

TABLE OF RECOMMENDATIONS
NT GOVERNMENT
POSITION ON ALCOHOL POLICIES AND
LEGISLATION REVIEW FINAL REPORT'S
RECOMMENDATIONS



Note: ‘Supported’ means supported without change or condition, ‘Supported in-principle’ means that the Government endorses the general concept, principle or outcome of the recommendation, but may wish to achieve the same result in a different manner to that prescribed by the recommendation and ‘not supported’ means the general concept, principle or outcome of the recommendation is rejected by Government and will not be implemented.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
CHAPTER 1 Whole of Government Approach 1.1 WHOLE-OF GOVERNMENT APPROACH	1.1.1 The Northern Territory Government strive for a bipartisan agreement to give effect to the alcohol harm minimisation framework to ensure a sustained long-term approach to addressing the issues.	Supported	The NT Government agrees with the sentiment that for alcohol reforms to be successful in the Territory long term bipartisan support is required.
	1.1.2 Alcohol harm reduction be given major project status within government, with all new programs/ policies/Cabinet submissions to consider and address the impact they will have on reducing the harms caused by alcohol.	Supported	The NT Government has publicly declared the importance it places on alcohol reform and the Territory and will continue to do so through its commitment to implementing the Alcohol Harm Minimisation Action Plan 2018-2019.
	1.1.3 A strong focus be given to addressing social determinants to support alcohol harm minimisation efforts.	Supported	<p>The NT Government acknowledges that a sustained reduction in alcohol-related harms can only be achieved by addressing the underlying causal factors, which means addressing social determinants of health such as employment, housing and social and emotional wellbeing.</p> <p>This approach is represented in the Alcohol Harm Minimisation Action Plan 2018-2019.</p>

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>1.1.4 The establishment of a high-level executive position within the Department of the Chief Minister that reports directly to the Chief Executive (CE) and through the CE to the Chief Minister and Cabinet with the Chief Minister then reporting to Parliament on all alcohol related matters.</p>	Supported	The recommendation has been implemented through the establishment of the Alcohol Review Implementation Team within the Department of the Chief Minister (DCM), which is led by an Executive Director.
	<p>1.1.5 The role of the high level officer in the Department of the Chief Minister shall include, but not be limited to:</p> <ul style="list-style-type: none"> • coordinating the Northern Territory Government response to the Alcohol Policies and Legislation review • oversight of the development of an inter-agency implementation plan with clear performance indicators for each agency • ensuring liaison with non-government organisations and the Australian Government on all alcohol-related matters • ensuring adequate data collection and appropriate linkage across all agencies • coordinating evaluation of the interagency implementation plan and its initiatives in partnership with external research bodies • reporting through the Chief Minister to Parliament on progress with implementation and outcomes • coordinating public health awareness campaigns at a population, community and individual level. 	Supported	See comments at recommendation 1.1.4.

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	<p>1.1.6 The high-level officer in the Department of the Chief Minister oversee a unit that is resourced with, at a minimum, support staff with a knowledge of health, law enforcement, and regulation matters.</p>	Supported	The Alcohol Review Implementation Team comprises of officers with legal qualifications, extensive liquor regulation and licensing experience, alcohol and other drug regulation and policy experience and has access to expertise from other agencies and within DCM, as required.
	<p>1.2.1 Public education campaigns be developed to:</p> <ul style="list-style-type: none"> • target sub-groups of the population to address the drinking culture within those groups • encourage abstinence among people under 18 (and especially among those under 15) • highlight the risks of drinking when pregnant, planning a pregnancy or when breastfeeding • highlight risks of alcohol in the workplace • highlight the impact of alcohol on sporting performance • highlight the risks of driving under the influence of alcohol • highlight the connection between consumption of alcohol and violence. 	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>1.2.2 All campaigns promote the NHMRC Australian Guidelines to reduce health risks from drinking alcohol and have an overall aim to improve the drinking culture, and ultimately reduce harm within the Northern Territory.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	1.2.3 To assess the success of the measures outlined in this report a baseline survey and subsequent three yearly attitudinal survey be undertaken to assess the attitudes of Territorians towards the use of alcohol.	Supported	The NT Government agrees that improved baseline data is required for the Territory and is working in partnership with key organisations to obtain it. This is reflected in the Alcohol Harm Minimisation Action Plan 2018-2019.
	1.2.4 The Northern Territory Government give priority to hosting, supporting and promoting alcohol free events.	Supported	The NT Government is committed to providing more alcohol-free events for young people across the Territory.
	1.2.5 The Northern Territory Government increase resources to provide young people with access to further sporting opportunities, drop-in centres, and programs to encourage family/community connectedness and personal/social development.	Supported	The NT Government is continuing to roll-out funding through agencies such as DCM and Territory Families to non-government organisations (NGOs) to provide services, support and activities for young people and family across the Territory.
1.3 RESEARCH/ DATA/ EVALUATION	1.3.1 The data linkage project (Improving the developmental outcomes of Northern Territory children: a data linkage study to inform policy and practice in family services and education) be expanded to allow for the capture and sharing of data about alcohol use, treatment and prevention, to enable better access to, and use of, relevant data to inform alcohol harm minimisation initiatives, policies and programs.	Supported	The 'data linkage project', a three year project (2015-2017), is being undertaken by the National Health and Medical Research Council (NHMRC), Menzies, Territory Families, Department of Health and AMSANT. Government will investigate the opportunities to build-on or expand the data linkage study.

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	1.3.2 The Northern Territory Government support the establishment of an external dedicated research unit, either new or within an existing research body, addressing alcohol and other drugs. The unit report to Parliament and have the charter of initiating research into the causes, patterns and consequences of alcohol and other drug misuse in the Northern Territory.	Supported	<p>The NT Government has existing partnerships and funding arrangements with a number of research organisations including Menzies and CDU.</p> <p>Government will investigate what opportunities there are to establish such a dedicate research unit within these organisations or if the Northern Territory can utilise existing specialised research units within other organisations.</p>
	1.3.3 The research body also undertake the role of conducting independent, high-quality evaluations of interventions and policies.	Supported	See comment at recommendation 1.3.2.
	1.3.4 The research body work towards standardising data collection systems and records across all services providers.	Supported	See comment at recommendation 1.3.2.
	1.3.5 Collection of data relating to the BDR commence immediately and an independent evaluation of the BDR be undertaken to assess its impact on alcohol harm minimisation within three years or some other suitable period.	Supported	<p>The Banned Drinker Register (BDR) publishes monitoring reports online every month.</p> <p>The BDR will release an Evaluation Report for September-December 2017 in March 2018, another Evaluation Report for September 2017- March 2018 in June 2018 and another report evaluating its effectiveness after one year of operation in March 2019.</p> <p>A follow-up evaluation report will be publicly released in March 2020, after two years of operation.</p>

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	1.3.6 The Northern Territory Government regularly collect and publish comprehensive alcohol related wholesale supply, consumption, criminal justice, hospital and health data. Care must be taken to ensure the capture of data relating to the online sale and supply of alcohol.	Supported	The capture, evaluation and publication of data will be delivered under the Alcohol Harm Minimisation Action Plan 2018-2019. Government acknowledges the need to capture the data relating to online sales of alcohol in the Northern Territory. Investigations are currently underway as to how this can occur.
	1.3.7 Feedback from all data collected be provided to stakeholders including the licensing authority, emergency departments, police, ambulance and licensees.	Supported	See comment at recommendation 1.3.6.
	1.3.8 The Northern Territory Government trial the Cardiff model to link emergency department data with assault statistics to inform policy development in this area and to improve front-line response to incidents.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	1.3.9 A last drinks survey, be developed and implemented across the Northern Territory, enabling data linkage across police, emergency departments and the licensing authority.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	1.3.10 Emergency department data collection include mandatory questions on; location of alcohol related event; consumption of alcohol in the past 12 hours; place of last alcoholic drink consumed; place where the majority of the alcohol was purchased.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	1.3.11 A 'last drinks' monitoring system be implemented by Police to mandatorily identify where people involved in alcohol related crime purchased and consumed their last drinks.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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CHAPTER 2 Regulatory Framework 2.1 The <i>Liquor Act</i>	2.1.1	The <i>Liquor Act</i> be rewritten.	Supported This is a key initiative under the Alcohol Harm Minimisation Action Plan 2018–2019. It is anticipated this will commence in mid-2018.
	2.1.2	The <i>Liquor Act</i> provide a coherent framework for the operation of the liquor industry within harm minimisation principles consistent with the goals and aims discussed in this report.	Supported See comments at recommendation 2.1.1.
	2.1.3	Remove confusing and inconsistent provisions in the Act.	Supported See comments at recommendation 2.1.1.
	2.1.4	Develop a Public Interest and Community Impact test in accordance with this report.	Supported Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test.
	2.1.5	The public interest and community impact test be explained in guidelines covering, but not limited to, the matters identified in section 6 of the <i>Liquor Act</i> and in table 12 included in this report.	Supported See comments at recommendation 2.1.4.
	2.1.6	All decisions made under the Act be required to apply the public interest and community impact test.	Supported See comments at recommendation 2.1.4.

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	2.1.7 The Act make it clear that at all times the onus rests firmly upon the applicant to establish the case for the outcome sought by the applicant.	Supported	See comments at recommendation 2.1.4.
	2.1.8 Section 3 of the Act remain in its present or a similar form.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
2.2 Who make decisions under the <i>Liquor Act</i>	2.2.1 A Liquor Commission be established as the independent and primary decision maker under the <i>Liquor Act</i> .	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sitings of the Legislative Assembly.
	2.2.2 The Commission consist of four appointed members, with three members (Chair and two others) required to be in attendance for a hearing.	Supported	See comments at recommendation 2.2.1.
	2.2.3 The Chair of the Commission be a lawyer with a minimum of five years of post-admission experience and be of good standing in the community.	Supported	See comments at recommendation 2.2.1.
	2.2.4 At least one sitting member have a health background.	Supported	See comments at recommendation 2.2.1.
	2.2.5 The structure and operations of the Commission reflect the matters discussed in this report.	Supported	See comments at recommendation 2.2.1.

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	<p>2.2.6 The position of Director of Licensing be established, with the position being vested with the powers discussed in this report.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
2.3 Application process and consultation	<p>2.3.1 The <i>Liquor Act</i> be amended to permit the Commission to grant leave to peak industry bodies, key government agencies and peak community and health bodies, to make submissions when it holds a hearing with respect to a licence application or an alcohol management plan.</p>	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test.
	<p>2.3.2 The <i>Liquor Act</i> be amended to require both the Northern Territory Police, Fire and Emergency Service and Department of Health to be formally notified of an application and that a response be provided by each.</p>	Supported	See comments at recommendation 2.3.1.
2.4 Liquor Licence Fees	<p>2.4.1 All application fees be reviewed and set at an appropriate level in line with other jurisdictions.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Annual Fees	<p>2.4.2 An annual risk-based licensing fee be introduced for all liquor licence categories based on the following principles:</p> <ul style="list-style-type: none"> • a base fee that applies to the different categories of licence • a loading fee to reflect the patron capacity of the venue for on-premises and club licence categories • a loading fee for the takeaway licence category based on volume of sales • a loading fee for extended hours authorities • a loading fee attributed to poor compliance history. 	Supported in-principle	All licence fees (including the introduction of an annual fee) will be considered as part of the <i>Liquor Act</i> rewrite, which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	<p>2.4.3 Payment of the annual fee be a statutory requirement and failing to make payment would give rise to suspension of the licence and recovery of the amount owing.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
<p>2.5 Categories and Terms of Conditions of Liquor Licences</p> <p>Trading Days and Hours of Operation – On-premises Licences</p>	<p>2.5.1 Standard Days of trade for on-premises licences be Monday to Saturday, with Sundays, Good Friday and Christmas Day defined as Restricted Days to which restricted hours apply (10am to 10pm).</p>	Supported in-principle	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.5.2 An automatic extension of the standard trading hours for consumption on-premises, or trading hours authorised by an extended trading authority, will apply on New Year's Eve for an additional three hours of trade, but in any event not past 4am.</p>	Supported in-principle	See comments at recommendation 2.5.1.
	<p>2.5.3 Standard Hours be established by legislation to apply to all licence categories that authorise the sale of retail alcohol for consumption on the premises. Those hours be 10 am to 11 pm Monday to Saturday, and 10 am to 10 pm on Sundays and other restricted days.</p>	Supported in-principle	See comments at recommendation 2.5.1.
	<p>2.5.4 The licence identify the hours, within the Standard Hours, in which trading will take place, making it unlawful to trade outside those hours.</p>	Supported in-principle	See comments at recommendation 2.5.1.

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	2.5.5 The Standard Hours may be extended by applying for and being granted an extended hours trading authority.	Supported in-principle	See comments at recommendation 2.5.1.
Trading Days and Hours – Takeaway Licences	2.5.6 The Standard Days for trade in takeaway liquor be Monday to Saturday, with the sale of takeaway liquor on Sunday prohibited.	Not supported	Government has specifically rejected that recommendation insofar as it concerns the prohibition of takeaway alcohol on Sundays.
	2.5.7 Further restrictions on such trading days be provided in appropriate circumstances as assessed by the licensing authority.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.8 Liquor supply plans allow for regions to have specific takeaway sales free days each week where a need is identified.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.9 The current prohibition of takeaway sales on Good Friday and Christmas Day be retained.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Takeaway Standard Hours	2.5.10 Standard Hours for all takeaway liquor outlets be provided in the <i>Liquor Act</i> to be no earlier than 10 am and no later than 10 pm Monday to Saturday.	Supported in-principle	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.5.11 The takeaway licence must identify the actual hours within the Standard Hours in which takeaway trading will take place, making it unlawful to trade outside those hours.	Supported in-principle	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.5.12 Further restrictions on such trading hours (later opening hours and earlier closing hours) may be provided in appropriate circumstances as assessed by the licensing authority.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

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Store Licences	2.5.13 Takeaway liquor only be permitted to be sold from a stand-alone business in which the primary focus of the business is the sale of alcohol.	Supported in-principle	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
Cessation of Trade	2.5.14 The <i>Liquor Act</i> be amended to provide that licensees must provide notice, in writing, to the licensing authority when they intend to cease trading for periods longer than six weeks, and prohibiting the cessation of trade for a period longer than six months without prior consent from the licensing authority.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.15 The <i>Liquor Act</i> be amended to empower the licensing authority to cancel a licence that has ceased operating.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Categories of Licences	2.5.16 The following categories or licences be established: <ul style="list-style-type: none"> • On-premises Liquor Licence • Club Licence • Takeaway Liquor Licence • Restaurant and Catering Licence • Liquor Producer Licence • Major Event Licence • Limited Licence • BYO Licence • Interstate Supplier Licence 	Supported in-principle	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.5.17 Transitional arrangements ensure that licensees are subject to annual risk based licence fees during the transitional period.	Supported in-principle	All licence fees (including the introduction of an annual fee) will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	2.5.18 A condition be imposed on all extended hours authorities, prohibiting the sale of beverages with a high alcohol content (>5 per cent), and rapid consumption beverages such as shots.	Supported in-principle	Licence categories and conditions will be considered as part of the Liquor Act rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.5.19 Store licences transitioning to takeaway licences be subject to a condition restricting liquor sales to 15 per cent of the gross annual sales of the business, and a seven year sunset period in which time the licensee obtains a takeaway licence and the transitional licence will cease to operate.	Supported in-principle	Licence categories and conditions will be considered as part of the Liquor Act rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019 and this recommendation will be phased in.
	2.5.20 The Northern Territory Government imposes an immediate moratorium on issuing new takeaway licences to allow for the new framework to be established and take effect and because such licences have reached saturation point. A review be undertaken after the first five years of operation when consideration be given to extending the moratorium.	Supported	Currently a moratorium by Regulation is in place but will be formalised and extended to five years through legislation introduced in the February 2018 Sittings of the Legislative Assembly.
	2.5.21 An independent review be undertaken on the effectiveness of the categories at five years from commencement and further modification of categories be considered where necessary.	Supported	High quality research, data and evaluations are crucial to informing the NT Government's efforts to minimise alcohol-related harms.
Transfer of a liquor licence, substitution of premises and variation of conditions	2.5.22 Approval for transfer of a liquor licence only be granted within the same licence category and will be subject to appropriate probity, public interest and community impact requirements.	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	2.5.23 Fees for a transfer application should be set at an appropriate level.	Supported	All licence fees (including the introduction of an annual fee) will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.5.24 The <i>Liquor Act</i> be amended to require applications for the substitution of premises to be treated as a new application under the Act and be subject to the same requirements including consideration of the public interest and community impact test.	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test.
	2.5.25 The licensing authority have the discretion to authorise a substitution without the new application process being undertaken where the premises to be substituted is in close proximity to the premises identified in the licence; there is no significant change in the nature of the business; and no other concerns arise.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.26 Public notice of any substitution application be required.	Supported	Legislation introduced in the February 2018 Sittings of the Legislative Assembly requires public notice for substitution applications and for these to be treated as new applications.
	2.5.27 No change to a licence category be made through the substitution process.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.28 Fees for a substitution application should be set at an appropriate level.	Supported	All licence fees (including the introduction of an annual fee) will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	2.5.29 An application to vary a licence within the terms and conditions of a category be permitted, however, variation that moves a licence from one category to another not be permitted.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.30 The licensing authority retain the power to vary licence conditions, including standard conditions, when considered necessary.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.31 All variation applications be subject to the public interest and community impact test.	Supported	Applications for variation to licences will be subject to the new public interest and community impact test through legislation introduced in the February 2018 Sittings of the Legislative Assembly.
Liquor Accords	2.5.32 That liquor accords continue to be an element in the regulatory framework for liquor licences.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.33 The <i>Liquor Act</i> be amended, in relation to accords, to: <ul style="list-style-type: none"> allow the licensing authority to give a direction to a licensee requiring participation in a liquor accord and noting that failure to comply will constitute a breach impose a positive duty on the administrative arm of the licensing authority to establish liquor accords. 	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.5.34 The licensing authority undertake evaluation and monitoring to inform regular reviews of all accords.	Supported	High quality research, data and evaluations are crucial to informing the NT Government's efforts to minimise alcohol-related harms.
	2.5.35 The licensing authority publish the contents of all accords.	Supported	NT Government will ensure that all current and future accords are published. If deemed necessary, this requirement will be incorporated into the new <i>Liquor Act</i> .

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2.6 Density of liquor licences and the size of liquor outlets	2.6.1	The <i>Liquor Act</i> provide that density (however described) is a matter to be taken into account when considering the public interest and community impact.	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test. Volume and density have been included in the public interest and community impact test.
	2.6.2	The <i>Liquor Act</i> provide that the volume of alcohol to enter the community be taken into account when considering the public interest and community impact.	Supported	See comments at recommendation 2.6.2.
	2.6.3	The <i>Liquor Act</i> provide that, to assist with assessing density, licensees be identified by clearly defined geographic and population areas.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.6.4	The Licensing database be updated to ensure information relating to the location of a venue is accurate.	Supported	Licensing NT are reviewing their processes to ensure that the database is accurate.
	2.6.5	Licensees be required to provide regular returns (six monthly or yearly) reporting the volume of alcohol sales from their premises.	Supported	High quality research, data and evaluations are crucial to informing the NT Government's efforts to minimise alcohol related harms. If deemed necessary, this requirement will be incorporated into the new <i>Liquor Act</i> .
2.7 Compliance and Enforcement	2.7.1	A more rigorous and publicised approach be taken to the compliance and enforcement regime to ensure compliance with the requirements of the licence and the <i>Liquor Act</i> and that failures are met with consequences that deter the licensee and others from similar conduct. Consequences of breaches should be both financial and reputational and be seen as part of broad cultural change in relation to alcohol.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	<p>2.7.2 More information be made available to both licensees and the public about liquor licensing regulation in the Northern Territory. In respect of licensees, this information should be in a format that can be easily incorporated into induction and training programs for new and existing staff to encourage and improve licensee compliance.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.7.3 The Department of the Chief Minister oversee a review of current processes with the Commissioner of Police and the licensing authority as they relate to planning, information gathering, staff training, liaison and secondment, joint operations and any other measure, and make necessary changes to improve compliance and enforcement outcomes.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.7.4 The <i>Liquor Act</i> be amended to empower police with similar authority to suspend a licence as provided to the licensing authority under section 48A of the <i>Liquor Act</i>, save that such powers are to be limited to suspension for a 48 hour period.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Compliance Activity	<p>2.7.5 Licensing be appropriately resourced to undertake a broad range of compliance activity under the <i>Liquor Act</i>.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.7.6 Licensing prepare an annual audit and compliance plan for liquor licences. Outcomes to be reported in the licensing authority's annual report.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

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	<p>2.7.7 The <i>Liquor Act</i> be amended to allow for harm minimisation audits to be conducted periodically in respect of licences, with the ability for the licensing authority to make a decision regarding suspension, revocation or amendment of the licence depending on the outcome of the audit.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	<p>2.7.8 Licensing be sufficiently resourced to regularly undertake covert 'mystery shopper' programs, similar to those used in Queensland.</p>	Supported in-principle	To be considered by Licensing NT and Police when developing their compliance and enforcement plan (refer to comments at recommendation 2.7.6).
Enforcement	<p>2.7.9 The number of offences that may be dealt with by infringement notice under the <i>Liquor Act</i> be reviewed and, where appropriate, expanded.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	<p>2.7.10 The <i>Liquor Act</i> be amended to authorise Licensing Inspectors to issue infringement notices in the same circumstances as allowed for police.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	<p>2.7.11 The <i>Liquor Act</i> be amended to allow Licensing Inspectors and police to issue on the spot infringement notices.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
2.8 Responsible Service of Alcohol	<p>2.8.1 The <i>Liquor Act</i> be amended to include RSA requirements as a statutory condition of a liquor licence to elevate the importance of RSA.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	<p>2.8.2 The <i>Liquor Act</i> be amended to include the requirement to hold an RSA certificate on commencement of employment, thereby removing the one-month grace period that now applies.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

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	2.8.3 An RSA refresher course be undertaken every three years, with the course content and delivery being approved by the licensing authority.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.8.4 High risk licences (such as major event licences or licences that operate an extended hours authority) must develop and implement an amenity and patron safety plan which includes an element for RSA.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.8.5 Specific compliance and enforcement activity relating to RSA, such as the 'mystery shopper' program, be introduced and administered by the licensing authority.	Supported in-principle	To be considered by Licensing NT and Police when developing their compliance and enforcement plan (refer to recommendation 2.7.6).
2.9 Signage in licenced premises	2.9.1 The <i>Liquor Act</i> be amended to provide that mandatory signage, as approved by the licensing authority, be displayed in licensed premises.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
2.10 Promotion and Advertising	<p>2.10.1 The Northern Territory Government advocate at the national level for independent, legislated control on the content, placement and volume of all forms of alcohol advertising and promotion. There should be a comprehensive code and enforceable decisions with sanctions that act as a deterrent to inappropriate alcohol advertising.</p>	Supported	<p>The National Alcohol Strategy 2018–2026 is currently out for consultation. The Strategy advocates for a number of actions in relation to alcohol advertising, including:</p> <ul style="list-style-type: none"> – A single national advertising code which covers placement and content across all media which provides consistent protection of exposure to minors regardless of programming – Implement regulatory measures to reduce alcohol advertising exposure to young people (including sport and online) – Effective controls on alcohol promotion to protect at risk groups including youth and dependent drinkers – Regulator measures to prevent promotion of discounted/low priced alcohol including bulk buys, two for one offers, shop-a-dockets and other promotions based on price. <p>The NT Government will look to align its approaches to those outlined in the Strategy so far as practicable.</p>
	<p>2.10.2 The Northern Territory Government advocate that the issue of alcohol advertising during telecasts of live sports events be considered at a national level, with a view to prohibiting, or at least restricting, such advertising.</p>	Supported	See comments at recommendation 2.10.1
	<p>2.10.3 The Northern Territory Government advocate nationally for initiatives that provide for alternatives to sports sponsorship by the alcohol industry.</p>	Supported	See comments at recommendation 2.10.1

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	2.10.4 The licensing authority endeavour to ensure the Good Sports program or similar programs are incorporated into future accords and alcohol management plans to promote the health and safety of those associated with sporting clubs.	Supported	The Good Sports program is currently in place across 87 sports clubs in the Northern Territory. The Northern Territory Government continues to explore opportunities to help licensed clubs promote the health and safety of members and their communities.
	2.10.5 The <i>Liquor Act</i> be amended to make clear the power of the licensing authority to control, restrict or prohibit undesirable promotional activity in relation to both on-premises licences and takeaway licences.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.10.6 The legislation makes clear that promotion (by whatever means) of alcohol by reference to harmful price discounts is prohibited.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite). Also note the actions identified in the draft National Alcohol Strategy 2018-2026.
	2.10.7 The <i>Liquor Act</i> be amended to make clear the power of the licensing authority to restrict or prohibit the sale of undesirable liquor products in relation to both on-premises licences and takeaway licences.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.10.8 The <i>Liquor Act</i> be amended to provide for the licensing authority to specifically prohibit certain types of promotional activities, such as shopper dockets.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.10.9 External advertising of the sale of alcohol be prohibited for businesses with a current store licence that will be transitioning to a takeaway licence until a takeaway licence is obtained.	Supported	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	2.10.10 All external advertising on licensed premises comply with the Advertising Code of Practice as approved under the <i>Liquor Act</i> .	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	2.10.11 The Advertising Code of Practice be reviewed to ensure it conforms with harm minimisation principles.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.10.12 The Northern Territory Government bans alcohol advertising on publicly owned assets such as buses and buildings.	Supported	An appropriate policy is to be developed as soon as practicable by the relevant NT Government agencies, including but not limited to the Department of Infrastructure, Planning and Logistics and the Department of Corporate and Information Services.
2.11 Alcohol and Vessels	2.11.1 The Northern Territory Government legislate to make it an offence for a person to operate or navigate a vessel with a breath or blood alcohol content above a prescribed minimum in a manner similar to the requirements of the Traffic Act in relation to vehicles.	Supported	Appropriate legislation will be developed for the Northern Territory context and will be supported by raising awareness and educating Territory and visiting recreational boaters on the dangers of operating a vessel while under the influence of alcohol.
2.12 Restricted Areas General Restricted Areas and Alcohol Protected Areas	2.12.1 No changes be made to the dry status of an area/ community without local decision making and local ownership over alcohol management.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019. There will be a focus on an increase on Aboriginal communities to decide how harms associated with alcohol can be addressed in their communities.
	2.12.2 Consultation commence now with communities the subject of an Alcohol Protected Area declaration under the SFNT Act, as to the future management of alcohol in that community when the SFNT Act ceases in 2022.	Supported	The NT Government is committed to working with the Commonwealth Government to ensure culturally appropriate and respectful consultations are undertaken with affected communities.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>2.12.3 The Northern Territory Government convene meetings with the Australian Government and representatives of each of the Alice Springs town camps to formulate an alcohol management plan relating to supply for the particular circumstances of the individual town camps.</p>	Supported	See comments at recommendation 2.12.2.
Public Restricted Areas	<p>2.12.4 The present confusing array of Restricted Areas be abolished and all public space in urban areas be restricted, with the ability for exemptions to be declared in appropriate cases. Such exemptions may be time limited.</p>	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan (<i>Liquor Act</i> rewrite).
	<p>2.12.5 The licensing authority, or the local government authority, be responsible for granting exemptions on its own initiative or on application from appropriate bodies. All exemptions must have regard to the public interest and community impact.</p>	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Private Restricted Areas	<p>2.12.6 The <i>Liquor Act</i> be amended to provide the authority for Public Housing Safety Officers, Public Housing Officers and Police to make an application for a public housing residence to be declared as restricted premises</p>	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
Alcohol Management Plans (AMP) and Liquor Supply Plans (LSP)	<p>2.12.7 In line with the commitment to local decision making, the Northern Territory Government use the partnership between the Regional Network Group in the Department of the Chief Minister and APONT, to reinvigorate the AMP process with communities.</p>	Supported	Government agencies and service providers are committed to supporting those communities that wish to decide how harms associated with alcohol can be addressed in their communities.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>2.12.8 The <i>Liquor Act</i> be amended to specifically empower the licensing authority to inquire into and promulgate local and regional LSPs. The Act should directly, or through regulations, specify in detail the powers and obligations of the licensing authority as well as the local community in developing such plans.</p>	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).
	<p>2.12.9 The regime should:</p> <ul style="list-style-type: none"> • define a regional Liquor Supply Plan as a set of provisions that apply to a particular geographic area • include provisions that specify: <ul style="list-style-type: none"> – areas within the LSP area where liquor licences may not be issued – areas subject to specific restrictions such as a General Restricted Area declaration – types of business that may or may not be operated in conjunction with a liquor licence in the area and identify pre-requisites additional to those in the Act or Guidelines for a business to be licensed – standard conditions for the area that may impose further restrictions on the conditions applicable to licence categories (for example, hours of operation, types of liquor and types of container) – matters that relate to particular controls on the behaviour, or limits on the rights of individuals, provided that the proposed controls or limits conform with community expectations, are likely to reduce alcohol related harm and are consistent with the objects of the <i>Liquor Act</i> - this would include things such as the introduction of a permit system 	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
2.12.9 cont	<ul style="list-style-type: none"> - the collection of data and other information concerning the resulting effects of the plan - the establishment of a local or regional alcohol management committee or the use of an already established group/ committee to undertake this function. • provide that, where the licensing authority is satisfied there is likely to be a public benefit, a plan may also specify for a given period, no greater than three years, the number of licences generally, or in particular categories, that may be issued in the locality or region • specify that the licensing authority may, having regard to the objects of the Act, the public interest and any request, submission or other information that has been provided to it, determine that a Liquor Supply Plan should be developed for an area and determine the process that will apply to develop the plan • entitle specific organisations or people to apply to the licensing authority for it to determine that a Liquor Supply Plan should be developed for the area. Such organisations and people would include but not be limited to community members, regional councils, health services and local police officers, or the licensing authority itself 	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
2.12.9 cont	<ul style="list-style-type: none"> • provide that, unless the licensing authority is satisfied, after consideration of any material provided by the applicant or any other person, that development of a Liquor Supply Plan would not advance the objects of the Act, that such a plan should be developed unless there is an overwhelming reason not to • provide that the licensing authority may determine that all or some elements of a plan are to be trialled for a specified period of time, no longer than 12 months, and that the licensing authority should provide for a process to evaluate the trialled elements provide that the licensing authority may determine the procedures to be followed to develop the Liquor Supply Plan, but also provide that any person may make a submission in writing, that the licensing authority will provide assistance to people who wish to provide an oral submission to turn it into writing, and that the licensing authority will in the first instance use informal procedures to promote agreement among licensees and community members about the content of plan. The legislation should also provide that, where no agreement is reached, the licensing authority may conduct a hearing where it may appoint counsel assisting the licensing authority. At the hearing any licensee, local government body, the Commissioner of Police, any existing alcohol management committee (or equivalent committee tasked with LSP related coordination functions) and any government or community-based health, welfare or legal service provider may as of right, and any other person may with leave of the licensing authority, attend and give relevant evidence • provide that a Liquor Supply Plan should specify a period of time not less than two years and not more than five years after which the plan must be reviewed by the licensing authority • provide that the licensing authority should be empowered to establish and support ad hoc or permanent local advisory committees to assist it in gaining detailed input from community interests 	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

CATEGORY	RECOMMENDATION	POSITION	COMMENTS	
Alcohol Service Provision in Remote Communities	2.12.10	The Northern Territory Government develop clear action plans for managing alcohol in communities as we move towards 2022 and the cessation of the SFNT Act, and that the AMP process, including permits, be a part of that process.	Supported	There will be a focus on an increase on Aboriginal communities to decide how harms associated with alcohol can be addressed in their communities. This also relates to recommendation 2.12.2.
	2.12.11	A comprehensive set of guidelines be developed providing for the core requirements of a permit system for the guidance of communities in which such systems exist and for communities considering such a system.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.12.12	Government act on the recommendations of the review of Liquor Permit Schemes under the Northern Territory <i>Liquor Act</i> (permit report) – prepared by the Menzies School of Health Research. Those recommendations appear at Appendix E to this report.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	2.12.13	The introduction of licensed social clubs, or changes to conditions of existing licensed social clubs, only occur following extensive consultation with communities through a local decision making framework.	Supported	There will be a focus on an increase on Aboriginal communities to decide how harms associated with alcohol can be addressed in their communities.
	2.12.14	Licensed social clubs be encouraged to emphasise the social aspect of the club rather than be simply a place to consume alcohol.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>2.12.15 Government act on the recommendations of the Bowchung Report, <i>Managing Alcohol Consumption – a review on licensed clubs in remote Indigenous communities in the Northern Territory</i>. Those recommendations appear at Appendix F to this report.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.12.16 A specific education campaign be conducted in remote communities to raise awareness of the problems that sly-grogging causes, and encourage people to ‘dob-in-a-grog-runner’.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>2.12.17 Additional police resources be made available to remote communities to provide appropriate law enforcement including measures to restrict secondary supply of alcohol.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
CHAPTER 3 HARM PREVENTION 3.1 VOLUMETRIC TAXATION	3.1.1 The Northern Territory Government continue to vigorously lobby the Australian Government in relation to the implementation of a single volumetric tax rate across all alcohol products and for the abolishment of the current WET tax for wine products.	Supported	<p>The recently released draft National Alcohol Strategy 2018–2026 recommends taxation reform to include volumetric taxation (as recommended by the Henry Tax Review).</p> <p>The NT Government supports implementation of this action by the Commonwealth Government.</p>
3.2 FLOOR PRICE	3.2.1 A minimum unit price (floor price) for all alcohol products of approximately \$1.50 per standard drink or such other figure as may be determined after appropriate review, in recognition that raising the price of alcohol is a cost-effective way to reduce alcohol-related harm.	Supported	The NT Government supports the implementation of a floor price for alcohol based on modelling for NT context.
	3.2.2 The minimum unit price apply to all sales and supply of alcohol in the Northern Territory including all outlets conducting on-premises and takeaway sales. This figure be indexed against average ordinary time wages to ensure its effect is not diminished over time.	Supported	See comments at recommendation 3.2.1.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>3.2.3 The impact of the introduction of a minimum unit price be rigorously evaluated after three years on its impact on consumption and alcohol related harms.</p>	Supported in-principle	High quality research, data and evaluations are crucial to informing the NT Government's efforts to minimise alcohol-related harms. If deemed necessary, this requirement will be incorporated into the new <i>Liquor Act</i> .
3.3 SAFE AND VIBRANT ENTERTAINMENT PRECINCT	<p>3.3.1 A review be conducted of the statistical data about alcohol related harm experienced within the Darwin Waterfront precinct to assess whether the Darwin CBD Designated Area should be extended to include the Darwin Waterfront precinct.</p>	Supported	Licensing NT will undertake the review in 2018.
	<p>3.3.2 All licences authorised to trade until 4am include a condition that requires a lock out to be initiated from 3am.</p>	Supported	Formalise the current conditions for late night venues with 3am lockout.
	<p>3.3.3 The <i>Liquor Act</i> be amended to require any licensee trading under an extended trading authority to install an approved ID scanner linked to the BDR at each entry to their licensed premises and those on the BDR be denied entry.</p>	Supported	To be developed as Stage 2 of the Banned Drinker Register.
	<p>3.3.4 The licensing authority ensure (through the licensing process) that late night precincts remain first and foremost entertainment precincts and not become alcohol precincts. The licensing authority should ensure there is an appropriate mix of licensed businesses offering a varied range of entertainment options.</p>	Supported	Legislation reinstating the Liquor Commission was introduced in the February 2018 Sittings of the Legislative Assembly. Under this legislation, applicants have the onus of satisfying the Liquor Commission under the public interest and community impact test.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.3.5 The impact and effectiveness of declarations of Designated Areas under the <i>Liquor Act</i> be assessed.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018–2019 (as part of the <i>Liquor Act</i> rewrite).
	3.3.6 The licensing authority investigate additional conditions to be imposed within particular designated areas as identified in this report.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018–2019 (as part of the <i>Liquor Act</i> rewrite).
	3.3.7 The Northern Territory Government review the availability of late night transport options in designated areas.	Supported	The Northern Territory's first ride-sharing service was introduced in February 2018 which will assist with increasing transport options to patrons in designated areas.
3.4 MAJOR EVENTS	3.4.1 The <i>Liquor Act</i> be amended to include a provision enabling police, emergency management personnel and Licence Inspectors to initiate preventative action (such as restricting the amount of alcohol sold per service, or suspending alcohol sales for a prescribed period of time) at major events if breaches of licence conditions are observed or alcohol-fuelled anti-social behaviour is becoming an issue.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018–2019 (as part of the <i>Liquor Act</i> rewrite).
	3.4.2 Transport management be addressed as a condition of the major event licence category.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018–2019 (as part of the <i>Liquor Act</i> rewrite).
3.5 COMMUNITY PATROLS (NIGHT AND DAY PATROLS, COMMUNITY SAFETY OFFICERS)	3.5.1 Steps be taken to improve awareness and understanding of the role and scope of Community Patrol Workers among workers themselves, police, sobering up shelters, local government and in the wider community.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018–2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.5.2 The Department of the Chief Minister coordinate more effective collaboration between police, sobering up shelters, community patrols and local government to ensure a coordinated approach to tackling alcohol related problems in the community.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.5.3 The operating hours/days of community patrols be re-assessed, on a community by community basis, and adjusted in accordance with demand.	Supported	For services the NT Government funds, every effort will be made to align operating hours and days of service for patrols with community needs, as has occurred with the Darwin Day Patrols. For other services, the NT Government will engage with service providers and the Commonwealth Government to ensure awareness of the need to adjust operating hours according to demand. To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.5.4 The operating hours of community patrols align with the opening hours of the sobering up shelter in the region.	Supported	See comments at recommendation 3.5.3.
	3.5.5 The number of community patrol workers employed be re-assessed, on an individual community basis, to ensure there are adequate staff to meet the demand.	Supported	See comments at recommendation 3.5.3.
	3.5.6 The Department of the Chief Minister ensure effective coordination and integration of Australian Government funded programs (such as community patrols) with Northern Territory initiatives by maintaining effective communication, with the Australian Government.	Supported	See comments at recommendation 3.5.3.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>3.5.7 The Department of Health work with community patrol providers to assess the need for further education of alcohol related harms in each community, and if appropriate develop culturally responsive educative information about alcohol harms and sources of assistance which Community Patrol Workers can disseminate as part of their engagement with drinkers.</p>	Supported	See comments at recommendation 3.5.3.
<p>3.6 POINT OF SALE INTERVENTIONS (POSIs)</p>	<p>3.6.1 POSIs continue in regional centres after the commencement of the BDR until (and unless) it can be demonstrated that they are no longer required.</p>	Supported	<p>The NT Government recognises the effectiveness of POSIs/Temporary Beat Locations (TBLs) are a harm minimisation tool, particularly in Alice Springs, Tennant Creek and Katherine.</p> <p>The Government, through the Northern Territory Police, Fire and Emergency Services (Police) is currently developing a more sustainable operational model for POSIs/TBLs, which will involve freeing up valuable Police resources and enable suitable empowered and trained personnel, which may include licensing officers to replace Police.</p> <p>To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.</p>
	<p>3.6.2 The <i>Liquor Act</i> be amended to empower uniformed Licensing Inspectors to undertake the POSI role.</p>	Supported	<p>See comment at recommendation 3.6.1.</p> <p>Note – it may not be ‘licensing inspectors’, but another suitably empowered and trained personnel.</p>
	<p>3.6.3 Appropriate training be provided to Licensing Inspectors to enable them to undertake the POSI role.</p>	Supported	See comment at recommendation 3.6.1.
	<p>3.6.4 Police continue to undertake the POSI role until Licensing Inspectors are employed and trained.</p>	Supported	See comment at recommendation 3.6.1.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.6.5 The POSIs regime be monitored and then evaluated to measure its continuing effectiveness and efficiency.	Supported	High quality research, data and evaluations are crucial to informing the NT Government's efforts to reduce alcohol related harms. To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
3.7 FOETAL ALCOHOL SPECTRUM DISORDER (FASD)	3.7.1 The Department of Health develop a strategy for implementing the Australian FASD diagnostic instrument, finalised in 2015. As part of that strategy development, the Department considers the cost effectiveness of multi-disciplinary paediatric teams.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.7.2 The Northern Territory Government prioritise funding for early intervention services for FASD, including paediatric diagnosis, psychotherapy and other behavioural management measures, and early childhood support and education services.	Supported in-principle	See comments at recommendation 3.7.1. The Commonwealth Government through the NDIS has a significant role to play insofar as funding services for FASD.
	3.7.3 The Department of Health promote protocols for screening alcohol use before and during pregnancy to raise awareness of the risks or alcohol, assist expectant mothers with alcohol issues, and collect data in accordance with the Australian Institute of Health and Welfare's National Maternity Data Development Project.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019. The Department of Health have an already-established routine alcohol screening with antenatal checks.
	3.7.4 Protocols for screening alcohol use during pregnancy include guidelines for support and referral for women struggling with alcohol use during pregnancy, including information on relevant local support services.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.7.5 Alcohol screening include the use of other screening tools such as the Edinburgh Postnatal Depression scale, to assess the total environment of the pregnant woman.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.7.6 The Department of Health review options for screening for FASD, particularly targeted screening of high risk populations, in line with the possible development of a national FASD screening instrument.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.7.7 The Department of Health undertake audits of the current professional development needs of the health workforce in relation to FASD and develop a plan for ensuring an adequate level of awareness of FASD.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>3.7.8 The government improve support for caring for children in the first years, particularly for at risk populations and:</p> <ul style="list-style-type: none"> • expand the Family as First Teachers program • explore options for promoting early childhood education programs, such as Abecedarian day care, across the Territory • explore options for improving support to new mothers, including the Family Nurse Partnerships Program. 	Supported	<p>The NT Government is pleased to advise that the following is in place or in the process of being implemented:</p> <ul style="list-style-type: none"> – <i>Families as First Teachers (FaFT)</i>: the Department of Education has expanded the number of FaFT sites across the Territory over the last two years; the department’s focus has now shifted to increasing the reach of the program by increasing participation rates at each of the sites. – <i>Promoting early childhood education</i>: the Department of Education is focussing on expanding access to quality Early Learning Programs from four year olds to include three year olds. The Abecedarian approach is also being offered to the child care sector – with limited uptake. – <i>Family Nurse Partnerships Program</i>: the Department of Education is working to provide Abecedarian training to staff of the Family Nurse Partnerships Program – currently four sites have received training and the initiative will be expanded to 13 sites. – <i>The Young Mothers Strong Mothers Program</i> is being expanded to all six Children and Families Centre sites from the current pilot site at Palmerston. A Strong Fathers program will be developed in parallel. – The draft Early Childhood Development Plan <i>Starting Early for a Better Future</i> outlines the NT Government’s aspiration for the Territory’s youngest children. It is a 10 year plan to build an equitable, high quality and culturally responsive early childhood development system with a focus on 0-5 years of age.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>3.7.9 The Department of Education implement and strengthen its initiatives to address the needs of students with FASD, including the delivery of strategies, training and resources for teaching students with FASD and the establishment of a formal FASD reference group.</p>	Supported	<p>The Department of Education notes that the following initiatives are in place or are being implemented:</p> <ul style="list-style-type: none"> • School Support Services division within the Department of Education has established a range of resources to support staff who are teaching and working with students with FASD; including access to professional learning, and teaching and learning resources. <p>Strategies which are in place include:</p> <ul style="list-style-type: none"> – a suite of resources, established by the School Psychologists’ Team to support teachers with the integration of students with FASD into the classroom; – access to Professional Learning, either for individual teachers or whole staff cohorts, to provide information about FASD, possible teaching strategies and guidance about best practice to support students in a classroom setting; – teachers, assisted by Special Education Teachers, Assistant Principals and or Principals develop Education Adjustment Plans for students who have been diagnosed with FASD; these students may also have an Individual Behaviour Plan, developed within their school.
	<p>3.7.10 A multi-disciplinary diagnostic service be established to which child protection workers, legal practitioners, judicial officers and correctional staff may refer individuals suspected of having a cognitive impairment such as FASD. The service should be linked to government and community based treatment programs.</p>	Supported	<p>To be considered as part of the development of an NT FASD Strategy to be developed in line with the National FASD Strategy.</p>

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.7.11 The multi-disciplinary diagnostic service maintain data on the prevalence of FASD individuals in contact with the criminal justice and child protection systems.	Supported	See comments at recommendation 3.7.10.
	3.7.12 A FASD support service be established in the Department of Health to provide case management for FASD individuals and their carers through an appointed social worker.	Supported in-principle	See comments at recommendation 3.7.10. Funding will be provided through NDIS for short-term early intervention supports for individuals, to stabilise and prevent them from requiring lifetime funded supports. The NDIS has commenced and is currently being progressively rolled out. It is expected to be available right across the NT from 1 July 2019.
	3.7.13 Additional funding be allocated to the development of more residential secure care facilities for the delivery of behavioural management programs to the cognitively impaired, including FASD individuals.	Supported in-principle	See comments at recommendation 3.7.10.
	3.7.14 Community based health organisations and social service providers be funded to provide evidence based behavioural management programs for FASD individuals. The programs should be linked to the FASD support service.	Supported in-principle	See comments at recommendation 3.7.12.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	<p>3.7.15 A high level FASD Working Group be established and coordinated by the Department of the Chief Minister with representatives from the Departments of Health, Education, Children and Families, Attorney-General and Justice, Corrections and Police, Fire and Emergency Services to develop and implement an action plan addressing:</p> <ul style="list-style-type: none"> • protocols for sharing information about people diagnosed with FASD • training and awareness of FASD and related referral options for health • teaching, child protection, police, justice and corrections professionals • continuity and coordination of FASD services 	Supported	A FASD working group has been established in central Australia and a working group is currently being established for the Top End.
	<p>3.7.16 The Northern Territory Government continue to support the development and implementation of AMPs and that these be evaluated regularly to ensure their ongoing effectiveness (this recommend is subject to the recommendations regarding changes in relation to AMPs made elsewhere in this report).</p>	Supported	<p>To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.</p> <p>There will be a focus on an increase on Aboriginal communities to decide how harms associated with alcohol can be addressed in their communities.</p>
	<p>3.7.17 The Northern Territory Government restrict the trading of alcohol at times when the greatest harm from alcohol consumption occurs as per recommendations made in the Categories and Terms and Conditions of Licences section with this report.</p>	Supported	Licence categories and conditions will be considered as part of the <i>Liquor Act</i> rewrite which is an important part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>3.7.18 In line with recommendation 4.1.3 (in the Treatment section of this report), the demand study include a needs assessment for family rehabilitation facilities.</p>	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.7.19 The Northern Territory Government ensure all children receive a culturally appropriate sexual health awareness program, such as the Adolescent Sexual Education Program and Core of Life.	Supported	Northern Territory Government schools deliver the Australian Curriculum, which includes the teaching of sexuality education. Schools access a number of sexuality education programs and can partner with the non-government sector in order to achieve this in a culturally appropriate manner.
	3.7.20 The Department of Health ensure all training of health professionals include information on FASD and the risks of drinking while pregnant, and that protocols for antenatal visits include discussion of the risks of alcohol and whether the woman is consuming alcohol.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	3.7.21 The Department of Health implement programs to improve the awareness regarding, and availability of, contraception options.	Supported	The NT Government, through the Department of Health and the Department of Education, will continue to support and deliver programs to improve the awareness regarding and the availability of contraception options.
	3.7.22 The Department of Health assess the need for intervention and support services for alcohol dependent pregnant women, particularly for rehabilitation services that provide for families and children, and alcohol free, safe accommodation.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.7.23 Education programs be developed to increase awareness and effects of FASD (as per Chapter 3.8 education) and these be offered to the judiciary, lawyers (including prosecutors and defence counsel) Corrections and Youth Justice Officers.	Supported	To be considered as part of the development of an NT FASD Strategy to be developed in line with the National FASD Strategy.
	3.7.24 The Northern Territory Government advocate for warnings on alcohol labels to be larger and more eye catching and be varied regularly.	Supported	<p>The National Alcohol Strategy 2018-2026 (the Strategy) is currently out for consultation. The Strategy advocates for a number of actions in relation to alcohol advertising, including:</p> <ul style="list-style-type: none"> - a single national advertising code that covers placement and content across all media to provide consistent protection of exposure to minors regardless of programming - implement regulatory measures to reduce alcohol advertising exposure to young people (including sport and online) - effective controls on alcohol promotion to protect at risk groups including youth and dependent drinkers - regulator measures to prevent promotion of discounted/ low priced alcohol including bulk buys, two-for-one offers, shop-a-dockets and other promotions based on price. <p>The NT Government will look to align its approaches to those outlined in the Strategy so far as practicable.</p>
	3.7.25 All licensed premises display clear visual warnings about the risks of drinking while pregnant.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019 (<i>Liquor Act</i> rewrite).

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.7.26 The Department of Health commission a prevalence study, using both antenatal and postnatal screening, to accurately assess the extent of FASD across the Northern Territory.	Supported in-principle	To be considered as part of the development of an NT FASD Strategy, to be developed in line with the National FASD Strategy.
	3.7.27 The Department of Health improve the proportion of pregnant women receiving antenatal care within the first trimester of pregnancy, with the aim of achieving 100 per cent.	Supported	<p>The Department of Health have an already-established routine alcohol screening with antenatal checks in the first trimester as part of the draft Early Childhood Development Plan.</p> <p>The Department of Health will work to improve the proportion of pregnant women receiving antenatal care as per recommendation 3.7.27.</p>
	3.7.28 A FASD regional interagency network committee be established in the Top End, similar to the Central Australian network committee.	Supported	A FASD working group has been established in central Australia and a working group is currently being established for the Top End.
	3.7.29 A review of the Northern Territory FASD Strategy be undertaken and associated action plans developed in line with the National FASD Strategy 2018-2028 when it is released.	Supported	To be considered as part of the development of an NT FASD Strategy, to be developed in line with the National FASD Strategy.
	3.7.30 The Northern Territory Government advocate at a national level for additional and sustained funding to prevent FASD and support those affected by FASD.	Supported	<p>Funding will be provided through NDIS for short-term early intervention supports for individuals to stabilise and prevent them from requiring lifetime funded supports.</p> <p>The NDIS has commenced and is currently being progressively rolled out. It is expected to be available right across the Northern Territory from 1 July 2019.</p>
3.8 EARLY CHILDHOOD AND EDUCATION	3.8.1 The Northern Territory Government commit to long term and sustained investment in early childhood development programs.	Supported	<p>The NT Government has released its draft early childhood strategy Starting Early for a Better Future to direct Government over the next 10 years on how to deliver better early childhood outcomes all Territory children.</p> <p>Refer to recommendation 3.7.8 in regards to a number of specific early childhood development programs.</p>

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	3.8.2 School-based alcohol and drug programs with evidence of success be delivered in all Northern Territory schools at appropriate ages, on a long term basis.	Supported	Northern Territory Government schools deliver the Australian Curriculum, which includes age-appropriate alcohol and drug education. Schools have the autonomy to access additional alcohol and drug education programs as required to address local need.
	3.8.3 School-based alcohol and drug programs that are suitable for urban settings be assessed and, if necessary, modified to ensure they are appropriate for regional and remote settings of the Northern Territory.	Supported	See comments at recommendation 3.8.2
	3.8.4 Educative programs be provided by AOD workers and teachers at key community events, to raise awareness of the harms of alcohol misuse.	Supported	The NT Government, through the Department of Health, facilitate the provision of community education through: <ul style="list-style-type: none"> – remote AOD Workers, positions funded through the National Partnership Agreement (funding to both government and non-government service) and administered by NT Health to employ people to work in Aboriginal communities in culturally appropriate ways – staff at Aboriginal Community Controlled Health services, for example Mitwatj and AMSANT – community Alcohol, Tobacco and Other Drugs (ATODs) teams – for example, the Top End Health Service.
	3.8.5 The Department of Health develop education campaigns and resources to be delivered in a primary health setting, with a particular focus on women, to raise awareness of FASD.	Supported	To be considered as part of the development of an NT FASD Strategy, to be developed in line with the National FASD Strategy.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
3.9 REMOTE WORKFORCE DEVELOPMENT	3.9.1 The Northern Territory Government take expert advice on how best to ensure the appropriate training of local people and the transition of such people into identified areas of employment in recognition of the importance of providing employment opportunities in remote communities.	Supported	Work is underway to renew a Northern Territory Aboriginal Affairs Strategy in alignment with a refresh of the Council of Australian Governments (COAG) Closing the Gap Framework. This will be shaped through working in partnership with Aboriginal people and communities to drive community control and improve and strengthen cultural, social, economic and environmental outcomes. In January 2018, the NT Government awarded \$1.7 million through the Remote Aboriginal Development Fund, to projects that will drive economic development, create local jobs and support capacity building in remote communities in the Northern Territory.
	3.9.2 The Northern Territory Government invest in providing locally based training in remote areas with training targeted at health (ATSIHP, AOD and support services, such as treatment services), policing (ACPO) and other key support roles (PHSO, Night Patrol workers).	Supported	See comments at recommendation 3.9.1.
	3.9.3 The Northern Territory Government increase support for people living in remote communities to undertake studies (by way of scholarships, traineeships, community based foundation level training, etc).	Supported	The NT Government currently offers a range of study and training support programs for Aboriginal people including the NT Government Aboriginal Cadetship Support Program Health, though will work to increase the support available.
	3.9.4 The Department of Housing and Community Development work towards increasing the number of PHSOs to enable the permanent presence of this workforce in regions where there is an identified need.	Supported in-principle	The Department of Housing and Community Development will investigate the demand for permanent Public Housing Safety Officers (PHSOs) in regions.
	3.9.5 Government address gaps in employee housing to support a local workforce.	Supported	The NT Government is committed to improving housing in remote communities with an investment of \$1.1 billion over 10 years. This includes \$200 million over 10 years to expand Government Employee Housing to include locally recruited NT Government employees in remote areas.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
CHAPTER 4 MANAGING HARMS 4.1 TREATMENT	4.1.1 The Department of Health promote the use of a standardised assessment tool (such as the AUDIT tool) across all health delivery services.	Supported	The Department of Health will promote the use of standardised assessment tools across its health services.
	4.1.2 The AUDIT tool (or similar tool) be used to assess relevant individuals to stream them into the appropriate treatment for that individual.	Supported	See comments at recommendation 4.1.1.
	4.1.3 The Department of the Chief Minister coordinate the development of a demand study for alcohol treatment services in the Northern Territory. This study should draw on ABS data, the Chief Health Officer's report, the Criminal Justice data collection, the Menzies School of Health Research data, emergency department presentations, hospital admissions, data from the Aboriginal Medical Services Alliance Northern Territory (AMSANT) and other relevant reports that have been presented to the review. The demand study should take into account the need to provide services locally where it is clinically safe and effective to do so.	Supported	<p>To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.</p> <p>Work has already been undertaken by the Northern Territory Primary Health Network (NT PHN) and the Association of Alcohol and Other Drug Agencies NT (AADANT) which needs to be considered in the demand study.</p>
	4.1.4 The demand study should inform a multi-agency alcohol services plan which would meet the demand for alcohol treatment across the range of service types. This services plan should be developed by the Department of the Chief Minister and should include a workforce plan and an asset plan.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	4.1.5 The Department of the Chief Minister ensure all existing services from all agencies be mapped against the overall service plan and a gap analysis be conducted to determine priorities for additional services, workforce and facilities. Where existing services have no evidence base, consideration should be given to changing the service model or conducting a rigorous evaluation..	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	4.1.6 Where appropriate, external expertise be sought to complete the demand study, mapping of services and gap analysis and evaluation of services.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	4.1.7 That the Department of the Chief Minister closely monitor the progress of the demand study, gap analysis and development of the multi-agency service plan to ensure its progression.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	4.1.8 That the Department of the Chief Minister ensure the implementation of the multi-agency service plan and monitors and reports on progress against the plan by ensuring each agency has clear targets about their actions which must be the subject of regular reporting.	Supported	To be delivered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	4.1.9 Treatment programs have funding certainty for seven years (ten years in remote communities).	Supported in-principle	The NT Government is committed to providing secure long term funding agreements to key NGOs. The NT Government commitment for funding with NGOs is to enter into five year agreements where appropriate. The Department of Health will examine the feasibility of entering into such long term arrangements.
	4.1.10 The Northern Territory Government work in partnership with AOD training providers to overcome barriers to remote workforce training.	Supported	The Department of Health will continue to work with key organisations such as the AADNT to improve workforce planning and training for the AOD workforce.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
	4.1.11 The NT Government consider introducing 'internships' in remote communities.	Supported	The Department of Health will examine the feasibility of introducing internships in remote communities.
	4.1.12 The Department of the Chief Minister ensure effective coordination and integration of Australian Government funded programs with Northern Territory initiatives by maintaining adequate contact, and ensuring effective communication, with the Australian Government.	Supported	The Department of the Chief Minister will continue to maintain relationships with the Australian Government through its well established working relationship with the Department of the Prime Minister and Cabinet.
4.2 ALCOHOL AND OTHER DRUGS COURT	4.2.1 An Alcohol and Other Drugs Court (along the lines of the former SMART Court) be established with emphasis upon diversion and treatment. The operation of the new court be modified in light of the experience with the SMART Court and with the operation of similar courts in other jurisdictions.	Supported in-principle	The Department of the Attorney-General and Justice will consider how this recommendation can be delivered.
	4.2.2 The former CREDIT/Bail diversion program for alcohol and drug related offending be considered in conjunction with the establishment of the court and adopted in such modified form as is appropriate to the circumstances.	Supported in-principle	See comments at recommendation 4.2.1.
	4.2.3 The court be subject to an evidence-based assessment after it has been in operation for a sufficient period to evaluate its worth.	Supported in-principle	See comments at recommendation 4.2.1.
	4.2.4 Funding for the COMMIT program be continued if it is deemed successful in meeting its objectives following the full evaluation of the program scheduled for 2019/20.	Supported	The NT Government looks forward to receiving the program's evaluation report.
	4.2.5 To increase the efficiency of the SMART court consideration be given to combining the function with mental health court liaison services.	Supported in-principle	See comments at recommendation 4.2.1.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
4.3 DRINKING SPOTS	<p>4.3.1 The Northern Territory Government, in consultation with the affected communities, reviews identified 'drinking spots' throughout the Territory and, where appropriate:</p> <ul style="list-style-type: none"> • relocate the drinking spot away from major roadways • reduce speed limits near known drinking spots • provide appropriate signage, to be developed in conjunction with communities and Aboriginal organisations, to warn road users of the existence of such spots • where practical provide water and shelter and adequate lighting to provide greater visibility of people or obstacles • ensure, where practical, regular patrols by Police Officers and/ or community night patrols are undertaken at known drinking spots 	Supported in-principle	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>4.3.2 The Northern Territory Government establish a working group to review strategies and initiatives to improve the safety of drinking spots in the Northern Territory.</p>	Supported in-principle	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
4.4 MANAGED ALCOHOL PROGRAMS (WET HOUSE)	<p>4.4.1 A residential managed alcohol program be trialled in an appropriate location in the Northern Territory.</p>	Supported in-principle	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.
	<p>4.4.2 A comprehensive and independent evaluation of the trial be conducted, to measure its effectiveness in reducing alcohol related harms.</p>	Supported in-principle	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018-2019.

CATEGORY	RECOMMENDATION	POSITION	COMMENTS
4.5 SOBERING UP SHELTERS	4.5.1 A review of SUS services across the Northern Territory be undertaken to: <ul style="list-style-type: none"> • identify geographic areas of need • identify if the current beds in each existing SUS are adequate • determine the peak demand times for the use of SUS in each geographic area • identify the most effective service delivery and funding model for each geographic area • determine whether the current AUDIT (or similar) screening tool is being completed with every client and whether it is the most appropriate tool to use • examine and address the reasons for the low usage rates 	Supported	To be considered as part of the Alcohol Harm Minimisation Action Plan 2018–2019.
	4.5.2 The sobering up shelter monitoring system be expanded to record the score generated from the use of the AUDIT (or similar) screening tool.	Supported	The Department of Health will work with providers in relation to the implementation of recommendations relating to operations of Sobering Up Shelters (SUSs) in the Northern Territory.
	4.5.3 Appropriate key performance indicators for SUS operations be established to measure the number of referrals to treatment services based on the score generated from the use of the AUDIT (or similar) screening tool.	Supported	See comments at recommendation 4.5.2.
	4.5.4 SUSs be appropriately staffed to enable assessments to be made and advice offered regarding rehabilitation and other treatment services.	Supported	See comments at recommendation 4.5.2.
	4.5.5 In relation to a person apprehended under Part VII Division 4 of the Police Administration Act, Police be required to exhaust all other reasonable alternatives for the person's care and protection before detaining a person at a police station under the protective custody laws, this should be monitored to ensure this is occurring.	Supported	Police are currently required to do this through their operating procedures.
	4.5.6 SUSs should have funding certainty for seven years (10 years in remote communities).	Supported in-principle	See comments at recommendation 4.1.9.

