ANNEX A: Reply Form

Consultation on the Road Traffic (Drink Driving) (Amendment) Bill and additional measures to tackle drink and drug driving in Northern Ireland

Title: Dr...

Name: Peter Rice

Organisation (if applicable)* Scottish Health Action on Alcohol Problems

(SHAAP)

Address:12 Queen Street, Edinburgh

Postcode: EH2 1JE

E-mail address:shaap@rcpe.ac.uk

Date:02/10/12

*Organisation Details

If you are replying on behalf of an organisation, please explain who you represent and size of organisation:

Scottish Health Action on Alcohol Problems (SHAAP) was established in 2006 by the Scottish Medical Royal Colleges and Faculties to provide an authoritative medical voice on reducing the negative impact of alcohol on the health and well-being of the people of Scotland. Members of SHAAP include consultants in accident and emergency medicine, gastroenterologists, psychiatrists, public health specialists, general practitioners and nurses - all with first-hand experience of the adverse affect that alcohol can have on individuals and our health services. SHAAP is a member of the Alcohol Health Alliance UK, an alliance of medical bodies, patient representatives and alcohol health campaigners working together to highlight rising levels of alcohol health harm in the UK.

Please note:

The Department will prepare a summary of all the responses to this consultation letter. Copies of individual responses may also be made available to anyone that requests them.

I am content for a copy of my response to be made available if requested.

Please note that if you ask for your response to be kept confidential this will only be possible if it is consistent with our obligations under the Freedom of Information Act 2000.

REPEAT OFFENDERS

Q1. Which option do you consider to be the most effective in tackling Repeat Offenders?

Option A:

Introduce graduated penalties for repeat offenders where either one or both offences is above the new lower limits (either 20mg/100ml or 50mg/100m - as applicable) but remains below a BAC level at which there is currently no offence i.e. below 80mg/100ml. In all other circumstances the current minimum 3 year disqualification period will apply: or

Option B:

Apply the minimum 3 year disqualification period for all repeat offenders irrespective of BAC levels;

Please indicate your preference by ticking the appropriate box $(\sqrt{})$

х

[†]please delete as appropriate

1	^	_	m	m	۸r	٠.	۸r	ı G	۱1	
N	_	u			ъı	IL	UI	ı	2 1	٠.

Any drink drive offence is significant and where there is a repeat offence this indicates that public safety considerations require a significant penalty in all situations.

Alongside this, in all circumstances, we would urge the provision of courses for drink drive offenders and other appropriate support services.

REGISTERED HEALTH CARE PROFESSIONALS

Q2. Do you agree with the proposal to extend the role of the registered health care professional when investigating drink/drug offences as follows:

To allow nurses (in addition to medical practitioners):	Yes	No
a) to take blood samples in hospitals as well as in police stations;	X	
b) to take blood samples from a person incapable of consenting; and	X	
c) to assess whether drug testing should proceed	x	

Comment on Q2.

PRELIMINARY BREATH TEST					
	Yes	No			
Q3. Do you agree with the proposal to remove the need for a preliminary breath test as a pre-requisite to an evidential breath test [following the acquisition of new evidential breath testing equipment]?	x				

Comment on Q3.

We welcome the improvements in technology which enable roadside testing to be used as evidence and believe this could be a major contributor to reducing accidents.

ADDITIONAL COMMENTS ON THE DRAFT BILL

Q4. Do you have any additional comments on any of the issues included in the draft Road Traffic (Drink Driving) (Amendment) Bill? Please prefix your comments with the particular aspect to which they refer.

We note with concern the continuing problems related to consumption of alcohol and resultant accidental injuries and deaths and drink driving.

We welcome the fact that the Northern Ireland is taking action to try to reduce these harms.

We broadly support these measures from a public health and safety perspective and would emphasise the importance of:

- General Public Information campaigns about alcohol, including drink driving
- Primary prevention and education activities, especially for young people
- Comprehensive access to support and treatment services for people with alcohol problems
- Support for families affected by alcohol misuse, including drink driving

CONSULTATION PROCESS

Q5. Do you have any comments to make on the consultation process?

Thank you for giving us the opportunity to comment.

Thank you for taking the time to complete the questionnaire.

Please return this form by 5 October 2012 to:

John Brogan
Road Safety and Vehicle Regulation Division
Department of the Environment
Clarence Court
10-18 Adelaide Street
Town Parks
Belfast
BT2 8GB

Or e-mail: drinkdrive@doeni.gov.uk