



Best Practice Guidance for Alcohol Sales and Deliveries During and After the COVID-19 Pandemic

A National Liquor Law Enforcement Association Guidance Document

December 2020

This document is intended to provide background and guidance on best practices for the enforcement of laws related to sales and delivery of alcohol both during and after the COVID-19 pandemic.”

State alcohol policies during the COVID-19 pandemic have been temporarily¹ – and in some cases permanently² – changed to expand consumers’ access to and ability to acquire alcohol through drinks-to-go, home delivery, and curbside delivery. Some of these policies are being implemented by local jurisdictions, making the policy landscape more complicated.³

The pandemic is creating unprecedented shifts and changes in the alcohol marketplace adding additional challenges for Alcohol Law Enforcement (ALE).⁴ In 2005, there were an

average of 54 ALE agents per state tasked with monitoring 14,112 alcohol outlets. This problem has only worsened over the years.⁴ The harms from alcohol have been further exacerbated by recent shifting policies⁵ in the U.S., which have made alcohol more accessible and available.

Making alcohol more widely available and accessible increases alcohol consumption and related harms.^{6,7,8} This may occur when there is an increase in the hours⁶ or days of sale,⁷ an increase in outlet density,⁸ or – as is the case during the COVID-19 pandemic – an expansion of home delivery laws.



Drinks-To-Go

Restaurants or bars selling a single serving of alcoholic beverages (usually distilled spirits) for consumption off the premises.



Home Delivery

Restaurants, bars, or retailers delivering alcohol to consumers’ homes through either the use of their own employees or through a third-party delivery service.



Curbside Delivery

Consumers purchasing alcohol from a restaurant, bar, or retailer and having the business bring it to the consumers without them having to leave their car.

Consumption, Harms and Enforcement Implications

During the COVID-19 pandemic, alcohol consumption has increased⁵ among certain subgroups within the population – especially among women, African Americans, and people with children – and patterns of alcohol sales have shifted from on-premise sales to off-premises sales.⁹

Public Health and Safety Implications

The shift toward off-premise alcohol sales has public health and safety implications. There is a stronger association between off-premise alcohol sales and harms than between on-premise sales and harms, including increased rates of:

- Violence¹⁰
- Robberies¹¹
- Assaults¹²
- Child abuse¹³
- Intimate partner violence¹⁴
- Alcohol-attributable hospital admissions¹⁵
- Impaired driving¹⁶

Risky and Impaired Driving

It has been documented that risky drivers are being even more dangerous on the roads during COVID-19.¹⁷ Despite a 17 percent decrease in miles driven, there was a 20 percent increase in fatalities for the six months of 2020 compared to the same six-month period in 2019.¹⁸ Media coverage nationwide has reported that the increase in fatalities is due to increases in drunk driving and speeding.¹⁹

Enforcing laws preventing open containers of alcohol in motor vehicles reduces drunk driving.²⁰ If these laws are violated through poorly sealed drinks-to-go, it could undermine states' abilities to receive federal highway funds.²¹

Compliance

Alcohol compliance checks conducted in several states in response to complaints of youth accessing alcohol through home delivery or curbside delivery have shown high rates of non-compliance with alcohol being provided or sold to minors.²²

Resources

The STOP Act *Report to Congress on the Prevention and Reduction of Underage Drinking* collects data on state home delivery policies²³ but more research is needed on how these laws have changed during the COVID-19 pandemic and the impact of that change.

Two resources that show how different states have handled alcohol during COVID-19 include:

- The National Institute on Alcohol Abuse and Alcoholism's *Alcohol Policy Information System*²⁴
- The National Alcohol Beverage Control Association's *COVID-19 Dashboard*²⁵

Even before the pandemic, non-compliance with home delivery was documented by researchers as a serious concern for increased youth access to alcohol. In one study, almost half of underage buyers were able to order and receive alcohol with age verification being conducted inconsistently or ineffectively.²⁶ When underage drinking laws are properly enforced, underage alcohol consumption and related harms decrease.²⁷

Enforcement Capacity

ALE resources were already over-burdened before the COVID-19 crisis²⁸ and the changing alcohol marketplace is further exacerbating the issue. According to NLLEA's *2020 Salary Survey*, there is an average of one ALE agent for every 207 alcohol outlets. Some states, have seen a doubling of their licensed premises, with no increase in ALE support.²⁸

Maintaining a fair and balanced marketplace requires regular and proactive monitoring of the licensee community. Without adequate ALE capacity, reactive efforts are often the only feasible option and little consideration has been given to enforcement capacity by states discussing these alcohol policy changes.

Why is Alcohol a Public Health and Safety Problem?

- Each year, there are 95,000 alcohol-attributable deaths in the U.S.²⁹ Of those 3,500 deaths are by people under the age of 21.³⁰
- Alcohol has both short- and long-term harms, including motor vehicle crashes,³¹ cancers,³² homicides,³³ suicides,³⁴ sexually transmitted diseases,³⁵ and many other accidental and intentional injuries and deaths.
- Excessive alcohol consumption cost the U.S. \$249 billion in 2010.³⁶
- There are unique harms from distilled spirits (versus beer and wine)³⁷ and our country has always treated them differently³⁸ (e.g., differing tax rates, distribution, sales).

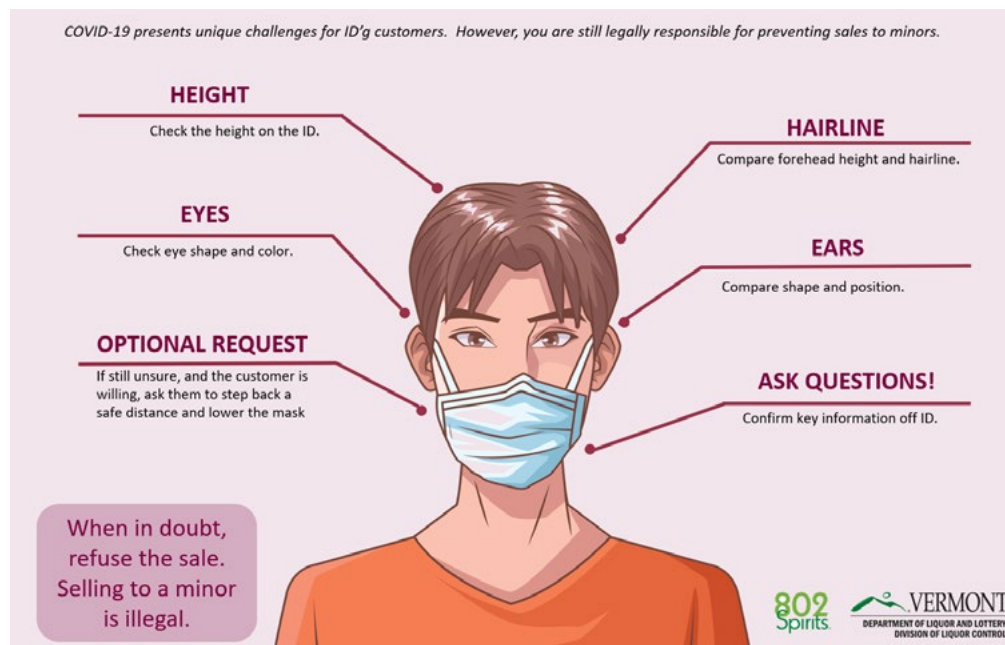
How to Prevent Alcohol-Related Problems in Your State?

- Collaborate with local and state partners such as public health entities, coalitions, government safety officers.
- Advocate for adequate resources, funding, awareness, research, and educational campaigns.
- Report unsafe and illegal practices of license holders to alcohol regulatory authorities to ensure accountability for non-compliance activities.

“This dangerous, reckless, and permanent expansion of access to alcohol without protections for communities, consumers, and our youth and vulnerable population undermines any economic benefit that may result.”

- Chris Lane, Vice President of Operations for BASEC Management, Inc.³⁹

Checking Customers' Identification During COVID-19 Infographic



A list of all of the references cited in this document can be found on the NLEA website: www.nlea.org
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BEST PRACTICES AND RECOMMENDATIONS

- **Check identifications (IDs) for all alcohol sales and deliveries**
Check out this resource from Vermont on how to check IDs for individuals wearing masks or hats.⁴⁰
- **Conduct effective compliance checks**
These should happen quarterly, be random, and penalties should be swift, certain, and severe. Check out this resource from North Carolina on how to conduct effective compliance checks during COVID-19.⁴¹
- **Develop evidence-based policies for delivery drivers**
This should include that: a) The customer ordering, paying, and receiving the alcohol is the same person, is over the age of 21, and shows no sign of impairment; b) Drivers should check that the person taking the delivery is at least 21 years of age and showing no signs of impairment; c) Drivers must ensure alcohol is received and not left unattended on the premises; d) All delivery drivers should be required to have a permit; e) Alcohol outlets should incentivize delivery drivers to not make underage sales by paying them if they bring the alcohol back to the outlet rather than sell it to an underage or impaired individual.
- **Develop evidence-based policies for servers & bartenders at restaurants & bars**
This should include that the person ordering, paying, and picking up the alcohol needs to be the same person who is both over the age of 21 and showing no sign of impairment.
- **Conduct training for servers, bartenders, & delivery drivers**
Servers, bartenders, and delivery drivers should be trained on both state and local alcohol policies and taught how to properly check IDs.
- **Package and label alcoholic products properly**
Check out these resources from Iowa ^{42,43,44} and Illinois ⁴⁵ on how to properly seal products (e.g., a sticker on top of the can is not enough) and properly label products (e.g., clearly state it is alcohol, the ingredients). Customers should also receive information on how to comply with open container laws (e.g., a reminder to put the alcohol in the trunk).
- **Establish and enforce liability and penalties for illegal sales**
It needs to be clear who is liable for illegal sales (e.g., the delivery drivers, the servers, the owners) and penalties for conducting or delivering those sales need to be swift, certain, and severe.⁴⁶
- **Increase funding for Alcohol Law Enforcement (ALE)**
Many ALEs are already at capacity²⁸ and now have had to add on checking that COVID-19 requirements (e.g., social distancing, masks) are met. More funding is needed. Policy does not happen in a vacuum and laws are only as good as their implementation (including funding) and enforcement.
- **Use science and data to inform policies and practices**
ALEs need to improve data collection processes at both the state and local levels (e.g., place of last drink, inspections of license premises, administrative/criminal code violations at and around license premises) and these data need to be studied. It is important to know the potential harms of these laws and how it will both benefit and harm alcohol licensees and public health.

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