



Hamilton

INFORMATION REPORT

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	February 18, 2016
SUBJECT/REPORT NO:	Overview of Smoke-Free Ontario Act and Electronic Cigarettes Act Legislative and Regulatory Changes Effective January 1, 2016 (BOH16002) (City Wide)
WARD(S) AFFECTED:	City Wide
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SUBMITTED BY & SIGNATURES:	Ellen Pezzetta Director, Healthy Living Division Public Health Services Dr. Julie Emili Associate Medical Officer of Health Public Health Services

Council Direction:

Not applicable

Information:

The provincial government has recently strengthened the Smoke-Free Ontario Act (SFOA) and enacted the Electronic Cigarettes Act (ECA) in an effort to protect youth from the harmful effects of tobacco and e-cigarettes and help achieve the goal of having the lowest smoking rate in Canada. Youth are particularly susceptible to the availability of flavoured tobacco products, and e-cigarettes are rising in popularity, especially among adolescents.

On January 1, 2016, the following will be coming into effect:

Smoke-Free Ontario Act Amendments (SFOA)

- Prohibition of smoking on outdoor grounds of hospitals, psychiatric facilities and the outdoor grounds of specified office buildings owned by the Province, except in designated smoking areas;

- Prohibition of the sale of tobacco at specified office buildings owned by the Province;
- Prohibition of the sale of flavoured tobacco products, with some exemptions for wine, port, whisky and rum flavoured cigars between 1.4 and 6 grams, and all flavoured cigars over 6 grams and flavoured pipe tobacco;
- A temporary exemption for menthol and clove flavoured tobacco products is in place until January 1, 2017;
- Doubling the maximum fines for those who sell tobacco to youth;
- Strengthening the enforcement authority to address indoor use of tobacco in water pipe bars and restaurants;
- Expansion of the seizure authority of inspectors; and,
- Clarification of the process for issuing automatic prohibitions to retailers who sell tobacco to youth.

Electronic Cigarettes Act (ECA)

- Prohibition of the sale and supply of e-cigarettes to anyone less than 19 years of age;
- Prohibition of the sale and supply of e-cigarettes to any person who appears to be less than 25 years old without asking for identification;
- Prohibition of the use of false identification to purchase an e-cigarette;
- Prohibition of the sale of e-cigarettes in retail settings if prescribed signs are not posted; and,
- Prohibition of the sale of e-cigarettes in vending machines.

Additional regulations under the ECA are expected regarding the use of e-cigarettes in public places and workplaces, and the display and promotion of e-cigarettes in retail settings. The provincial government is conducting public and stakeholder consultations during 2016, and new regulations drafted as a result of these consultations will be brought forward to the Board of Health later this year.

The provincial Ministry of Health and Long-Term Care (MOHLTC) is coordinating a province-wide communications strategy to raise awareness and educate operators and the public concerning legislative and regulatory changes to the SFOA and ECA.

Hamilton Public Health Services' Tobacco Enforcement Officers have and will continue to visit premises that offer e-cigarette products for sale at retail for the purpose of providing education concerning the legislative and regulatory changes taking effect January 1, 2016. The SFOA and the ECA will be enforced by Tobacco Enforcement Officers with Hamilton Public Health Services.

The MOHLTC provided additional base and one-time funding to the City of Hamilton Public Health Services for 2015 coinciding with these recently announced legislative and regulatory changes. This funding has been provided to support public and vendor education as well as SFOA and ECA inspection and enforcement requirements.

Hamilton Public Health Services will monitor and assess the inspection and enforcement impacts these legislative and regulatory changes result in during the initial year of implementation and will report back to the Board of Health in 2017 concerning outputs and outcomes.