

## Submission to the Victorian Office of Liquor, Gaming & Racing (OLGR) December 2016

### Review of the Liquor Control Reform Act 1998

The Australasian College for Emergency Medicine (ACEM) welcomes the opportunity to provide feedback on the *Review of the Liquor Control Reform Act 1998* being conducted by the Victorian Office of Liquor, Gaming & Racing.

ACEM is a not-for-profit organisation responsible for the training and ongoing education of emergency physicians, and for the advancement of professional standards in emergency medicine, in Australia and New Zealand. As the peak professional organisation for emergency medicine in Australasia, ACEM has a vital interest in ensuring the highest standards of emergency medical care are maintained for all patients across Australasia.

Alcohol harm is one of the largest preventable public health issues facing our emergency departments (EDs). Alcohol has never been cheaper, more heavily promoted or more readily available. EDs deal with high volumes of alcohol-related presentations<sup>1</sup> and this has a detrimental effect on clinical staff, other patients and the functioning of the ED<sup>2</sup>. This situation is increasingly unsustainable, given that emergency department presentations have increased by 3.4% on average each year in the last five years<sup>3</sup>. By comparison, Australia's population grew by 1.4% in the last year<sup>4</sup>.

As a member of the Victorian Alcohol Policy Coalition (APC), ACEM endorses the submission made on behalf of APC members. ACEM's submission focuses on alcohol harm from an emergency medicine perspective.

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<sup>1</sup> Egerton-Warburton D, Gosbell A, Wadsworth A, et al. Survey of alcohol-related presentations to Australasian emergency departments. *Med J Aust* 2014; 201: 584-587. Available at <https://www.mja.com.au/journal/2014/201/10/survey-alcohol-related-presentations-australasian-emergency-departments>.

Egerton-Warburton D, Gosbell A, Wadsworth A, et al. Survey confirms alcohol-related presentations to Australasian emergency departments are under-reported [abstract]. 31st Annual Scientific Meeting of the Australasian College for Emergency Medicine, 7–11 December 2014, Melbourne, Australia. *Emerg Med Australas* 2015; 27 (Suppl 1): 6.

Egerton-Warburton D, Gosbell A, Wadsworth A, et al. 24/7, Seven-days A Week Study Confirms Alcohol-related Presentations Represent A Significant Burden To Australasian Emergency Departments. 2016. Unpublished manuscript.

<sup>2</sup> Egerton-Warburton D, Gosbell A, Wadsworth A, et al. Perceptions of Australasian emergency department staff of the impact of alcohol-related presentations. *Med J Aust* 2016; 204 (4): 155. Available at: <https://www.mja.com.au/journal/2016/204/4/perceptions-australasian-emergency-department-staff-impact-alcohol-related>

<sup>3</sup> AIHW 2016. Emergency department care 2015–16: Australian hospital statistics. Health services series no. 72. Cat. no. HSE 182. Canberra: AIHW.

<sup>4</sup> Bureau of Statistics: Retrieved 8/12/16 from: <http://www.abs.gov.au/ausstats/abs@.nsf/mf/3101.0>.

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## Alcohol harm in EDs research

There is no routine collection of alcohol-related presentation data to Australian EDs. Official datasets significantly underestimate the number of alcohol-related presentations. To address this issue, ACEM has conducted a series of surveys to quantify the extent of alcohol-related harms presenting to EDs in Australia. This research has shown that on average one in 12 presentations to EDs in Australasia are alcohol-related. On weekends, this increases to one in seven presentations<sup>5</sup>.

In the largest study of its kind undertaken, ACEM surveyed over 2000 ED clinical staff on their experiences of alcohol-related presentations. 98% of staff said they had experienced verbal aggression in the last 12 months, and 92% said they had experienced physical aggression from alcohol-affected patients. 87% of respondents said they had felt unsafe because of an alcohol-affected patient in the last 12 months<sup>6</sup>. This survey shows that clinical staff are consistently exposed to unacceptable levels of violence in the ED.

Furthermore, this survey also revealed that managing alcohol-related presentations compromises the care of other patients in the ED because resources are tied up dealing with the aftermath of alcohol-related harm. In fact, 88% of respondents to the ACEM clinicians' survey said the care of other patients was negatively or very negatively affected by alcohol-related presentations.

ACEM's research makes a strong case for legislation to address this serious public health problem.

## Alcohol and family violence

ACEM is concerned that current alcohol policy fails to take into account the indisputable link between alcohol and family violence. Family violence-related presentations are not systematically recorded in Australian EDs. However, ACEM recognises that victims of family violence may regularly attend the ED as a result of injury or an associated condition, or as an alternative to other health care services, due to the level of anonymity provided<sup>7</sup>.

The Victorian Royal Commission into Family Violence acknowledged alcohol as a notable risk factor in the context of family violence offending<sup>8</sup>. The Australian Bureau of Statistics Personal Safety Survey estimates that alcohol is involved in 50% of all partner violence and 73% of partner physical assaults<sup>9</sup>.

A recent panel survey to investigate the relationship between alcohol and other drug (AOD) use and family violence in the Australian population found that alcohol was involved in 34 percent of intimate partner violence incidents, and 29 percent of family violence incidents. The survey also found that alcohol-related intimate partner violence incidents were more likely to result in either a physical

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<sup>7</sup> McGarry J and Nairn S. An exploration of the perceptions of emergency department nursing staff towards the role of a domestic abuse nurse specialist: a qualitative study. *International Emergency Nursing*. 2015; 23: 65-70.

<sup>8</sup> Royal Commission into Family Violence: Report and Recommendations, Vol III, Parliamentary Paper No. 132 (2014-16).

<sup>9</sup> Laslett, AM. 2010. The Range and Magnitude of Alcohol's Harm to Others. Fitzroy, Victoria: AER Centre for Alcohol Policy Research, Turning Point Alcohol and Drug Centre, Eastern Health.

(34.4%) or psychological injury (20.6%) compared with those that did not involve alcohol (19.6% physical; 13% psychological). Furthermore, the survey found when alcohol consumption had been associated with intimate partner violence incidents, the alcohol tended to be purchased from a packaged liquor store (supermarket, bottle shop, etc.) and consumed at the respondent's home<sup>10</sup>.

### **Recommendations**

Given the recognised harms that alcohol causes to individuals and society, ACEM recommends that harm minimisation is made a key priority in the Liquor Control Reform Act.

This review presents an opportunity for the Victorian Government to address a significant risk factor for family violence by reviewing the accessibility of packaged liquor. There is well established evidence that even modest reductions in the availability of alcohol can reduce the associated harms<sup>11</sup>.

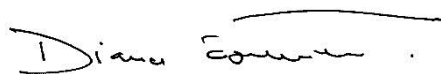
**ACEM strongly urges the Government to consider state-wide, 10pm closing of packaged liquor outlets and 2am closing time for licensed premises.**

ACEM recommends the mandatory collection of alcohol related presentations data to EDs to allow an accurate measure of harm and assist in the evaluation of licensing changes and future policy decisions.

Finally, ACEM is concerned that no information has been made available on when submissions to this consultation will be publicly available, or when a consultation report will be released. This practice is out of step with other State Governments. ACEM strongly encourages the Victorian Government to make all aspects of this and future public consultations transparent.

Thank you for the opportunity to provide feedback to this consultation. If you require any clarification or further information, please do not hesitate to contact the ACEM Policy and Advocacy Manager Fatima Mehmedbegovic on (03) 9320 0444 or [fatima.mehmedbegovic@acem.org.au](mailto:fatima.mehmedbegovic@acem.org.au).

Yours sincerely,



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PROFESSOR ANTHONY LAWLER  
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<sup>10</sup> Miller et al. 2016. Alcohol/Drug Involved Family Violence in Australia. National Drug Law Enforcement Research Fund

<sup>11</sup> Babor et al. 2010. Alcohol: No ordinary commodity. Research and public policy. Oxford University Press. 2<sup>nd</sup> edition.