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September 30, 2008

Mariela Orellana
Senior Policy Advisor
Sector Liaison Branch
Ministry of Small Business and Consumer Services
Government of Ontario
777 Bay Street, 5th floor
Toronto ON M7A 2J3

Dear Ms. Orellana:

RE: Response of the Ontario Public Health Association to the consultation on proposed reforms to the Liquor Licence Act – Special Occasion Permits (SOP's)

The Ontario Public Health Association (OPHA) represents the interests of more than 3,000 community and public health practitioners across Ontario. The mission of OPHA is to provide leadership on issues affecting the public's health, and to strengthen the impact of people who are active in public and community health throughout Ontario. As such, we are pleased to provide input to the consultation on proposed changes to the Liquor Licence Act (LLA) with respect to Special Occasion Permits (SOPs).

The OPHA supports and recognizes the need for continual review and evaluation of current legislation to ensure public health and safety measures are thoroughly explored. Further, it is incumbent upon the government to balance business and consumer interests with public health and safety.

It is strongly suggested that the Ministry of Government Services (MGS) re-examine allowing events consisting of 1000 (one thousand) people or less without the review and approval of the Alcohol and Gaming Commission of Ontario (AGCO). This number represents a very large number of individuals who could potentially be consuming alcohol, with the risk of injury and associated harm at high levels. A more appropriate measure may be that events of over 100 (one hundred) people need to be reviewed, assessed with a risk-based safety model, and approved directly through the AGCO.

The types of permits and categories of SOPs should be detailed even further so there is no confusion or misinterpretation of the language used. For example, the term "Significant Event" is vague and can be seen as all encompassing.

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As referenced in OPHA letters from March 2007 and March 2006 to the Ministry of Government Services, the OPHA feels strongly that improvements to the enforcement of SOPs are needed. At a minimum, OPHA suggests an increase to at least double the number of liquor inspectors. The LLA in regards to SOPs cannot be effective if human resources for its enforcement are inadequate. Moreover, once inspectors identify violators, the length of time between charges and court dates needs to be shortened. Lengthy delays for cases going to court have resulted in the AGCO not being able to take action against an SOP holder who refused to comply with the law. Consequently, OPHA supports changes to create a more efficient mechanism to deal with problematic SOP holders.

Events that do not involve the exchange of money for alcohol should be seen as higher risk. There is a large body of research that delineates the important role of pricing in preventing alcohol-related problems and costs. According to this evidence, charging a fee for alcohol works to moderate consumption levels. Thus a minimum floor price is essential at SOP events. Additionally, statistically, the 15 to 24 year-old age category is overrepresented, in comparison to the rest of the drinker categories (i.e., 25-55+ years), in heavy drinking behaviours. In these age groups, intoxication is the leading cause of public safety problems. This age group, and the events attracting them, need to be prioritized as high risk. Efforts to minimize intoxication in these groups would therefore have important public safety benefits as well as help to address the issue of access to alcohol by minors at SOP events. The AGCO also needs to direct such SOP holders to prove that an increased attention has been given to better security and server training measures in these types of events to minimize risks.

OPHA would like to emphasize again the importance of health and safety in all government deliberations on issues of alcohol policy, and not just consultations on changes to the LLA. In fact, we believe that someone from the substance abuse prevention field, such as a representative from the Ontario Public Health Association and/or the Centre for Addiction and Mental Health, should be on the board of the Alcohol and Gaming Commission of Ontario to provide perspective on public health and safety issues.

OPHA is pleased to offer input on changes to the Liquor Licence Act and encourages the MGS to consult the Ontario Public Health system, including, but not limited to, Medical Officers of Health and the Association of Local Public Health Agencies, which are both responsible for substance abuse prevention in communities that would be affected by any new policy measures.

Sincerely,



Carol Timmings
President