



Re: Official Information Act request – Alcohol Licensing

I refer to your Official Information Act request dated 10 May 2021 to the Ministry of Health (MoH) and partially transferred (Q4 – 8) from MoH to Auckland DHB on 31 May 2021.

I am responding from Auckland District Health Board (ADHB) as the DHB responsible for Auckland Regional Public Health Service (ARPHS).

ARPHS provides public health services to all three metro Auckland District Health Boards Waitematā District Health Board, Counties Manukau Health, Auckland District Health Board and the populations they serve. ARPHS's core role is to protect and promote public health. This response was coordinated by ARPHS on behalf of the three DHBs in the Auckland region.

Please see below responses to questions 4 – 8.

4. What number of following alcohol licence application types for each financial year split by each Public Health Unit were investigated and had a positive outcome:

ARPHS alcohol licencing information system does not breakdown positive outcomes data by new and renewal of licenses, therefore, the total has been combined in the table below.

PHU (Public Health Unit)	Auckland					
	2018 /19		2019/20		2020/21 to 2 June 2021	
Licence type	Investigated	Positive outcome	Investigated	Positive outcome	Investigated	Positive outcome
New off - licences	134		147		156	
Renewal off- licence	316	10	321	12	307	15

PHU (Public Health Unit)	Auckland					
	2018 /19		2019/20		2020/21 to 2 June 2021	
Licence type						
New on-licence	466	26	408	17	356	3
Renewal on-licence	998		879		931	
New club licence	69	0	7	0	95	0
Renewal club licence	110		71		8	
Specials	38 (out of 2073 received)	4	28 (out of 1735 received)	4	48 (out of 1685 received)	0
Total	4167	30	3568	33	3538	18

NB: I am aware that health may need to work with the Council on some of this information - I would expect that this is done routinely as part of annual evaluation and can be completed easily under s 295 of the Sale and Supply of Alcohol Act 2012.

NB: Positive outcome can mean licence refused at a hearing such as a District licensing Committee (DLC), applicant withdrew, and opposition withdrawn after negotiated outcome before or at DLC. Please itemise positive outcome i.e. 2 declines, 1 withdrawn, 3 negotiated outcomes before opposing.

5. As well as the above, by Public Health Unit, how many of each licence type were:

(a) Applied for in high Māori population areas

ARPHS information system does not record applications made in high Māori population areas by each licence type, therefore, we are declining to answer your question under section 18(g) of the Official Information Act 1982 as the information you have requested is not held by ARPHS.

(b) Investigated by health regulatory officers in consultation with Māori under public health's obligation to te Tiriti o Waitangi?

ARPHS started to consult with the Ōtara Māori wardens in September 2017 on new bottle-shop and tavern applications in five areas of interest in South Auckland as identified by the Ōtara Māori wardens. ARPHS information system did not record the consultation with the Ōtara Māori wardens until 2019/2020 financial year, therefore the figures prior to 2019/2020 are based on manual counts recorded via e-mails.

At the request of the Ōtara Māori wardens this consultation stopped in April 2019. ARPHS has been re-engaging on this relationship, which is temporarily on hold as per your advice. ARPHS also consults with Hāpai te Hauora and Te Hā Oranga.

The data available recording consultation with Māori organisations for alcohol applications is as follows:

2017/18: 3

2018/19: 11

2019/20: 4

2020/21 (to date): 60

6. In relation to the Sale and Supply of Alcohol Act 2012, could you provide me with the following since 2013:

(a) Each PHU's 'Duty to Collaborate' s295 (b) collaborative plan of intervention and prevention strategies developed with the tri-agencies and other partners to prevent alcohol-related harm.

ARPHS has not developed plans under s295(b) therefore we are declining to answer your question under section 18(g) of the Official Information Act as the information you have requested is not held by ARPHS.

(b) If there is no plan, please provide activities per PHU that shows collaboration to reduce and prevent alcohol-related harm under Duty to Collaborate under s295 (b).

ARPHS is working to strengthen the Auckland Council's signage bylaw, to replace alcohol sponsorship of sports and is working with the tri-agencies (Auckland Council, Police and ARPHS) to decide our priorities to strengthen the Sale and Supply of Alcohol Act 2012 and its anticipated review in 2022/23.

(c) Please provide each PHU's successful strategies and interventions under s295 (b)

The work in 6b above have not yet reached their conclusion therefore we are declining to answer your question under section 18(g) of the Official Information Act as the information you have requested is not held by ARPHS.

For the avoidance of doubt, for both questions (a) and (b) this does not mean regulatory and alcohol licensing tasks such as meetings to discuss applications and preparation for DLC hearings etc., which would be s295 (a).

Please see the Te Hinnga Hauora guidance of what Duty to Collaborate s295 (b) entails:

<https://www.alcohol.org.nz/management-laws/administering-alcohol-law/guidance-for-regulatory-agencies/collaboration-a-guide-for-regulatory-agencies/part-a-understanding-s295-b>

295 Duty to collaborate

The Police, inspectors, and Medical Officers of Health within each territorial authority's district must-

(a) establish and maintain arrangements with each other to ensure the ongoing monitoring of licences and the enforcement of this Act; and

(b) work together to develop and implement strategies for the reduction of alcohol-related harm.

7. The workforce capacity of alcohol licensing staff per each of the 12 public health units before COVID- 19 (as of December 2020) including vacancies held:

ARPHS COVID-19 response commenced in January 2020 so the data below is as at December 2019

Public Health Unit	Regulatory Officers FTE	Regulatory Officers Head Count (no. of people)	Dedicated legal support FTE	Medical Officer of Health FTE	Administrative support FTE
Auckland	4 FTE	5	0.2 FTE	0.3 FTE	1.6 FTE

8. The workforce capacity of alcohol licensing staff per each of the 12 public health units as of May 2021 including vacancies held:

Public Health Unit	Regulatory Officers FTE	Regulatory Officers Head Count (no. of people)	Dedicated legal support FTE	Medical Officer of Health FTE	Administrative support FTE
Auckland	4.2 FTE	5	0.2 FTE	0.3 FTE	1.8 FTE

You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at www.ombudsman.parliament.nz or freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Auckland DHB website.

Yours faithfully



WILSON
Acting CE

Ailsa Claire, OBE
Chief Executive of Te Toka Tumai (Auckland District Health Board)