

**Submission
No 265**

SYDNEY'S NIGHT TIME ECONOMY

Organisation: New South Wales Nurses and Midwives' Association

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Submission to the Joint Select Committee on Sydney's night time economy

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NSW NURSES AND MIDWIVES' ASSOCIATION
AUSTRALIAN NURSING AND MIDWIFERY FEDERATION NSW BRANCH

www.nswnma.asn.au
50 O'Dea Avenue
Waterloo NSW 2017

T 8595 1234 (METRO) • 1300 367 962 (NON-METRO)
F 9662 1414
E gensec@nswnma.asn.au

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Recommendations

1. Recommendation 1: The NSWNMA supports the retention of the measures implemented in 2014, and urges the Committee to recommend the government retains these measures.
2. Recommendation 2: The NSWNMA urges the Committee to recommend the government retain the measures, and considers expanding these measures across NSW.
3. Recommendation 3: The NSWNMA recommends the Committee considers innovative and inclusive approaches to ensuring a vibrant night time economy. It is crucial that Sydney's night time economy is not solely focused around late-night availability of alcohol.
4. Recommendation 4: The NSWNMA urges the Committee to obtain costings of the increased public services such as Transport, Police, Emergency Services, Hospitals and Emergency Department staff and beds that are needed to support an expanding night time economy.
5. Recommendation 5: The NSWNMA believes in the importance of expanding evidence-based harm minimisation initiatives. The NSWNMA recommends the Committee urge the government to increase funding to the full suite of evidence-based harm minimisation initiatives.

Foreword

The New South Wales Nurses and Midwives' Association (NSWNMA) is the registered union for all nurses and midwives in New South Wales. The membership of the NSWNMA comprises all those who perform nursing and midwifery work. This includes: registered nurses; enrolled nurses and midwives at all levels including management and education, and assistants in nursing and midwifery.

The NSWNMA has approximately 66,000 members and is affiliated to Unions NSW and the Australian Council of Trade Unions (ACTU). Eligible members of the NSWNMA are also deemed to be members of the New South Wales Branch of the Australian Nursing and Midwifery Federation.

NSWNMA strives to be innovative in our advocacy to promote a world class, well-funded, integrated health system by being a professional advocate for the health system and our members. We are committed to improving standards of patient care and the quality of services of all health and aged care services whilst protecting and advancing the interests of nurses and midwives and their professions.

We currently have 3000 members who work in Emergency Nursing, who are regularly consulted with respect to matters specific to their practice.

We welcome the opportunity to provide a submission to the Joint Select Committee on Sydney's night time economy.

This response is authorised by the elected officers of the New South Wales Nurses and Midwives' Association



BRETT HOLMES
General Secretary

CONTACT DETAILS

NSW Nurses and Midwives' Association

50 O'Dea Avenue
Waterloo, NSW 2017

(02) 8595 1234 (METRO)

1300 367 962 (RURAL)

gensec@nswnma.asn.au

Introduction

The NSW Nurses and Midwives' Association (NSWNMA) thanks you for the opportunity to provide a submission to the Joint Select Committee on Sydney's night time economy.

The NSWNMA strongly supported the regulations, around liquor sales and licensing, brought in by the government in February 2014. The suite of measures included the 1.30am one-way door policy (referred to as the 'lockout laws') and a 3am 'last drinks' policy.

At that time, we commended the government for having the courage to introduce these measures in the face of strong opposition from the alcohol industry. Five years since the introduction of these measures, the incidence of alcohol-fuelled violence in Sydney's main entertainment precincts (the Kings Cross area and the Sydney CBD) has drastically improved. We now implore the government to maintain these measures.

Nurses are across all aspect of health and are the largest profession in the health workforce making up over 50% of the workforce in NSW. Our response to this inquiry is framed in the context of the NSW nursing perspective, as this is our core business and our member's main area of practice.

Discussion

REDUCING THE HARMS ASSOCIATED WITH ALCOHOL

Alcohol is one of the major causes of preventable disease and disability in Australia¹. The National Drug Strategy 2017-2026 outlines that more than 17% of Australians consume alcohol at a level that increases their risk of harm from alcohol-related disease or injury, and more than 25% of Australians drink at a level that increases their risk of injury².

In 2016, more than 1 in 5 Australians aged 14 and over had been a victim of an alcohol-related incident³. There is a clear link between the amount of alcohol consumed and the level of harm, both for the individual and the broader community.

Alcohol is responsible for more than 37 emergency department (ED) presentations, 147 hospitalisations and three deaths every day in NSW. The NSWNMA is supportive of any evidence-based measures that work to reduce the alcohol-related harms for individuals, as well as the broader community.

Reduction in violence

Since the introduction of a range of measures in 2014, aiming to curb alcohol-related violence in Sydney's entertainment precinct, there has been a dramatic reduction in non-domestic violence. Substantial reductions have been observed in the Kings Cross area and Sydney's CBD⁴.

Non-domestic alcohol-related assaults in the Sydney local government area have decreased by 23.5% since the measures were introduced, from 1868 assaults in the 12 months prior to their implementation (year to March 2014) to 1429 assaults (year to March 2019)⁵.

This decrease in violence has had a direct flow on to the health system. In the 12 months following the introduction of the measure in 2014, there was a 24.8% relative rate reduction in alcohol-related serious injury presentations to St Vincent's Hospital, Darlinghurst. Furthermore, in the 2 years following the introduction of the lockout laws and last drinks policy, there was a 60% reduction in serious facial trauma surgeries (most commonly occurring from assault).

¹ Australian Institute of Health and Welfare 2018, Alcohol, tobacco and other drugs in Australia, <https://www.aihw.gov.au/reports-data/behaviours-risk-factors/alcohol/overview>

² Department of Health 2017, National Drug Strategy 2017-2026, <https://beta.health.gov.au/resources/collections/national-drug-strategy>

³ Australian Institute of Health and Welfare 2017, National Drug Household Survey 2016: detailed findings, <https://www.aihw.gov.au/reports/illicit-use-of-drugs/2016-ndshs-detailed/contents/table-of-contents>

⁴ Menéndez, P., Kypri, K., & Weatherburn, D. 2017. The effect of liquor licensing restrictions on assault: a quasi-experimental study in Sydney, Australia. *Addiction*, 112(2), 261-268.

⁵ NSW Bureau of Crime Statistics and Research 2019, <https://www.bocsar.nsw.gov.au/>

This isn't a unique success story for Sydney. Following the implementation of similar measures in Newcastle CBD, the city saw similar improvements in alcohol-related violence, and alcohol-related presentations to ED.

Is the violence moving elsewhere?

Initially, there were fears that alcohol-related violence, and hospital admissions, would be displaced to the areas surrounding Sydney's main entertainment precincts. However, there is no evidence of geographical displacement of assaults to areas proximate or distal to the targeted entertainment areas⁶. Furthermore, there is no evidence that alcohol-related admissions have increased at Royal Prince Alfred Hospital in Camperdown, a major hospital adjacent to the areas with lockout laws and the last drinks policy⁷.

Reduction in healthcare costs

Whilst the true cost savings to the healthcare system associated with the suite of measures introduced in 2014 will be hard to quantify, data from St Vincent's Hospital estimates savings of approximately \$0.5million AUD in hospital and ambulance costs, due to the decreasing number of fractures requiring surgery⁸.

RECOMMENDATION: The NSWMA supports the retention of the measures implemented in 2014, and urges the Committee to recommend the government retains these measures.

IMPACTS ON FRONTLINE HEALTH WORKERS

For emergency service workers such as doctors, nurses, paramedics and police officers – the people on the front-line of dealing with aggressive alcohol-fuelled people – alcohol-fuelled violence is a constant occupational hazard.

In 2010, the NSWMA – together with three other major organisations representing emergency service workers in NSW – launched the 'Last Drinks' campaign. This campaign seeks to tackle the issue of alcohol-fuelled violence head-on, by challenging the 24/7 drinking culture that has permeated modern Australian society.

Nurses working in EDs in NSW are at the frontline dealing with alcohol-related harms; caring for patients experiencing the impact of alcohol-related injuries. Alcohol-related presentations represent a large burden for EDs. In 2017, the Alcohol Harm Emergency Department program (AHED) conducted a

⁶ Menéndez, P. et al 2017.

⁷ Colyer, S 2018 – MJA InSight, Issue 7 – Bottom line: Sydney's "lockout laws" reduce assaults, <https://insightplus.mja.com.au/2018/7/bottom-line-sydneys-lockout-laws-reduce-assaults/>

⁸ Holmes, R. F., Lung, T., Fulde G. & Fraser, C. L. (2018). Fewer orbital fractures treated at St Vincent's Hospital after lockout laws introduced in Sydney. *Medical journal of Australia*, 208(4), 174.

snapshot survey of 118 hospitals across Australia and New Zealand, on 16th December, at 2am. The survey found that 1 in 8 patients (12.5%) were in the ED as a result of harmful alcohol use⁹.

AHED also conducted a survey of more than 2000 ED clinical staff; the findings from this survey are deeply disturbing:

- 98% of respondents had experienced alcohol-related verbal aggression from patients in the last 12 months;
- 92% of respondents had experienced alcohol-related physical violence or threats from patients in the last 12 months;
- Over 94% of respondents said alcohol-related presentations in the ED had a negative or very negative effect on the workload of ED staff;
- 87% of respondents said they had felt unsafe due to the presence of an alcohol-affected patient while working in their ED; and
- 88% of respondents said that the care of other patients was negatively or very negatively affected¹⁰.

These findings reflect the experiences of many of our members working in EDs; many nurses have reported that they are routinely threatened and verbally abused by patients under the influence of alcohol. On some occasions, nurses have been physically assaulted.

Our members have highlighted the complexities of having to manage intoxicated patients in ED, whilst also caring for other patients with complex needs:

“When you have to de-escalate an intoxicated patient it takes away nursing care time from other patients”... “It makes it difficult to care for them”.

“Other patients are affected by the behaviour of an intoxicated patient, when they are abusive and aggressive and you have got an elderly patient with a fractured femur in the next bed, it becomes very difficult”

In areas of NSW where lockout laws and last drinks policy have been implemented (Newcastle and Sydney), nurses have responded positively:

“The severity of aggression has significantly decreased”

⁹ Alcohol Harm in the ED 2017, 2017 Alcohol Harm Snapshot Survey (AHSS), <https://acem.org.au/Content-Sources/Advancing-Emergency-Medicine/Workplace-health-and-safety/Alcohol-harm-in-the-ED>

¹⁰ Alcohol Harm in the ED 2014, 2014 ED clinical staff perception survey, <https://acem.org.au/Content-Sources/Advancing-Emergency-Medicine/Workplace-health-and-safety/Alcohol-harm-in-the-ED>

“The nature and types of injuries have changed, the incidence of facial trauma and head injuries have decreased”

“I have noticed a significant decrease in the amount of alcohol related violence and assault presentations, particularly in the early hours of the morning... people are more likely to just go home or stay in one venue where the alcohol consumption can be monitored and refused service if inappropriately intoxicated”

“The weekends used to be full of intoxicated, violent and/assaulted patients. Now the most prevalent presentation of this type is on public holidays when people start drinking a lot earlier in the day”

Our members are supportive of the suite of measure remaining in place:

“If the laws were relaxed or removed, I believe that the violence and abuse we already face would increase which is unacceptable”

“I would be 100% opposed to relaxing or removing the lock out laws. Prior to the laws coming in I was very much considering leaving emergency nursing. I could no longer imagine working weekend nights... I have seen such an improvement with the laws in place”

We know that the ED can be a chaotic environment, with a range of patients requiring immediate – sometimes complex – care. Nurses working in EDs are already overworked, and under immense pressure. To be verbally and physically abused by intoxicated patients not only makes it harder for them to care for others, and it is simply not acceptable.

RECOMMENDATION: The NSWNMA urges the Committee to recommend the government retain the measures, and considers expanding these measures across NSW.

A VIBRANT NIGHT TIME ECONOMY

This review is to examine if there is ‘the proper balance between community safety and maintaining a vibrant night time economy in Sydney?’. The NSWNMA strongly feels that a vibrant night time economy does not need to be reliant on the increased availability of alcohol. Community safety must be the priority, and efforts to increase the vibrancy of Sydney’s night time economy must not jeopardise the safety of our members, or other frontline service personnel (including doctors, police and paramedics).

A vibrant night time economy is about more than alcohol – it includes fitness and sport options, arts and culture, extended shopping and transport choices, food options, and sport. Focussing on only the drinking options available in a city is restrictive and unhelpful.

It is crucial to recognise that an expansion of the night time economy will require an expansion of key government services to meet increased demand. This will include expansion of transport, police and emergency care services (including paramedics and nurses and Emergency Department staff and bed capacity). The true cost to the community of increased demand for public services must be factored into any economic argument about the expansion of a night time economy. These services are not currently funded to cope with the expansion of a night time economy.

The 2018 report ‘Measuring the Australian Night Time Economy 2016-2017’ provides strong evidence that Sydney’s night time economy is thriving. Since the 2014 measures were implemented, there has been an increase in establishments/venues, and employment and revenue are increasing. Furthermore, the report shows increased growth in drinks, entertainment and food options¹¹.

The alcohol industry will argue that those venues affected in the Sydney CBD are financially disadvantaged by the conditions imposed upon them. The NSWNMA therefore request that the government expand these measures across the State to remove any unfairness and disparity that allegedly may occur through imposing such conditions on targeted hot spots only.

RECOMMENDATION: The NSWNMA recommends the Committee considers innovative and inclusive approaches to ensuring a vibrant night time economy. It is crucial that Sydney’s night time economy is not solely focused around late-night availability of alcohol.

RECOMMENDATION: The NSWNMA urges the Committee to obtain costings of the increased public services such as Transport, Police, Emergency Services, Hospitals and Emergency Department staff and beds that are needed to support an expanding night time economy.

EVIDENCE-BASED APPROACHES TO HARM MINIMISATION

The National Drug and Alcohol Strategy outlines various approaches to harm minimisation in relation to alcohol¹². These include:

- price mechanisms (tax increases)
- building community knowledge and change acceptability of use (social marketing strategies)
- restrictions on promotion (enforcing advertising standards)
- treatment services (family support programs, various treatment services)
- safe transport and sobering up services ¹³

¹¹ License, A., Edwards, A * Bevan T. (2018). Measuring the Australian Night Time Economy 2016-2017. Prepared by Ingenium Research for the Council of Capital City Lord Mayors. Melbourne: Australia.

¹² Department of Health 2017

¹³ Ibid

The NSWNMA believes in the importance of expanding evidence-based harm minimisation initiatives to reduce alcohol-related harms in NSW. It is crucial that the suite of measures implemented in 2014 are supported by various other harm minimisation initiatives. Importantly, educational campaigns that raise awareness of the short-term and long-term harms associated with alcohol are of crucial importance. The drinking culture in Australia needs to shift toward being more inclusive, safe and respectful. Targeted educational campaigns, particularly toward high-risk drinkers, will assist with this.

RECOMMENDATION: The NSWNMA recommends the committee urge the government to increase funding to the full suite of evidence-based harm minimisation initiatives available.

Conclusion

We ask the Committee to take into consideration, and act on, the available evidence; research clearly shows that measures have been effective in reducing alcohol-fuelled violence within Sydney's entertainment, with no negative dislocation to surrounding areas. It is clear that any liberalising of the measures introduced in 2014 will only increase the level of alcohol-related harm in Sydney.

The NSWNMA supports the retention of all current measures, implemented to reduce the risk of alcohol-fuelled violence and anti-social behaviour, in the Kings Cross area and the Sydney CBD. Furthermore the NSWNMA encourages the committee to recommend the expansion of these measures across NSW. These measures have had a substantial and positive effect in reducing the incidence of alcohol-fuelled violence and anti-social behaviour during late night trading periods. This has had a positive flow-on effect to the health system, and to frontline clinicians including nurses. The reduction in alcohol-related presentations to EDs allows more resources to be allocated to a range of other presentations seen in these departments. Further to this, it improves the safety of frontline service personnel, including nurses, through the reduction of alcohol-related presentations that might be abusive and/or violent.

The NSWNMA supports the expansion of a night time economy that is not based on the availability of alcohol. The Committee should require public sector agencies such as Transport For NSW, NSW Health, NSW Police to provide costings to provide services that will be needed to properly service a night time economy with thousands more people in our cities throughout the night.

Lastly, the NSWNMA urges the committee to recommend a range of evidence-based harm minimisation initiatives – that have been shown to decrease alcohol-related harm – are implemented. These include price mechanisms on alcohol, restrictions on promotion of alcohol and health promotion and educational campaigns.



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