# **Blackpool Council Licensing Service**

# Representation made by a Responsible Authority to an application for the grant / variation of a Premises Licence / Club Premises Certificate

Responsible Authority								
Name of Responsible Authority		Public Health, Blackpool Council						
Name of Officer (please print)		C. Dobson & R. Swindells						
Signature of Officer		C. Dobson						
Contact telephone number		07990084572						
Date representation made		15	04	2015				
Do you consider mediation to be a		appropria	te			NO		
Premises Details								
Premises Name	113-117,							
Address	Egerton Road,							
	Blackpool							
Post Code	FY1 2NL							
Peasons for making representations								

The Public Health Department, Blackpool Council, write in reference to the new Premises Licence application for 113-117 Egerton Road, Blackpool.

The applicant brings this application in full knowledge that it is in the Claremont Ward which has been subject to a Cumulative Impact Policy (CIP) since 2009.

As stated in Blackpool Council's Statement of Licensing Policy –

The number, type and density of premises selling alcohol in a particular area can lead to serious problems of nuisance or disorder. In these circumstances the impact of the premises taken as a whole can be far greater than that arising from individual premises. In most cases it would be impossible to identify individual premises as being the sole cause or major contributing factor.

Following review of this application, Public Health, Blackpool Council, make a formal

# objection.

Public Health has concerns that this new premises is situated next door to a shop which already holds an alcohol licence and there are also a number of premises that sell alcohol within the surrounding area. In total Claremont ward has approx. 23 other premises where off sale alcohol can be purchased and there are also a high number establishments where alcohol can be consumed on the premises within the ward.

# **Background Claremont ward information**

# Deprivation -

Blackpool experiences considerable levels of disadvantage, and in 2010 ranked as the 6th most deprived of 354 local authorities in England (Blackpool Drug and Alcohol Needs Assessment, 2014).

This premise is within Claremont. Specific areas in the central wards, including Claremont Ward, have the highest ranked levels of deprivation in Blackpool (About Blackpool: Short Profile Summary, 2013)

There is a statistical correlation between Blackpool's areas of deprivation and hotspots for violent crime, domestic abuse, and criminal damage, all associated with alcohol abuse to some degree. (JSNA Blackpool, Social and Community Environment in Blackpool, Core Document, Chapter 4, page 100, October 2012).

# Domestic Violence -

Alcohol is associated with an increased risk of domestic violence. In the UK, 1 in 4 women and 1 in 7 men have experienced domestic abuse. The Blackpool Domestic Abuse Service estimates that alcohol was a contributing factor in 76% of incidents in 2011 (Blackpool Drug and Alcohol Needs Assessment, 2014).

Information from the Blackpool Drug and Alcohol Needs Assessment (2014), reports Claremont Ward has the second highest number of calls to the police for Domestic Abuse in Blackpool and across Lancashire.

# **Blackpool Drug and Alcohol Needs Assessment (2014)** Page 61 of 84, Table 5: Calls to police per 1000 households from May 2013 to Apr 2014.

Area	Rate of calls per 1000 households			
Wards with Highest rates	Bloomfield 112			
	Claremont 109.1			
Wards with lowest rates	Squires Gate 19.3			
	Norbreck 17.9			
Blackpool District Average	46			
Lancashire County Average	24.3			

(Source: Safer Lancashire)

# Health related information -

Further evidence relates to paragraph 13.23 of the Section 182, Evidence of Cumulative Impact, a list of categories of information are suggested as good evidence to support a CIP, the 3<sup>rd</sup> on the list states –

'Health-related statistics such as alcohol related emergency attendances and hospital admissions'.

Recent health statistics show Claremont has significantly higher numbers of hospital stays for alcohol related harm (SAR) that the National average (England). (Public Health England, 2014 – Local Health Profile).

Public Health would ask the Licensing Committee to consider the potential risks associated with the increase in the availability of alcohol within this Saturation Area in their deliberations as to whether to grant this application.

For New / Variation Applications only.

It is recommended that the licence should only be granted if the application is amended, or if conditions are applied, as detailed below.

N/A

# **Local Health**





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ndicators	Selecti	value	Englan	England	Engla
	value	Englan	worst	range	be
Obese Children (Year 6) (%)	20.6	19.1	36.0	0	
Children with excess weight (Year 6) (%)	34.8	33.5	54.1	C III	10
Children's and young people's admissions for injury ((	1,86	1,180.9	2,647.8	•	412
Obese adults (%)	27.1	24.1	34.8	0	
Binge drinking adults (%)	29.1	20.0	56.4	0	
Healthy eating adults (%)	19.5	28.7	12.3		5-
Emergency hospital admissions for all causes (SAR)	184.4	100.0	224.9	•	2
Emergency hospital admissions for CHD (SAR)	144.1	100.0	425.3	•	2
Emergency hospital admissions for stroke (SAR)	122.0	100.0	257.7	0	2
Emergency hospital admissions for Myocardial Infarcti	92.6	100.0	324.3	<u> </u>	2
Emergency hospital admissions for Chronic Obstructiv	228.2	100.0	660.1	•	1
ncidence of all cancer (SIR)	113.8	100.0	146.6	0	4
ncidence of breast cancer (SIR)	110.1	100.0	180.1	0	4
ncidence of colorectal cancer (SIR)	102.0	100.0	200.1	o o	3
ncidence of lung cancer (SIR)	161.0	100.0	302.0	•	2
ncidence of prostate cancer (SIR)	74.0	100.0	216.8	0	2
Hospital stays for self harm (SAR)	386.9	100.0	464.3	•	1
Hospital stays for alcohol related harm (SAR)	234.7	100.0	296.2		3
emergency hospital admissions for hip fracture in 65+	99.3	100.0	218.2	<b>o</b>	3
Elective hospital admissions for hip replacement (SAF	82.1	100.0	218.4	<u> </u>	1
Elective hospital admissions for knee replacement (SA	99.5	100.0	215.3	o o	2
ife expectancy at birth for males (years)	69.1	78.9	67.1	•	9
ife expectancy at birth for females (years)	76.9	82.8	73.9	•	9
Deaths from all causes, all ages (SMR)	170.4	100.0	279.2	•	1
Deaths from all causes, under 65 years (SMR)	308.1	100.0	320.9	•	
Deaths from all causes, under 75 years (SMR)	255.2	100.0	286.1	•	
Deaths from all cancer, all ages (SMR)	131.3	100.0	234.6	•	
Deaths from all cancer, under 75 years (SMR)	144.2	100.0	274.5	•	
Deaths from circulatory disease, all ages (SMR)	173.3	100.0	279.2	•	
Deaths from circulatory disease, under 75 years (SMR	284.7	100.0	319.1	•	
Deaths from coronary heart disease, all ages (SMR)	187.7	100.0	596.2	•	
Deaths from coronary heart disease, under 75 years (\$	308.2	100.0	569.8	•	
Deaths from stroke, all ages (SMR)	172.7	100.0	711.9	•	
Deaths from respiratory diseases, all ages (SMR)	190.1	100.0	373.2	•	

# **Blackpool - Key Statistics**

#### Location

Blackpool is a large seaside town located in Lancashire County in North West England. Blackpool covers an area of 13.46 square miles within the urban area stretching along the Fylde Coast, and is one of the most densely populated authorities in the UK.

### **Demographics**

The population of Blackpool<sup>1</sup> is estimated at 142,080, with a larger proportion of residents aged 60+ compared to national age structure. Residents are mostly of White ethnicity, with Black and Minority Ethnic groups estimated to make up just 3% of the population approximately 4000 people, compared with the estimated proportion for England of 15%.

**Table 1: Population Demographics** 

•	• .	
Age <sup>2</sup>	Blackpool	England
Aged 0-18 years	22%	23%
Aged 19-24 years	7%	8%
Aged 25-59 years	45%	47%
Aged 60+	26%	22%
Ethnicity <sup>3</sup>		
White	97%	85%
Mixed/multiple ethnic groups	1%	2%
Asian/Asian British	2%	8%
Black/African/Caribbean/Black British	0.2%	4%
Other ethnic group	0.2%	1%
Tenure⁴		
Owner Occupied	67%	71%
Social Rented	11%	18%
Private Rented	22%	11%

Sources: See endnotes

### Housing

Blackpool has a similar proportion of Owner-Occupiers compared to national (England) levels, but almost double the proportion of Private Rented accommodation (26.1% vs 16.8%). This is driven largely by changes in the seaside economies with many former guest houses converting to flats, and fluctuations in seasonal work creating demand for temporary accommodation in resort areas. Blackpool has a significant proportion of Houses in Multiple Occupancy (HMOs) in central wards close to the promenade and a monitoring project by Blackpool Council identified up to 37% of private sector rented properties in resort areas could be classified as a HMO<sup>5</sup>.

### **Poverty and Deprivation**

Blackpool has a large proportion of residents living in deprived areas and is currently ranked the 6th most deprived authority in England under the Indices of Deprivation 2010 – a higher rank than in 2007 (12<sup>th</sup>) and 2004 (24<sup>th</sup>) Additionally, in the 2010 Indices, Blackpool ranked 1st for the concentration of deprivation.

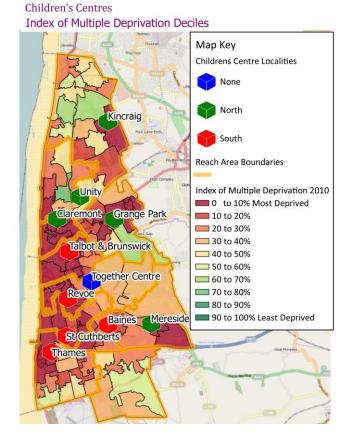
Map 1 below shows the relative positions of local areas in Blackpool. Around half of Blackpool's 94 Lower Super Output Areas (LSOA's)<sup>1</sup>, are in the most deprived 20% of all LSOAs in England. Specific areas in the central wards of Talbot, Bloomfield, Brunswick, Claremont and the outer wards of Clifton and Park have the highest ranked levels of deprivation in Blackpool.

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<sup>&</sup>lt;sup>1</sup> An LSOA is a small area of approximately 1500 residents

Poverty is also a significant factor in Blackpool. In 2010, 30% of children in Blackpool were estimated to be in poverty, compared to 20.6% of all children in England. Further analysis highlighted that the majority of children in poverty live in lone parent families<sup>6</sup>.

There are strong relationships between deprivation and a range of social issues and as a continued effort to address inequalities, Blackpool has launched a Fairness Commission. The Commission is made up of a range of local people representing different organisations which will explore social and other inequalities in depth and make recommendations for further improvements. 2012 also saw the introduction of a Child Poverty Framework aimed at reducing the levels of children in low income families and providing support for families currently in financial difficulty.



# **Employment and Benefits**

In terms of workforce, Blackpool has a low employment rate at 68.1% compared to a national (GB) rate of 70.3%. There are a high proportion of benefit claimants with out-of-work benefits, including Employment Support Allowance (ESA) and Job Seekers Allowance (JSA) at almost twice the national (GB) level - currently 23%, compared to 12.5% (GB)<sup>7</sup>. This approximates to about 20,000 individuals claiming an out-of-work benefit, the majority (10,930) of which claim ESA. Table 2 below shows the distribution of claims in Feb 2012.

Table 2: Distribution of benefits claims in Blackpool by Statistical Group

	Number	Blackpool	<b>Great Britain</b>
Total claimants	23,940	26.9	15.0
Key out-of-work benefits†	20,050	23.0	12.5
By statistical group			
Job seekers	6,340	7.3	4.1
ESA and incapacity benefits	10,930	12.5	6.5
Lone parents	2,010	2.3	1.5
Carers	1,780	2.0	1.2
Others on income related benefits	760	0.9	0.4
Disabled	1,460	1.7	1.1
Bereaved	200	0.2	0.2

**Source: DWP February 2012** 

For residents in employment, the median wage for full time employees in Blackpool is around £293.00, which is £117 per week less than the national median<sup>8</sup>. An estimated 17.8% of the working age population in Blackpool having no formal qualifications.<sup>9</sup>

### **Education and Children's Outcomes**

For young people in Blackpool, there are a range of challenges across both educational attainment and life chance indicators. The range of issues is partly driven by the existing high levels of poverty and social disadvantage in Blackpool, both of which have generational impacts whereby parents' difficulties create problems in the family and influence children's outcomes. The rate of Looked after Children in Blackpool is the highest in England at a rate of 150 per 10,000 children; this is over twice the rate for England as a whole at 59 per 10,000.

In terms of academic achievement, the proportion of children attaining the expected level at Key Stage 2 is similar to national levels at 80-85% attainment dependent on subject. There are strong differences between the highest and lowest performing areas however with evidence for the North West region suggesting the proportion attaining level 4 in the 10% most deprived areas is 18 percentage points lower than those in the least deprived 10%..

Blackpool pupils perform similarly to national levels at GCSE level with an equal proportion achieving 5 or more A\* to C grade GCSEs (82%). When Maths and English are included however a significant gap appears – 48% of Blackpool pupils achieve 5+ A\*-C (incl. Maths & English) compared to 59% nationally<sup>11</sup>.

In addition, approximately 10% of Blackpool's young people are not in education, employment or training compared to 8% for the sub-region <sup>12</sup>.

### **Health and Lifestyles**

Blackpool has poor life expectancy, with life expectancy for males the poorest in England at 73.6 years compared to 78.5 years. Life expectancy for females is similarly poor, at 79.4 years, compared to 82.5 years for England -the 3<sup>rd</sup> poorest after Manchester and Liverpool<sup>13</sup>. The biggest contributors for both men and women are circulatory diseases, digestive disease including cirrhosis, and respiratory disease. These three areas contribute over half of the overall life expectancy gap in Blackpool. Lung Cancer is also a significant contributor to Female Life Expectancy<sup>14</sup>.

Substance and Alcohol misuse is considered high, with alcohol-related death the highest in England<sup>15</sup> (cirrhosis being one of the major drivers of the life expectancy gap). Further estimates suggest that the prevalence of problematic heroin and/or crack cocaine use in Blackpool was 27.49 per 1,000 populations<sup>16</sup>. Blackpool has the highest drug prevalence rate across the region, and is within the top ten nationally.

While not directly a health damaging issue, teenage Pregnancy rates in under-18s are the 6<sup>th</sup> highest in England & Wales. In addition, Blackpool has a very low proportion of teenage pregnancies leading to abortion (36%) compared to England & Wales (49%). This implies a greater relative proportion of teenagers go on to become parents<sup>17</sup> and may require further local authority support. Teenage conceptions have associated risks for both parent and child's health and social wellbeing.

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<sup>&</sup>lt;sup>1</sup> ONS Mid Year Population estimates 2011

<sup>&</sup>lt;sup>2</sup> ONS Mid-Year Population Estimates Analysis Tool, 2011

<sup>&</sup>lt;sup>3</sup> ONS Census 2011 Ethnicity, 2011

<sup>&</sup>lt;sup>4</sup> ONS Census 2011 Tenure, 2011

<sup>&</sup>lt;sup>5</sup> Blackpool Council - MIPS Summary Report - 2011

<sup>&</sup>lt;sup>6</sup> HMRC Child Poverty Statistics, 2010

<sup>&</sup>lt;sup>7</sup> DWP WPLS, February 2012

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 $<sup>^{\</sup>rm 8}$  ONS Annual Survey of Hours and Earnings 2011.

<sup>&</sup>lt;sup>9</sup> ONS Labour Force Survey, 2011 – Estimates for Jan-Dec 2011.

<sup>&</sup>lt;sup>10</sup> DfE: Children Looked After by Local Authorities in England,2012

<sup>&</sup>lt;sup>11</sup> DfE: Local Area Data Tables, 2012

<sup>&</sup>lt;sup>12</sup> CCIS Database, September 2011, (12 month averages of 2010 data)

<sup>&</sup>lt;sup>13</sup> ONS Life Expectancy, 2008-10

<sup>&</sup>lt;sup>14</sup> London Health Observatory – Spearhead Life Expectancy Tools - 2009

<sup>&</sup>lt;sup>15</sup> NWPHO Local Alcohol Profiles 2011

<sup>&</sup>lt;sup>16</sup> Glasgow University 2006/07

<sup>&</sup>lt;sup>17</sup> DfE: Teenage Pregnancy Statistics, 2008- 2010