21 October 2013

Dear Chief Executive,

LOCAL ALCOHOL ACTION AREAS

The cost of alcohol-related harm is significant. In terms of crime and disorder, the cost is £11bn a year in England and Wales, while the NHS in England spends £3.5bn a year on treating alcohol-related health problems. Alcohol costs the UK economy £7.3bn a year in lost productivity. Excessive alcohol consumption blights communities, clogs up accident and emergency departments, and makes many of our town and city centres no-go areas for decent people on Friday and Saturday nights.

Communities, local agencies and businesses are best placed to identify and deal with alcohol-related problems in their area. Many are already coming up with creative solutions, working with business, local communities and agencies. In “Next Steps Following the Consultation on Delivering the Government’s Alcohol Strategy”, published in July 2013, the Government committed to support local areas with higher levels of alcohol-related harms to deliver change.

Through a Local Alcohol Action Area (LAAA) project, the Government wants to support local areas in tackling the blight caused by excessive alcohol consumption. The project will address three aims: tackling alcohol-related crime and disorder; reducing alcohol-related health harms; and promoting growth by establishing diverse and vibrant night-time economies. We intend to work with local crime and health agencies, the best local partnership schemes and the alcohol industry to galvanise this ambition.

We are seeking 15-20 areas with higher levels of alcohol harm to work with over a 15 month period. Each LAAA will be able to choose whether to focus on one, two or all three of the aims. They will decide their own priorities for local action in line with the three project aims. We do not intend to be
prescriptive about the size of areas that take part in the programme; a LAAA could focus on a single town centre or seek to make a difference across a whole county or city. Each area will have responsibility for its own action plan and for delivering change as part of the programme.

The Home Office and Public Health England will provide advice and support to areas in formulating their action plans and reviewing progress and the Welsh Government has agreed to help support LAAA projects in Wales. We will share our expertise in licensing law and practice and public health improvement. We will also use our influence and that of other partner organisations to remove barriers to data sharing between agencies and assist in overcoming local resistance to change. We will make connections with mentor areas that have effectively and innovatively tackled the same issues that local action areas face, and bring together local areas to share learning and solve joint problems. We are challenging the alcohol industry to support LAAAs, prioritising the roll-out of best practice schemes and galvanizing the support of businesses.

The Home Office Press Office will work with your communications staff to help harness the support of local media to take up the cause to reduce alcohol related disorder on high streets. In addition Home Office Strategic communications will seek to work with five willing areas more intensively on communications to facilitate new or build on existing partnerships with local businesses to reduce problem drinking and the associated harms.

In selecting the LAAAs our main criteria will be that the areas must have higher levels of alcohol-related crime and disorder, alcohol-related health harms or have a night-time economy that offers little beyond drinking alcohol. Beyond that, we will seek to balance the number of projects addressing each of the three aims. Each area should name a senior lead to be accountable for delivery and have responsibility for developing and delivering an action plan. Areas should specify in their expressions of interest the project aims that they wish to address and provide evidence of the issues that make these aims a priority. Details should also be provided of current efforts to tackle these issues. Areas wishing to benefit from communications support should make that clear and a local communications contact should be provided. All expressions of interest must have the support of both the chief executive of the local authority and the area’s police and crime commissioner. All which include the health aim should also have the support of the local clinical commissioning group and of the chief executive officer of the local acute trust.

All expressions of interest should be completed on the enclosed template and returned by 15 November 2013. They should be sent to Andy Parsons of the Drugs and Alcohol Unit, Home Office, 4th Floor Fry Building, 2 Marsham Street, London SW1P 4DF. Expressions can be sent by e-mail to Andrew.parsons1@homeoffice.gsi.gov.uk
I have written in similar terms to Police and Crime Commissioners. If you have any questions about the LAAA project, please contact Andy Parsons on 020 7035 1921, or Stephen Cummins on 020 7035 1836.

The Rt. Hon Theresa May MP