

### **Licensing Committee**

Date: WEDNESDAY, 28 APRIL 2021

Time: 1.45 pm

Venue: VIRTUAL PUBLIC MEETING (ACCESSIBLE REMOTELY)

**Members:** Caroline Addy Marianne Fredericks

Deputy Peter Dunphy Michael Hudson

Mary Durcan Deputy Jamie Ingham Clark

Karina Dostalova Shravan Joshi
Deputy Kevin Everett Graham Packham
Sophie Fernandes Judith Pleasance
John Fletcher James Tumbridge

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#### Accessing the virtual public meeting

Members of the public can observe this virtual public meeting at the below link: https://youtu.be/HTt-5cVNeIY

This meeting will be a virtual meeting and therefore will not take place in a physical location following regulations made under Section 78 of the Coronavirus Act 2020. A recording of the public meeting will be available via the above link following the end of the public meeting for up to one municipal year. Please note: Online meeting recordings do not constitute the formal minutes of the meeting; minutes are written and are available on the City of London Corporation's website. Recordings may be edited, at the discretion of the proper officer, to remove any inappropriate material.

John Barradell
Town Clerk and Chief Executive

#### **AGENDA**

#### 1. APOLOGIES

# 2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

#### 3. ORDER OF THE COURT OF COMMON COUNCIL

To receive the Order of the Court of Common Council dated 15 April 2021 appointing the Committee and setting its Terms of Reference.

For Information

(Pages 1 - 2)

#### 4. ELECTION OF CHAIRMAN

To elect a Chairman in accordance with Standing Order No.29.

For Decision

#### 5. **ELECTION OF DEPUTY CHAIRMAN**

To elect a Deputy Chairman in accordance with Standing Order No. 30.

For Decision

#### 6. APPOINTMENT OF SUB COMMITTEE CHAIRMEN AND REFERENCE SUB-COMMITTEE

To appoint four Members, in addition to the Chairman, Deputy Chairman and Past Grand Committee Chairmen, to chair Licensing (Hearing) Sub Committee meetings and serve on the Reference Sub Committee for the ensuing year.

For Decision

#### 7. PUBLIC MINUTES

To agree the public minutes of the meeting held on 3 February 2021.

For Decision (Pages 3 - 10)

### 8. APPEALS AGAINST LICENSING (HEARING) SUB COMMITTEE DECISIONS

The Comptroller and City Solicitor to be heard.

For Information

#### 9. **GAMBLING ACT - ANNUAL REVIEW OF FEES 2021/22**

Report of the Director of Markets & Consumer Protection.

For Decision (Pages 11 - 20)

#### 10. SEX ESTABLISHMENTS - ANNUAL REVIEW OF FEES 2021/22

Report of the Director of Markets & Consumer Protection.

For Decision (Pages 21 - 28)

#### 11. COVID-19 UPDATE

Oral update on the latest position.

For Information

#### 12. CITY OF LONDON POLICE UPDATE

The Chief Superintendent, City of London Police to be heard.

For Information

### 13. LICENSING SERVICE BUSINESS PLAN 2020/21: PROGRESS REPORT

Repot of the Director of Markets and Consumer Protection.

For Information (Pages 29 - 36)

#### 14. DIRECTOR OF PUBLIC HEALTH REPORT FOR 2019/20

Report of the Director of Community & Children's Services.

For Information (Pages 37 - 62)

## 15. DELEGATED DECISIONS OF THE DIRECTOR OF MARKETS AND CONSUMER PROTECTION PERTAINING TO PREMISES LICENCES

Report of the Director of Markets and Consumer Protection.

For Information (Pages 63 - 74)

#### 16. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE

#### 17. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

#### 18. **EXCLUSION OF THE PUBLIC**

**MOTION -** That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Part I of Schedule 12A of the Local Government Act.

For Decision

#### 19. **NON-PUBLIC MINUTES**

To agree the non-public minutes of the meeting held on 3 February 2021.

For Decision (Pages 75 - 76)

#### 20. **REOPENING AND RECOVERY UPDATE**

The Head of Relationships & Networks and the Cultural & Visitor Development Director to be heard.

Members are asked to note the Reopening Initiative, Recovery Taskforce and Recovery Promotional Campaign reports (Items 7, 8 and 9) which were approved by the Policy and Resources Committee on 8 April 2021 found <a href="here">here</a>.

For Information

21. NON-PUBLIC APPENDIX: DELEGATED DECISIONS OF THE DIRECTOR OF MARKETS AND CONSUMER PROTECTION PERTAINING TO PREMISES LICENCES

To be read in conjunction with Item 15.

For Information (Pages 77 - 78)

- 22. NON-PUBLIC QUESTIONS RELATING TO THE WORK OF THE COMMITTEE
- 23. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED

### Agenda Item 3

RUSSELL, Mayor	RESOLVED: That the Court of Common
	Council holden in the Guildhall of the City of London on Thursday 15th April 2021, doth
	hereby appoint the following Committee until the first meeting of the Court in April, 2022.

#### **LICENSING COMMITTEE**

#### 1. Constitution

A Non-Ward Committee consisting of 15 Members elected by the Court of Common Council, at least one of whom shall have fewer than five years' service on the Court at the time of their appointment.

#### 2. Quorum

The quorum consists of any five Members.

#### 3. Membership 2021/22

- 9 (4) Michael Hudson
- 9 (4) Graham David Packham
- 8 (4) Judith Lindsay Pleasance
- 4 (4) Caroline Kordai Addy
- 19 (3) Kevin Malcolm Everett, Deputy
- 11 (3) Sophie Anne Fernandes
- 11 (3) James Richard Tumbridge
- 3 (3) John William Fletcher
- 4 (2) Karina Dostalova
- 13 (2) Marianne Bernadette Fredericks
- 4 (2) Shravan Joshi, M.B.E.
- 11 (1) Peter Gerard Dunphy, Deputy
- 5 (1) Mary Durcan
- 9 (1) Jamie Ingham Clark, Deputy

Vacancy

Together with four Members to be appointed this day.

#### 4. Terms of Reference

To be responsible for:-

- (a) the City of London Corporation's licensing functions under the following legislation:-
  - (i) Licensing Act 2003:-
  - (ii) Gambling Act 2005:-
  - (iii) Local Government (Miscellaneous Provisions) Act 1982, as amended by the Policing and Crime Act 2009:-
    - (a) the licensing of sexual entertainment venues
    - (b) action to prohibit the consumption of alcohol in designated public places as detailed in sections 12-16 of the Criminal Justice and Police Act 2001 and the Local Authorities (Alcohol Consumption in Designated Public Places) Regulations 2001
    - (c) the implementation of those sections of any Acts of Parliament and/or European Legislation which direct that the local authority take action in respect of those duties listed at (a) above, including the functions contained in Sections 2(1) and 2(2) of the Hypnotism Act 1952
    - (d) determining which of its functions and responsibilities may be delegated to enable the Director of Markets and Consumer Protection to act on its behalf.
- (b) The appointment of the Director of Markets and Consumer Protection (acting jointly with the Port Health and Environmental Services Committee and the Markets Committee);
- (c) Making recommendations to the Court of Common Council regarding:-
  - (i) the City Corporation's Statement of Licensing Policy; and
  - (ii) The Statement of Licensing Principles in respect of the Gambling Act 2005.

(d)	charity collections, enactment).	under	the	Police,	Factories	and	Miscellaneous	Provisions	Act	1916	(or	any	subsequent	re-

#### LICENSING COMMITTEE

#### Wednesday, 3 February 2021

Minutes of the virtual meeting of the Licensing Committee held on Wednesday, 3 February 2021 at 1.45 pm

#### **Present**

#### Members:

Sophie Anne Fernandes (Chairman)

Shravan Joshi (Deputy Chairman)

Deputy Kevin Everett

Marianne Fredericks

Deputy Keith Bottomley

Michael Hudson

Deputy Peter Dunphy Deputy Jamie Ingham Clark

Mary Durcan Graham Packham Karina Dostalova Judith Pleasance

#### In Attendance

#### Officers:

Jon Averns - Director of Markets & Consumer Protection
Gavin Stedman - Port Health and Public Protection Director

Rachel Pye - Markets & Consumer Protection
Peter Davenport - Markets & Consumer Protection
Jenny Pitcairn - Chamberlain's Department

Frank Marchione - Comptroller and City Solicitor's Department

Tony Macklin - Markets & Consumer Protection
Aggie Minas - Markets & Consumer Protection

Leanne Murphy - Town Clerk's Department
Andrew Buckingham - Media Team, Town Clerk's Department

Jo Northmore - City of London Police

#### 1. APOLOGIES

Apologies were received from James Tumbridge.

# 2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

There were no declarations.

#### 3. PUBLIC MINUTES

The public minutes of the meeting held on 4 October 2020 were approved as a correct record.

#### 4. ANNUAL REVIEW OF THE COMMITTEE'S TERMS OF REFERENCE

The Committee considered a report of the Town Clerk which presented the Committee's terms of reference for review. Members were also asked to consider whether the current meeting frequency was appropriate.

Members confirmed they had no changes to the terms of reference or frequency of meetings.

A Member noted that the City Corporation's new Target Operating Model could potentially lead to operational changes in the future. Officers confirmed this was true across the board and would continue to be reviewed.

#### **RESOLVED** - That:-

- the terms of reference of the Committee be approved without amendment for submission to the Court in April 2021;
- no change be required to the frequency of the Committee's meetings.
- 5. APPEALS AGAINST LICENSING (HEARING) SUB COMMITTEE DECISIONS
  The Comptroller & City Solicitor advised the Committee that there were currently no appeals.

#### 6. COVID COMPLIANT ACCREDITATION SCHEME

The Committee received an oral update from the Assistant Director, Environmental Health & Public Protection, providing Members with an update on the Covid Compliant Accreditation Scheme.

Following a meeting of Central London Chief Executives, a proposal was made to the Department of Business Energy and Industrial Strategy to run a scheme whereby businesses could get accreditation for demonstrating they were doing all they could to be Covid secure and ultimately give confidence to customers that the business was safe to visit.

This scheme was launched on 14 September 2020 as a localised pilot and is being led by the City Corporation in collaboration with the Southwark and Camden Boroughs. Any interested business can apply by submitting key documentation (e.g. Covid Risk Assessments, procedure notes) which is checked by an Environmental Health Officer who then carries out an on-site visit to verify the case. if the business meets the requirements, they are awarded the Covid compliant sticker to display in their window.

Unfortunately, the launch occurred just before major changes in legislation and take-up by business was low leading to the scheme being suspended. However, it is hoped that post the current lockdown, the scheme can be relaunched when trading begins and will be promoted to all businesses in the City.

A Member enquired if the scheme was working with the Culture, Leisure and Tourism Sub Committee for the EC Partnership bid. The Assistant Director confirmed that the scheme was working with a number of bids including Cheapside, Aldgate, EC, Fleet Street and would be offered to any business Citywide that was eligible.

Members were supportive of the scheme and agreed that businesses needed help to maintain and grow. It was noted that there had been rekindled interest from Local Authorities and the GLA following efforts to relaunch and promote high streets and UK Hospitality and the Cabinet Office had been notified of the scheme.

#### 7. COVID-19 UPDATE

The Committee received an oral update from the Director of Markets and Consumer Protection providing Members with an update on the current situation as a result of the Covid-19 pandemic.

Members were advised that there had been lots of engagement with businesses in industry and the City Corporation continued to support them since moving from Tier 1 to a Tier 4 national lockdown. It was noted that there had been 64 legislative changes since the start of the pandemic.

The current lockdown was having a huge impact with only 15% of hospitality venues open for takeaways in the City in January compared with 60% in December. Officers and businesses keenly await the Government's roadmap to be announced on 22 February 2021.

With regards to recovery, the Member and Officer Recovery Taskforce is considering the broader implications. Licensing Officers also continue to watch licences, payments and which businesses have left their premises. It was acknowledged that it was too early to understand the full impact of the pandemic until it was over, and businesses finally reopened. Since 1 April 2020, 21 licenses have been surrendered and 16 new licence applications have been made. No licenses have been formally suspended to date, but soft suspension letters have been issued to the 309 premises that have not paid their licence fees as per statute, plus 177 Late Night Levy fees remain outstanding. It was noted that a lot of businesses had been in touch to say they would pay the fees when they back up and running.

Members were advised that the City Corporation had been listening and engaging, with the Lord Mayor holding a series of round tables in December including livery industry bodies and local businesses. It was accepted that it would be a bleak winter and help was required by the businesses when they were able to reopen. The City Corporation will lead a media campaign to spread the messaging that the City was open for business, and also assist with footfall and open-air space to show case hospitality and create a "FOMO" effect to encourage people back into the City. It was also noted that the All Party Parliamentary Group are leading an enquiry and the Remembrancer has made a submission.

Financial support has also been offered by the City Revenues team administering £127m in business rate relief meaning 2,300 premises will not have business rate relief to pay for 2020/21. Alongside this, £20.4m in grants to SMEs (approx. 10% of the sector) have been made and new business support grants are also being established.

As Gary Grant alluded to during the recent Licensing during the Pandemic session, the City Corporation already has very supportive policies in place with the Al-Fresco Policy, which was being extended, and the existing licensing

Policy Statement. It was confirmed that Officers were working with the Chairman and Deputy Chair to identify ways in which these may be enhanced to further support recovery.

The Chairman thanked all Licensing Officers for their hard work and compassionate support throughout the pandemic responding to the plethora of guidance and changes to assist the struggling hospitality industry which was hardest hit by the pandemic.

# 8. LATE NIGHT LEVY - 12 MONTH REPORT (1 OCTOBER 2019 - 30 SEPTEMBER 2020)

The Committee considered a report of the Director of Markets & Consumer Protection providing Members with a 12-month review concerning the Late Night Levy covering the period 1 October 2019 to 30 September 2020.

Members were advised that this annual report differed from previous reports due to the impact of the pandemic on premises from March 2020. Paragraphs 11-14 were highlighted to Members which detailed how Officers were handling collection of the Levy fees from premises and it was acknowledged that only a very small number of premises had been able to trade after midnight. The statutory requirement to collect the Levy has remained and the licence must be suspended if not paid.

Officers provided two options regarding the City Corporation's policy for collection of the Levy. The first was to scrap the Levy scheme altogether and reintroduce it at a later date; this would require significant work and public and stakeholder consultation. The second approach was a soft suspension giving notice of non-payment and a delayed suspension. This was the favoured approach offering as much flexibility as possible when collecting the Levy by stretching the suspension to the limit as the legislation did not specify when to suspend. When premises are able to trade past 12pm, premises will be asked how they plan to settle their Levy charge which may be two years' worth of charges. Payment plans may also be considered.

A Member wished to understand the type of businesses paying for the Levy and, in particular, the difference between big chains versus independents as Members were keen to support SMEs. Officers confirmed approximately 90% of the premises paying the Levy belonged to larger chains.

In response to a question asking if it would take three months to stop the scheme due to the consultation process plus approximately three months to restart the scheme, Members were informed that they were already within a Levy year meaning that anyone that belonged to the scheme would still be liable to pay for the current year. If this was to be scrapped, it would have to be the next Levy year starting 1 October 2021 and it would take three months to complete consultation. Whilst this could be reintroduced at any time, approximately three months would again be required to allow for sufficient consultation.

Members supported the soft suspension approach as most pragmatic and considerate for business owners. It was recommended that all Levy premises also be offered a discount for the Safety Thirst Scheme.

A Member highlighted the extensive enquiries and lobbying that took place at the beginning of the first lockdown regarding the Levy and advice at the time was that the City Corporation was legal obliged to charge the Levy fee. Members considered whether it was necessary for Officers to bring a paper detailing a process of consultation to leave the scheme for 12 months and rejoin after this point and the implications.

With regards to a query concerning the annual cost of the Levy, Members were informed the bands of levy were presented in Table 1. Members agreed the costs were fairly modest and had not been challenged by premises. It was noted that premises also had the option to change their hours if the Levy was a burden. It was ultimately decided that Officers continue to monitor the situation and make a decision on the scheme following Government advice.

#### RESOLVED - That Members:-

- Note the contents of this report;
- Agree the policy regarding the collection of Levy outlined in paragraphs 11-14

## 9. DRAFT MARKETS AND CONSUMER PROTECTION HIGH-LEVEL BUSINESS PLAN 2021/22

Members considered a report of the Director of Markets and Consumer Protection concerning the High-Level Business Plan for the Port Health and Public Protection (PH&PP) Division of the Department of Markets and Consumer Protection for 2021/22.

Members were advised that the Department was due to be split up later this year with Consumer Protection going into the Environment Department. These parts were therefore separate on the Business Plan.

Following a querying relating to the Climate Action Strategy and implications for the Committee, Officers confirmed this was currently limited but would be reviewed.

RESOLVED – That Members approve, subject to the incorporation of any changes sought by this Committee, the High-Level Business Plan for the Port Health and Public Protection (PH&PP) Division of the Department of Markets and Consumer Protection for 2021/22 (or the elements therein that fall within this committee's Terms of Reference).

#### 10. **REVENUE BUDGETS 2021/22**

Members considered a joint report of the Chamberlain and Director of Markets and Consumer Protection concerning the revenue budgets for the Licensing Committee for 2021/22.

Members were informed that the main change was the reduction of £57k which was largely the Department's 12% target of savings as required. The impact of these savings on fee income will continue to be reviewed.

#### RESOLVED - That Members:-

- review and approve the proposed revenue budget for 2021/22 for submission to Finance Committee:
- authorise the Chamberlain, in consultation with the Director of Markets and Consumer Protection to revise these budgets to allow for any further implications arising from subsequently approved savings proposals, and amended 2021/22 pay award; and
- agree that amendments for 2020/21 and 2021/22 budgets arising from changes to recharges during budget setting be delegated to the Chamberlain.

## 11. BUSINESS AND PLANNING ACT 2020 - ALFRESCO EATING & DRINKING POLICY UPDATE

Members received a report of the Director of Markets and Consumer Protection providing a summary of pavement licences granted following the easing of lockdown 1 and outlines proposals to facilitate the pavement licence application process following the easing of current lockdown 3.

Members were advised that since the Act went live on 22 July 2020, 20 pavement licences had been issued to assist businesses during the pandemic. The provisions were temporarily agreed until 30 September 2021, plus zero fees for the applications and the issuing of licences for a six-month period which would run up until March. It was proposed that this continue to support businesses in the City which was supported by the Committee.

#### RESOLVED - That Members:-

- Agree the pavement licence duration period until 30 September 2021 as outlined in paragraph 11(a) of this report;
- Agree a zero fee for all pavement licence applications received after 1
   April 2021 as outlined in paragraph 11(b) of this report.

#### 12. CRIMES AT LICENSED PREMISES

The Committee considered a report of the Chief Superintendent regarding violent crime from licensed premises during the period October to December 2020.

Members were informed that premises were completely shut by December with the exception of a small number of businesses remaining open for takeaways. During this period, only six low level violent offences took place and crime generally was low. In response to a question by a Member, Officers confirmed that the recently reported cannabis factory case in the City was not linked to a licensed premises and took place in sublet room in the same building.

RECEIVED.

# 13. DELEGATED DECISIONS OF THE DIRECTOR OF MARKETS AND CONSUMER PROTECTION PERTAINING TO PREMISES LICENCES

The Committee noted a report of the Director of Markets and Consumer Protection regarding the delegated decisions of the Interim Director of Consumer Protection and Market Operations pertaining to premises licences.

RECEIVED.

# 14. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE

There were no questions.

# 15. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT** There were no urgent items.

#### 16. EXCLUSION OF THE PUBLIC

**RESOLVED** – That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A of the Local Government Act.

#### 17. NON-PUBLIC MINUTES

The non-public minutes of the meeting held on 4 October 2020 were approved as a correct record.

# 18. NON-PUBLIC APPENDIX: DELEGATED DECISIONS OF THE DIRECTOR OF MARKETS AND CONSUMER PROTECTION PERTAINING TO PREMISES LICENCES

The Committee received a non-public appendix report to the report under agenda item 13 pertaining to premises licenses which included the names of each premises.

# 19. NON-PUBLIC QUESTIONS RELATING TO THE WORK OF THE COMMITTEE

There were no questions.

# 20. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED

There were no urgent items.

The meeting ended at 2.45 pm

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Chairman

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Committee(s)	Dated:
Licensing Committee	28 04 2021
Subject:	Public
Gambling Act – Annual Review of Fees 2021/22	
Which outcomes in the City Corporation's	1,4,5
Corporate Plan does this proposal aim to impact directly?	
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	
What is the source of Funding?	
Has this Funding Source been agreed with the	
Chamberlain's Department?	
Report of:	For Decision
Director of Markets & Consumer Protection	
Report author:	
Peter Davenport - Licensing	

#### Summary

The City of London Corporation has to set annual fees for those premises requiring a licence under the Gambling Act 2005. The report outlines current case law which has indicated that the process for setting the fees must be robust and that income received through the licensing process cannot exceed the cost of obtaining that income.

The matters considered by the licensing service in setting the proposed fees are discussed and include all aspects within the licensing process.

The proposed fees will result in less income compared with previous years due primarily to a reduction in the forecast for the number of gambling premises in the City of London.

#### Recommendation(s)

#### Members are asked to:

 Agree the proposed fees for 2021/22 as set out in Appendix 1 (column 6, 'Proposed Fee').

Page 11

#### Main Report

#### Background

- 1. The Gambling (Premises Licence Fees) (England and Wales) Regulations 2007 (the 'Regulations') sets out the statutory provisions and limitations for setting gambling fees.
- 2. The City of London Licensing Authority must determine the appropriate fees subject to a maximum as set out in the schedule to the regulations. The fee structure allows for various types of applications associated with varying classes of premises licence, many of which do not currently apply within the City of London e.g. Casinos, bingo Halls. The maximum fees permissible can be seen in Appendix 1, (column 4, 'Maximum permitted fee')
- 3. Licences are valid for life from the date of grant unless surrendered or revoked. An annual fee is due for payment within thirty days of the licence issue (effective date) and then annually thereafter.
- 4. Section 212 of the Gambling Act 2005 states that the licensing authority, '...shall aim to ensure that the income from fees of that kind [determined by the licensing authority] as nearly as possible equates to the costs of providing the service to which the fee relates...'.
- 5. A High Court case held on 16 May 2012 (*R* (Hemming and Others) v Westminster City Council) concluded that the amount of the fee is required to be determined every year and further that a local authority was precluded from making a profit from the licensing regime. A full account of the fee income and expenditure would therefore need to be considered to ensure a surplus is not being made.
- 6. Successive appeals/decisions in the Court of Appeal, The Supreme Court and the European Court of Justice decided that the fee can include administrative costs involved, the costs of vetting the applicants (in the case of applications for a licence) and the costs of investigating/enforcing the licensing scheme including costs involved in enforcement against those premises that are not licensed.

#### Calculation of Fees for 2021/22

- 7. In order to avoid possible complications arising from non-compliance with the Hemming decision, the licensing service has carried out an in-depth examination of the processes that are undertaken in order to administer the licence application/renewal and the costs of investigating compliance with any licence condition.
- 8. In determining the proposed fee structure for gambling premises licences the following factors have been taken into account:

- Officer time spent on processing applications including site inspections and the issue of any licence
- Officer time spent on the development and maintenance of processes and guidance notes
- Training of staff as necessary
- A proportion of the service costs such as accommodation, equipment and central recharges
- Officer time spent on inspections of licensed premises to ensure compliance with terms and conditions of any licence
- Time spent on the compilation of a new 'Statement of Licensing Principles'.

An example of those factors taken into account in the calculation of fees can be seen as Appendix 2.

- 9. Gambling fees for 2021/22 have been calculated on the above basis for each of a number of different types of licence. The majority of the proposed fees have reduced slightly due primarily to inspections not taking place in 2020 thus reducing overall costs and being reflected in the final proposed fee. Inspections never took place due to Government COVID restrictions and premises remaining closed for the majority of the year. Proposed fees for 2021/22 can be seen as Appendix 1, column 6.
- 10. The forecast number of applications for each main type of gambling licence can be seen in the table below along with the number of licences/registrations that were actually granted in previous years.

	2019/20		2020	2021/22	
	Forecast	Actual	Forecast	Actual	Forecast
New Betting Shop	1	0	0	0	0
Annual fee (renewal)	32	32	24	21	17
Variation Betting Shop	0	0	0	0	0
New/Annual Fee Bingo	0	0	1	1	1
Temporary Use notice	2	1	1	0	0
Gaming machine permits	17	17	17	17	17

Small Society Lotteries (New)	-	-	5	5	5
Small Society Lotteries (Renewal)	-	-	20	20	20

#### **Proposals/Options**

- 11. If fees are set lower than those recommended the result will be an increased deficit for 2021/22 as costs of administering the licence will not be fully met from income received.
- 12. Fees set higher than those recommended, where permissible, will result in a surplus i.e. an income which exceeds the cost of providing the service.
- 13. Any such under or over recovery of costs from 2021/22 will be calculated after the end of that financial year and will be carried forward to be taken into consideration in setting fees for 2023/24, except in cases where costs are higher than the statutory maximum fee and there is therefore no prospect of offsetting the under recovery through future fee increases. The surplus or deficit on each fee type from 2019/20 has been taken into account when setting the fees for 2021/22, except where costs exceed the maximum fee as described above. Ignoring a surplus or deficit could result in the City Corporation being subject to legal challenge.

#### **Corporate & Strategic Implications**

14. The proposals within this report meet the statutory requirement to set fees for the licensing of activities within the Gambling Act 2005, as they apply to the City of London Corporation.

#### **Implications**

- 15. Setting the recommended fees will result in an estimated income from Gambling licence fees for 2021/22 of £11,660, against a budgeted income of £16,000.
- 16. Setting fees above or below those recommended will have the implications as set out in paragraphs 11- 13 above.

#### **Appendices**

- Appendix 1 Proposed Fees for 2021/22
- Appendix 2 Factors taken into account when calculating Fees.

### **Background Papers**

None

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Proposed Fee Structure 2021 – 2022

			uic 2021			
Application Type	Estimated No	Current fee	Maximum permitted fee	Predicted cost of licence/ permit	Proposed Fee	Income Forecast
New Betting Shop	0	£900	£3,000	£882	£880	£0
New Casino (small) *	0	£3,710	£8,000	£3,061	£3,060	£0
New Bingo	0	£1,030	£3,500	£913	£910	£0
New AGC	0	£1,030	£2,000	£913	£910	£0
New FEC	0	£1,030	£2,000	£913	£910	£0
Annual fee Betting Shop	17	£600	£600	£569	£560	£9,520
Annual fee Casino (small) *	0	£1,540	£5,000	£1,371	£1,370	£0
Annual fee Bingo	1	£820	£1,000	£687	£690	£690
Annual fee AGC	0	£820	£1,000	£687	£690	£0
Annual fee FEC	0	£750	£750	£687	£690	£0
Variation betting shop	0	£300	£1,500	£376	£300	£0
Variation Casino (small) *	0	£2,850	£4,000	£2,488	£2,490	£0
Variation Bingo	0	£430	£1,750	£376	£380	£0
Variation AGC	0	£430	£1,000	£376	£380	£0
Variation FEC	0	£430	£1,000	£376	£380	£0
Transfer/reinstatement betting shop	0	£300	£1,200	£267	£260	£0
Transfer/reinstatement Casino (Sm)	0	£300	£1,200 £1,800	£354	£350	£0
Transfer/reinstatement Bingo	0		£1,200	£267	£270	£0
Transfer/reinstatement AGC	0	£300 £300	£1,200	£267	£270	£0
Transfer/reinstatement FEC				£267	£270	£0
Transfer/ferristatement FEC	0	£300	£950	1201	£ZIU	£U
Provisional statement Betting Shop	0	£1,030	£3,000	£882	£880	£0
Provisional statement Casino (Sm)	0	£3,710	£8,000	£3,061	£3,060	£0
Provisional statement Bingo	0	£1,030	£3,500	£913	£910	£0
Provisional statement AGC	0	£1,030	£2,000	£913	£910	£0
Provisional statement FEC	0	£1,030	£2,000	£913	£910	£0
New ann with provictatement Bet Chan	•	04.000	24.000	C004	0000	00
New app with prov statement Bet Shop  New app with prov statement Casino	0	£1,020	£1,200	£904	£900	£0
(sm)	0	£3,000	£3,000	£3,033	£3,000¹	£0
New app with prov statement Bingo	0	£1,020	£1,200	£904	£900	£0
new app with prov statement AGC	0	£1,020	£1,200	£904	£900	£0
New app with prov statement FEC	0	£950	£950	£904	£900	£0
Change of circumstances	0	£50	£50	£50	£50	£0
Copy of licence	0	£25	£25	£25	£30	£0
Temporary use notice (TUN)	0	£500	£500	£645	£500¹	£0
Replacement TUN (copy)	0	£25	£25	£25	£30	£0
Prize Caming Pormit	0	£300	£300	£300	£300	£0
Prize Gaming Permit Gaming machine permit (2 or less)	0	£300 £50	£50	£300 £50	£300 £50	£0
Gaming machine permit (2 or less)  Gaming machine permit (3 or more)	0	£150	£150	£150	£150	£0
Annual gaming machine permit (3 or more)	17	£50	£50	£50	£50	£850
Variation to gaming machine permit (3 or more)	0	£100	£100	£100	£100	£0
Transfer of gaming machine permit (3 or more)	0	£25	£25	£25	£25	£0
Small society lotteries (new)	F	040	£40	£40	040	COOO
Small society lotteries (renewal)	5 20	£40 £20	£40 £20	£40 £20	£40 £20	£200 £400
Total	20			220		£11,660
ced fee as necessary where actual co	ets exceed s	Page	) /			211,000

<sup>&</sup>lt;sup>1</sup> Reduced fee as necessary where actual costs exceed statutory maximum

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# Example of factors taken into account when calculating fee for a renewal of a gambling (betting shop) licence

### 2021/22 (Proposed fee is maximum fee permitted of £600)

Task	Predicted cost
General queries	
<ul> <li>Time spent answering queries including emails and telephone calls</li> </ul>	12.12
Collection of annual payment	
Preparation of data for finance	18.18
Update M3 database and public register	
Compliance	
<ul> <li>Inspections for compliance with licence conditions</li> </ul>	61.43
Update information on database	
Correspondence with licence holder	
Post-renewal	
Member queries	33.67
Maintain website	
Quarterly return to Gambling Commission	
Policy	
Policy development	443.53
Committee work	
Consultation with final report to Court of Common Council	
Legislative updates	
Training	
Total predicted cost	568.93

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Committee(s)	Dated:
Licensing Committee	28 04 2021
Subject:	Public
Sex Establishments – Annual Review of Fees 2021/22	
Which outcomes in the City Corporation's	1,4,5
Corporate Plan does this proposal aim to impact directly?	
Does this proposal require extra revenue and/or	N
capital spending?	
If so, how much?	
What is the source of Funding?	
Has this Funding Source been agreed with the	
Chamberlain's Department?	
Report of:	For Decision
Director of Markets & Consumer Protection	
Report author:	
Peter Davenport - Licensing	

#### Summary

The City of London Corporation has to set annual fees for those premises requiring a licence under the Local Government (Miscellaneous Provisions) Act 1982 as a sex establishment. The report outlines case law which indicates that the process for setting the fees must be robust and that income received through the licensing process cannot exceed the cost of administering that process.

The matters considered by the licensing service in setting the proposed fees are discussed and include all aspects within the licensing process.

The proposed fees are the same as for 2020/21. This will not affect budget income targets as we currently do not have any premises that have a Sex Establishment Licence.

#### Recommendation(s)

Members are asked to:

Agree the proposed fees for 2021/22 as set out in Appendix 1

#### **Main Report**

#### **Background**

1. The Local Government (Miscellaneous Provisions) Act 1982 Schedule 3, as amended by s.27 of The Policing and Crime Act 2009 sets out the statutory provisions for setting Sex Establishment fees.

- 2. A Sex Establishment is defined as a Sex Shop, Sex Cinema or Sexual Entertainment Venue (SEV) (primarily lap dancing clubs). A premises is not a Sexual Entertainment Venue if any relevant entertainment is only provided on eleven or less occasions during a twelve month period and, each of the occasions are at least one month apart.
- The City of London Licensing Authority must determine the appropriate fees for the granting, renewal, transfer and variation of a licence. Any fee set must be 'reasonable'.
- 4. Licences are valid for 12 months from the date of grant unless surrendered or revoked. A process similar to the granting of a new licence is to be followed for each renewal including consultation.
- 5. A High Court case held on 16 May 2012 (*R* (Hemming and Others) v Westminster City Council) concluded that the amount of the fee is required to be determined every year and further that a local authority was precluded from making a profit from the licensing regime. A full account of the fee income and expenditure would therefore need to be considered to ensure a surplus is not being made.
- 6. Successive appeals/decisions in the Court of Appeal, The Supreme Court and the European Court of Justice decided that the fee can include administrative costs involved, the costs of vetting the applicants (in the case of applications for a licence) and the costs of investigating/enforcing the licensing scheme including costs involved in enforcement against those premises that are not licensed.

#### Calculation of Fees for 2021/22

- 7. In order to avoid possible complications arising from non-compliance with the Hemming decision, the licensing service has carried out an in-depth examination of the processes that would be undertaken in order to administer a licence application/renewal and the costs of investigating compliance with any licence conditions.
- 8. In determining the proposed fee structure for a Sex Establishment, the following factors have been taken into account (an example of the factors taken into account if we received a new application for a Sexual Entertainment Venue can be seen as Appendix 2):
  - Officer time spent on processing applications including site inspections and the issue of any licence
  - Officer time spent on the development and maintenance of processes and quidance notes
  - Training of staff as necessary

- A proportion of the service costs such as accommodation, equipment and central recharges
- Officer time spent on inspections of licensed premises to ensure compliance with terms and conditions of any licence
- 9. The proposed fees for 2021/22 have been set at the same rate as in 2020/21.

#### **Proposals/Options**

- 10. If fees are set lower than those recommended the result will be a deficit for 2021/22 if an application is received, as costs of administering the licence will not be fully met from income received. Fees set higher than those recommended will result in a surplus i.e. an income which exceeds the cost of providing the service.
- 11. Any such under or over recovery of costs from 2021/22 will be calculated after the end of that financial year and be carried forward to be taken into consideration in setting fees for 2023/24. Ignoring a surplus or deficit could result in the City Corporation being subject to legal challenge. There was no under or over recovery to take into account in calculating the proposed fees for 2021/22, as no applications were received in 2019/20.

#### **Corporate & Strategic Implications**

12. The proposals within this report meet the statutory requirement to set fees for the licensing of Sex Establishments.

#### **Implications**

- 13. Setting the recommended sex establishment fees will not have a detrimental effect on the licensing budget as there are currently no sex establishments and thus no income.
- 14. Setting fees above or below those recommended will have the implications as set out in paragraphs 10 and 11 above.

#### Conclusion

15. Setting the proposed fees will permit the Corporation to meet its statutory obligations and recover all costs if an application for a Sex Establishment is received during 2021/22.

### **Appendices**

- Appendix 1 Proposed Fees for 2021/22
- Appendix 2 Example of factors taken into account when calculating a proposed fee

### Background Papers None

### **Peter Davenport**

Licensing Manager T: 020 7332 3227 E: <a href="mailto:peter.davenport@cityoflondon.gov.uk">peter.davenport@cityoflondon.gov.uk</a>

### **Proposed Sex Establishment Fees for 2021/22**

Application Type	Estimated number in 2021/22	Current Fee 2020/21	Proposed Fee 2021/22	Income Forecast 2021/22
New sex shop / sex cinema application	0	£8,350	£8,350	£0
Renewal of sex shop / sex cinema licence	0	£7,790	£7,790	£0
Variation of sex shop / sex cinema licence	0	£6,860	£6,860	£0
Transfer of sex shop / sex cinema licence	0	£710	£710	£0
New sexual entertainment venue application	0	£8,350	£8,350	£0
Renewal of sexual entertainment venue licence	0	£7,790	£7,790	£0
Variation of sexual entertainment venue licence	0	£6,860	£6,860	£0
Transfer of sexual entertainment venue licence	0	£710	£710	£0
Change of details	0	£60	£60	£0
Copy of licence	0	£40	£40	£0
Total				£0

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# Example of the factors taken into account when calculating the fee for an application for a Sexual Entertainment Venue.

### Fee set for 2021/22 at £8,350 (New Application)

Task	Predicted Cost £
Pre-application queries	
Queries from applicant	61
Keeping forms etc. up to date	
Receipt of application	
<ul> <li>Allocation of work, review of application</li> </ul>	81
Preliminary enquiries of applicant	
Processing fee	
Consultation	
<ul> <li>Scanning of application and loading onto M3 database</li> </ul>	115
Posting details on website	
Consultation with both internal and external teams	
Consultation responses	
<ul> <li>Interviewing applicant and site visit, locality assessment</li> </ul>	937
Check newspaper advertisement	
Consider representations	
Queries from responsible authorities	
Update database	
Determination	
<ul> <li>Planning team and noise team logs/information</li> </ul>	1,945
Pre-hearing admin	
<ul> <li>Hearing process (including costs for legal and other City</li> </ul>	
departments)	
Post-hearing and production of licence	
Work of committee officer producing minutes, decision letters,	669
notifying applicant etc	
Preparation of licence, update database	
Policy costs	0.044
Policy development	2,014
Committee work	
Consultation with final report to Court of Common Council	
Legislative updates, training	
Post-licence	4.000
Member queries; responding to FOIs	1,039
Updating website	
Review of fees	
Compliance costs	4 404
Proactive compliance visits	1,484
Total Predicted Cost per Application	8,345

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Committee(s)	Dated:
Licensing Committee	28/04/2021
Subject: Licensing Service Business Plan 2020/21:	Public
Progress Report	
Which outcomes in the City Corporation's Corporate	1, 2, 5, 6
Plan does this proposal aim to impact directly?	
Does this proposal require extra revenue and/or	N
capital spending?	
Report of:	For Information
Director of Markets and Consumer Protection	
Report author:	
Joanne Hill, Department of Markets and Consumer	
Protection	

#### Summary

This report provides an update on progress made during 2020/21 against the operational performance indicators (PIs) and improvement objectives outlined in the Business Plan of the Licensing Service.

#### The report includes:

 Appendix A: Performance against operational performance indicators and key improvement objectives.

#### Recommendation(s)

#### Members are asked to:

• Note the content of this report and its appendix.

#### **Main Report**

#### **Background**

- 1. In February 2020, your Committee received a report which included the 2020/21 High-Level Business Plan of the Department of Markets and Consumer Protection. This Plan was supported by underlying, detailed business plans for each division of service within the department.
- 2. The 2020/21 Licensing Service Business Plan set out improvement objectives against which performance would be monitored throughout the year. Three operational performance indicators (PIs) were also set for the Service.
- 3. The objectives and performance indicators were selected to be representative of the main elements of work carried out by the Licensing Service.

#### **Current Position**

- 4. To keep your Committee informed of progress made by the Service in delivering its objectives and meeting its performance targets, this report contains updates on performance during the year (Appendix A). This enables Members to ask questions and have an input to areas of particular importance to them. Members are also encouraged to ask the Director for information throughout the year.
- 5. Progress against the Business Plan is monitored throughout the year and is regularly discussed by Senior Management to ensure any issues are resolved at an early stage.

#### **Corporate & Strategic Implications**

- Strategic implications The monitoring of key improvement objectives and performance indicators links to the achievement of the aims and outcomes set out in the Corporate Plan 2018-23.
- Financial implications The full end of year financial position for 2020/21 will be detailed in the Chamberlain's Outturn report which will be presented to your Committee in July 2021.
- o Resource implications None
- Legal implications None
- Risk implications Risk is reviewed regularly by the Senior Management Team as part of the ongoing management of operations. In addition to the flexibility for emerging risks to be raised as they are identified, a process exists for in-depth periodic review of the risk register. The Department's Risk Register currently includes no Red or Amber risks specifically related to the Licensing Service.
- Equalities implications None
- o Climate implications None
- Security implications None

#### **Appendices**

Appendix A - Performance against operational performance indicators and key improvement objectives 2020/21

#### **Background Papers**

'Revenue Budgets and High-Level Summary Business Plans 2020/21' (Licensing Committee 5 February 2020)

#### **Contacts**

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Joanne Hill Department of Markets and Consumer Protection

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# Department of Markets and Consumer Protection Licensing Service Business Plan Outturn Report 2020/21

# **Progress against Operational Performance Indicators**

Performance Indicator	Result 2019/20	Target 2020/21	Result 2020/21
Ensure that, within 12 months, 90% of premises entering the red or amber zone of the Traffic Light Scheme are brought back to the amber or green zone respectively.	95%	90%	The Scheme was suspended when Government COVID-19 restrictions were put in place and licensed premises were not permitted to open. For the brief period that licensed premises were allowed limited opening, there was insufficient time for them to be brought into line within the twelve month target. However, the situation has been continually monitored and premises regularly inspected.  The Scheme is due to resume from April 2021.
100% of licences to either be renewed or appropriate legal action taken (in accordance with the PH&PP Enforcement Policy) within one month of the licence renewal date.	100%	100%	Due to Government COVID-19 restrictions concessions have been made with regard to payment of licence fees and renewal of licences. Although premises are not currently open, once a renewal date has passed no action will be taken until the premises is permitted to trade again. At that time, premises will have to pay the licence fee in full or agree to a payment plan over twelve months. This will not be relevant until mid-April 2021.
Receive a greater number of applications from licensed premises for the 2020/21 annual Safety Thirst Award Scheme (i.e. an increase on the number received in 2019/20).	73	>73	The Scheme was put on hold during 2020/21 due to Government COVID-19 restrictions. All 2019/20 winners retained their award for an additional year.  The Scheme will resume in 2021/22.

Performance Indicator	Annual result 2019/20	Target 2020/21	Annual result 2020/21
a) 90% of debts to be settled within 60 days. *1	89%	90%	Not yet available
b) 100% of debts settled within 120 days. *1	95%	100%	Not yet available

<sup>\*1</sup> The data for the end of 2020-21 is not yet available. Due to the COVID-19 restrictions, concessions have been given to licensed premises regarding the time permitted to pay outstanding invoices. The aged debt figures will, therefore, be skewed until the end of 2021/22.

# Progress against key improvement objectives

Ref.	Objective	End of year progress update
1	Monitor outside drinking in order to prevent this from becoming an issue.	<ul> <li>Achieved.</li> <li>Intermittent outside drinking took place during the year due to Government COVID-19 restrictions.</li> </ul>
2	Review and update relevant Licensing Policies/ procedures to provide clarity and uniformity for applicants/customers/staff.	<ul> <li>Partly achieved. Other priorities brought about by Government COVID restrictions took precedence.</li> <li>The 'Tables &amp; Chairs Policy' was reviewed and updated. However, other policies were implemented to deal with changes to pavement licence permissions and processes made by the Business and Planning Bill 2020. These included a fast-track approval process for Pavement Licence applications and the City's own 'Al Fresco Eating and Drinking Policy'.</li> <li>The review and update of the 'Sexual Entertainment Venues Policy' has been postponed until 2021/22.</li> </ul>
3	Ensure provisions relating to any further amendment of the Licensing Act 2003 and other relevant legislation are complied with and information contained on web site is correct.	<ul> <li>Achieved. Legislative requirements were monitored for updates/ amendments with many being made throughout the year due mainly to COVID-19.</li> <li>Team members were kept fully up to date and 'amendment sheets' were issued to relevant colleagues in other service areas.</li> </ul>
4	Revise policy for the issuing of Street Trading Licences and introduce procedures for the enforcement of the Policy.	<ul> <li>Not achieved. Carried over to 2021/22.</li> <li>No, or very little, street trading took place throughout year due to Government COVID-19 restrictions.</li> <li>The policy will also need to include details of how we will deal with comments made by the Counter Terrorism Security Advisor; this is still under discussion.</li> </ul>
5	To fully utilise 'Assure' ensuring all M3 procedures are carried over and service requests are logged.	<ul> <li>Partly achieved.</li> <li>Initial testing revealed numerous problems which are being investigated by the supplier (Northgate).</li> <li>Most issues have now been resolved and the 'go live' date is due to be in April/May 2021.</li> </ul>

Page 34

Ref.	Objective	End of year progress update
6	Ensure all staff are fully aware of and trained in new policies/ procedures and legislative changes.	<ul> <li>Achieved.</li> <li>All staff were trained/updated on all legislative amendments and informed of all new and amended policies.</li> </ul>
7	Implement changes in the regeneration of Petticoat Lane Market Project.	<ul> <li>Achieved as far as Government COVID-19 restrictions permitted:         <ul> <li>Design and implementation of a gate at the top end of the market, branded and acting as both a security and advertising measure: to be fully implemented – May 2021.</li> <li>Re-design layout of market with more double pitches: to be fully implemented once market re-commences trading – April 2021.</li> <li>Produce a 'Market Mile' flyer: the flyer has been designed and is ready for publication once the market resumes trading - May 2021.</li> </ul> </li> </ul>
8	Prevent illegal street trading on, and around, the bridges within the City of London (including Tower Bridge).	<ul> <li>Achieved.</li> <li>Five prosecutions against peanut and ice-cream vendors are in process although delayed due to Government COVID-19 restrictions.</li> <li>Trading activity over the past 12 months has been almost non-existent due to the COVID-19 pandemic.</li> <li>An additional funded post for illegal street trading enforcement has been secured and will commence in April 2021.</li> </ul>
9	Increase the number of businesses participating in, and achieving an award in, the Safety Thirst Scheme.	<ul> <li>Not achieved. The Scheme was put on hold during 2020/21 due to Government COVID-19 restrictions.</li> <li>All 2019/20 winners retained their award for an additional year.</li> <li>The Scheme will resume in 2021/22.</li> </ul>
10	Achieve the KPI targets set in the 2020/21 Business Plan.	Performance is shown on the first page of this Appendix.

Page 35

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# Agenda Item 14

Committee(s):	Dated:
Health and Well Being Board - for information	19 Feb 2021
Community and Children's Service Committee - for information	5 March 2021
City of London Police Authority Board - for information	25 March 2021
Licensing Committee - for information	28 April 2021
Subject: Director of Public Health Report for 2019/20	Public
Which outcomes in the City Corporation's Corporate	1, 2, 5, 12
Plan does this proposal aim to impact directly?	
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	£N/A
What is the source of Funding?	N/A
Has this Funding Source been agreed with the	N/A
Chamberlain's Department?	
Report of: Andrew Carter, Director of Community & Children's Services	For Information
Report author: Sandra Husbands - Director of Public	
Health; Chris Lovitt - Deputy Director of Public Health	
,	

#### Summary

The Director of Public Health annual report (DPHAR) for 2019/20 has now been published. The Health and Wellbeing Board (HWB) is requested to consider and respond to the recommendations within the report. The 2020/21 report will focus on the health impacts of the economic recession and how these can be mitigated.

#### Recommendation(s)

The Health and Wellbeing board is requested to note and comment on i) the recommendations within the DPHAR and ii) stakeholders to be involved in producing the response to the recommendations to be published as a follow up report.

**Main Report** 

**Background** 

- 1) The annual report from the Director of Public Health provides an opportunity to assess the local population's health and, as appropriate, make recommendations to address identified need.<sup>1</sup>
- 2) The report for 2019/20 was delayed due to the need to respond to the COVID pandemic but has now been finalised.
- 3) The report details what is known about substance use, including alcohol, and the health harms cause by misuse using information provided by Public Health England based upon uptake of services, primary care and hospital data<sup>2</sup>.
- 4) The impact of COVID is not yet fully known but where it possible to quantify the effect or early indications this is described.
- 5) The recommendations to address the needs identified have been developed from the National Institute for Health and Clinical Care Excellence (NICE) guidelines on addressing alcohol<sup>3</sup> and substance misuse<sup>4</sup>.
- 6) Key stakeholders and service providers will be engaged to respond to the report and recommendations during January and February 2021.
- 7) Stakeholders will be requested to detail where they are already addressing the issues raised, sharing best practice and how they would be able to further strengthen their service provision to better address the recommendations. These will then form part 2 of the DPH report to be published in early 2021 collating their responses.
- 8) In the summer of 2021 a service user engagement exercise is proposed to report back on the DPH report, responses and provide a user perspective on the process and outcomes.
- 9) The proposed theme for the DPH report for 2021/22 is how to mitigate the health and wellbeing impacts of a recession and a scoping document will be presented detailing the proposed process in due course.

#### **Appendices**

Annual Report of the Director of Public Health 2019/2020

#### **Chris Lovitt**

Deputy Director of Public Health E: chris.lovitt@cityoflondon.gov.uk

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/860515/direct\_ors-of-public-health-in-local-government-roles-responsibilities-and-context.pdf

<sup>&</sup>lt;sup>2</sup> https://fingertips.phe.org.uk/profile/local-alcohol-profiles

<sup>&</sup>lt;sup>3</sup> https://www.nice.org.uk/guidance/lifestyle-and-wellbeing/alcohol

<sup>&</sup>lt;sup>4</sup> https://www.nice.org.uk/guidance/health-protection/drug-misuse

Substance misuse in the City of London and Hackney









# **Foreword**

**Dr Sandra Husbands** Director of Public Health for City and Hackney



I have chosen to focus on substance misuse, both alcohol and drug use, for my first report as the joint Director of Public Health for the City of London and Hackney. This is in order to highlight not just the many harms caused by alcohol misuse and illicit substances but also to call for a greater focus on the actions that can be taken to address these harms. No one agency can effectively prevent or provide services to our residents who are experiencing the wide-ranging health and social impacts of substance misuse.

mmunities, services and businesses. The extent to which the pandemic ontinues to change society is still evolving and this is also the case for obstance misuse. Supply of both alcohol and illicit substances was significantly disrupted along with treatment services - rapid changes needed to be implemented to ensure substitute prescribing could be safely maintained and services shifted online.

Fear, stress and worry are all normal responses to the unknown and have been heightened throughout the pandemic compounded by far reaching effects on every aspect of daily life. The short, medium- and long-term effect of the pandemic and its interrelationship with substance misuse and mental health is only now starting to be understood. For some people, the disruption has led to a reduction in harmful behaviours. For others, increased mental health stresses have led to increased substance misuse.

For too long the combined challenges of a so-called dual diagnosis, of both a mental health condition and substance misuse, has made accessing treatment and care for either or both more difficult. Services have not always worked together as needed to ensure there is no wrong door into services and to start the journey to recovery.

In my report I describe the need, harms and local responses to substance misuse, and I call for the adoption of six principles that should underpin our approach, rooted in evidence-based interventions and recognised good practice.

The common factor uniting these principles is the need for partnership working. In recognition of this, I will be seeking feedback and advice on these recommendations prior to the production of a supplementary second part to this report, to be published in the new year.

In developing these principles by incorporating the views of political representatives, service users and those within the local health system, I aim to assure their success through consensus building and shared ownership. This should ultimately allow us to review the full scope of services and public health interventions and agree where we should focus our attention as the system responds to the challenges brought about by the pandemic.

# Executive summary

Substance misuse creates harms for the individual, their families, and the wider community. To effectively address substance misuse, a partnership approach is required across the widest range of organisations and society to not only support people into effective treatment, but also strengthen protective factors and address the root causes. This partnership needs to reflect the interrelatedness of the risk factors which make people more vulnerable to problematic use of drugs and alcohol.

Drug and alcohol misuse contribute towards a wide range of physical and mental health conditions, increasing the risk of illness, hospital admissions and emature death. Furthermore, drug and alcohol misuse are often associated with poverty, insecure housing, homelessness and unemployment. It can negatively impact on friends and family, as well as having negative social consequences such as crime, anti-social behaviour and economic costs. These are not issues that can be remedied by either the public health or medical professions working in isolation. Addressing them requires a broad coalition of partners such as probation services, the police, the education sector, adult social care and mental health providers among others. This needs to be underpinned by strong political support and advocacy.

In Hackney and the City approximately one third of adults are estimated to drink more than the recommended low risk limit (14 units of alcohol per week). Only a minority of those with alcohol dependency are receiving treatment.

Just over 4,000 16-59-year olds in Hackney and around 100 in the City of London are frequent drug users. In Hackney only 44% of the estimated number of residents using opiates, and 10% using non-opiate/crack, are accessing treatment. These figures indicate a high level of unmet need.

Priority local issues that need to be addressed include:

- The reducing number of residents with alcohol dependence accessing treatment services, especially given local high alcohol related hospital admissions and death rates
- An ageing cohort of opiate and poly-drug users, with significant physical and psychological health needs
- The number of residents with both mental health conditions and substance misuse who are not currently receiving any mental health support
- Increasing inequalities locally and nationally, including for health, housing, employment, education and income
- The impact of the coronavirus crisis locally, including the additional negative impacts this is having on mental health and inequalities
- Significant improvement in equity of access to a full range of drug and alcohol treatment interventions through the newly commissioned Hackney and the City integrated service.

The basis of our response to these issues must be prompt identification and effective prevention of substance misuse and related harm.

This includes preventative measures, such as education and information provision; early intervention and brief advice; and specialist treatment, including in-patient care. From October 2020 Hackney and the City has had

a single integrated drug and alcohol treatment service. This will build on the successes of the previous service, but it has also been designed to address the gaps identified above. If we are successful with this approach, it should lead to a greater level of resilience to substance misuse in both the individuals at risk and our community more broadly.

**Six core principles** should underpin this response. Achieving them requires commitment from all stakeholders, and so consensus building will be key as we chart a path forward.

- 1) **Prevent:** reduce the availability of alcohol and illicit substances, increase price and restrict marketing especially where viewable by children.
- 2) Assess: Universal use of assessment tools to identify children and adults at risk of substance misuse harms, including both use and dealing especially so called "county lines". These tools need to be implemented across all services who come into contact with residents including education, housing, social care, health and criminal justice settings.
- 3) **Dual Diagnosis:** All clients accessing health or social care services with a suspected or confirmed mental illnesses are assessed for substance misuse at least every 12 months and an up to date dual treatment plan is recorded where a need is identified.
- **4) Inform:** Provide locally relevant information on the effects of substance misuse and where to get support, treatment or to exit illicit dealing/supplyensuring information is widely known and all practitioners are confident to make an effective referral to local services.
- 5) **Refer:** Where either a vulnerability or existing substance misuse need is identified an effective referral is made within the last 12 months, documented and follow up enquiry made with the client.
- **6**) **Excel:** A renewed local focus on helping people into effective treatment and ensure treatment outcomes including reductions in drugs overdoes, abstinence or harm reduction and successful blood borne virus outcomes are amongst the best in country.

# Contents

1. Background	6
2. Substance misuse and its impacts	7
Physical and mental health	7
Socioeconomic impacts	9
Friends and family	11
Wider society	12
Prevalence of substance misuse in the City and Hackney  O Alcohol	
Drugs	
4. Emerging issues	15
Mental health and Dual Diagnosis	15
Increasing inequality	15
Changes in the City of London	16

5. Conclusion and recommendations	17
Prevent	17
Assess	17
Dual Diagnosis	18
Inform	18
Refer	18
Excel	18
6. Appendix A: Related Policy Documents	19
National policies and recognised guidance	19
Local Policies	19
7. Appendix B: Case Study	20
8 Peferences	22

# 1. Background



Alcohol and drug use occur in all sections of society across England, but the nature, extent and acceptability varies significantly with culture and religion. The majority of people do not use illicit drugs or drink above the recommended limits. However, a significant number do, and this can have a serious negative impact on their physical and mental health, social relationships, economic circumstances and lifestyle choices, in addition to wider family, environmental and economic impacts.

In Hackney and the City of London, we are committed to reducing the harm associated with drugs and alcohol. We will do this not only by providing up to date and accurate information on the risks of substance use (allowing local people to make an informed decision about their choices) but also by providing excellent and effective treatment and support to those who are affected by substance misuse. Importantly, individuals struggling with substance misuse will be fully involved in the decisions made about their treatment journey.

However, providing information and services in itself is not sufficient. To effectively address substance misuse there must be ongoing partnership work to address the root causes and ensure that the treatment system is trusted and easily accessible. Outcomes should not only focus on harm minimisation, recovery and abstinence but also ensuring clients are able to address housing, employment and wider health issues. All agencies across the private, voluntary and statutory sector must work together to ensure effective identification of need, referral and ongoing support for residents who would benefit from accessing treatment services. We recognise the importance of behavioural science and continue to look at opportunities to embed behavioural insight-led approaches into our work.

# 2. Substance misuse and its impacts

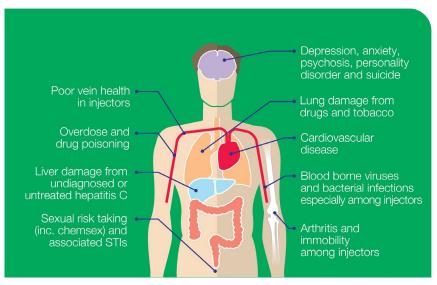
# Physical and mental health

## Physical health

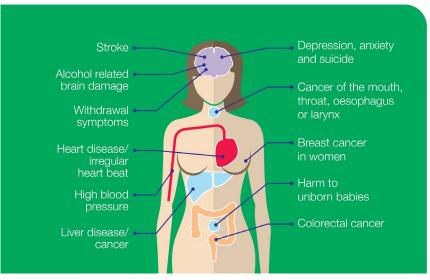
Alcohol and drug misuse are associated with a wide range of negative physical health outcomes. In the short-term this can include indigestion, nausea, diarrhoea, changes to appetite, heart rate, wakefulness, blood pressure, and mood changes. Individuals can also overdose from substances which can lead to death. In the longer term, it can also increase the risk of a wide range of lang-term physical health conditions, including stroke, cardiovascular disease, cancers, psychosis and brain damage. Some of the longer-term health risks associated with alcohol and drug misuse are outlined in the images on the land the page, courtesy of Public Health England. [1]



## Drug misuse damages health



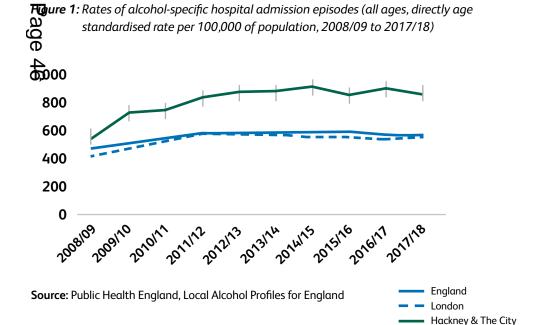
## Alcohol use damages health



#### Local health data

The rate of drug related deaths in Hackney<sup>1</sup> has consistently been greater than both the England and London average recent years. Between 2015 - 2017, there were 50 recorded drug related deaths in Hackney equating to 6.4 deaths per 100,000 population, compared to 3.0 for London. Although this reduced to 44 for 2016-18, 5.4 deaths per 100,000, this remains above the rate for London at 3.1 per 100,000, or England at 4.5 per 100,000.

Alcohol is the leading risk factor for ill health, early death and disability among people aged 15-49 years in England and the 5th leading risk factor for these areas across all age groups. [2]. In terms of hospital admissions, alcohol has a significant impact locally, as seen in Figure 1. This is for adults only, for under 18s the figure is lower than England and London averages.



LIFE

#### Mental health

Poor mental health can be both a cause and a consequence of substance misuse. Compared with the general population, people addicted to drugs or alcohol are approximately twice as likely to suffer from mood and anxiety disorders and, similarly, people with mental health problems are more likely to be dependent on drugs and/or alcohol. [3] Evidence indicates that alcohol use causally increases the risk of depression, however, there is also evidence that many people in the UK drink alcohol in order to help them cope with emotions or situations that they would otherwise find difficult to manage. [4] [5] Over 40 % of new presentations to the local drug and alcohol treatment service in 2017/18 self-reported a concern with mental health and asked for support.

<sup>&</sup>lt;sup>1</sup>Data not available for City of London due to small numbers

# **Socioeconomic impacts**

The importance of partnership working becomes clear when we consider the range of wider socioeconomic issues that have a reciprocal relationship with substance misuse. Issues that are strongly associated include poor housing, social deprivation and unemployment. These can only be tackled in the context of the wider system, necessitating the involvement of multiple agencies. One of the key roles of Public Health is to facilitate this kind of partnership working, by developing professional relationships, helping colleagues understand what the data is telling us, and creating opportunities for partners to develop system-level solutions. This should all be rooted in an empathetic, strengths-based approach that recognises the value of the individual.

This kind of attitude is exemplified by MEAM, making every adult matter.

This framework is used by local partnerships across England to develop a coordinated approach to tackling multiple disadvantage in their local area.

Pocally, our STEPS (Supporting Transitions and Empowering People Service)

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## Poor housing and Homelessness

Drug and alcohol problems can be both a cause and a symptom of homelessness, with substance use being recognised locally as a key driver for rough sleeping. [6] In 2019/20, 275 and 434 rough sleepers were identified in Hackney and the City of London respectively, a large increase of 112 people in Hackney and a small reduction of 7 people in the City of London since the previous year. Of rough sleepers assessed across London during this time period, 77 % reported using drugs, alcohol and/or having a mental health need, demonstrating that substance use and mental health are significant risk factors within the local homeless population.

Rough sleepers are among those most vulnerable to the risks of coronavirus, and given the impact coronavirus is having on employment and the wider economy it is likely that more people will become homeless over the coming months. In response to the needs of this high risk group, in line with the wider government initiative, Hackney Council and the City of London Corporation worked to find appropriate accommodation for everyone sleeping rough, or in a shelter, in Hackney and the City during lockdown. This has provided an opportunity for the council/corporation, local health trusts and voluntary sector and community organisations to engage the homeless population and provide wraparound support in a way that was not previously possible.

The Covid Homeless Rapid Integrated Screening Protocol (CHRISP) conducted by clinicians from University College London Hospital (UCLH), following the 'Everyone In' initiative to protect the homeless during the pandemic, provided a health assessment for 140 rough sleepers in Hackney. CHRISP data found 51% of rough sleepers met clinical thresholds for a diagnosis of depression and/or anxiety, with a further 25% suffering from a severe mental health condition, such as bipolar disorder or psychosis. A further 17% were dually diagnosed, meeting the clinical thresholds for daily injecting drug use and severe mental health.

Importantly, this focus on delivering health and wellbeing interventions to recently housed rough sleepers includes testing for Covid-19, alongside the screening of blood borne virus, tuberculosis, and physical and mental health. The Covid-19, Homeless, Rapid, Integrated, Screening Protocol survey is being carried out by UCLH's Find and Treat team. Findings from CHRISP will inform a local needs assessment of this population to further inform local pathways, service delivery and the identification of appropriate move on options for longer term sustained housing.

### **Deprivation**

People living in more deprived areas live, on average, shorter and unhealthier lives. [7] Deprivation is linked to almost all health outcomes. In terms of substance misuse, there is an association between deprivation and prevalence of opiate and crack cocaine use, and also an association with poorer treatment outcomes. The Index of Multiple Deprivation (IMD) is a combination of a number of indices: income deprivation; employment deprivation; health deprivation and disability; education skills and training deprivation; barriers to housing and services; living environment deprivation; and crime. [8] In 2019, Hackney was ranked² the 22nd most deprived local authority in England and the City of London was the 135th out of 149. Hackney continues to rank poorly increas such as income, crime, barriers to housing and services and has over % of the lower super output areas ranked as being in the most deprived % nationally.



## **Employment**

Drug and alcohol use and misuse is known to have an impact on employment, and other areas that support employment such as education and training programmes.



For example, alcohol misuse has been estimated to cost £7billion in lost productivity across the country. [10] In addition, the majority of individuals engaged in drug and alcohol treatment report they are unemployed. Effective treatment services work to support service users back into employment or other kinds of meaningful activities. Employment and recovery from drug and alcohol misuse are mutually reinforcing.

<sup>&</sup>lt;sup>2</sup> Rank of Extent

# Friends and family

Drugs and alcohol can also have a negative impact on friends and family. A recent national survey in England found that one in five adults had been harmed by the drinking of another person in the previous 12 months. [11]

Parental drug and alcohol misuse can also have a detrimental effect on the health and wellbeing of children. The Department for Education's (DfE's)

Characteristics of children in need showed that in 2016 to 2017, drug use was assessed as a factor (either parent or child-related) in 19.7% of cases and alcohol use was a factor in 18%. It is associated with an increased likelihood of the children partaking in risk-taking behaviours, reduced educational attainment and earlier uptake of drugs or alcohol. Alcohol during pregnancy also creates a risk of Fetal Alcohol Spectrum Disorders

(FASD), causing neurodevelopmental problems that impact on the life chances of those affected.

# **№** 2017/18:

- 11 new presentations to drug and alcohol treatment across Hackney and the City of London were pregnant women, equating to 5% of all new presentations
- 14% of new presentations for alcohol misuse and 12% of new presentations for drug misuse were living with children in 2017/18 (their own or others)
- However, in Hackney it is estimated that only 16% of alcohol dependent residents and 55% of opiate dependant residents living with children are receiving drug and alcohol treatment, demonstrating a notable unmet need. Numbers in the City of London are too small for meaningful analysis. [12]

# Hackney and the City's Pregnancy Multidisciplinary Team (MDT)

Since 2018 Hackney Recovery Service's offer to pregnant women has improved significantly in response to this unmet need. The Pregnancy MDT was also established in response to the specific needs of pregnant and perinatal women in Hackney and the City, which included greater co-occurring mental health issues in this population:

- The pregnancy and perinatal MDT consists of the consultant psychiatrist, families worker, midwife, recovery workers, and the health visitor.
- The MDT occurs every two weeks, via Microsoft Teams.
- The focus of the MDT is around holistic assessment of substance misuse difficulties, diagnosis of comorbid mental health difficulties, psychosocial planning, communication and feedback from midwives, MDT planning, sharing of information, and referral to mental health perinatal services if required.

Outcomes from this innovative partnership working include; increased referrals to Mother and Baby Units, with treatment being prioritised for pregnant women through referrals to detox units and rehabilitation facilities, the MDT has been able to advocate for women and identify additional needs such as complex PTSD, social and general anxiety and bipolar disorder. Women have successfully been referred to Hackney's Orbit service to continue learning about how substance misuse impacts upon theirs and their babies' health and wellbeing and to learn parenting and self-care skills.

# Wider society

#### Crime

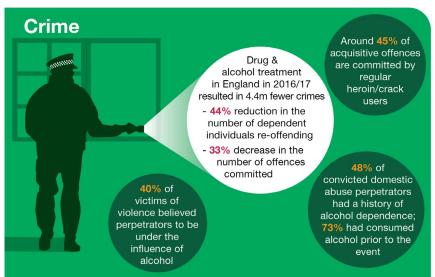
50

Acquisitive crime, violent crime and domestic abuse are particularly associated with drug and alcohol misuse. Up to 80% of weekend arrests are alcohol related and over half of violent crime is committed under the influence of alcohol. [13] Furthermore 45% of all acquisitive offences (for example theft, burglary, and robbery) are committed by regular heroin or crack cocaine users. [14]

Local data across the City of London and Hackney echo the above statements with ambulance dispatches for alcohol assaults increasing at times and on days where alcohol is more likely to be consumed. It is important to note that Hackney and the City's night time economy is attractive to visitors, so the increase may not wholly relate to the residents.

rug and alcohol treatment have a proven track record of reducing crime.

Drug and alcohol misuse harms communities\*



# Annual costs of drug misuse and alcohol related harm\*



### **Economic costs**

The costs associated with drug and alcohol use, and their associated harms, are substantial. They include costs associated with deaths, NHS treatment, crime, policing and lost productivity in the workplace. [1]

The evidence shows us that alcohol and drug treatment helps people to recover and is value for money. Treatment is associated with immediate and long-term savings to the public purse, e.g.

every £1 spent on drug treatment, saves £2.50



# 3. Prevalence of substance misuse in the City and Hackney

It is challenging to estimate how many people use substances within a local area. This is partly due to the hidden nature of substance misuse, possibly linked to the legal status of many substances, or potential feelings of shame or embarrassment. Many people also underestimate the risks associated with their lifestyle choices; for example, underestimating their alcohol consumption by as much as  $40\,\%$ , and how risky their drinking patterns are. [15]

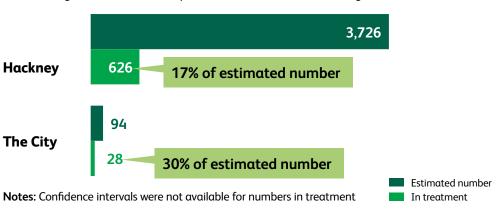
However, there are some estimation tools available that give local authorities and other services (e.g. healthcare) an idea of the amount of substance misuse accurring in a local area, and therefore, the support and treatment needed.

# Alcohol

About one third of adults in Hackney are estimated to drink more than 14 units of alcohol per week (commonly agreed to be the lower risk limit for alcohol consumption) but around one fifth of residents abstain from alcohol completely. [16] A local survey in 2019 suggested that some people may not have good insight into their drinking habits, with over 70% of those who thought they did not drink to excess being assessed as 'high-risk' drinkers using the AUDIT-C tool.

Public Health England estimates that nearly 4,000 residents across the City and Hackney are dependent on alcohol, with 83% of those adults in Hackney and 69% in the City not receiving treatment for this. [18]

Figure 2: Estimated number of Hackney and City of London residents with alcohol dependency (age 18+, 2016/17) compared to numbers in treatment (age 18+, 2017/18)



System wide approaches to prevention can help our community to reduce levels of harmful drinking, and multidisciplinary alcohol care teams linking primary care, secondary care and the community are very effective in reducing alcohol harms and costs to the health system and wider society.

Cross-sectional data extracted from primary care records on 1st April 2018 showed that 16% of City and 6% of Hackney residents registered with a GP aged 18 and over had completed an AUDIT-C assessment. Of these, nearly 500 City residents and 5,475 Hackney residents aged 18 and over had an AUDIT-C score of 5 and above indicating increasing or higher risk drinking (8% and 2% of the resident adult population respectively). Brief advice and screening such as this are essential to a systems wide approach to the identification and prevention of substance misuse.

# **Drugs**

The 2017/18 Crime Survey for England and Wales (CSEW) gives an estimate of the prevalence of people using drugs in London. We can use this prevalence estimate by applying it to our local population data. This crudely predicts the number of people using drugs in Hackney and the City (Table1). The CSEW also estimates that around 2.1% of 16-59-year olds nationally are frequent drug users<sup>3</sup>. [19] Applied locally to 2018 population projections, these estimates suggest that just over 4,000 16-59-year olds in Hackney and around 100 in the City of London are frequent drug users.

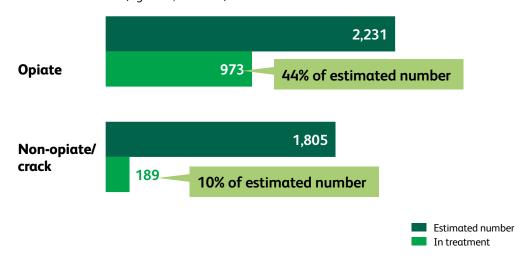
**Table 1:** Local estimates of Hackney and the City residents using drugs in the last year by type (age 16-59, 2017/18)

Substance type 0 0 0 0	National prevalence England	Regional prevalence London	Hackney estimated No.	City of London estimated No.
Any Class A drug <sup>4</sup>	3.5 %	3.3 %	6,387 (2.2 %) <sup>5</sup>	165 (1.9 % ) <sup>6</sup>
Any drug <sup>7</sup>	9.0%	9.3 %	18,001 (6.4%)	466 (5.6%)

Source: Home Office, CSEW 2017/18, [18]

Public Health England uses a tool developed by Liverpool John Moores University to estimate the prevalence of opiate and/or crack cocaine use in local areas. [20] This tool suggests there are approximately 2,880 residents across Hackney and the City using opiates and/or crack cocaine. As with alcohol, there is a high level of unmet need, with over half of those estimated as dependent on opiates and/or crack cocaine not receiving treatment for this.

Figure 3: Estimated number of Hackney residents using opiates and/or crack cocaine (age 15-64, 2016/17) compared to numbers in treatment (age 18+, 2017/18)



<sup>&</sup>lt;sup>3</sup> Frequent use refers to use of any drug more than once a month in the past year.

<sup>&</sup>lt;sup>4</sup> Any Class A drug' comprises powder cocaine, crack cocaine, ecstasy, LSD, magic mushrooms, heroin, methadone and methamphetamine.

<sup>&</sup>lt;sup>5</sup> Based on the 2018 mid-year population estimate of 279,700

<sup>&</sup>lt;sup>6</sup> Based on the 2019 mid-year population estimate of 8,700

<sup>&</sup>lt;sup>7</sup> Any drug' comprises powder cocaine, crack cocaine, ecstasy, LSD, magic mushrooms, heroin, methadone, amphetamines, cannabis, tranquillisers, anabolic steroids and any other pills/powders/drugs smoked, ketamine, methamphetamine and mephedrone.

# 4. Emerging issues

# Mental health and Dual Diagnosis

Unfortunately, due to continually increasing health inequalities, a deteriorating economy and the coronavirus crisis, prevalence of mental health problems in the City and Hackney are likely to increase over the coming months and years. Mental health thus needs to be a high priority to strengthen prevention efforts with substance misuse, as in 2019/20, 56% of substance misuse treatment service users had a mental health treatment need identified.

Published guidance emphasises that an integrated approach to treatment and support is essential. Yet, a quarter of all new presentations to Hackney and the ty's treatment system in 2019/20, with a self-disclosed mental health issue, where not receiving any support or treatment for their mental health.

the pathways and partnership working between substance misuse and mental health services, so that service users receive more joined up care going forward. In North East London, a novel approach to mental health service provision is emerging, focusing on blended teams that draw on a wide range of partners to meet the needs of our community. Our new substance misuse provider is becoming more engaged with this promising neighbourhoods model, enabling service users to have a package of support that is tailored to their specific needs. Along with this additional capacity to bring drug and alcohol treatment into the community to better tailor the recovery journey to the individual's need, the new substance misuse service will provide a Dual Diagnosis post to lead on evidence based, best practice for substance misuse to complement the work of the new blended mental health teams.

# Increasing inequality

The recently published report: Health equity in England: *The Marmot Review 10 years on*, [22] found that inequalities in the UK have continued to increase across a wide range of domains, including health, education, housing, employment and income. This is likely to be at least partly a consequence of the last decade of austerity, including factors such as the closure of children's centres; declines in education funding; an increase in precarious work and zero hours contracts; a housing affordability crisis and a rise in homelessness; more people with insufficient money to lead a healthy life and resorting to food banks; and ignored communities with poor living conditions and little reason for hope.

These increasing inequalities are likely to directly and indirectly led to increased levels of substance misuse. Often, inequalities are interrelated and can have a compounding effect. For example, low income is a risk factor on its own but children living in poverty are also more likely to be exposed to adverse childhood experiences. These experiences in turn elevate the risk that children and young people will experience negative health and social outcomes across the life course, including higher risk of substance misuse. The more adverse childhood experiences, the worse the outcomes are likely to be. For example, where children have four or more adverse childhood experiences, they are five times more likely to use illicit drugs and seven times more likely to be addicted to alcohol than children who have not. [23]

The effect of inequalities is being magnified by the coronavirus pandemic, and regardless of how quickly we can overcome the virus, these impacts are likely to be felt for a long time to come.

Many people have experienced trauma as a result of the crisis, including frontline workers, people who have lost loved ones, those who were seriously ill but recovered and those who struggled to feed or look after themselves and their families during the crisis. Economic inequalities have increased, with the least affluent struggling more than ever with debts, housing, employment and health. Children from the most deprived families are also most likely to have had their education negatively impacted by lockdown restrictions, which will have long-term effects on their opportunities in life.

All these issues create risk factors for substance misuse. How we respond to coronavirus therefore has significance far beyond the direct effects of the virus; it will determine the future of our community and our ability to build an environment that is conducive to lowering the risk factors for harmful use of alcohol and drugs.

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# Changes in the City of London

The Covid-19 pandemic and the introduction of strict social distancing measures, combined with "lockdown" in March 2020 and move to Tier 2 and 3 Covid restrictions, has led to a huge shift in the daytime population in the City of London. With the vast majority of City workers and other desk-based workers in central London working from home and the likelihood that this will remain the case in at least the short- to medium-term, this brings about significant changes to the Night Time Economy (NTE) in the Square Mile. These changes will, in turn, have a large impact on the "social" use of alcohol and substances among City workers and visitors to the City's NTE; the effects of which it is too early to confirm. Most cocaine use among City workers has typically been in combination with alcohol consumption.

In addition, increased working from home has necessitated different approaches in terms of supporting City employers to share messages about alcohol and drug related harm and harm reduction with their workforces, such as through virtual channels and signposting to digital resources. This is not necessarily the case with regards to the City's "hidden" workforce (such as security guards and cleaners), who continue to travel into the Square Mile and work on-site.

# 5. Conclusion and recommendations

The challenges that substance misuse creates for individuals and families in our community are only likely to increase as the broader social impacts of the pandemic become apparent. The current pattern of need across the City and Hackney highlights how important it is for us to ensure our treatment services are able to deliver for those affected, and our approaches to prevention must take in to account the wider determinants of health and focus on reducing health inequalities between different groups in our population.

None of this can be achieved by single measures that tackle isolated problems. We need the entire system to respond, and partners must work together to achieve this. As such, any recommendations should be made in the spirit of collaboration and consensus. I therefore propose the following six principles at should underpin partnership working. We will seek feedback from these partners to agree on how these principles should be employed and developed in response to the increasing need we are likely to see in the coming months and years.

# **Prevent**

Reduce the availability of alcohol and illicit substances, increase price and restrict marketing especially where viewable by children.

A fundamental component of our approach to reducing the harms of substance misuse is creating an environment that is less conducive to it. For alcohol, Shoreditch and Dalston are already Special Policy Areas, creating a presumption that new licencing applications will be refused; more generally,

we advocate to continually seek appropriate and effective opportunities to discourage excessive consumption, through reducing 'special offers' and price reductions.

Our new service provider is obliged to support and promote local and national campaigns (e.g. Dry January, Alcohol Awareness Week), in an effective and strategic manner. The City and Hackney should use these opportunities to support national efforts to reinforce messaging around alcohol consumption, in particular zero alcohol during pregnancy; Fetal Alcohol Spectrum Disorders increase the future risks of substance misuse for those affected, and prevention is thus crucial to breaking recurrent cycles of alcohol misuse across generations.

## **Assess**

Universal use of assessment tools in all agencies to identify children and adults at risk of substance misuse harms, including both use and dealing especially so called "county lines".

Consistent application of assessment frameworks must be a cornerstone of our approach to substance misuse. We need all professionals to be confident in applying these, such as the AUDIT-C framework for alcohol, and tools such as DAST for illicit substances, and to have clear subsequent referral pathways and mechanisms. Our new service provider is working closely with GPs to ensure a seamless transition of referral pathways, and this needs to be the case for all partners in the health system and social care.

Application of assessment frameworks also underpins our ability to recognise young people at risk of exploitation. The incentives for young people to become involved in gangs and "county lines" can be powerful, and we need a multiagency approach to supporting parents and carers to overcome these. Appropriate assessment forms the basis of this approach.

# **Dual Diagnosis**

All clients accessing health or social care services with a suspected or confirmed mental illnesses are assessed for substance misuse at least every 12 months and an up to date dual treatment plan is recorded where a need is identified.

The interrelationship between mental health and substance misuse creates deallenges in delivering services for people with the most complex needs. Joined services which seek to eliminate the walls between interventions for mental health and substance misuse require good record keeping and dual treatment wans, designed to allow people to reconnect with services if treatment is halted prematurely.

## **Inform**

Provide locally relevant information on the effects of substance misuse and where to get support, treatment or to exit illicit dealing/supply - ensuring information is widely known and all practitioners are confident to make an effective referral to local services.

All partners in the health, social care and education sectors need to be confident and aware of the services we are providing, with the opportunity to develop relationships with providers and develop an understanding of the services offered. Open days and networking meetings should be encouraged

and can be facilitated by the Public Health team. Public Health in conjunction with our new service provider Turning point will also aim to develop our approach to Shared Care among GPs.

## Refer

Where either a vulnerability or existing substance misuse need is identified, an effective referral is made within the last 12 months. This must be documented and a follow up enquiry made with the client.

Consistency and quality of referrals from the health, social care and education providers must be continually reviewed, alongside a recognition that making a referral does not represent the end of our duty to the individual. Follow up is required to ensure treatment commences and results in a successful outcome. This often requires sensitivity to individual circumstances, for example the observation that many people referred for support with alcohol misuse find services that also tackle other types of substance misuse unacceptable.

## **Excel**

A renewed local focus on helping people into effective treatment and ensure treatment outcomes including reductions in drugs overdoes, abstinence or harm reduction and successful blood borne virus outcomes are amongst the best in country.

We must draw on all the evidence available to us to provide the best service. This starts with our communities and service users; sharing of experiences through stories and user representation in decision making forums is an opportunity for all partners to take ownership and responsibility for substance misuse. Regular focus on NDTMS metrics and reflection on how we can improve upon them should similarly be a collaborative effort.

# **6. Appendix A:** Related Policy Documents

# National policies and recognised guidance

National Drug Strategy (2017) - Sets out the Government's partnership approach to tackle drug misuse at a local, national and international level. It is focused on reducing demand, restricting supply, building recovery and global action. [26] This expands on the aims of the previous strategy in 2010, namely to provide additional focus on reducing illicit drug use and increase the rate of people recovering from addiction and/or dependence on substances.

Go17): These guidelines, commonly known as the 'Orange Book', provide information for clinicians and commissioners on evidence-based pharmacological and psychosocial treatments, ensure safe clinical and prescribing practices within specialist drug and alcohol services, and other clinical environments such as hospitals, custody settings and GP practices. [27]

#### The National Institute for Health and Care Excellence (NICE) Guidelines:

Commissioners and substance misuse services will comply with NICE guidelines on managing alcohol use disorders and drug misuse to ensure high quality practices for alcohol and drug use prevention, identification, assessment and treatment. [28]

## **Local Policies**

Hackney's Alcohol Strategy (2017-2020): This local alcohol strategy is the result of a consultation process with residents and partners aiming to reduce alcohol-related harm in Hackney. [29] It is based on four core principles:

- encourage healthier drinking behaviours
- commission appropriate and responsive services
- support families, carers and young people affected by alcohol misuse
- promote responsible drinking environments.

#### Hackney Community Safety Partnership Strategic Assessment (2018-2019):

This strategy focuses on tackling crime and disorder in Hackney and has three strategic priorities linked to alcohol and drug misuse:

- gangs, youth crime, youth victimisation and engagement
- alcohol related crime, licensing and safer socialising
- substance misuse, treatment and drug dealing.

City's Draft Alcohol Strategy (2019-2023): This strategy is currently in consultation with residents and workers of the City of London, but it stands on three main outcomes:

- people being informed about the risks of alcohol-related harms
- people being and feeling safe in the night-time economy
- people having the support they need to access services.

# 7. Appendix B: Case Study

The following case study has been provided with the permission of S. His story highlights the problems that people encounter dealing with a system where the parts do not always work together well. His engagement with the Multiple Needs Service shows how effectively partners from different agencies can be when they collaborate to overcome the problems to allow those with substance misuse problems to flourish.

S is a 50 year old male who was diagnosed with clinical depression, bi polar and personality disorder at a young age but his mental health worsened when his dad died unexpectedly. S was first introduced to class A drugs when he was an inpatient in a mental health hospital by other patients and his drug use, which are a mental health hospital by other patients and his drug use, was and heroin, continued after he was discharged. S was last sectioned in eccember 2015 for two months following an overdose as a deliberate serious spicide attempt.

S has a history of offending including charges for possession and shoplifting. Prior to his hospital admission S was homeless so on discharge he was placed in a hostel for ex-offenders in Stoke Newington by Probation.

S was referred to the Multiple Needs Service, MNS, in August 2016 by his keyworker at Hackney Recovery Service (HRS). S had been a client at HRS and prescribed 45mls of methadone since May 2016. S scored high on the Chaos Index at 39 out of 48 as he had support needs in all four key areas, mental health, substance use, criminal justice and unstable housing. S was on a methadone script but continued to use crack and heroin on a weekly basis, he was no longer being supported by mental health services but was compliant on medication prescribed by GP for clinical depression and bi-polar and he continued to attend probation.

When S was first referred to MNS he didn't know how the team could support him and asked to 'take it slow' as he didn't want to feel overwhelmed, but after the first few meetings he started to open up and spoke about his family and his mental health and substance use. S wasn't feeling supported at the hostel and there were concerns about issues he was having with the other resident in his flat and there was no 'move on' plan in place. This was impacting his mental health, in particular when he experienced bi-polar low moods he was finding it difficult to keep himself safe in his environment. S was expressing suicidal ideation and at times he considered hospital admission. MNS were active in coordinating and attending case management meetings with S, the hostel, HRS and Probation in order to develop a shared support plan.

Whilst putting a move on plan in place we were informed by the hostel that S had accrued almost £3000 rent arrears that he needed to pay off first. There appeared to be a short fall in housing benefit of around £50 per week, S wasn't in a financial position to cover this and pay off arrears so MNS took the lead on finding a solution. Through investigation, MNS were informed that this was an error as the hostel were classed as supported accommodation, so therefore a benefit cap does not apply. During this process, MNS discovered that S was registered for council accommodation and with the rent arrears now cleared, he was eligible to bid. MNS supported S to bid on properties and used their knowledge of Hackney to ensure they were in areas that suited his needs. Within a few weeks of bidding S was invited to view a property, MNS supported him to attend, he accepted the property and collected the keys and signed the tenancy agreement that same day.

The hostel supported S to move from the hostel into the flat three weeks later,

and allowed him to take the single bed and a small table from his room as he had no furniture of his own. In addition, the hostel and HRS applied for funding from various sources to help furnish the flat, enabling S to buy a fridge freezer and washing machine and in addition MNS Service bought him a microwave. MNS supported S with a PIP application which was successful and he used this to buy a cooker, double bed frame and put £200 towards a sofa and the other £250 was paid for from the Sherriff's Fund. A year later, because S had been unable to save for a double mattress, MNS team bought him one to celebrate maintaining his tenancy for one year and his 50th birthday.

Once settled in a safer environment and engaging well with MNS and HRS support, S wanted to access services to support his mental health. HRS contacted his GP who referred S to The Therapeutic Outreach Service (TCOS), a service for people with personality disorder and MNS referred S to the Wellbeing Network. MNS supported S to attend his assessment for TCOS and was accepted for the 8 week Group Introduction programme and whilst he waited to start he attended some group sessions at the Wellbeing Network and ontinued to attend the peer led weekly SMART group.

S went on to complete the introduction programme at TCOS but found it challenging so felt unable to continue with the Wellbeing Network as well. When he was invited back to TCOS to discuss his progress and the next stage of treatment, S asked MNS to go with him and when asked, how MNS Team support him, he replied by saying, 'they saved my life'. S has been accepted for

the next stage of treatment at TCOS but was advised there is a 9 month wait to start and is currently still waiting. In the meantime he is encouraged to check in with TCOS if needed but is otherwise supported by HRS and MNS.

S continues to attend the SMART group and HRS and has reduced his methadone dose by more than half to 20mls. He had managed to reduce his dose to 5mls but at that point he experienced symptoms of withdrawal and bought street methadone to prevent him from using heroin over a weekend. S initiated a joint meeting with MNS and his keyworker at HRS to discuss what happened and together we decided it was best for him to go back up to 20mls as he'd also had some disruption with the medication prescribed by his GP. In joint meetings since then S has explored residential detox as an option and after attending several pretox groups and further discussion, has decided he is ready. There is a plan in place and funding agreed for S to attend 3 weeks residential detox to be followed by a 12 week abstinence day programme at HRS.

In recent weeks, a number of other service users and professionals have commented on the way S contributes during group sessions and how well it supports his peers. He has been exploring with MNS ways he could develop his skills and is considering an NVQ in Advice and Information with a view to facilitating his own peer led groups. Most recently he attended a MEAM learning hub where he contributed well and was proud to tell people he is an MNS service user.

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Committee(s)	Dated:
Licensing Committee	28 April 2021
Subject: Delegated decisions of the Director of Markets and Consumer Protection pertaining to premises licences	Public
Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?	1, 4
Does this proposal require extra revenue and/or	N
If so, how much?	N/A
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain's Department?	N/A
Report of: Director of Markets & Consumer Protection	For Information
Report author: Robert Breese, Licensing Officer	

#### **Summary**

This report details the premises licences, and variations to premises licences, granted under the Licensing Act 2003 by the Licensing Service from 1 January 2021 to 31 March 2021. It does not include any premises where Members have been involved in the decision-making process i.e. decisions made at Licensing Sub-Committee hearings.

The report also gives a summary of the enforcement action taken under the Licensing Act 2003 between 1 January 2021 to 31 March 2021. In addition, the report presents data from the 'traffic light' risk scheme introduced within the City of London on 1 April 2013. The data gives a view of the scheme as at 31 December 2020. Please note this data is the same as in the previous report – no new data has been generated as hospitality has been in lockdown since the last report and there are no changes.

#### Recommendation(s)

#### Members are asked to:

Note the report

#### **Main Report**

1. The Licensing Team has faced many challenges over the past 12 months due to the ever-changing environment presented by various Covid-related lockdowns and easements. Notwithstanding, a way of flexible working has been developed that maintains the working relationships and the level of service that our stakeholders have become accustomed to. Output remains high, and all applications across all licensing functions and regimes are processed and considered in a consistent and thorough manner.

- Pursuant to the instructions from your committee, I attach for your information lists detailing 'premises licence' applications (Appendix 1) and variations (Appendix 2) granted by the Licensing Service between 1 January 2021 to 31 March 2021. Each of these appendices contain details of any conditions attached to the premises licences.
- 3. The report also contains information appertaining to the number of personal licences issued. This information is also contained in Appendix 2.
- 4. Any questions of detail concerning premises licences can be obtained from the Corporation's public register which can be found on:

  <a href="http://www.cityoflondon.gov.uk/business/licensing/alcohol-and-entertainment/Pages/Search-the-public-register.aspx">http://www.cityoflondon.gov.uk/business/licensing/alcohol-and-entertainment/Pages/Search-the-public-register.aspx</a> or by email to the Licensing Team at licensing@cityoflondon.gov.uk.
- 5. This report also outlines the enforcement activity of the Licensing Service in relation to premises with a licence granted under the Licensing Act 2003 (Appendix 3). The table in Appendix 3 shows the number of visits undertaken, number of complaints received and the number of enforcement actions taken. Enforcement actions include warning letters, notices, simple cautions, legal proceedings etc. Appendix 3 provides data from 1 January 2021 to 31 March 2021.
- 6. Licensing Officers undertake routine enforcement visits checking on premises licence conditions where there are concerns, e.g. closing times, compliance with Temporary Event Notices and managing numbers of people consuming alcohol outside venues, and also in response to complaints. The Departmental Policy Statement on Enforcement is followed prior to escalating action and taking legal proceedings.
- 7. The Departmental Policy Statement on Enforcement conforms to the Regulators' Compliance Code and the regulatory principles required under the Legislative and Regulatory Reform Act 2006. It sets out the general principles and approach which Officers are expected to follow and addresses issues of proportionality, consistency, targeting, transparency and accountability.
- 8. More widely, enforcement arrangements are currently coordinated at the Licensing Liaison Partnership meetings that are held monthly and are attended by representatives from all enforcement agencies. Joint visits are organised via this forum and subsequent reports are used to add to the top level premises list that comprises those premises that have accrued the most points under the 'traffic light' risk scheme. These are then targeted by relevant enforcement officers.
- 9. This report details data produced from the 'traffic light' risk scheme as of 31 December 2020. Further details can be seen in Appendix 4.
- 10. There is a very good working relationship between the Port Health & Public Protection (PH&PP) Licensing Team, The City of London Police Licensing Team and the PH&PP Pollution Control Team, all of whom are based at the Guildhall. These relationship and lines of communication have been maintained

with regard to working from home, the majority of communications now taking place remotely.

- 11. The Memorandum of Understanding (MoU) between the City of London Police and the Markets and Consumer Protection Department agreed in November 2011 outlines specific arrangements for cooperation between the Licensing Teams.
- 12. The other City Corporation Department that is routinely involved in enforcement is the Department of the Built Environment (DoBE). Where it appears that a material change of use has occurred, or there is a failure to comply with any condition attached to a planning permission or a breach of planning controls, when it is expedient to do so, officers from this Department seek authorisation to take the appropriate enforcement action.
- 13. Any complaints about licensed premises are dealt with by the relevant agency/team, e.g. crime and disorder Police, fire safety London Fire Brigade. As far as PH&PP are concerned, complaints relating to the conditions on a licence will be dealt with in the first instance by the Licensing Team, but if there are noise issues the Pollution Team will also be involved.
- 14. Investigations are undertaken and if there are grounds for a review of the licence in relation to the licensing objectives, then the responsible authorities can apply accordingly. In practice, potential applications are considered at the Licensing Liaison Partnership meetings, and agencies/authorities support one another in providing evidence and making applications.

#### **Implications**

15. Corporate & Strategic Implications:

Strategic implications - None

Financial implications - None

Resource implications - None

Legal implications - None

Risk implications - None

Equalities implications – None

Climate implications - None

Security implications – None

### **Appendices**

- Appendix 1 New Licence Applications issued between 01 January 2021 to 31 March 2021.
- Appendix 2 Applications to vary a licence issued between 01 January 2021 to 31 March 2021.
- Appendix 3 Enforcement Action carried out between 01 January 2021 to 31 March 2021 (including complaints received).
- Appendix 4 (Non-Public) Update on the risk scheme as of 31 December 2020.

#### **Background Papers**

None

#### **Robert Breese**

**Licensing Officer** 

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# New Licence Applications Issued by way of Delegated Authority (01 January 2021 to 31 March 2021)

Name	Address	Ward	Details
Canopy by Hilton Hotel	11-15 Minories, EC3N	Tower	A, L (b), (c), (e), (f) (g) <b>02:00</b>
	1AX		
The Market	22 Bishopsgate, EC2N	Lime Street	A, L, (b), (e), (f) <b>02:00</b>
	4AH		
Studio Paris	7 Fredericks Place,	Cheap	A, (e), (f) 23:00
	EC2R 8AB	-	

### **Total Licences Issued = 3**

Key to Details:

A Sale of Alcohol

(e) Live Music

L Late Night Refreshment (f) Recorded Music

(a) Plays

(g) Performances of Dance

(b) Films

(h) Making Music

- (c) Indoor Sporting Events
- (d) Boxing or Wrestling

Times stated are the latest terminal hour for at least one of the licensable activities.

### Number of Licences by Ward

WARD No. Cheap 1 **Lime Street** 1 Tower 1

### **Conditions Applied to Licences Granted by way of Delegated Authority**

#### **Canopy by Hilton Hotel**

- 1. The sale of alcohol is permitted 24 hours a day to residents and their bona fide guests
- 2. There shall be no promoted events on the premises unless agreed with the Police Licensing Officer and upon submission of a satisfactory risk management form. A promoted event is an event where the musical entertainment is provided at any time by a disc jockey or disc jockeys one or some of whom are not employees/ agents of the premises licence holder and the event is (independent of the premises licence holder) promoted to the general public.
- 3. The premises shall install and maintain a comprehensive digital colour CCTV system. All public areas of the licensed premises, including all public entry and exit points and the street environment, will be covered enabling facial identification of every person entering in any light condition. The CCTV cameras shall continually record whilst the premises are open to the public and recordings shall be kept available for a minimum of 31 days with date and time stamping. A staff member who is conversant with the operation of the CCTV system shall be present on the premises at all times when they are open to the public. This staff member shall be able to show the police or the Licensing Authority recordings of the preceding two days immediately when requested.
- 4. There shall be no sales of alcohol on the external roof terrace area after 23:00 hours daily.

#### **The Market**

- 1. The premises shall install and maintain a comprehensive digital colour CCTV system. All public areas of the licensed premises, including all public entry and exit points, will be covered enabling facial identification of every person entering in any light condition. The CCTV cameras shall continually record whilst the premises are open to the public and recordings shall be kept available for a minimum of 31 days with date and time stamping. A staff member who is conversant with the operation of the CCTV system shall be present on the premises at all times when they are open to the public. This staff member shall be able to show the police or the Licensing Authority recordings of the preceding two days immediately when requested.
- 2. The premises will not hold promoted events, a promoted event being defined as follows: "A promoted event is an event where the musical entertainment is provided at any time by a disc jockey or disc jockeys one or some of whom are not employees of the premises licence holder and the event is (independent of the premises licence holder) promoted to the general public"
- 3. The external terraced area shall not be used between the hours of 23:00 and 08:00 for the playing of music or the consumption of food or beverages. The area may be used as a smoking area up to the terminal hour of the business.
- 4. All external doors and windows shall be kept closed, except for access or egress, at any time when live or recorded music is being played in the premises.
- 5. Only background music shall be played on the external terraced area at any time.

#### **Studio Paris**

1. The premises shall install and maintain a comprehensive digital colour CCTV system. All public areas of the licensed premises, including all public entry and exit points, will be covered enabling facial identification of every person entering in any light condition. The CCTV cameras shall continually record whilst the premises are open to the public and recordings shall be kept available for a minimum of 31 days with date and time stamping. A staff member who is conversant with the operation of the CCTV system shall be present on the premises at all times when they are open to the public. This staff member shall be able to show the police or the Licensing Authority recordings of the preceding two days immediately when requested.

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# Licence Variations Issued by way of Delegated Authority (01 January 2021 to 31 March 2021)

Name	Address	Ward	Variation
Oyster Shed	1 Angel Lane, EC4R	Dowgate	• Change of plans
	3AB		only due to
			refurbishment (no
			change to
			hours/conditions)

### **Total Number of Variations Issued = 1**

Number of Licences by Ward

WARD No.

Dowgate 1

# Personal Licences Issued by way of Delegated Authority

01 January 2021 to 31 March 2021

1

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# Enforcement Action Carried out Under the Licensing Act 2003 01 January 2021 – 31 March 2021

Total Number of Inspections	25 (constant monitoring, focusing on advising open premises as to regs)
Number of Warning Letters	0
Number of Premises advised	25
Number of simple cautions	0
Number of suspension notices	119 (emails to say if you haven't paid we are obliged to suspend licence)
Licence lapsed* 'Dead' Suspensions** 'Live' Suspensions***	0 0 0
Under determination	0

<sup>\*</sup>Licences are deemed lapsed in circumstances where the licence holder no longer exists e.g. a company has gone into liquidation.

<sup>\*\*</sup>A 'dead' suspension is where the premises is closed but there is no evidence to suggest that the licence holder is still in existence. If the licence holder returns to the premises the outstanding fee will have to be paid in order for the licence to be resurrected.

<sup>\*\*\*</sup>A 'Live' suspension is where the premises is still trading and can now no longer carry on licensable activities until the licence fee has been paid.

# Number of complaints received between 01/01/2021 and 31/03/2021

Total number of complaints: 1

Leon, 86 Cannon Street, London, EC4N 6HT

Noise from deliveries 15:20 08/02/2021 Resolved informally Dowgate

# Agenda Item 19

Document is Restricted



# Agenda Item 21

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted

