

# ***people's alcohol action coalition***

## **PAAC**

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11<sup>th</sup> December 2020

Hon. Selena Uibo MLA,  
Attorney-General and Minister for Justice,  
and  
Hon. Natasha Fyles,  
Minister for Health and Minister for Alcohol Policy

Parliament House,  
Darwin NT  
0800  
Via email

Dear Ministers,

I am writing on behalf of PAAC to raise a couple of matters in relation to the use of the Banned Drinker Register (BDR). The latest figures on the Health website show that as at 30<sup>th</sup> June there were 3,533 individuals on the BDR with active bans. The vast majority, 2269, were placed on the Register through police referrals, with 925 coming from NT courts. This is far fewer than the 7,000 that police estimated would be on the BDR after a year of its operation.

### **BDR system and reportable transactions**

We ask you to consider the use of the Banned Drinker Register ID system to monitor the sales of large volumes of take-away liquor. The Liquor Commission's January 2020 Decision in relation to such sales (attached\*) was, you would be aware, implemented on 3<sup>rd</sup> November, after delays that came about due to the objections of a group of licensees in Alice Springs.

Whilst we welcome the introduction of the scheme, we are concerned that it may not be as effective as intended, and may therefore not assist police to the greatest extent possible in the apprehension of those conducting illegal sales.

One problem we foresee is that a customer who wishes to buy large amounts of take-away liquor may simply visit a couple of venues on any given day. We understand that PALIs are informally keeping a record of this to try to prevent this from occurring, which is useful, but not sufficient.

It is our understanding that the scanning system, which in Alice Springs is set up to enforce the limits on the sale of cask wine and fortified wine, will not pick up instances where there are three sales in any one day, even though this is one of the triggers for reportable transactions. This alone may greatly reduce the efficacy of the scheme.

In its Decision, the Liquor Commission noted the licensees' submissions on the use of the ID system to identify suspicious (now reportable) transactions, at page 5, as follows:

'12. The Commission agrees with the matter raised at sub-paragraph 6f above. In its Decision delivered on 27 May 2019, the Commission stated:

The Commission notes the proposal by the Central Australia Liquor Accord and others that the identification system established by s 31A of the *Liquor Act* be enhanced so as to instantaneously flag suspicious transactions and alert police. The Commission considers that this proposal has merit. Although there are privacy issues to consider before adopting this proposal, it would seem clear that an expanded use of the Banned Drinkers Register could make it easier to target both problem drinkers and covert secondary suppliers. This would relieve the burden on licensees, and provide significant benefits in turn for law

enforcement. The Commission recommends that the Northern Territory Government review this proposal with a view to implementing it.

The Commission remains of that view and reiterates its recommendation.’

We also note the privacy issues mentioned, and ask that you consider how these may be addressed in order to implement the reportable transaction scheme using electronic means, as licensees have requested and which the Liquor Commission also supports. We appreciate that this is a sensitive issue, but we are also aware that it is possible to make alterations to the system, as has been done in relation to cask and fortified wine limits.

For example, is it possible that data relating to reportable transactions could be supplied to police on the day, with customers’ details continuing to be deleted at midnight? It is our understanding that the system currently in use is very sophisticated. Its use for this purpose would ease the pressure on both licensees and Police Auxiliary Licensing inspectors (PALIs).

### **BDR numbers**

On 13<sup>th</sup> November the BDR Registrar Jenni Cullen attended a PAAC meeting at our request. We had also hoped to meet with Cecelia Gore, Senior Director for Mental Health and AoD, but she was not available. Ms Cullen is also keen to see the BDR numbers increase, and advised that she had been conducting some education sessions outside Darwin, mainly in Katherine. She also suggested we write to you with our concerns.

As you know, there are numerous parties who may refer people to the BDR Registrar, including nurses, doctors, paramedics, Aboriginal health workers

psychologists, psychiatrists, child protection workers, sobering up shelter team leaders and child protection workers.

PAAC does not believe that problem drinkers are being referred at an acceptable rate by those who are authorised to make referrals.

In the case of sobering up shelters, for example, we believe that referral should be a contractual requirement for funding. If a person is intoxicated enough to be taken to a shelter, they should be referred. It is not acceptable for shelters to take the position that people will refuse to use their services, which we note do not involve treatment. We don't believe people will stop using these services, and if this should prove to be the case, so be it. There are many shelter clients who should be on the BDR and who are not being referred due to a lack of willingness on the part of shelter management.

Territory Families staff should be making more referrals, in particular when dealing with children who are on the streets whilst their parents or other carers are drinking to excess. Relevant Territory Families staff should be directed to refer people in these circumstances to the Registrar.

We are aware that many health professionals are concerned that a BDR referral would jeopardise their relationship with the patient, but we believe that, at least in the case of Emergency Department presentations where the patient is clearly intoxicated, such referrals should be made.

As with shelters, if a person turns up at ED adversely affected by alcohol, the Registrar should have the opportunity to investigate and put them on the BDR if she sees fit.

PAAC has previously argued, and we do so again, that because it takes a significant length of time for those with a serious alcohol addiction to address it with any success, the duration of an initial ban should be extended to twelve months. Three months is an insufficient period in which progress is likely to occur. The Registrar already has the power to issue a twelve-month banning order, but referrals need to be increased for these powers to be better utilised.

Given the reported increase in alcohol consumption by, and consequent harm to some people as a result of the increased income due to Jobseeker, it has become more important that we find better ways to target individuals who are, unfortunately, spending too much of these additional funds on alcohol.

We do not want the fact that some people are abusing alcohol to be used to jeopardise the many benefits from the increase in Newstart which, as you know, was previously well below the poverty line. It is important that Jobseeker stays at the increased rate and finding better ways to reduce any rise in alcohol abuse will be very important.

### **On-premises trial**

A person on the BDR is prohibited from possessing, supplying or consuming alcohol, but of course the reality is that it only applies to take-away liquor.

The on-premises trial of the earlier version of the BDR in Alice Springs was not evaluated; however, we believe it worked to break up drinking circles and to further reduce access to alcohol by those who were banned.

Given the current situation in Tennant Creek, where alcohol-related assaults have seen a significant increase, we believe it would be a very useful exercise

to trial the use of the BDR in local hotel bars and clubs in that town. It may also allow police to spend more time on pursuing illegal sales, in particular those involving alcohol from across the Queensland border.

### **Conclusion**

PAAC believes it is important that the BDR be used to the greatest practicable extent in order to assist NT residents with alcohol problems, and to decrease pressure on their families and the general community. At the moment, the BDR is under-utilised, with considerable potential for expansion.

We think the above suggestions would assist in further reducing consumption and therefore, community well-being.

I would be happy to discuss these issues further with you. Please do not hesitate to contact either myself or PAAC's Policy Co-ordinator Vicki Gillick on 0401 077 483.

Yours sincerely,

A handwritten signature in black ink, appearing to read "John Boffa". The signature is written in a cursive style with a large, sweeping initial 'J'.

Dr. John Boffa  
on behalf of PAAC

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