Expression of interest to become a LAAA

| 1. Who is the lead contact: | David Ottiwell  
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|---------------------------|----------------------------------------------------------------------------------|
| (Name / Job Title / Address / Phone / Email) | David Ottiwell  
Head, Public Protection Research Team, Greater Manchester  
6th Floor Churchgate House  
56 Oxford Street  
Manchester M1 6EU  
07525 392 268  
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| 2. Who is the Senior Responsible Owner for your proposed project | Jim Taylor  
Chief Executive  
Rochdale Metropolitan Borough Council  
(delegated Chief Executive, on behalf of the Greater Manchester Combined Authority (GMCA)) |
| (Name / Job Title) | Jim Taylor  
Chief Executive  
Rochdale Metropolitan Borough Council  
(delegated Chief Executive, on behalf of the Greater Manchester Combined Authority (GMCA)) |
| 3. What is the exact location of your proposed LAAA: | The Greater Manchester Combined Authority area (The GMCA is a local authority established under s.103 of the Local Democracy, Economic Development and Construction Act 2009 that covers the areas of the District Councils of Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside, Trafford, and Wigan.) |
| (A LAAA can be any size from a single town centre to a whole local authority area) | The Greater Manchester Combined Authority area (The GMCA is a local authority established under s.103 of the Local Democracy, Economic Development and Construction Act 2009 that covers the areas of the District Councils of Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside, Trafford, and Wigan.) |
| 4. Which of the three LAAA aims will your project address? | All 3 aims:  
1. reducing alcohol-related crime and disorder;  
2. reducing alcohol-related health harms; and  
3. promoting growth by establishing a diverse and vibrant night-time economy. |
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3. promoting growth by establishing a diverse and vibrant night-time economy. |
| 5. Please describe the issues that make this aim/these aims a priority for you. (500 words max) | 1. **Reducing Alcohol Related Crime and Disorder**  
According to the most recent data, most of GM has rates of alcohol-related crime above the national average, with 20,000 victims of alcohol-based crime each year. This costs GM more than £380m a year, or £142 per resident, 8% higher than national average. There were more than 11,000 local incidents of rowdy/inconsiderate behaviour recorded as alcohol-related in the year to October 2013. The 2010/11 Crime Survey shows 37% of domestic violence cases involve alcohol, and domestic homicide reviews in GM identify long-term complex alcohol misuse as key factors in the deaths. In response to this, we are developing a strong evidence base that points to the greater collaboration and integration that this bid seeks to progress in the way mental health, domestic abuse and substance abuse are addressed.  

2. **Reducing Alcohol Related Harm**  
The rate of alcohol related hospital admissions is higher for all 10 GM districts than the national average, with 5 in the top 10%. Performance across the conurbation is worse than the national average for alcohol-specific mortality, for under and over 18s, and for numbers of alcohol-specific hospital episodes. The estimated NHS alcohol-related costs of this in GM is almost £240m pa. Workplace costs, which includes days off sick due to excessive alcohol consumption, are more than £470m a year. Key themes in the local evidence base we seek to drive forward with an LAAA include:  

- early intervention: with a specific focus in Wigan on alcohol-specific admissions for under 18s through the bespoke ‘Start Well’ partnership;
3. Night-time economy

Much work, including cost-benefit analysis, is being done to analyse local night-time economies, which many view as unbalanced and narrow, targeting a particular demographic and age group. Binge drinking in GM is higher than the national average. There is also a significant perceptions problem for many GM town centres, with nearly half of respondents to the NW Big Drink Debate saying they avoid local town centres at night because of drunken behaviour. Becoming an LAAA will help GM analyse further the degree to which this creates lack of footfall and the prevalence of unoccupied units and stunts a stronger food and entertainment-based early evening economy emerging, with a focus on families. The annual GM-wide survey, of 2,500 businesses, showed one in three dissatisfied with levels of crime and ASB and flagged the importance of the town centre environment being one where businesses want to locate and invest. The negative alcohol costs to GM are estimated at £1.2bn per year; around £436 per resident. This is an unsustainable burden and makes alcohol key to delivering the GM Strategy of economic growth and public service reform.
6. Please set out what action is currently taken to tackle these issues. (500 words max)

The GM LAAA will drive improvements through stronger partnership, better enforcement and improved intelligence.

**Stronger partnership**

- Discuss enforcement, regulatory, preventative, and treatment-based activities in a single conversation rather than in silos
- A joined-up and robust channel of dialogue with the on-and off-trade, to agree a shared position on key strategic issues including the availability of cheap and high-strength alcohol and hours of licensed trade
- Avoid unilateral decision-making which can disadvantage one District’s night-time economy against another and displace problems
- Position the debate on alcohol and the night-time economy within a broader strategic programme, including developing GM’s town centres
- Exploit strong existing networks through Drinkwise

**Better enforcement**

- Make full and more consistent use of relevant powers under licensing legislation, setting minimum standards based on best practice
- Reconceptualise “enforcement” with an integrated model of response that harnesses the contribution of all agencies with licensing powers
- A collaborative business plan owned by GM’s licensing managers’ forum
- Maximise opportunities to build support elements to the enforcement approach, e.g. building a “positive requirement element” into ASB tools and powers

**Improved intelligence**

- Deliver stronger data-sharing practices between GM acute trusts and local partners, including to inform public health-based licensing representations
- Build on detailed local work to understand and respond to the demand costs created by hospital frequent attenders
- Harness the expertise of Drinkwise, Our Life, PHE and other key partners to strengthen the evidence base
- Examine links between alcohol-related town centre crime and wider serious criminality, such as organised criminal gangs and child sexual exploitation

Within the GM LAAA, coherence can be given to a wide and varied set of local interventions, enabling comparison and benchmarking. Initial work has taken place underway to identify the priority themes that will be followed in different areas should GM be granted the LAAA. This is summarised below, with more detail available.
### 1. Reducing alcohol-related crime and disorder

- **Integrated offender management**: multi-agency safeguarding hub models and wider IOM processes (various)
- **Out of court disposals**: conditional cautioning (Oldham), alternative use of Fixed Penalty Notices (various)
- **Alcohol-related ASB**: current package of community-led interventions supported by Baroness Newlove’s Alcohol Fund, other street pastor/safe-haven initiatives for vulnerable people, interventions focused on student populations (Bury)
- **Fire safety and alcohol**: earlier intervention where high risk, and awareness-raising through schools (various)

### 2. Reducing alcohol-related health harms

- **Shared CSP-health delivery models tackling cost**: public service reform approach between partners integrating care to manage complex and high cost/demand cases (Wigan, Oldham)
- **Integrated, recovery based substance misuse**: Payment by Results pilot areas helping clients sustain recovery and reintegration into the community, active redesign/commissioning of more effective treatment (Wigan, Stockport)
- **Preventative work**: Alcohol screening and ‘brief advice/interventions’ (various), custody suite-based abstinence workers (Oldham), alcohol liaison nurse provision, assessment & referral schemes within A&E (various)
- **Young people focused ‘healthy relationships’ programmes**: Young Carer Project (Tameside), Community Alcohol Partnership (Wigan), Grundtvig project (Oldham) youth services partnership (Rochdale)
- **Workplace wellbeing and alcohol**: The Workplace Wellbeing Charter provides actions for employers to help staff reduce alcohol intake, alongside better coordination and integration between employment support and health services (all)

### 3. Night-time economy

- **Evidence-based targeting of problem licensed premises**: intelligence-based test purchasing, targeted hotspot enforcement, multi-agency action days/nights (various)
- **Full use of available regulatory tools and powers**: Designated Public Place Order (DPPO) powers (Bury)
- **Partnership with business community/licensed premises**: Best Bar None and Pub Watch accreditation schemes, voluntary partnerships for responsible retailing (various)
- **Town centre redevelopment**: integrating alcohol aims into broader regeneration (Tameside, Rochdale), Purple Flag accreditation (various)

### 7. Does your area wish to be one of five that will benefit from intensive support from the Home Office communications specialists? If so, please briefly explain how you think you might benefit.

GM would significantly benefit from such Home Office communications support and would like to be a chosen areas. Such expertise would help particularly with a better-informed shared approach with the on- and off-trade, and in fostering the sharing of innovation, and best practice, including using social
media/marketing and customer segmentation, which can inform awareness-raising activities and support community-led attitude and behaviour change. There would be many opportunities for collaboration to help achieve greater partnership benefits, including those identified below.

- Several areas continue to have difficulties building a positive narrative on the social and economic benefits of a well-regulated and balanced night time economy. Cost benefit analysis for one district showed activities associated with businesses operating in the evening economy supported more than 300 jobs and generated in excess of £4m per annum in economic output (gross valued added). There is great interest in working toward Purple Flag accreditation this could help with, and it would be significant support to re-invigorating the economic role of several town centres, with such assistance in building a strategic communications strategy centred on alcohol but more widely framed potentially a very important contribution to promoting town centres as attractive places to invest.

- This Home Office expertise would build on and enrich seasonal activities to raise awareness of the harmful nature of excessive alcohol consumption, with the burden during the festive period a noted challenge. More broadly, expertise on campaigns timed at other periods would be an important area of development, from both residents’ and businesses’ (including licensed premises) viewpoints.

- The GM LAAA would particularly welcome this impetus and support in finessing a shared strategy to exploit communications media such as local radio. There is also particular interest in extending existing web presence and making more effective use of social media to support behaviour change, particularly where this engages young people in new and innovative ways, and where it can integrated into broader public health campaigns to spread positive health messages working with under-18s and their families.

8. Please confirm that this expression of interest has the support of the chief executive of your local authority and the police and crime commissioner of your force area.

This EoI has the support of the GMCA’s Head of Paid Service, as well as that of all ten component Local Authority Chief Executives, who have delegated the LAAA’s overall management to the GM police and crime lead Jim Taylor, the Chief Executive of Rochdale MBC. It also has the support of various police, fire, CCG, acute and other health Chief Executives/officers, as well as that of Greater Manchester’s Police and Crime Commissioner, Tony Lloyd.
9. If one of your project’s chosen aims is to reduce health harms, please confirm that it has the support of your local clinical commissioning group and the chief executive officer of the local acute trust.

This GM EOI has the support of the Chief Executives of various local CCGs, acute trusts and other health bodies, represented by Dr Mike Burrows, Chief Executive of NHS England (Greater Manchester)

Greater Manchester Combined Authority*

Signed: [ELECTRONIC SIGNATURE REQUIRED]

Print Name: Jim Taylor

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Office of the Police and Crime Commissioner, Greater Manchester

Signed: [ELECTRONIC SIGNATURE REQUIRED]

Print Name: Tony Lloyd

NHS England – Greater Manchester

Signed: [ELECTRONIC SIGNATURE REQUIRED]

Print Name: Dr Mike Burrows

Greater Manchester Police

Signed: [ELECTRONIC SIGNATURE REQUIRED]

Print Name: ACC Garry Shewan

Please return this form to Andy Parsons, Drugs and Alcohol Unit, Home Office, 4th Floor Fry Building, 2 Marsham Street, London, SW1P 4DF.
If you have any queries regarding the application process please contact Andy Parsons on 020 7035 1921 or e-mail Andrew.Parsons1@homeoffice.gsi.gov.uk