



NSW
NURSES &
MIDWIVES'
ASSOCIATION

NEW SOUTH WALES NURSES AND MIDWIVES' ASSOCIATION

In association with the Australian Nursing and Midwifery Federation

ABN 63 398 164 405

IN REPLY PLEASE QUOTE:

BH:MH

Ref:

31 March 2016

Hon. Ian Callinan AC
Liquor Law Review
GPO Box 7060
Sydney NSW 2001
liquorlawreview@justice.nsw.gov.au

Dear Mr Callinan,

Support for the Retention of Measures to Reduce Alcohol Related Violence in Sydney

The NSW Nurses and Midwives' Association (NSWNMA) thanks you for the opportunity to provide a submission to the Independent Review of the Impact of Liquor Law Reforms in New South Wales (NSW).

The NSWNMA is the industrial and professional body that represents over 62,000 nurses and midwives in New South Wales, and works in association with the Australian Nursing and Midwifery Federation (ANMF). The membership of the NSWNMA comprises all those who perform nursing work, assistants in nursing, who are unregulated, enrolled nurses, registered nurses and registered midwives at all levels including management and education.

The NSWNMA strongly support the introduction of the regulations for liquor sales and licensing by the government in February 2014 to reduce alcohol-fuelled violence in Sydney.

We commend the government for having the courage to introduce these measures in the face of strong opposition from the alcohol industry. These measures have without question, reduced the incidence of alcohol-fuelled violence occurring in the Kings Cross and Sydney CBD areas. We ask that the government remain firm and not be swayed by political pressure from the alcohol industry into reducing the effectiveness of these current measures now in place.

It is our view that the outcome from this trial has been extremely effective in reducing alcohol-fuelled violence across Sydney. The NSWNMA request that the government consider expanding these measures across the State.

The arguments put forward by the alcohol industry against keeping these new regulations in place are very similar to the tobacco industry's arguments against stiffer legislation on the sale of cigarettes when first introduced a few years ago.



The alcohol industry must be held accountable for the harm caused from the late night sale of alcohol in the Sydney CBD. The Government must intervene to stop the alcohol industry shifting the burden of cost to the tax payer through health related costs incurred by individuals and the community from alcohol related harm.

The Alcohol Harm Emergency Department program (AHED) conducted two snapshot surveys of 107 hospitals in Australia and New Zealand on 14th December 2013 and 6th December 2014, both at 2am.

The survey found that 14% and 12%, of patients, respectively, were in the emergency department because of alcohol (The Medical Journal of Australia published the findings from this survey on 17 November 2015).

An Emergency Department (ED) clinical staff online survey conducted by AHED over a five week period from 30th May to 7th July 2014, received 2002 responses. The data is available on the Australian College for Emergency Medicine Digital Media Site. (<https://vimeo.com/acemonline>)

The findings from the 2002 responses received found that:

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

(<http://lastdrinks.org.au/research-alcohol-harm-in-emergency-departments-ahed-program/>)

The NSWNMA joined forces with other emergency services organisations in launching the 'Last Drinks' campaign 30th March 2010, to introduce alcohol trading restrictions state-wide, similar to those already in place in Newcastle, in an effort to help prevent emergency service workers becoming the victims of alcohol-related abuse.

Nurses working in EDs have reported that they are routinely threatened and verbally abused by patients under the influence of alcohol and on some occasions, even physically assaulted.

Nurses are already overworked in busy EDs and to be verbally and physically abused by patients under the influence of alcohol is not acceptable.

Our members have stated that since the introduction of the regulations, "the severity of aggression has significantly decreased" along with "a notable decrease" in the number alcohol related admissions in EDs.

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

"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 become very difficult"

The initial fears alcohol related crime would be displaced has not occurred. This is consistent with the findings from the Newcastle legislative changes in 2008, where there was a 37% reduction in assaults from and also a 26% decrease in related Emergency Department admissions.

The Queensland Government has also recognised the need to introduce effective measures to reduce alcohol related violence. They recently passed the 'Tackling Alcohol-Fuelled Violence Legislation Amendment Act 2016' (March 2016) with more legislation changes taking effect in July 2016.

We ask the Government to act on the available scientific research that clearly demonstrates assaults have been reduced by 40% over the trial period in the Sydney CBD, with dramatic drops in violence in the Kings Cross, Oxford Street, George Street and the Rocks.

The NSWNMA strongly encourages you to recommend to the NSW Government that the current liquor sales and licensing regulations continue.

Please do not hesitate to contact Marc Hopkins via email [REDACTED] or [REDACTED] if you require any further information or assistance.

Yours sincerely



BRETT HOLMES
General Secretary