



# **A Framework for Managing the Night Time Economy in Wales**

## **Health Impact Assessment Report**

**July 2016**

**Public Health Wales on behalf of Welsh Government**

## **1.0 Introduction**

Health Impact Assessment (HIA) is a process which supports organisations to assess the potential consequences of their decisions on people's health and well-being. The Welsh Government (WG) is committed to developing its use as a key part of its strategy to improve health and reduce inequalities although HIA is currently not Statutory.

Health impact assessment provides a systematic yet flexible and practical framework that can be used to consider the wider effects of local and national policies or initiatives and how they, in turn, may affect people's health. It works best when it involves people and organisations who can contribute different kinds of relevant knowledge and insight. The information is then used to build in measures to maximise opportunities for health and to minimise any risks and it can also identify any 'gaps' that can then be filled. HIA can also provide a way of addressing the inequalities in health that continue to persist in Wales by identifying any groups within the population who may be particularly affected by a policy or plan.

The Wales Health Impact Assessment Support Unit (WHIASU) was established in 2001 to support the development of HIA in Wales and is part of the Policy, Research and International Development Directorate (PRID) of Public Health Wales (PHW). Its remit is to support, train, facilitate and build capacity in HIA and raise awareness of how the process can support and contribute to improving health and wellbeing. A particular focus of WHIASU in recent years has been the use of HIA within traditionally 'non-health' sectors such as mining, regeneration and housing, waste, land-use and transport planning as a method of encouraging a consideration of 'Health in All Policies' (HiAP). The Unit has a strong research function and has published a number of guides, evidence reviews and resources to support the practice of HIA by specialists and non-specialists (1).

## **2.0 Background**

There is no standard definition for the night time economy (NTE). For the purposes of this framework - which considers both alcohol and drugs - the night time economy concerns the economic activity which occurs between the hours of 6pm to 6am.

There has been substantial consultation in the development of the framework. It was initially developed through a Welsh Government Night Time Economy Working Group. This Group consisted of a wide range of stakeholders with an interest in the night time economy including Police Licensing Officers, Community Safety Leads, Fire Safety Officers and Trading Standards. Additional consultation has taken place with other stakeholders including police, public and clinical health, local authorities and the business community, all of whom have a shared responsibility to create a safer and healthier Wales. This culminated in a draft document - 'A Framework for Managing the Night time Economy in Wales' - which was consulted on in late 2015 (2)

### **2.1 The draft Framework for Managing the Night Time Economy in Wales (NTE Framework)**

The purpose of the NTE Framework is to *'provide a framework for local*

*authorities, local health boards, night time economy teams, community safety leads and other stakeholders to assist them in developing and delivering local plans and strategies to address drug and alcohol-related disorder and anti-social behaviour in towns and cities in Wales’ (2). It aims to improve access to the night-time economy for a wider population and ‘to promote a diverse night time economy throughout Wales and enhance quality of life by providing safe city and town centres that are accessible and attractive to all who work, visit and live in them’. In particular, the consultation document of the draft NTE contained at its core 3 specific aims. These were:*

- *Protect individuals and communities by creating a safe and healthy environment;*
- *Tackle availability of both alcohol and drugs by the enforcement of licensing regulations; and*
- *Confront anti-social behaviour, crime and the fear of crime, including sexual assault, and harassment and modern slavery in the context of the night time economy.*

The Framework for the draft NTE consultation document aimed ‘to gather best practice examples of actions that have been taken to manage the night time economy in a variety of towns and cities’. It states that ‘It is not intended to be directional and there is no expectation for every team responsible for managing a night time economy in Wales to implement every action within this framework. However, it is intended to be used as a reference point that partners can use when considering what additional actions could be taken to strengthen the management of the night time economy in their area’ (2).

### **2.3 The Health Impact Assessment**

This HIA is a comprehensive assessment of the draft NTE Framework. It was conducted as a series of stages across Wales and it included several stakeholder workshops.

It builds on a variety of evidence that had already been collated by Welsh Government’s Substance Misuse Policy, Government and Corporate Business team. There had been extensive consultation with a range of organisations throughout the preparation of the draft framework culminating in a formal consultation from 24<sup>th</sup> September until 17<sup>th</sup> December 2015 (2). The responses from the consultation provided an opportunity for the team to critically assess the proposed framework and make any changes to it.

In discussions with PHW and the Policing and Health Lead from the PRID, WG recognised that a HIA would be a beneficial way of impartially assessing the draft NTE framework and its contents. It would do this using the social determinants of health and wellbeing as a lens and would comply with WG’s requirements for Public Bodies under the Wellbeing of the Future Generations (Wales) Act 2015 (WFGA) (3). In respect of inequalities, the HIA would include a consideration of any vulnerable groups who would be affected in the population as well as the general population as a whole. It would also consider the wider impacts on those key stakeholders who would be affected by, have an interest in, or be required to implement the NTE.

The Policing and Health Lead approached the Wales Health Impact Assessment Support Unit (WHIASU) to help to support Welsh Government to undertake the HIA

so that any health and wellbeing impacts or unintended effects could be identified and consider the inequality implications. A number of other impact assessments were undertaken for the draft NTE Framework including a Welsh Language Impact Assessment, a Child and Human Rights Impact Assessment and an Equalities Impact Assessment. The evidence from the HIA was used to inform the final NTE Framework and also to support parts of the Equality Impact Assessment (EQIA).

Stage One consisted of assessing the Draft NTE Framework that had been published and consulted on in late 2015 (2). The information gathered from this exercise was then used to redraft new NTE aims and objectives, so that the final document would support the needs of all the key stakeholders and night time economy service users. Stage Two consisted of two workshops which ‘tested’ these new aims and objectives and aimed to gather information to strengthen the content of the final document.

The HIA was led by Liz Green (LG), Principal HIA Development Officer and Lee Parry-Williams (LPW) Senior Public Health Practitioner (Policy and Impact Assessment) from WHIASU and was qualitative in nature. It followed the systematic methodology described in the 2012 Welsh HIA guidance of ‘Health Impact Assessment: A Practical Guide’ (4). It builds on work and training that WHIASU has recently undertaken across Wales to develop HIA and build a consideration of health, wellbeing and inequalities into a wide range of settings and sectors. It also can maximise Public Health’s collaboration with a wide range of Public Bodies in respect of the WFGA.

A small Steering Group was established and a scoping meeting was held to discuss the format, content, roles and responsibilities and invitees to the HIA. This Steering Group consisted of the following:

Janine Roderick	Lead for Public Health and Policing, PRID, PHW
Liz Green	Principal HIA Development Officer, PRID, PHW
Lee Parry-Williams	Senior Public Health Practitioner (Policy and Impact Assessment), PRID, PHW
Samantha French	Performance Management and Finance Officer, Substance Misuse Policy and Finance Branch, Welsh Government
Kathryn Ashton	Public Health Researcher, PRID, PHW
Iva Nekovarova	Public Health Research Assistant, PRID, PHW

## **2.4 Evidence**

HIA is evidence based. This evidence includes quantitative, statistical data and qualitative knowledge and evidence. As practiced in Wales, HIA is grounded in a mixed methodological approach and embraces organisational, community and lay knowledge. Wales emphasizes the inclusion of all stakeholders including local community citizens as part of the process. Including this type of qualitative evidence is important to assess individual concerns, anxiety and fears for example, and the data can be quantified for use in decision-making and/or mitigation. It can give a more holistic, contextual view of national and local impacts.

The draft NTE Framework ties in with a number of national policies and strategies (5, 6)

As well as technical and stakeholder information gathered as part of the development of the draft NTE a brief literature search was conducted by the Principal HIA Development Officer focussing on the general health and wellbeing impacts of the Night Time Economy. There were no collective reports or papers explicitly relating to this subject matter.

However, the NTE consists of a number of component parts including: the consumption of alcohol and other substances; dining out; socialising with others; dancing; and attending scheduled events. There is a wealth of evidence around tackling crime and substance misuse in the NTE and the impact of this on health outcomes. However, the formal evidence and literature around other wellbeing aspects such as the social impacts, regeneration, design and planning etc of the NTE is very limited (7, 8, 9, 10, 11, 12, 13, 14). The PRID Researchers provided links to evidence also.

In terms of actual health impact assessments which have been completed - there are no comparable HIAs which have ever been undertaken on this type of framework - either nationally or internationally. The Principal HIA Development Officer identified an Equality Impact Assessment at a local level in Wales (the Cardiff NTE (15) but this was a screening paper only and provided little information or insight for the HIA.

This is therefore the first and only, HIA on the subject globally.

### **3.0 Stage One**

As part of the HIA process, a half day stakeholder workshop was held in Cardiff and participants attended from across Wales.

#### **3.1 Rapid Participatory HIA Workshop**

The workshop took place on April 19th 2016. A number of key stakeholders were invited to participate and contribute to the discussion. There was such an interest in the HIA and proposed development that virtually all the invitees attended.

In total, 20 attended the workshop and included a wide range of officers. Participants were local authority officers from Planning and Licensing, representatives from Local Health Boards (LHB), Welsh Government policy leads, PHW, Third Sector representatives and the emergency services. The draft NTE Framework was circulated beforehand to the participants alongside an HIA information sheet and an agenda. The agenda is included in Appendix One.

The aim of this workshop was primarily to gather professional and stakeholder knowledge and evidence about the potential impacts of the proposed draft. Other data and evidence has been considered previously throughout its development as stated previously. It assessed the Framework based on the attendees understanding of the national policy context; their local circumstances; and their wealth of experience from licensing, implementing and providing services for the NTE in Wales. The comments from the workshop were synthesised with other comments from the consultation, evidence and research gathered by PRID, PHW and used to inform and adjust the draft NTE Framework.

### 3.2 Vulnerable Groups

At the outset, the group identified the main vulnerable groups who would be affected by the draft Framework using Appendix 1 of the Welsh guidance (Appendix Two). A lively discussion followed and a wide ranging number of groups were highlighted as being directly affected by the NTE Framework and its aims and objectives.

It was acknowledged at the start that the draft Framework is applicable to a wide range of communities, groups and individuals in the general population. However, there are a number of groups who may be specifically affected by it. These were (in no particular order):

- Young People eg. Wrexham NTE is very focused on 18-21yr olds
- Women - safety concerns
- Older people - the framework may not currently 'cater' for this population group
- Students - key issues are that they are away from home for the first time/not 'mature' enough to handle peer pressure or alcohol/pre-loading. They are a group that are both vulnerable but there are also opportunities. They can be treated as a distinct group who can be influenced through 'education'. Students are also important in the context of the NTE due to the business opportunities for certain premises to hold 'student nights' and other promotional events. Universities also report a growing prevalence of mental health issues within student population. However these may not manifest themselves until linked with alcohol etc. This can add to an individual's vulnerability if there is an unrecognised mental health issue. Also note that this is not just linked with personal use of alcohol etc but just the pull of City Centre at night could impact on individuals in context of NTE
- Mental ill health/wellbeing - mental ill health can manifest itself within the NTE - NTE can exacerbate an existing condition but also unknown/unrecognised conditions may be identified due to alcohol/drugs within the NTE
- All (within general public/ population) could become vulnerable at any point within NTE and yet be okay the next day
- Short term/long term vulnerability - need to be aware that a common denominator could be NTE
- Geographical/social communities - importance of being aware that differences do exist i.e urban/rural or large town centres and smaller towns/villages. Certain key principles within the Framework need to adapt for these differences.
- 'Strength drinkers' are perceived by other groups of drinkers as not a popular group. They are a group that can be abused by others whilst at the same time can be a nuisance to others
- Young families - a mixed population is encouraged to use NTE centres
- Workers and specifically lone workers and bar workers late at night
- Transport groups - train, coach and taxi drivers

There was a strong discussion in respect of any groups who could be described as vulnerable. It was noted that care should be taken when identifying individuals/groups as vulnerable in respect of the NTE Framework. There will be individuals who have key characteristics which would identify them as vulnerable both within and external to NTE, whilst others may become vulnerable through involvement within the NTE ie 'transient' groups. There is also another group who

are not directly involved in the NTE i.e those not drinking/clubbing etc but those who by being in the vicinity of these activities are placed in a vulnerable position. The distinctions can become blurred and all need to be aware of this.

After agreement on the above groups, the participants then worked systematically through the wider or social determinants of health and assessed the health and wellbeing impacts as listed in Appendix 2 of the Welsh guidance (Appendix Three) of the Framework. Positive or negative impacts were identified as were any opportunities, gaps or unintended consequences. Suggestions were made for mitigation and documented. All of this is summarised in the table in Appendix Four.

### **3.3 Appraisal**

The workshop followed a systematic process, continued to provoke a lively discussion and made important connections to other policy areas and stakeholders.

The participants felt that the current draft framework is focussed on harm minimisation, control, and enforcement and licensing and that there were opportunities to strengthen it with evidence based practice, a clear focus to prevention, linking to other policy areas and strategies and by promoting the positive benefits of the NTE.

It is clear from the transcribed and verbal contributions that several important themes emerged and some key messages and priority areas were clearly articulated by the participants.

These were:

- **Diversification:** This is the key to a thriving NTE. There is a need to learn from the successful experience of others in this respect ie the Swansea Framework.
- **Culture and norms:** It was recognised that culture ie drinking and its normalisation played an important role and that this needs to be addressed. A strong and vibrant NTE also needs to cater for families and non-drinking cultures
- **Branding:** Review the ‘branding’ of the NTE and the need to publicise the differing facilities and opportunities which the NTE can provide
- **Education and early Intervention:** There is a need for education and quality training for personnel involved in the NTE so that Early Intervention becomes a key focus and best practice
- **Evidence, best practice and resources:** The NTE Framework must include, and be based on a robust evidence base. It was recognised that the Framework is guidance only. The stakeholders gave a very clear message that the Framework should include a good range of evidence, resources and best practice interventions to inform the stakeholders who will be required to implement the NTE guidance. It was strongly communicated that this would strengthen and support them during the research and planning phase at a local level. The implementation teams will have confidence in the quality and robustness of the evidence whilst also avoiding duplication and wasting resources.
- **Monitoring:** In respect of CCTV. The participants recognised that it is a cost intensive resource but that there are risks if it is not enabled. The valuable contribution it makes to aspects of NTE was also recognised.

- **Transportation:** The roles, and types of, transport were discussed at length and several suggestions were put forward to be included in a redrafted NTE Framework.

This information and evidence was used to support the drafting of new aims and objectives for the NTE Framework. Participants were asked to forward any additional views, evidence or case studies which they believed would aid this process after the workshop if they wished to.

## **4.0 Stage Two**

The information and other evidence gathered as part of Stage One was used to inform new draft aims and objectives for the NTE Framework. These are listed in Appendix Five. The three core themes assessed for their potential impact on health, wellbeing and inequalities are:

- **Objective 1:** To support the development of a systematic approach to gain a sound understanding of the NTE based on intelligence and accurate information
- **Objective 2:** To promote a sustainable environment and support prevention strategies to create a healthy, safe and diverse NTE in Wales
- **Objective 3:** To support effective multi-agency management of the NTE and enforcement at the local level

### **4.1 HIA and discussion stakeholder workshops**

Following the success of the HIA participatory workshop in Stage One, the Steering Group decided that it would be highly beneficial to undertake a similar exercise with wider stakeholder groups and organisational representatives across Wales. These would discuss and assess the newly drafted NTE aims and objectives detailed above.

Two workshops were scoped and organised by the Steering Group. One was held in Cardiff Metropolitan University, Cardiff on May 23<sup>rd</sup> and another was held in Glyndwr University, Wrexham on May 25<sup>th</sup> 2016. A wide range of stakeholders were invited including from Public Bodies (LAs, Welsh Government, and LHBs), public health (health improvement, health policy), criminal justice representatives, Trading Standards and business agencies.

The structure of the workshop was in two parts (Appendix Six):

- the first component of the workshop involved the stakeholders critically reviewing and discussing each of the aims and their associated objectives and providing feedback on these;
- the second component was a wider discussion and health impact assessment of these aims and objectives.

The workshops fostered many useful and interesting discussions and provided some valuable information to include in the new NTE Framework and highlighted a

number of successful best practice examples which could be included within the final document.

## **4.2 Vulnerable Groups**

Whilst the vulnerable groups' checklist was discussed at both workshops, at the North Wales workshop there was a further wide ranging discussion around the vulnerable groups which had been considered and compiled at the Stage One workshop. The participants suggested additional groups to be appended to this based on their experiences and their local contexts. These groups were:

- Young people outside of 18 years should be addressed. There should be a recognition that whilst younger age groups are not direct users of the NTE due to their age they can be in the environment/vicinity of the NTE and can be impacted as a consequence of others using the NTE. This was recognised as a safe guarding issue
- It was highlighted that there could be a need to split young people into distinct age groups and not only 18 years and over but 16-25 years and 25-30 years for example.
- Business/workers - including:
  - Door staff
  - Independent Fast Food premises staff - recognition of increased tensions within these premises compared to national branded premises such as MacDonald's/KFC etc. There are examples of racial abuse towards staff whilst customers are under the influence of substances or alcohol. This abuse seems to be accepted by other customers but when challenged by staff tensions can escalate
  - Emergency Services personnel. Unintended consequences on this group were noted. It was cited that the more vibrant the NTE, there can be a higher concentration of emergency services staff/teams/units and this therefore can impact on other areas away from the NTE. This can manifest itself as longer response times to non NTE incidents and/or a lack of cover - particularly for the police
- Town centre residents - particularly those with families. There is a tendency for increased noise the more vibrant the NTE
- Those who are homeless<sup>1</sup> It was identified that there could be a double impact in respect of a) impacts on homeless individuals who are deemed at risk to themselves and b) an impact on homeless individuals who are seen as a threat by and too others

## **4.3 Lifestyles**

In respect of lifestyles, the participants at Stage Two identified a number of positive impacts for these determinants. It was highlighted that by creating safer environments and more protective environments there was a huge opportunity to reduce harm and the risk of harms. There were opportunities for positive messages to be reinforced within the new aims and objectives and the actions which would

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<sup>1</sup> It was noted that there are different responsibilities in Wales to England.

sit below these; and it was noted that there were opportunities for early integration of educational and health promotion messages rather than adding these later.

However, the participants did note that there could be a few unintended negative consequences. A more vibrant and diverse NTE could have the potential of being perceived safe or safer and therefore the increased numbers attending or using the NTE could lead to a potential risk of increased injuries/unplanned sexual behaviour. The NTE Framework implementation could therefore be very dependent on determining the right mix of opportunities and how well any developments are informed by the Framework and evidence. It was noted that the NTE could also conversely be deemed too risky for certain groups ie families or older people and therefore they opt out completely to be safe and this then reduces their options. It was also cited that the range of healthy food choices within the late NTE is very limited.

### **4.3 Community impacts**

Positive impacts from the new aims and objectives for the NTE on community and social determinants were identified to come from diversification and a shift of focus for licensed premises to other entertainment options rather than just drinking and alcohol. It was highlighted that any shift could lead to a transfer in social responsibility and provide a spin off to other aspects of health and wellbeing such as obesity or mental wellbeing. It was noted that there could be wider community benefits i.e. rural pubs diversifying and creating community hubs which include a post office/shop and provide educational resources. There is a huge potential to work with sporting organisations and clubs to promote a positive message for lifestyles and health behaviours. Diversification could also create business and research opportunities - there is an awareness of growing diversity in communities of distinct cultures and beliefs and how these communities utilise or create their own NTEs. There could be opportunities to research and learn from these different cultures and how different dynamics play into a NTE.

Unintended negative consequences could be that existing vertical establishment businesses may perceive the new Framework as in opposition to them. The new NTE Framework needs to demonstrate it is inclusive of all stakeholders. There could also be an increased risk of excluding young people from the NTE ie students who foster a 'drinking culture'.

### **4.4 Living and Environmental impacts**

The participants of the workshops noted that Planning Policy and Planning Development Management could play a positive role in the development of or supporting a thriving NTE. New housing developments could contribute to the NTE by including less car parking and encourage residents to use NTE services in close proximity to home or facilitate the use of public transport encouraging easy access to the local NTE. Planning, regeneration and licensing frameworks could support broad multiagency planning for the NTE relevant to the local context. Planning and licensing frameworks could encourage licensing conditions different to planning conditions and prompt the need for greater joint planning and working.

Whilst Town Centre regeneration schemes are positive in themselves with the creation of new housing options in town and city centres, the attendees cited unintended consequences of this as the creation of tensions between businesses and residents as the NTE was improved and expanded. There could be an increase in noise and environmental impacts such as litter and anti-social behaviour (if not managed correctly) and they also highlighted the need to assess any placements of individuals to be residents in NTE neighbourhoods.

#### **4.5 Economic Conditions**

Overall, the NTE aims and objectives were noted to be highly positive in relation to economic determinants of health and wellbeing. There are opportunities for diverse business developments i.e. ports/cinemas/restaurants. The NTE can provide job opportunities for young people in particular and this includes part-time and flexible posts whilst studying. A safer and more diverse NTE could increase these opportunities. It was noted that all town and local centres, be they urban or rural, need a NTE. A positive was cited in respect of businesses involvement with many stakeholders currently. Many of the participants highlighted that businesses are keen to be involved and contribute to reducing any negative aspects of the NTE and boost business opportunities. However, limited evidence to support this or factual data can reduce the ability to target funding or interventions and develop the NTE and business opportunities further. There is a need for a good mix of data and the sharing of data to inform and plan accordingly. It was noted that the NTE Framework has the opportunity to strengthen data collection and sharing but there was also recognition of the difficulties in obtaining or accessing this across all sectors - Private, Public and Third sector i.e. private retailers hold valuable data but currently do not share possibly due to commercial sensitivities.

Negative impacts for health and wellbeing were highlighted to be that the existing focus of the NTE was dominated by alcohol and that austerity and cuts to public sector budgets could have a significant impact in the delivery of the NTE Framework. It was also noted that there were some unintended consequences of the pedestrianisation of town centres and NTE neighbourhoods. This manifests itself as reduced footfall due to lack of access by cars and taxis etc. Therefore, there may need to be some discussions in relation to re-introducing traffic etc and balance public safety/air quality etc and NTE opportunities when instigating one way systems etc.

#### **4.6 Access and quality of Services**

Positive impacts of the new aims and objectives were cited to be the focus on early engagement and the targeting and identification of interventions earlier. This is also related to sharing data and partnership working. It was felt that the new aims could foster and mobilise co-production between stakeholders and a positive could be a diversification of transport options to get people home safely at the end of an evening.

This was also noted as a potential negative consequence also. The personal safety of young people tends to rely heavily on mobile phone/new technology and non cash transactions. The failure of such a device or lost card reduces communication options and increases the risk of negative outcomes. Participants identified some **examples of good practice** including mobile recharging facilities in triage which

are currently working well where there are high concentrations of people - and one university is supporting a taxi access service in which the university pays for the taxi and this is then repaid by the student. A negative impact could also be the potential conflict between pedestrians and traffic in accessing the NTE. Whilst pedestrianisation or short term road closures can improve and protect community safety it was noted that motor vehicles can cause accidents with those under the influence and there is an increased potential for this.

## **5 Recommendations from Stage Two workshops**

The workshops contained diverse and interesting information and conversations. Participants within both workshops posed questions and also made some recommendations based on their knowledge and experience. These are listed below. There are not listed in any particular order:

1. Robust evidence and research, Good Practice and resources which can be useful and beneficial should be signposted within the Framework. It was strongly recommended that case study examples are included which demonstrate how stakeholders have worked closely and achieved joint outcomes.
2. Learning from others is essential ie what has happened elsewhere? which cities/towns have achieved a positive and thriving NTE.
3. There is a need to research alternative opportunities and business opportunities associated with the NTE - there is a need to move away from vertical drinking establishments and for diversification.
4. Need to learn from different cultures and their relationships with and use of the NTE i.e Polish communities in Merthyr was cited as an example
5. To consider the needs of, or involvement of, young people under the age of 18 in the NTE- should there and could the safeguarding of this group be addressed in some capacity within the new NTE Framework?
6. The new NTE Framework needs to be applicable to all of the populations of Wales who engage in the NTE. The scope of the Framework needs to inform those whose responsibility it is to licence, implement and oversee large and/or small scale NTEs and those situated in both rural and urban contexts across Wales.
7. It needs to demonstrate an awareness of the varying different impacts of the NTE on different town centres, geographical contexts and any resources, evidence and examples of good practice needs to represent these diverse situations
8. In respect of planning and licensing - the NTE Framework should consider: the provision of common terminology and the robust evidence that Planning Officers understand and present this evidence in a form which can be utilised by them to address issues.
9. Participants recommended that there is a need to explore any opportunities to jointly plan or influence Local Development Plans and national planning policy. It may be helpful to have a 'Vision' for the NTE at a local level so that any planning opportunities across Local Authority departments can be utilised.

10. Good Practice and Guidance needs to be included in the new NTE Framework in order to illustrate opportunities for closer working between stakeholders and this included between Planning and Licensing Officers.
11. Utilise Alcohol Industry Network for positive opportunities
12. A Programme Approach is required and some issues are covered within other areas of the Substance Misuse policy. Need to remember that that NTE Framework is one aspect of a number of policy responses on this agenda within the 'Working Together to Reduce Harm' Strategy
13. Need to promote the positive aspects of the NTE such as socialising and mental wellbeing
14. Need to look at alternative interventions than 'criminal orders'. An example was given which relates to the impact that the homeless community has on both themselves and others; and both in the NTE and at other times of the day. One outcome is that some other groups withdraw from the NTE because of this. Therefore when addressing the issue it was recommended that if the issue(s) are tackled using legislation and criminal justice levers, it could be more effective by taking a supportive approach rather than a pure criminal enforcement one.
15. A Healthy NTE may require 'pump priming' in order to achieve positive outcomes and this should be noted within the Framework.

## **6 Conclusion**

Overall, it was concluded that the NTE Framework will be highly beneficial to all but that the current draft and its aims and objectives, whilst very supportive will need to be amended and include specific examples of best practice, evidence and resources in order to enhance its delivery and implementation at a local level. It will positively deliver on many important issues but there are still some aspects that need to be addressed.

All of the participants who contributed to both Stage One and Stage Two were clear that there was a need for diversification of the NTE and a move away from enforcement to prevention and early intervention. They clearly articulated the need for a fundamental shift in culture in how the NTE is defined and understood and how the NTE itself can vary between social and geographical contexts and towns, cities, rural and urban areas. In some areas the NTE is heavily reliant on drinking establishments which are perceived as a problem. However, they do have a positive place in a thriving and vibrant NTE and the NTE as a whole needs to be understood as a making a positive contribution to society and individuals.

All participants agreed that the new Framework needs to include examples of any current best practice, robust evidence and resources for stakeholders to learn from and apply in practice. A number of 'good practice' examples were cited and these are contained in Appendix Seven.

The workshop followed a systematic process, fostered lively and productive discussion and made important connections to other policy areas and stakeholders.

Evaluations were conducted for all the workshops and these were highly positive - not only about the experience of being involved in the HIA but the process and how

their contributions could be included. It has demonstrated that the HIA was of benefit to all the participants and to Welsh Government.

The information and evidence gathered as part of the HIA will be now used to inform the final draft NTE Framework.

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## Appendix One

### Agenda

#### Rapid Health Impact Assessment (HIA) for the Night Time Economy in Wales

Thursday 19th April 2016

Temple of Peace, Cardiff

10am – 1pm

**Tea and coffee will be available throughout the meeting**

- **Welcome and Introductions**  
Janine Roderick, Policy Lead Public Health and Policing, Public Health Wales
- **Overview of the Night Time Economy Framework**  
Gareth Hewitt, Head of Substance Misuse, Welsh Government.
- **Outline of Health Impact Assessment**  
Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales
- **Introduction to HIA appraisal tool**  
Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales/Wales HIA Support Unit
- **Screening session-using appraisal tool to identify key health impacts of the proposal**  
Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales/Wales HIA Support Unit, Lee Parry-Williams, Senior Public Health Practitioner (Policy and Impact Assessment).
- **Feedback and Recommendations**  
Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales/Wales HIA Support Unit, Lee Parry-Williams, Senior Public Health Practitioner (Policy and Impact Assessment).
- **Evaluation**

## Appendix Two

### ***Vulnerable/Disadvantaged Groups Checklist***

(Please note that this list is a guide and is not exhaustive)

The target groups identified as vulnerable or disadvantaged will depend on the characteristics of the local population and the nature of the proposal itself. The most disadvantaged and/or vulnerable groups are those which will exhibit a number of characteristics, for example children in living poverty. This list is therefore just a guide and it may be appropriate to focus on groups that have multiple disadvantages.

#### **Age related groups\***

- Children and young people
- Older people

#### **Income related groups**

- People on low income
- Economically inactive
- Unemployed/workless
- People who are unable to work due to ill health

#### **Groups who suffer discrimination or other social disadvantage**

- People with physical or learning disabilities/difficulties
- Refugee groups
- People seeking asylum
- Travellers
- Single parent families
- Carers
- Lesbian, gay, transgender and bisexual people
- Veterans
- Homeless
- Sex workers
- Black and minority ethnic groups\*\*
- Religious groups\*\*
- Language/culture\*\*

#### **Geographical groups**

- People living in areas known to exhibit poor economic and/or health indicators
- People living in isolated/over-populated areas
- People unable to access services and facilities

The impact on the general adult population should also be assessed. In addition, it may be appropriate to assess the impact separately on men and women.

\* Could specify age range or target different age groups for special consideration.

\*\* May need to specify.

Appendix Three

**Health and Well-Being Determinants Checklist**

1. Lifestyles	<ul style="list-style-type: none"> <li>• Diet</li> <li>• Physical activity</li> <li>• Use of alcohol, cigarettes, non-prescribed drugs</li> <li>• Sexual activity</li> <li>• Other risk-taking activity</li> </ul>
2. Social and community influences on health	<ul style="list-style-type: none"> <li>• Family organisation and roles</li> <li>• Citizen power and influence</li> <li>• Social support and social networks</li> <li>• Neighbourliness</li> <li>• Sense of belonging</li> <li>• Local pride</li> <li>• Divisions in community</li> <li>• Social isolation</li> <li>• Peer pressure</li> <li>• Community identity</li> <li>• Cultural and spiritual ethos</li> <li>• Racism</li> <li>• Other social exclusion</li> </ul>
3. Mental Wellbeing	<p>Consider:</p> <ul style="list-style-type: none"> <li>• Does this proposal support <b>sense of control</b></li> <li>• does it enable participation in community and economic life</li> <li>• does it impact on emotional wellbeing and resilience</li> </ul>
4. Living/ environmental conditions affecting health	<ul style="list-style-type: none"> <li>• Built environment</li> <li>• Neighbourhood design</li> <li>• Housing</li> <li>• Indoor environment</li> <li>• Noise</li> <li>• Air and water quality</li> <li>• Attractiveness of area</li> <li>• Green space</li> <li>• Community safety</li> <li>• Smell/odour</li> <li>• Waste disposal</li> <li>• Road hazards</li> <li>• Injury hazards</li> <li>• Quality and safety of play areas</li> </ul>
5. Economic conditions affecting health	<ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Income</li> <li>• Economic inactivity</li> <li>• Type of employment</li> <li>• Workplace conditions</li> </ul>
6. Access and quality of services	<ul style="list-style-type: none"> <li>• Medical services</li> <li>• Other caring services</li> <li>• Careers advice</li> <li>• Shops and commercial services</li> <li>• Public amenities</li> <li>• Transport including parking</li> <li>• Education and training</li> </ul>

	<ul style="list-style-type: none"><li>• Information technology</li></ul>
7. Macro-economic, environmental and sustainability factors	<ul style="list-style-type: none"><li>• Government policies</li><li>• Gross Domestic Product</li><li>• Economic development</li><li>• Biological diversity</li><li>• Climate</li></ul>

## Appendix Four

### Notes from NTE HIA workshop - 19th April 2016 Venue: Central Cardiff Police Station

#### Part 1- Vulnerable groups

##### Vulnerable Groups Identified:

##### Make things worse for:

- Young People eg. Wrexham NTE is very focused on 18-21yr olds
- Women - around safety
- Older people - framework may not currently 'cater' for this group within the population
- Students- key issues away from home for the first time/not 'mature' /pre-loading - a group that are both vulnerable but also opportunities as a distinct group who can be influenced through 'education' . Students are also important in the context of NTE due to the business opportunities for certain premises to hold 'student nights' and other promotional events. Universities report a growing prevalence of mental health issues within student population however may not manifest itself until linked with alcohol etc. adds to the vulnerability if there is an unrecognised mental health issue. Also note that this is not just linked with personal use of alcohol etc but just the pull of City Centre at night could impact on indiv in context of NTE
- Mental ill health/wellbeing - mental ill health can manifest within NTE - NTE can exacerbate an existing condition but also unknown/unrecognised conditions may be identified due to alcohol/drugs within NTE
- All (within general public/ population) could become vulnerable at any point within NTE and yet be okay the next day
- Short term/long term vulnerability need to be aware common denominator could be NTE
- Geographical/social communities - importance of being aware that differences exist i.e urban/rural or large town centres and smaller towns/villages - certain key principles within the framework need to adapt for these differences.
- 'Transient' Vulnerability - care has to be taken when identifying indivs/groups as vulnerable. There will be individuals who have key characteristics which would identify them as vulnerable both within and external to NTE whilst others may become vulnerable through involvement within the NTE and another group who are not directly involved in the NTE i.e not drinking/clubbing etc but being in the vicinity of these activities are placed in a vulnerable position. The distinctions can become blurred and all need to be aware of this.
- 'Strength drinkers' perceived by other groups of drinkers as not a popular group. They are a group that can be abused by other whilst at the same time can be a nuisance to others
- Young families - mixed population encouraged to use city centre
- Workers
  - lone workers
  - bar workers
  - transport - train, coach drivers, taxi drivers

##### Comments/discussion/questions

C/Q. framework document appears re-active and not proactive/ preventative as someone reading the framework as a standalone document and someone who does

not work in Wales therefore not having a full grasp of the wider context in which this document sits the framework would benefit from additional context/requires expansion to ensure a good understanding of where the framework sits and what it contributes to and what contributes/supports it. Response - there are other elements of the substance misuse strategy that the framework forms a part of and acknowledgment that the framework would benefit and be strengthened if there was more context included.

Recommendation - expand on policy context where NTE framework fits but highlight which elements complement/contribute to one another.

Q. what is being done for the vulnerable groups in the wider context

C. Framework not currently looking at the wider context in which NTE exists - agreement framework is narrow

Q/C - in context of 'Purple Flags' this scheme is underpinned by a number of key principles are these transferable to different communities i.e. large urban cities to smaller towns and are there examples/lessons that can be learnt from England that could be incorporated into examples of good practice?

C. Framework is currently focused on 'heavy end' of NTE Large urban areas, university towns but different approach and recognition of other geographic/towns/village/rural may need to be incorporated.

C. Traditional view of NTE has been negative / problematic requiring reactive measures such as emergency responses, addressing anti social behaviour. Could the time be right to promote a more positive understanding of NTE and the positive contribution NTE can make to Wales. The framework could strengthen preventative approach and services.

C. NTE can contribute to mental wellbeing i.e. socialising and being a part of something relate to '5 ways to Wellbeing'

C. strengthen Framework to promote NTE framework as preventative

C. Wellbeing of Future Generations Act embedding principles into/to inform NTE framework will help - addressing health inequalities will benefit wider than NTE

C. support services specific support services have limited availability only offered on recognised busy nights

C. Important transient nature of vulnerability - is transient nature more important to preventive agenda?

### Lifestyle

#### +ve

There is the potential to have positive impacts on all aspects of lifestyle if the framework is managed effectively

Dancing is a good form of physical activity - maximising participation in these activities through a range of initiatives could build on the trend of YP involved in 'sober raves' trend with YP recognising they do not need alcohol/drugs to enjoy these activities

Recognising discreet areas of cities more family orientated during NTE

Concentrated areas for 'hard core'

#### -ve

Countered when things go wrong or the content of the framework does not address the right things.

Geographical spread of drinking establishments can make it difficult to



<p>drinking can make it easier to manage.</p> <p>A range of support services and initiatives have been developed over the years (health centres/street pastors etc)</p>	<p>manage effectively and stretch support services too thinly. Increased drinking/crime/assaults in concentrated areas</p> <p>Moral duty to support individuals in trouble and reduce harm but does it/has it created dependency and reduced individual responsibility as individuals know someone will be there to help Q. How do we get a balance in relation to 'safety nets'</p>
<p><b>Comments/questions/recommendations C.Q.R</b></p> <p>C. currently missing from the framework any commentary/engagement with culture behind NTE. Could this be considered as a component of the framework? Research evidence in relation to current barriers to addressing issues from culture perspective but also what could be learnt that would provide insight to address culture - cultural norms related to risk/values/attitudes/norms/perceptions. What opportunities could come from this in terms of prevention strategies/interventions. Current work in Cardiff/Swansea - what can be learnt from this to inform framework/best practice. i.e 'know the score' how do you set the tone and use existing legislation such as refusing to serve individuals who are deemed to have consumed enough alcohol already. Opportunity to frame culture based on certain existing initiatives/legislation.</p> <p>R. framework annex should highlight the revised unit guidance recommended by CMO's and also information on single episode drinking guidance alongside training opportunities for bar staff re unit guidance</p> <p>R. Include guidance re E-cigarettes related to licensed premises</p>	

<b>Social and community influences</b>	
<p><b>+ve</b></p> <p>A focus on changing cultural norms associated with NTE could have a positive effect. Perceptions of negativity related to NTE therefore opportunities to change perceptions and maximise outcomes</p>	<p><b>-ve</b></p> <p>Licence trade - very individual focused in their promotion potential within collective promotion</p> <p>Lacking in the framework is a more positive perspective of the NTE- how the NTE is perceived could be influenced by how it is promoted and reported. More positive messaging could have a positive effect on culture and perception linked to lifestyle and community</p>
<p><b>Comments/questions/recommendations C.Q.R</b></p> <p>C. perceptions play an important role in decisions for individuals/families etc to access the NTE</p> <p>C. How the NTE is promoted/reported is important in the context of perceptions and decisions and how these are informed</p> <p>C. re evidence source - Alcohol Concern Cymru - findings from current student intervention</p> <p>C. opportunities to change/influence cultural norms - the student population is an</p>	

important group in this context - welfare officers could have guidance/education to change culture- examples- education and awareness raising

Mental wellbeing	
<p><b>+ve</b>                      Opportunities to promote +ve aspects of NTE for mental wellbeing</p>	<p><b>-ve</b>                      Unintended consequences - support centre could create a dependency culture and lack of personal responsibility</p> <p>The positive aspects of NTE on mental wellbeing can be forgotten within this context have been lost within the focus on negative NTE becomes negative.</p>
<p><b>Comments/questions/recommendations C.Q.R</b>  <b>C.</b> close link with social influences determinant  <b>Q.</b> does the framework capture enough re the positive side of NTE i.e. mental wellbeing, economic business opportunities currently measuring the negative i.e. harm, cost to services etc. If not how can this be strengthened and ensure that it is transferable to different geographic areas eg large cities and smaller towns/city  <b>R.</b> include evidence of positive aspects of NTE in context of supporting positive mental wellbeing from socialising opportunities etc <i>5Ways</i> could be the framework  <b>R.</b> look to include findings from current survey in Swansea re NTE likes/dislikes/needs to inform development of City Centre</p>	

Living environment	
<p><b>+ve</b>                      Diversification can be a potential positive when promoting areas to new business can be an attractive business proposition.</p> <p>CCTV contributes to enforcement, protection, intelligence but this is one area that is under pressure from LA budgets some areas cutting back on this provision</p> <p>CCTV aids early intervention, crime prevention, perpetrators are identified, perceived by the public to make them safer</p> <p>CCTV not on it's own but what you do with that intelligence</p>	<p><b>-ve</b>                      Those whose homes are in the town centre may experience greater negative impacts by NTE - requires linkage with good planning in context of town centre regeneration</p> <p>Concerns that 'austerity' could have an impact on say CCTV, public toilets, street cleaning - how to use current legislation better such as night time Levy to address this</p> <p>Some LA's are reducing lighting provision</p> <p>Cleaning and hygiene of the streets is an issue recognition that LA's do a good job and all clean in the morning but during the period of NTE streets can become very unappealing</p> <p>Could the LNL be a disincentive to attract new businesses additional cost to invest in city centre where their full focus is not NTE</p>

	LA paying for the over use of the town centre
<p>R. research where there are good examples in Wales re diversification</p> <p>R. research/collate latest evidence for diversification to strengthen framework</p> <p>R. framework to include key links/signposting/highlighting to evidence, best practice and Home Office data and resources to aid the teams in LA/Police etc that have to plan and implement responses to framework. Researching evidence can be very time consuming practitioners would benefit from a well researched resource identifying quality evidence, case studies of good practice etc.</p> <p>C. look at findings from LAAA once reported</p> <p>C. opportunities to look at principles re early intervention/prevention strategies to inform guidance within framework - societal responsibility focus on geographic groups or groups of interest such a sport clubs/student groups and evidence to inform leaders of such groups. Resources from Drink aware</p> <p>Q, what opportunities to have a graded LNL? More research required and evidence to use in targeted way - look at Wrexham, Cardiff/Newcastle schemes/agreements with licensees</p> <p>Q. if CCTV is important to reach safe outcomes from NTE- is this captured enough in framework, is there more evidence required along with Cost benefit analysis of reducing CCTV</p> <p>R. strengthen how you use existing legislation i.e. LNL's to use this to support reactive interventions as a consequence of NTE i.e. support public toilet access, litter. Good practice examples eg Wrexham voluntary contribution agreement with licensees or shared use of existing toilets both LA run and city centre premises</p> <p>R. CCTV Strengthen evidence to inform framework guidance - include cost benefit analysis evidence - highlight it is used proactively to prevent &amp; protect framing it as best practice backed by evidence</p>	

<b>Economic conditions</b>	
<p><b>+ve</b></p> <p>Monitoring - identifies those who are already drunk and refused further sales</p> <p>Vulnerability Training is helpful in awareness on pre-loading and how to control/interact with customers</p> <p>Best Bar none positive in professionalising bar staff roles raises standards/quality</p> <p>Support available for licence trade in terms of training and recognition they cannot do this on their own- requires partnership support</p>	<p><b>-ve</b></p> <p>Monitoring - involves longer waiting times can cause frustrations</p> <p>Students - preloading due to alcohol cheaper on off sales but potentially at greater risk due to pre-load</p>
<p><b>Comments/questions/recommendations C.Q.R</b></p> <p>Q. monitoring at entry points of clubs/pubs is this mentioned/addressed within guidance in framework- part of 'know the score' initiative</p> <p>R. include evidence/guidance in framework include how to communicate/encourage communication between establishments to pre-warn non entry</p> <p>R. strengthen framework guidance on workplace training/support initiatives to</p>	

improve quality/standards  
 Q. are there vulnerable groups within NTE staff re training etc many part time/temp staff do they benefit the same from available training eg refusing to serve/challenge age etc

<b>Access to services</b>	
<p><b>+ve</b>            Transport in and out of NTE is a critical part</p> <p>Good transport links/interface is a good tool to positively promote NTE</p> <p>Good practice ATC bus manned by volunteers for student nights</p> <p>Good Practice - Swansea increased bus service for NTE increased numbers using service - business opportunity for transport services no significant issues have been identified positive due to increased use by students</p> <p>Planning/Town Centre regeneration opportunities to overcome the problem of lack of public toilets/transport create designated pick up/drop of points all co-located in specific points in town centre enable provision of toilets, taxi/bus links confidence that these services will be there provision of shelter from cold /wet nights</p> <p>Taxi Marshals - positive perception people feel safe to get in/out better experience</p>	<p><b>-ve</b>            Transport issues re rural communities including greater risk of drink &amp; drive</p>
<p><b>Comments/questions/recommendations C.Q.R</b>            Q. has framework raised transport issues/interventions enough?            R. include good practice interventions taxi marshals</p>	

<b>Macro-economic, environmental and sustainability factors</b>	
<p><b>+ve</b>            Licensing requirements - better use of evidence and data collection to inform /raise awareness with 'responsible bodies' better informed decision making</p> <p>Home office has a focus on diversification</p> <p>Waste management agenda - how to contribute to recycling agenda are there</p>	<p><b>-ve</b>            Framework currently missing the wider substance misuse strategy/policy context where do elements fit/contribute to each</p>

opportunities to contribute to increased personal responsibility	
<p><b>Comments/questions/recommendations C.Q.R</b></p> <p><b>C.</b> evidence sources - Challice? Cardiff research due for publication looking at relationship of density of licensed premises and health outcomes</p> <p><b>R.</b> S. Wales Violence Surveillance Data initiative should be expanded across Wales - good practice Demonstrated the ability to evidence impact of interventions-making a positive difference. Support/encourage data collection from interventions which is linked to outcomes making a difference.</p> <p><b>R</b> evidence base - the collection and range needs strengthening to inform licensing decisions. As important to 'educate' licensing bodies/decision makers re public health More guidance on the breadth of considerations required to undertake licensing decisions (recognition of constraints/limitations as WG do not set this agenda governed from Westminster)</p> <p><b>Q.</b></p> <ul style="list-style-type: none"> <li>• how do we better gather evidence locally/nationally</li> <li>• how do we make better use of that evidence/data</li> <li>• how can health data be embedded/inform into licensing decisions</li> </ul> <p><b>R.</b> potential to use Wider Determinants Framework to inform responses for licensing applications</p>	

Emerging themes from discussions:

Framework now:

- harm minimisation
- control
- enforcement
- licensing

Potential to strengthen in terms of:

- a focus on prevention
- promote the positives of NTE

Emerging themes

- culture
- education
- evidence base - recognition that the framework is guidance therefore very strong message that the framework should include a good range of evidence and best practice interventions to inform those having to implement the guidance. They require support in the research/planning phase. They need to have confidence in the quality and robustness of the evidence but that it saves time and duplication in the research/development phase.
- diversification
- promotion
- perceptions
- CCTV - risks if lost but recognition of the contribution it makes to aspects of NTE

## Appendix Five

### New Draft NTE Aims and Objectives

#### **Objective 1: To support the development of a systematic approach to gain a sound understanding of the NTE based on intelligence and accurate information**

##### **Outcomes:**

- a) Sharing of information, intelligence and resources amongst partnership agencies at the local and national level which helps promote preventive action
- b) Development of a programme of coordinated actions or projects to address identified problems using profiles of local area needs
- c) Recognition of a shared responsibility for the effective engagement and coordination of relevant agencies, stakeholders and local communities
- d) Effective and sustainable monitoring and evaluation of existing and new interventions to monitor progress and impact within the NTE

#### **Objective 2: To promote a sustainable environment and support prevention strategies to create a healthy, safe and diverse NTE in Wales**

##### **Outcomes:**

- a) Development and maintenance of diverse, safe and accessible environments in the NTE which support the needs of all NTE patrons, including vulnerable groups
- b) Effective provision of tailored facilities and infrastructure for all users of the NTE, including an effective transport system
- c) Promotion of key preventative messages to encourage a culture shift which minimises the risk of harm from alcohol and substance misuse in the NTE
- d) Encourage self-regulation and local involvement in of industry schemes to improve safety

#### **Objective 3: To support effective multi-agency management of the NTE and enforcement at the local level**

##### **Outcomes:**

- a) Sustainable provision of flexible and targeted emergency services in the NTE
- b) Efficient planning and use of licensing and legislative powers through joint-working and collaboration to ensure safety in the NTE
- c) Proactive enforcement of existing and new legislation incorporating a public health approach to policing
- d) Constructive and positive engagement between all key stakeholders, including public sector, industry and voluntary sector

**Agenda**  
**Night Time Economy Stakeholder Event**  
**Monday 23<sup>rd</sup> May 2016**  
**Cardiff Metropolitan University, Llandaff Campus, Cardiff**

**10am – 1pm (9.45am Registration with tea and coffee)**

- **10.00 - Welcome and Introduction**  
Janine Roderick, Policy Lead Public Health and Policing, Public Health Wales
- **10.05 - Overview of the Night Time Economy Framework**  
Gareth Hewitt, Head of Substance Misuse, Welsh Government
- **10.20 - Update on current position of the revised Framework following Consultation**  
Kathryn Ashton, Public Health Researcher, Public Health Wales
- **10.35 – Session 1 - Objectives of the revised Framework**  
Interactive session for all – led by Janine Roderick, Policy Lead Public Health and Policing, Public Health Wales
- **11.30 – Break**  
Tea, coffee and Welsh cakes
- **11.45 – Session 2 – Health Impact Assessment (HIA) (Introduction to HIA and discussion around key health impacts of the Framework)**  
Interactive session for all – led by Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales and Lee Parry-Williams, Senior Public Health Practitioner (Policy and impact assessment)
- **12.45 - Evaluation**  
Liz Green, Principal Health Impact Assessment Development Officer, Public Health Wales
- **12.55 – Close**  
Janine Roderick, Policy Lead Public Health and Policing, Public Health Wales

## Appendix Seven

Throughout both Stage Two workshops all participants were asked to provide current best practice examples that they were aware of in Wales. Many examples were cited and some of these are listed below:

- ‘Street Pastors’. There is evidence from this multi partnership approach of positive impact as a component part of Wrexham’s *Alcohol Demand Education Programme* (detail is included in reports to Welsh Government). Street Pastors have helped reduce tensions at the end of the night in the locality when concentrations of groups are queuing for taxis
- Security Industry Authority - *Violence Reduction Strategy*
- Multi Agency Approaches - Joint planning and working for key dates and events such as Christmas/Sporting event. This was first introduced in Wrexham and is now applied as a model across North Wales. There has been a reduced impact on Emergency Services Triage Service and this approach has included night time Street Pastors and also a Communication Strategy in respect of Pre-Loading
- *Best Bar None*. This is recognised as an excellent scheme which was well received by landlords and managers. It was successfully being implemented but unfortunately it has now ceased due to lack of financing. There has been an evaluation which could be used to implement best practice
- Implementation of ‘criminal orders’ to much better effect to manage issues within NTE rather than purely focussing on enforcement. This has proved supportive in managing issues
- Use of Taxi Marshals across Wales.