

Alcohol Health Alliance response to:

Department of the Environment: Public Consultation on Regulations to Tackle Drink Driving in Northern Ireland

Q1. Do you have any comments on the Department's approach to introducing fixed penalties for lower level drink driving offences?

The AHA is not convinced that fixed penalties, without a driving disqualification, reflect the seriousness of drink driving offences, even at the new lower limits. However, we note paragraph 2.6 of the consultation paper that the DOE "is not seeking comments on the concept of fixed penalties for drink driving offences in this consultation" but on its approach to how they will be used. Therefore, our comments are restricted to the DOE's approach for introducing fixed penalties for drink drive offenders who exceed the new lower limits, but not the existing 80mg/100ml limit.

The AHA agrees with the approach of incentivising offenders to take and complete an approved Course for Drink Drive Offenders, by imposing a lower fixed penalty (£100 fine and 3 penalty points) on drivers who do so. Research has indicated that offenders who complete a drink drive rehabilitation course have a lower reconviction rate for subsequent drink drive offences than drivers who did not complete a course.

We believe that the reduced fixed penalty for drivers who agree to take the course (and who must pay the course fee) represents a good balance, and that it is quite right that they should pay the higher fixed penalty if they accept the offer but subsequently fail to complete the course.

Automatic referral onto a course will mean many more offenders taking the course, so it will be essential to ensure that are sufficient numbers of courses are available across Northern Ireland and on days of the week and at times that do not make it difficult for offenders to take the course.

Q2. Do you have any comments on the Department's approach to the restriction of the requirement to re-sit the driving test to those disqualified for 12 months or more for offences involving higher levels of alcohol?

The AHA does not object to restricting the requirement to re-take the driving test to drivers who were disqualified from driving for 12 months or more.

Q3. Do you agree with the Department's approach to reducing the threshold for High Risk Offenders to 125/100mls?

The AHA agrees that the threshold for drink drive offenders to be categorised as High Risk Offenders, and so subject to more stringent penalties, should be retained as 2½ times the drink drive limit. Therefore, the threshold should be reduced to 125mg/100 ml given that the drink drive limit has been reduced to 50mg/100ml.

Q4. Do you have any comments to make on the consultation process?

We welcome the opportunity to comment on these draft Statutory Rules, and overall we support the government of Northern Ireland in reducing the drink drive limit from 80mg to 50mg/100ml.

Outside the UK, every country in Europe, except Malta, has a drink drive limit of 50mg or lower, and England and Wales should now follow Northern Ireland in lowering the limit to 50mg. In the 2015/2016 Parliamentary term, a Private Member's Bill to reduce the legal limit successfully completed its passage through the House of Lords, and a lower limit is supported by medical royal colleges, alcohol charities, road safety organisations, leaders of the emergency services, support groups for victims of drink driving and more. The public consistently support lowering the limit, with a recent Alcohol Health Alliance poll finding 77% of the UK public in support of a lower limit. Following the introduction of this bill, it is now time for the limit to be lowered across the whole of the UK.

Matt Chorley | Policy & Communications Officer – Alcohol Health Alliance
External Affairs | Royal College of Physicians
11 St Andrews Place | Regent's Park | London NW1 4LE

