference to overprovision as a valid ground for refusal. The only two types of application where overprovision is laid down in the 2005 Act as a ground for refusal are new premises licences and variations to premises licences. This would obviously apply to any variations seeking an increased capacity, for example. This does not mean, however, that applications for occasional licences and extended hours could not be refused on other grounds, eg inconsistency with the licensing objectives.

### 6.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Sustainable Development, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management.

An Equality Impact Assessment has been carried out. This is attached at APPENDIX 11.

#### 7.0 CONSULTATIONS

The Chief Executive, Director of Corporate Services, Head of Environmental Protection, the Director of Social Work, the Director of Leisure and Communities, the Director of City Development, the NHS and Police Scotland have been consulted in the preparation of this report.

### 8.0 BACKGROUND PAPERS

"An Assessment of Overprovision in Dundee" - Report January 2014 - Dundee City Alcohol & Drug Partnership.

Licensing (Scotland) Act 2005 - Section 142 - Guidance for Licensing Boards.

ROGER MENNIE CLERK TO THE LICENSING BOARD DATE: 10th February, 2014

# 9.1 Comparison of various measures of alcohol related harm across Dundee City

average, those below 1 are lower than average and those above 1 show how many more times the average a particular LCPP area is for a particular measure e.g. the rate of on-sales licences in Maryfield is 2.7 times higher than the Dundee average. rate for each indicator and LCPP area has been calculated as a multiple of the mean rate for Dundee City. Measures of 1.0 are the same as the Dundee Table 8 summarises and compares some of the measures of alcohol related harm that have been discussed in this report. To allow this comparison, the

related health harm. longer term while alcohol related incidents/crime often happens soon after excessive alcohol has been consumed and more often than not affects not just to 1 have been highlighted in red and are considered to be of particular concern. It should of course be noted that just because a particular measure is Given that we know that Dundee City has high levels of alcohol related harm compared to Scotland as a whole, any measures that are greater than or equal the individual but the wider community. Alcohol related incidents/crime suggests levels of over consumption which also contributes to individual alcohol below average, it should not be ignored. In the main, significant individual alcohol related health harm develops by way of excessive consumption over the

is based on the LCPP area of residence in which the individuals/offenders reside. The first three columns relate to the LCPP area in which the premise licence is located and where the alcohol related crime took place. The rest of the table

Table 8: Summary of alcohol related harm across Dundee City LCPP areas

	Mossil		- >35									
	location c	location of premises/incidents	incidents		Me	asures base	d on LCPP	residence c	Measures based on LCPP residence of individual/offender	offender		
	Alcohol A	Alcohol Availability	:	Alcohol re	Alcohol related Health Harm	tarm			Alcohol re	Alcohol related Crime		
LCPP Area	On-sales licences	Off-sales licences	All alcohol related crimes	Alcohol related A&E presentations	Alcohol related acute hospital discharges	Alcohol related mortality	All alcohol related crimes	Serious Assault	Sexual Crimes	Petty Assault	Vandalism	Breach of the Peace
Dundee City	1.0	1.0	10	1.0	1.0	10	1.0	1.0	10	10	10	10
Maryfield	2.7	1.7	3.4	1.3	1.3	1.4	13	1.3	0.9	44	0.8	20
Coldside	0.8	1.1	0.8	1.2	1.5	17	13	13	1.5	12	1.8	16
Lochee	0.7	1.0	1.0	1.3	1.1	12	On .	14	21	1 2	3.0	0.9
East End	0.3	1.3	0.7	1.3	1.3	4	1.4	0.7	10	16	1.7	17
North East	0.2	0.6	0.9	1.2	11	0.9	0.9	19	1.5	0.9	0.6	1.0
Strathmartine	0.4	0.6	0.6	0.7	0.8	0.6	1.0	0.9	0.0	11	12	1.3
West End	1.7	1.0	0.7	0.8	0.7	0.8	0.6	0.5	10.0	0.7	0.4	0.4
The Ferry	1.0	0.7	0.2	0.3	0.4	0.5	0.2	0.4	0.0	0.2	0.1	0.1
Key: Measure	s = 1.0 are t	Measures = 1.0 are the same as the Dundee average	the Dundee	average	2 20 0000 00 00		The second second					

Measures > 1.0 are 'worse' than the Dundee City average Measures < 1.0 are 'better' than the Dundee City average

# Mai Alleid

the population of Maryfield also suffer from above average alcohol related health harm and their residents commit higher than average alcohol related crime. location-based alcohol related crimes, are particularly high (the rate of crime is 3.4 times the average). However, the residence-based measures show that Maryfield is a concern in 8 of the 10 measures. As would be expected, given that Maryfield contains the City Centre, the measures of premises licences and

# Coldside

rates of alcohol related health harm and commit higher alcohol related crimes than Dundee as a whole. Coldside is of concern in 9 of the 10 measures. Despite having similar rates of premises licences as the Dundee average, Coldside's residents have higher

### Lochee

population of this area e.g. sexual crime rates by Lochee residents are 2.1 times higher than the Dundee average. Lochee is also a concern in 9 of the 10 measures. Of particular note in Lochee are the higher than average rates of alcohol related crimes committed by the

## East End

however the residents are committing a high rate of petty assault, vandalism and breach of the peace alcohol related crimes East End is of concern in 8 of the 10 measures. There is a low rate of on-sales licences and alcohol related crimes being committed within the East End area

# **North East**

of alcohol related health harm to Dundee as a whole, the rate of sexual crimes committed by those from the North East area is 1.9 times the average North East has been highlighted in 5 of the 10 measures. Although there are below average rates of premises licences and the residents have similar rates

# **Strathmartine**

higher than average alcohol related crime being committed by it's residents Strathmartine is of concern in 4 of the 10 measures. This area has a low rate of licences and lower than average alcohol related health harm but does have

# West End

crime, the rate of on-sales licences is 1.7 times higher in this area than the Dundee average The West End has concerning rates in 1 of the 10 measures. Although the population of West End have lower than average alcohol related health harm and

# The Ferr

the earlier considered alcohol consumption figures show that this population are drinking just as much, if not more than those from the least affluent areas of Although The Ferry is considered to be a concern in 0 of the 10 measures and has particularly low crime rates, we know that this area is fairly affluent and Dundee City which is a concern for the future

### APPENDIX ZA

# Summary of alcohol related health harm across Dundee City by Community Regeneration Area

Community Regeneration Area	Alconol related A&E	Alcohol related acute hospital	Alcohol related
	presentations	discharges	Поганцу
Dundee City	1.0	1.0	1.0
Ardler / St Mary's / Kirkton	1.0	12	1.0
Coldside/Maryfield	1.7	2.0	2.3
Menzieshill/Charleston/Lochee/Beechwood/Dryburgh	1.5	16	1.5
Mid Craigie/Linlathen/Douglas	1.4	1.3	1.4
Mill O Mains/Fintry/Whitfield	1.9	1.9	11.2

Note that measures are calculated in a similar manner as to those in the main Overprovision report

Source: SMR01, NRS

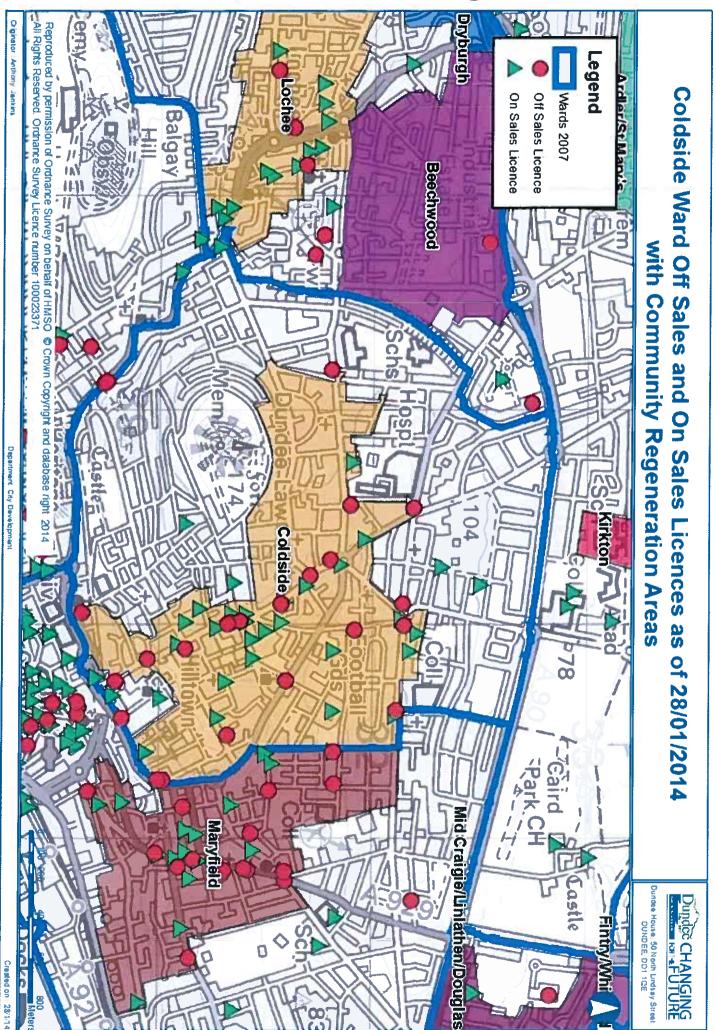
# Comparison of various measures of alcohol related harm across Dundee City

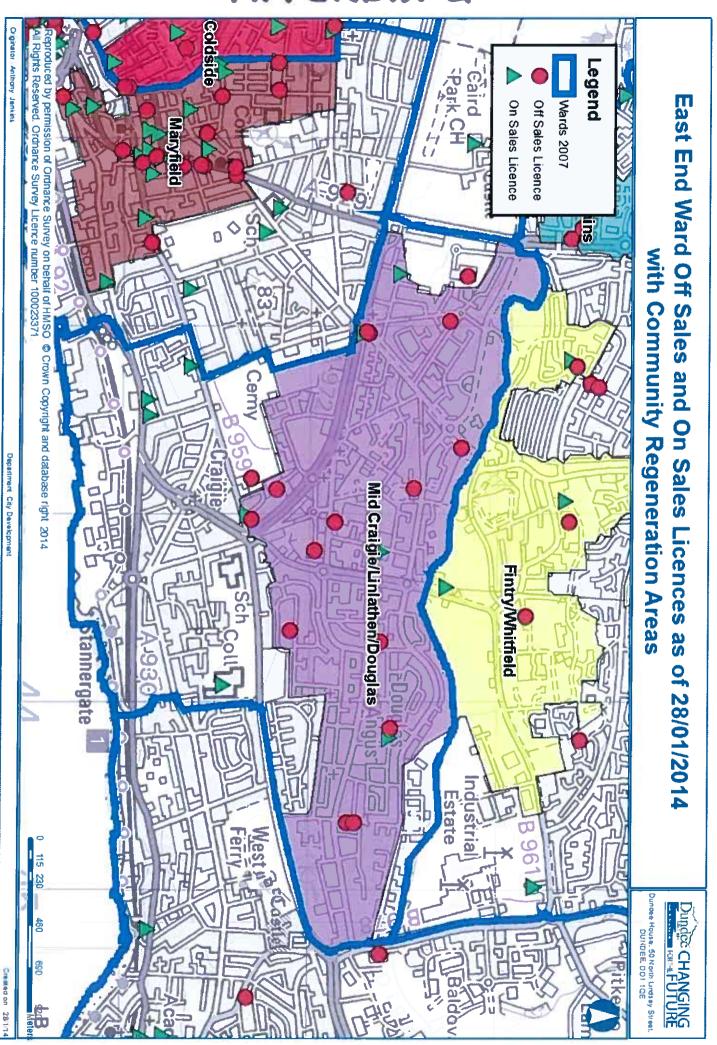
Summary of alcohol related harms across Dundee City for Community Regeneration Areas (CRAs)

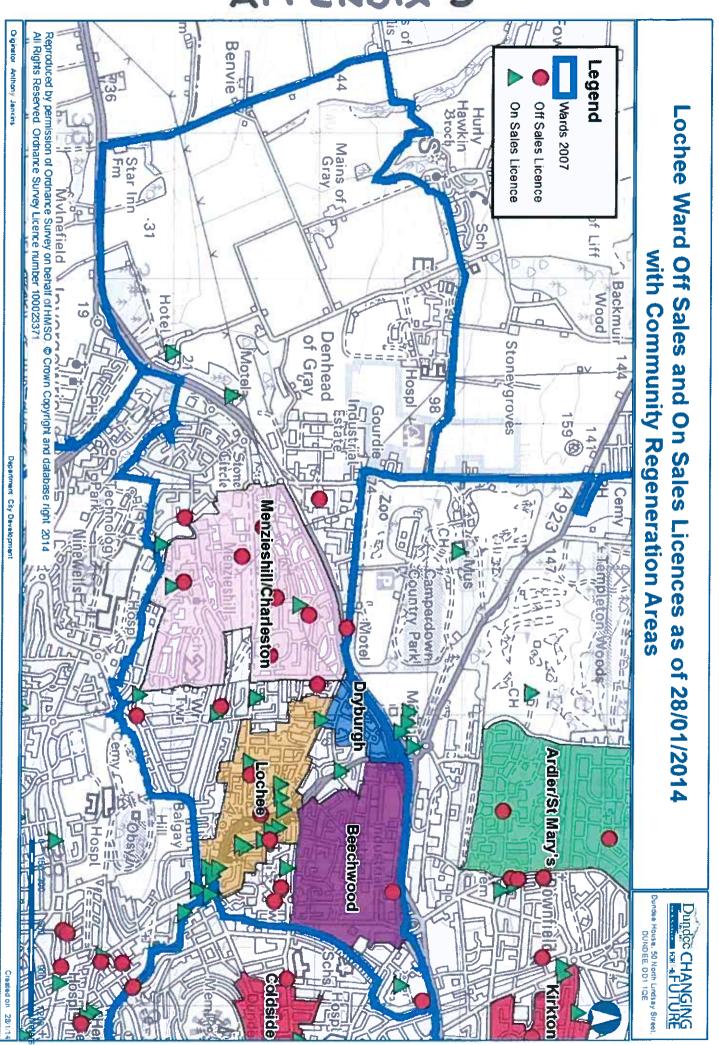
Community Resonantion Area	Based on CRA location of incident	Based on CRA	Based on CRA residence of individual/offender	ndividual/offe	ender
	Alcohol related crime	Alcohol related A&E presentations	Alcohol related acute hospital discharges	Alcohol related mortality	Alcohol related crime
Dundee City	10	40	ĵ	•	40
Ardler / St Mary's / Kirkton	0.5	1.0	12	1.0	4
Coldside/Maryfield	13	47	2.0	υ 2	1 80
Menzieshill/Charleston/Lochee/Beechwood/Dryburgh	1,4	1.5	1.6		1 9
Mid Craigie/Linlathen/Douglas		14	à	1	2 2
Mill O Mains/Fintry/Whitfield		19	10	٠ د	ול

# Please note:

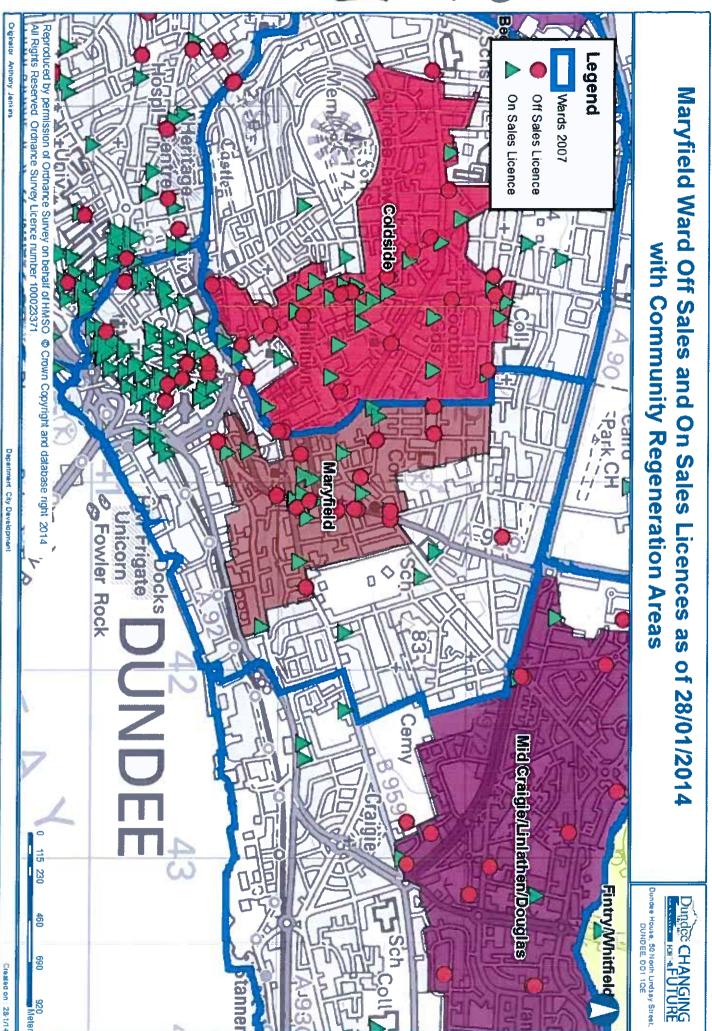
- To ensure presentation of the most recent available data for each indicator, the information presented above covers the following periods: A&E data is for 2012
- Acute discharges data is for 2011/12
- Mortality data is the 5 year period 2007-2011
   Crime statistics are for 2012/13.
- N breakdown by the types of crime for the CRAs. The crime data includes ALL alcohol related crimes by both location of incident and area of residence of offender. At this point, we do not have a

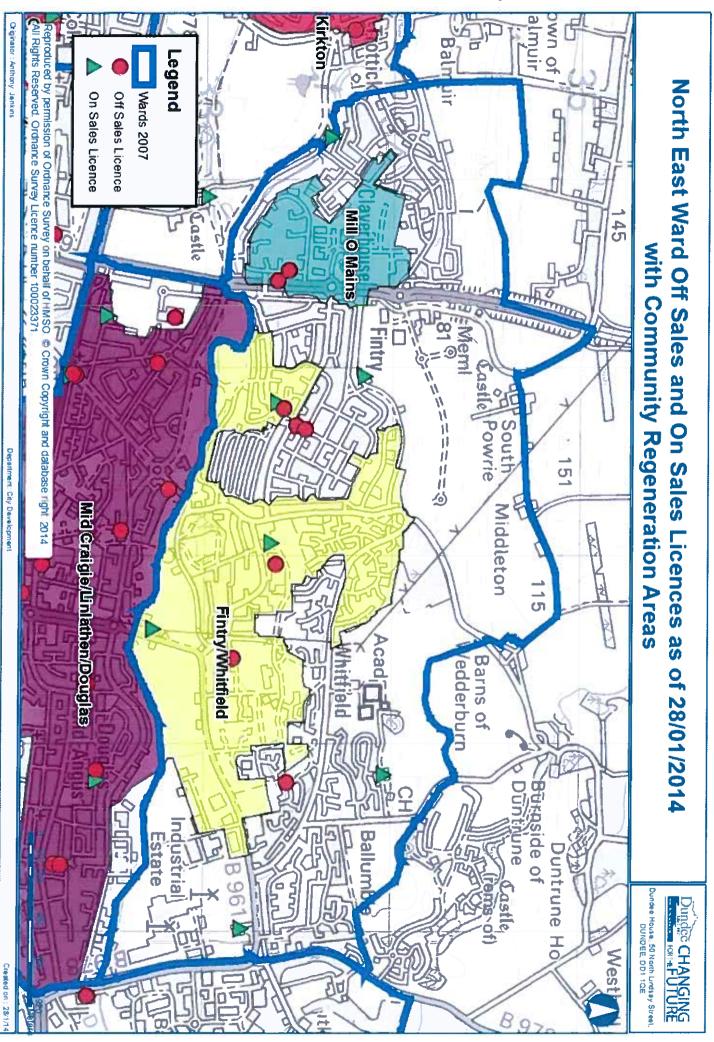


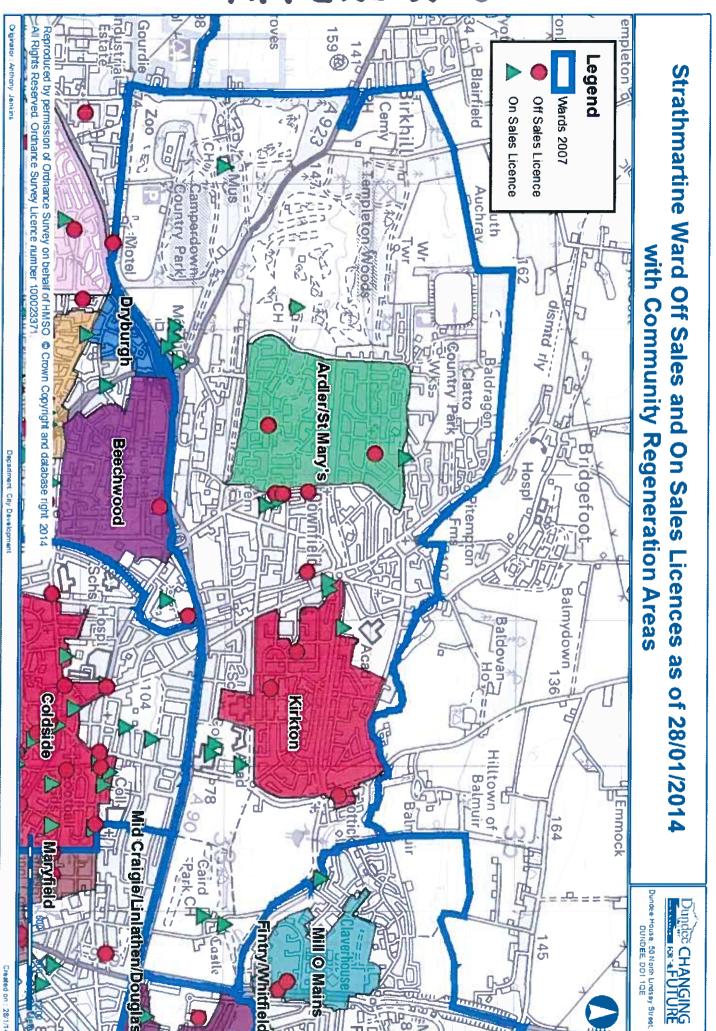




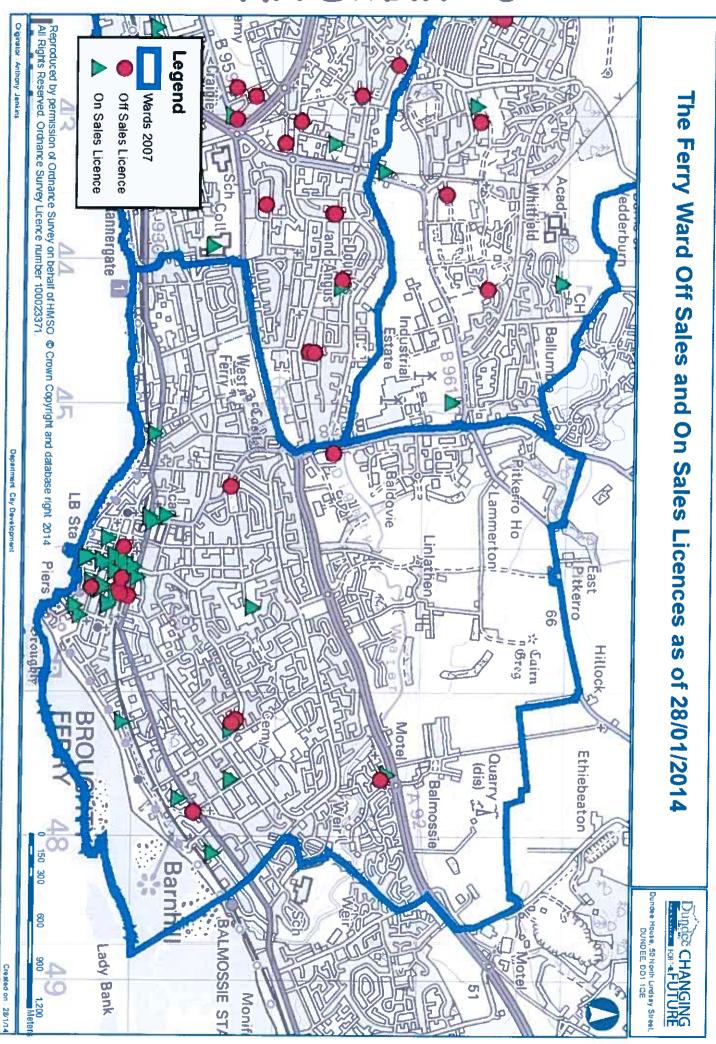
### APPENDIX C







### Orginator Anthon Jensins Reproduced by permission of Ordnance Survey on behalf of HMSO. © Crown Copyright and database right 2014 All Rights Reserved. Ordnance Survey Licence number 100023371 Legend Wards 2007 West End Ward Off Sales and On Sales Licences as of 28/01/2014 On Sales Licence Off Sales Licence Department City Development Hosp 四日 My Lord's Bank 150 300 DUNDEE, DD1 1GE Dundice CHANGING Discovery Point Middle Bank 600 900 Crested on: 28/1/1



### APPENDIX II



### **EQUALITY IMPACT ASSESSMENT TOOL**

### Part 1: Description/Consultation

Is	this a Rapid Equality Impact Assessment (RI	AT)?	Yes x□	No □
Is	this a Full Equality Impact Assessment (EQI	A)?	Yes □	No x□
Da	te of Assessment: 10 <sup>th</sup> February 2014	Committee	Report Number	er: 71- 2014
	le of document being assessed: OVERP COTLAND0 ACT 2005	ROVISION A	SSESSMENT	UNDER LICENSING
1.	This is a new policy, procedure, strategy or practice being assessed (If yes please check box) X□	or practice	existing policy being assesses check box)	
2.	Please give a brief description of the policy, procedure, strategy or practice being assessed.			e is overprovision of in any localities within
3.	What is the intended outcome of this policy, procedure, strategy or practice?	See answer	to 2. above.	
4.	Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	Guidance fo 2. An asses	r Licensing Boassment of overp City Alcohol 8	2005 - Section 142 - irds; provision in Dundee - & Drug Partnership -
5.	Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	No.		20022.5.3
6.	Please give details of council officer involvement in this assessment.  (e.g. names of officers consulted, dates of meetings etc)	Stuart Gallo Services)	way and Brian	Woodcock (Corporate
7.	Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy?  (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	to consult w	vith interested p	under a statutory duty parties in any locality y be overprovision.

### Part 2: Protected Characteristics

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	Positively	Negatively	No Impact	Not Known
Race / Ethnic Minorities			х□	
Gender			х□	
Gender Reassignment			х□	
Religion or Belief			х□	
People with a disability			х□	
Age			x□	
Lesbian, Gay and Bisexual			х□	
Socio-economic			х□	
Pregnancy & Maternity			х□	
Other (please state)			x□	

Part 3: Impacts/Monitoring

1.	Have any positive impacts been identified?  (We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)	No.
2.	Have any negative impacts been identified?  (Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)	No.
3.	What action is proposed to overcome any negative impacts?  (e.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. See Good Practice on DCC equalities web page)	N/A
4.	Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?  (If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)	N/A
5.	Has a 'Full' Equality Impact Assessment been recommended?  (If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required. Seek advice from your departmental Equality lead.)	No.
6.	How will the policy be monitored?  (How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.)	Will be kept under 3 yearly review as required under the Licensing (Scotland) Act 2005

### **Part 4: Contact Information**

Name of Department or Partnership	Corporate Services
Type of Document	
Human Resource Policy	
General Policy	x□
Strategy/Service	
Change Papers/Local Procedure	
Guidelines and Protocols	
Other	

Manager Res	onsible	Author Responsible
Name:	Stuart Galloway	Name: Brian Woodcock
Designation:	Principal General Services Officer	Designation: Senior Solicitor (Licensing)
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Email: Stuar	galloway@dundeecity.gov uk	Email: brian woodcock@dundeecity gov uk

Signature of author of the policy: Brian Woodcock		Date:	10/02/2014
Signature of Director/Head of Service:	Roger Mennie	Date:	10/02/2014
Name of Director/Head of Service:	Roger Mennie		
Date of Next Policy Review:	December 2016	·	