

National

Licensing Policy Framework

Our aim is to create a balanced licensing system that supports wider national and regional policies.

The Licensing Taskforce recommended that government "establish a National Licensing Policy Framework to harmonise licensing practices across authorities while preserving local discretion. It would align licensing with broader government goals — economic growth, cultural development and public safety — without requiring primary legislation. Delivered via licensing circulars, it would reduce regulatory burdens, improve consistency, and support fairer decision-making."

What is a National Licensing Policy Framework

The Licensing Act 2003 establishes the legal framework for alcohol, entertainment and late-night refreshment licensing in England and Wales. The statutory guidance offers detailed advice to licensing authorities on interpreting and applying the Act.

The proposed National Licensing Policy Framework (NLPF) would help deliver a balanced licensing system that reflects the original intent of the licensing framework, for example:

- giving business greater freedom and flexibility to meet customers' expectations
- greater choice for customers, including tourists, about where, when and how they spend their leisure time
- encouraging more family-friendly premises where younger children can go with their families
- further development within communities of our rich culture of live music, dancing and theatre
- the regeneration of areas that need the increased investment and employment opportunities that a thriving and safe night-time economy can bring
- the necessary protection of local residents, whose lives can be blighted by disturbance and anti-social behaviour associated with some people visiting licensed premises

In addition, the NLPF will help to harmonise licensing practices across local authorities while preserving local discretion. It would sit alongside the Licensing Act 2003 and the statutory guidance, providing national direction to support consistency, transparency and alignment with broader government goals such as economic growth, enhancing cultural representation, high street resilience and improving public health and wellbeing.

The Government envisages that the overarching objective of any NLPF would be to establish a consistent, transparent, and strategically aligned licensing system that empowers local authorities while supporting national goals for economic growth, cultural development, public safety, and community health and wellbeing.

Do you agree or disagree with the overarching objective of a consistent, transparent licensing system which empowers local authorities while promoting economic growth, cultural development, public safety and community wellbeing?

- Agree
- **Disagree**
- Don't know
- Prefer not to say

Please explain your answer:

The primary purpose of licensing has always been, and should continue to be, protecting the public against harms, not to act on behalf of businesses. The proposed reform explicitly seeks to change this.

The process by which the call for evidence was established has been heavily biased towards the alcohol industry and furthering their agenda, including the establishment of a Licensing Policy Taskforceⁱ which lacked public health representation and centred industry actors. Disproportionate emphasis has been placed on economic growth, with any reference to health being an afterthought and one which focuses vaguely on a thriving community, rather than a commitment to and prioritisation of public health.

An unhealthy population is detrimental to sustainable growth. Alcohol harm currently costs society in England £27.44 billion each year and is the third leading risk factor for poor health.ⁱⁱ Quick savings that are made at the expense of people's health and wellbeing will not only be harmful for individuals and their families, but also to the economy through lost productivity and increased demand on our health and social care services. The Office for Budget Responsibility and the Department for Work and Pensions have identified poor health as a key fiscal and labour market risk, threatening UK productivity.ⁱⁱⁱ The Government must prioritise public health if it seeks to enable growth.

There is a fundamental conflict between the health harming industries' (HHIs) aim to drive sales and profits and the public health imperative of reducing consumption of their products to protect population health. Recognising this, HHIs seek to shape legislation and regulatory processes in ways that favour their profits but undermine public health. To drive change within this complex system, it is essential for action to support two key shifts: 1) prioritising public health and wellbeing objectives over privatised profit, introducing public health as a fifth licensing objective and as a key objective of the licensing framework, ahead of the proposed economic goals; and 2) de-normalising the perception of unhealthy commodity industry actors or representatives as legitimate stakeholders in policy formulation, including in formal working groups or taskforces directly reporting their recommendations to government.^{iv}

It is well established that diverse commercial actors seek to influence science in order to obscure the harmful effects of their products and practices and create confusion about the interventions and policies needed to address them. Such efforts aim to prevent, dilute or delay regulation, by playing down the scale of the harms and thus the need for government action, emphasising individual responsibility for harms, and promoting ineffective policy alternatives such as self-regulation.^{v, vi, vii, viii} Case study evidence relating to the pharmaceutical industry,^{ix, x} alcohol industry,^{xi} tobacco industry,^{xii} fossil fuel industry, chemical and manufacturing industry^{xiii} and food industry,^{xiv, xv, xvi} among others, documents detrimental impacts on public health research and policy progress.^{xvii, xviii}

The Taskforce proposals will make it more difficult for local licensing authorities to curtail the sale of alcohol in shops and online, and for local communities and stakeholders to raise objections. It will make it much harder for local authorities to place conditions on licences that regulate how alcohol is sold and prevent irresponsible promotions. It will also undermine the ability of local authorities to controls late-night sales in both shops and bars.

Do you agree or disagree that promoting economic growth should be a statutory licensing objective alongside the existing public safety objectives?

A statutory objective is one that is defined in law and that licensing authorities are required to consider.

- Agree
- **Disagree**
- Don't know
- Prefer not to say

Do you think that the licensing regime should treat on-trade and off-trade premises differently in any respects in order to allow the differing challenges and opportunities they pose to be addressed?

- **Yes**
- No
- Don't know
- Prefer not to say

Please explain your answer:

Licensing regulation for both on-trade and off-trade are important, as alcohol is the biggest risk factor for death, ill-health and disability among 15-49 year olds in the UK, and the fifth biggest risk factor across all ages.^{xix} Both require robust regulation which is free from industry influence to ensure that public health remains the primary focus.

The Licensing Act 2003 currently applies to both on-trade and off-trade premises, without distinguishing between the two. The existing legislation does not provide a framework for separation, and the Taskforce's proposals do not explain how such a split could be implemented without comprehensive legislative reform. Nonetheless, we support the UK Government in creating a distinct licensing regime specifically for off-sales premises.

It is worth noting that off-sales significantly outnumber on-sales. British Beer & Pub Association (BBPA) figures estimate that three times as much alcohol is now bought from off-licensed premises as from pubs and other on-licensed premises. This is thought to be due to the increased affordability of alcoholic beverages from off-licence vendors, relative to the cost of purchasing drinks in pubs and bars.^{xx} A higher outlet density is also associated with higher rates of alcohol-related harm.^{xxi} As such, price is a key driver of harm and particular attention needs to be given to public health when regulating off-trade alcohol sales.

What priority themes should be included in a National Licensing Policy Framework?

- Public safety and Crime Prevention
- Economic Growth and Reducing Business Burdens
- Culture & Community Cohesion
- **Community Health and Wellbeing**
- Supporting Growth, Highstreets and Night-Time Economies
- **Others**

List any other themes for inclusion:

- **Public health**

How could the government assess whether national guidance is working effectively?

Please suggest ways we could measure if national guidance is making a positive difference.

- Growth in the size of the sector and number of businesses
- Lower rates of crime and ASB
- **Lower rates of alcohol-related harm**
- Fewer people appeal decisions
- Other (please tell us below)

Comment:

The introduction of public health as a fifth licensing objective would embed public health as a key consideration in national guidance. This would in turn allow alcohol-related harm data to be used as evidence in licensing applications, promoting the health and wellbeing of communities. A reduction in the rates of alcohol-related harm would signify that the guidance is promoting public safety and community wellbeing, despite an increased focus on economic growth. ^{xxii}

Impacts – crime, public health, local authorities, equality

57. In your view what impact will the proposals for reform included in this Call for Evidence have on public health?

- Very positive
- Positive
- None
- Negative
- **Very negative**
- Don't know
- Prefer not to say

Which, if any, of the reforms described in this Call for Evidence, in your view, pose public health concerns.

- **National Licensing Policy Framework**
- Licensing Condition Amnesty
- Remove Newspaper Advertising Requirement
- Outdoor Trading and Pavement Licences
- Increase TENs Entitlement
- Sunset Clause on Blanket Hours
- Arbitration, Evidence and Data Protocol
- Festivals and Events Licensing
- Agent of Change Principle
- None
- Don't know
- Prefer not to say

Why do you think this?

The core purpose of licensing is to create guardrails for public protection – not to promote business or investment. However, the Taskforce and proposed licensing reforms seek to fundamentally change the historical function of licensing, and to do so without the scrutiny of full legislative reform.

The effects of alcohol harm are far reaching across society, from additional costs to healthcare services, strong associations with violence and crime and negative impacts on the workforce.^{xxiii} The annual cost of alcohol-related crime and disorder in England alone is already estimated at £14.58 billion.^{xxiv} Alcohol is thought to be a factor in up to 40% of emergency department attendances, rising to as high as 70% in peak hours.^{xxv} Robust studies have estimated that 10-16% of all ambulance call-outs are caused by alcohol.^{xxvi} ^{xxvii} Alcohol poses a significant threat to the UK's economic performance, driven not only by its contribution to the onset of chronic illness and workforce withdrawal but also by its impact on workforce productivity. Analysis by the Institute of Alcohol Studies estimates that alcohol consumption costs the economy £5.06 billion a year – with 44% of the cost being due to presenteeism, where people are at work but their capacity is reduced.^{xxviii}



Public health and community wellbeing should be a key consideration when reforming the licensing system, not the profit and interests of the alcohol industry.

The Taskforce proposals will make it more difficult for local licensing authorities to curtail the sale of alcohol in shops and online, and for local communities and stakeholders to raise objections. It will make it much harder for local authorities to place conditions on licences that regulate how alcohol is sold and prevent irresponsible promotions. It will undermine the ability of local authorities to controls late-night sales in both shops and bars.

In reforming the licensing system to promote economic benefits, what measures can be taken to promote public health?

According to the Global Burden of Disease study, alcohol use among 15 to 49 year olds in England is the 2nd biggest risk factor for death and years lived with disability. Alcohol is a causal factor in more than 60 medical conditions, including cirrhosis of the liver, at least seven types of cancer and depression.^{xxxix} The effects of alcohol harm are far reaching across society, from additional costs to healthcare services, strong associations with violence and crime and negative impacts on the workforce.^{xxx} Alcohol harm costs England £27.4 billion a year – a 40% increase since it was last calculated in 2003.^{xxxi}

There is also significant evidence from the UK and globally that the alcohol industry, just like big tobacco, exerts considerable resources to shape policy debates in ways amenable to their profits but in direct conflict with the aims of healthy populations and communities.^{xxxii} As such, it is vital that the government takes measures not to embed their interests in the licencing framework and to regulate their ability to shape both policy processes and outcomes.

There is clear evidence for the health harms caused to communities by alcohol. The Licensing System should be reformed from a permissive scheme to one which promotes public health, and local authorities need greater powers to tackle alcohol-related harm.

Public health should be introduced as a fifth licensing objective. Whilst Directors of Public Health (DsPH) are recognised as responsible authorities in the Licensing Act 2003 and can make representations to oppose licensing applications, there is currently no statutory objective relating to public health. This makes it difficult for DsPH to promote and protect the health of their communities, as they must rely on alternative evidence and data to make a representation. The introduction of public health as a licensing objective in Scotland has led to increased engagement and participation in the licensing process, and increased use of health evidence in licensing policy development.^{xxxiii}

It has previously been argued that health as a licensing objective (HALO) could not be introduced as it would therefore require the Licensing Act to be revised. Under the current proposals, the Licensing Act will be amended, providing an opportunity for HALO to be added.

The affordability, accessibility and availability of alcohol need to be reduced. Reduced accessibility can be achieved through granting local authorities' greater powers to reduce hours of sale and reduce density of retail outlets. Affordability of alcohol can be addressed through fiscal measures such as a minimum unit price, increased alcohol duty and regular reviews of prices in relation to inflation and income. There is evidence that measures to address affordability are "the most effective, and cost-effective, approaches to prevention and health improvements".^{xxx}

Does this call for evidence raise any equalities concerns such as disproportionate impacts on particular demographic groups?

- Yes
- No
- Don't know
- Prefer not to say

Why do you think this?

Alcohol harm cuts across society but the worst impacts are experienced by the poorest. This is true for both health harm and crime.

Alcohol has been implicated as both a determinant and an outcome of socioeconomic inequality. Those in the most socioeconomically deprived decile have 2.23 times the rate of alcohol specific mortality and 1.53 times the rate of alcohol-related mortality compared to the least deprived decile^{xxxiv} despite similar or lower average alcohol consumption among lower socioeconomic groups. This is referred to as the 'alcohol harm paradox'. This phenomenon is thought to be due to different patterns of consumption, the relationship between alcohol with other factors influencing health, different access to healthcare and treatment and inequalities in the social determinants of health.^{xxxv}

Deprived neighbourhoods have both a disproportionately high outlet density and prevalence of alcohol advertising, compared to more affluent neighbourhoods.^{xxxvi} Both of which have been shown to cause children to start drinking alcohol at a younger age or drinking more than they usually would.^{xxxvii}

Children living in the most deprived areas of Scotland were almost five times more likely to be exposed to off-sale alcohol outlets than children in the least deprived areas, and almost three times more likely to be exposed to on-sale alcohol outlets. Children in deprived areas were also found to experience 31% of their exposure to off-sales outlets within 500 m of their homes compared to 7% for children from less deprived areas. Similarly, children from less deprived areas received a lower proportion of their exposure to off-sale outlets within 500m of their school than children living in more deprived areas.^{xxxviii}

In Scotland, neighbourhoods with the most alcohol outlets had double the alcohol-related death rate than neighbourhoods with the least.^{xxxix} Furthermore, health-harming product outlets, such as alcohol, fast-food, tobacco and gambling, have been shown to cluster their location together, with poorer areas facing the greatest clustering of these outlets.^{xl}

This highlights the need for a licensing system which restricts the availability, affordability and accessibility of alcohol and regulates the targeting of vulnerable populations. The proposed legislation changes could allow the proliferation of alcohol premises in areas which already suffer significant harm, further exacerbating inequalities.

Existing policies to tackle heavy drinking and lessen inequalities in alcohol-related harms have been shown to be effective. An evaluation of the minimum unit pricing (MUP) policy introduced in Scotland found strong evidence that MUP reduced deaths directly cause by alcohol consumption by 13.4%^{xli} and was shown to reduce inequalities.^{xlii} The Government should therefore be focusing on reforming the

current system in such a way that it will lessen existing inequalities in alcohol-related harm outcomes, rather than the proposed changes which will further harm the most vulnerable communities.

The most effective population level measures which address inequalities, such as MUP, are consistently opposed by industry, often citing arguments around economic growth. An evaluation of the Scottish MUP policy found no significant economic impact on the performance of the alcoholic drinks industry in Scotland.^{xliii} It is therefore important that public health is introduced as a clear objective of licensing, and industry actors are removed from decision-making processes to prevent misleading arguments being presented to dilute regulation.

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