



**RNAO response to proposed regulation under
the *Smoke-Free Ontario Act, 1994* and the
*Electronic Cigarettes Act, 2015***

Submission to the Ministry of Health and Long-
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The Registered Nurses' Association of Ontario (RNAO) is the professional association representing registered nurses, nurse practitioners and nursing students in Ontario. RNAO has voiced support for the *Smoke-Free Ontario Act* (SFOA) in the past and continues to support the government's efforts to strengthen tobacco control initiatives. RNAO welcomes this opportunity to provide feedback regarding proposed changes to Regulation 48/06 under the *Smoke-Free Ontario Act* (SFOA), as well as regulations under the *Electronic Cigarettes Act, 2015* (ECA).

RNAO's history of leadership and advocacy in tobacco cessation and control

Despite decreases in tobacco use in recent years, it remains a well-known and completely avoidable cause of illness and death, causing significant health risks for both tobacco users and non-users. In Ontario, 13,000 people die annually from tobacco-related causes, resulting in 1.6 billion dollars per year in direct health system costs [1]. RNAO supports the regulation of tobacco promotion, sale, and use as part of an overall tobacco control and cessation strategy in Ontario. Nurses play a key leadership role in empowering Ontarians to achieve and maintain their optimal health through their work in tobacco prevention, tobacco cessation, and advocacy for healthy public policy. RNAO supports nurses in building their capacity to engage in tobacco cessation interventions with clients through our best practice guideline [2] and our multi-prong province-wide initiative [3]. To learn more about RNAO's extensive leadership in this area, please see the attached document (Appendix).

Prohibition on selling flavoured tobacco

RNAO supports, in the strongest possible terms, regulations that prohibit the sale of flavoured tobacco in Ontario. However, we are gravely concerned that in the proposed Regulation 48/06, menthol- and clove-flavoured tobacco products are to be exempted until Dec. 31, 2016. In addition, we disagree with the exemptions given under the proposed regulations to flavoured cigars and pipe tobacco. Flavour additives are used by the tobacco industry to make their products more palatable and attractive [4]. No matter the format, whether pipes, snuff, cigars, cigarillos or cigarettes, flavoured tobacco products aim to make tobacco more enticing, particularly among young people [4]. Flavour additives may also lead to the misconception that flavoured products are less harmful than other tobacco products [5].

It is well-known that flavoured tobacco is often used by youth [4, 6, 7], and that menthol and other flavoured tobacco products may be designed specifically to encourage young people to begin using tobacco [7, 8]. Given this reality, RNAO insists that the sale of all flavoured tobacco be immediately prohibited in Ontario to prevent young people and others from taking up tobacco use, thereby preventing its associated health risks. RNAO supports prevention activities that engage young people in the creation of strategies to prevent youth from using tobacco products. RNAO's call for an immediate and complete ban on all flavoured tobacco is aligned with

Ministry of Health and Long-Term Care (MOHLTC) priorities to move towards a smoke-free Ontario [9].

Prohibition of smoking in certain public spaces

RNAO supports the proposed amendments to Regulation 48/06 regarding the prohibition of smoking on the outdoor grounds of hospitals and psychiatric facilities, as well as certain provincial government buildings. However, the regulation includes the authority for these facilities to provide a "designated smoking area", which will be revoked for hospitals and psychiatric facilities as of Jan. 1, 2018. Due to the serious health risks of second-hand smoke, RNAO urges revoking this authority immediately to render these properties completely smoke-free. Hospitals and psychiatric facilities serve some of the most vulnerable people among us, including those who are particularly susceptible to the adverse effects of second-hand smoke [10]. Thus, RNAO urges regulatory amendments to immediately mandate all hospitals, as well as all government building, to be smoke-free and safer for all Ontarians. This change would ideally be part of a hospital/psychiatric facility's comprehensive tobacco policy [10].

Mandatory signs for tobacco sales violations

RNAO also supports the proposed changes to the wording of signs that must be posted in locations where tobacco sales violations have taken place. RNAO believes that strict regulations around the sale of tobacco are an important strategic component in reducing tobacco use. RNAO was proud to represent Ontario's nurses on the Tobacco Strategy Advisory Group (TSAG), and continues to sit on provincial committees, including the Cessation Task Force. RNAO supports a comprehensive tobacco strategy that reduces demand for tobacco products, as well as strict enforcement of regulations on the sale of tobacco.

Prohibition on selling and supplying e-cigarettes to minors

RNAO fully supports the regulation of electronic cigarettes (e-cigarettes), both with and without nicotine, including regulation on their promotion, use and sale. This is in agreement with recommendations from the World Health Organization [11], the Canadian Lung Association [12], and the Heart and Stroke Foundation [13]. The risks of e-cigarette use are not yet fully understood. E-cigarettes are potentially harmful to health [12], and their quality and contents are currently unregulated in Canada [13]. There is lack of evidence to support the safety of e-cigarettes, both for the user and those exposed second-hand vapour[13, 14]. In order to minimize the potential negative health effects of e-cigarettes, RNAO supports ensuring the same regulations for e-cigarettes as for tobacco products [15].

Specifically, we support the proposed regulations that prohibit the selling and supplying of e-cigarettes to minors, as well as the size and format of signs that must be posted where e-cigarettes are sold. There is concern that e-cigarettes are appealing to youth and may lead to smoking initiation, thus acting as a gateway to nicotine addiction [16]. In addition, the increasing use of e-cigarettes, especially among young people, may represent a "renormalization" of smoking [17]. E-cigarette use may present a new and attractive form of smoking and may

undermine provincial efforts to reduce smoking prevalence among young people. Therefore, prohibiting the sale of e-cigarettes to minors represents an important step in preventing youth initiation of smoking.

Prohibition of e-cigarette use in certain areas

The long-term effects of exposure to e-cigarette vapour are unknown [13, 14]. Users of e-cigarettes inhale unregulated and potentially harmful vapours [12], hence more research is needed in regards to the health risks of second-hand vapour. In addition, there is currently a lack of consensus regarding the use of e-cigarettes as a smoking cessation aid. Overall, there is low quality evidence to support using e-cigarettes as a smoking cessation tool and more studies are required [18]. Given this lack of evidence, e-cigarettes are not currently approved as a smoking cessation aid [12, 19].

Given the potential harm and lack of known benefit, RNAO supports the prohibition of e-cigarette use in public spaces. In order to protect public safety, RNAO also believes that e-cigarettes should be prohibited wherever tobacco use is prohibited. We support the prohibited use of e-cigarettes in all of the locations laid out in the proposed regulations. However, we suggest the following additions:

1. Motor vehicles transporting children under 16 years of age (to align with the current regulations for tobacco products) to protect children from the potential harms of exposure to e-cigarette vapour
2. RNAO supports the proposed prohibition of e-cigarette use within the outdoor grounds of hospitals and psychiatric facilities, as well as certain provincial government buildings. However, the regulation includes the authority for these facilities to provide a "designated vaping area", which will be revoked for hospitals and psychiatric facilities as of Jan. 1, 2018. Due to the potential health risks of second-hand e-cigarette vapour, RNAO urges revoking this authority immediately in order to render these properties free of e-cigarette vapour.

If new evidence emerges regarding the safety of e-cigarette vapour, or the efficacy of e-cigarettes as a smoking cessation tool, these regulations may need to be re-visited. For this reason, RNAO supports the regular review of regulations under the ECA to ensure they reflect up-to-date research evidence.

Procedures for Home Health-Care Workers

RNAO applauds the proposed regulations under the Act that will protect home health-care workers from the potentially harmful exposure to e-cigarette vapour. This regulation would allow for the same protection from e-cigarette vapour as from exposure to tobacco smoke, and is an important step in promoting the occupational health and safety of home health-care workers, including registered nurses, nursing students and nurse practitioners.

Conclusion

RNAO is delighted with, and supports the Ontario government's efforts to strengthen healthy public policy in Ontario. We applaud the provincial government for passing Bill 45, the *Making Healthier Choices Act, 2015*, and we urge you to consider implementing the above regulatory

changes. We believe these practical and achievable measures are in the best interest of Ontarians, and will continue to move us towards our shared vision of a tobacco-free Ontario. Thank you for giving us the opportunity to present our views. We look forward to ongoing collaboration on this important issue.

Summary of Recommendations

1. Expand the proposed regulation prohibiting the sale of flavoured tobacco in Ontario to include all flavoured tobacco products (no exemptions) and to be effective immediately.
2. Proceed with the proposed amendments to Regulation 48/06 regarding the prohibition of smoking on the outdoor grounds of hospitals and psychiatric facilities, as well as certain provincial government buildings. Revoke the authority for these facilities to provide a "designated smoking area", effective immediately.
3. Proceed with the proposed changes to the wording of signs that must be posted in locations where tobacco sales violations have taken place.
4. Proceed with the proposed regulations that prohibit the selling and supplying of e-cigarettes to minors, as well as the size and format of signs that must be posted where e-cigarettes are sold.
5. Prohibit e-cigarette use wherever tobacco use is prohibited. We support the prohibited use of e-cigarettes in all of the locations laid out in the proposed regulations with the following additions:
 - i. Motor vehicles transporting children under 16 years of age
 - ii. Outdoor grounds of hospitals and psychiatric facilities; immediately revoke the authority for these facilities to provide a "designated vaping area."
6. Review regulations under the *Electronic Cigarette Act* regularly to ensure they reflect up-to-date research evidence.

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Appendix: Summary of RNAO's Work in Tobacco Cessation

A signature program of the RNAO is the *International Affairs and Best Practice Guidelines* (IABPG) *Centre*, which is focused on the development, dissemination, implementation and evaluation of clinical and healthy work environment best practice guidelines (BPGs). The program was launched in 1999 with multi-year funding from the Ontario Ministry of Health and Long Term Care (MOHLTC).

To date, the IABPG Centre has developed 42 clinical and 10 healthy work environment BPGs, many of which are focused on mental health, and primary care, and topic areas such as chronic diseases, adolescent health, home care and preventing violence in the workplace. BPGs have been implemented provincially, nationally and internationally, and their impact on clinical practice, client outcomes, nurse and organizational outcomes has been profound. Through a focus on individual practitioners and organizations, there have been significant enhancements made in developing evidence-based cultures that support using the best evidence in daily practice. RNAO's BPG *Integrating Smoking Cessation Into Daily Nursing Practice* (available at RNAO.ca/bpg/guidelines/integrating-smoking-cessation-daily-nursing-practice) focuses on providing practical interventions for nurses to help engage and support clients who use tobacco. This evidence-based resource has equipped nurses with the tools and resources to help clients quit smoking.

RNAO's Nursing Best Practice Smoking Cessation Initiative was launched in 2007 with funding from the MOHLTC and remains highly committed to reducing the number of smokers in Ontario by equipping nurses and other health professionals with the knowledge and skills to educate and empower nurses to integrate smoking cessation (SC) best practices into their clinical settings. RNAO's best practice guideline on smoking cessation has remained the initiative's foundation and an essential evidenced-based resource to support nurses and other health-care providers. The key goal of this initiative is to strengthen and sustain implementation activities related to smoking cessation best practices at the organizational level, in particular, within primary care settings. The engagement of nurses, nursing students and other health professionals working with pregnant women and new mothers and their families and other specific populations has been a critical focus through the provision of knowledge transfer events, networking opportunities, smoking cessation coordinator support, evidenced-based resources and SC champion activities. To date, there are close to 3000 smoking cessation champions in Ontario leading evidenced-based tobacco cessation activities within their organizations.