

SPECIAL COMMITTEE ON TOBACCO CONTROL



FINAL REPORT

January, 2001

1st SESSION of the 24th LEGISLATURE

LEGISLATIVE ASSEMBLY OF SASKATCHEWAN



February 8, 2001

To the Honourable Members of the Legislative Assembly

HONOURABLE MEMBERS:

Your Committee on Tobacco Control is pleased to present herewith its final report. After consideration of all the evidence and arguments available to the Committee, with one exception this Report represents a consensus.

The report builds on the interim report released in May 2000. In this report the Committee makes recommendations regulating tobacco use in the hospitality industry. This report also makes recommendations related to jurisdictional overlap on tobacco control.

Our Committee felt strongly that implementing measures for controlling tobacco use in restaurants, bars, casinos and bingo halls is best done in consultation with the hospitality industry. The Committee held additional hearings with The Canadian Food and Restaurant Association (CFRA), the Hotels Association of Saskatchewan and the Saskatchewan Coalition for Tobacco Reduction. We are grateful to representatives of the hospitality industry and to the Saskatchewan Coalition for Tobacco Reduction for their valued input.

Your Committee was guided by the goal to maintain fairness to those engaged in the hospitality industry and to be faithful to the concept of protecting the public, especially children, from exposure to environmental tobacco smoke. We believe that the objectives recommended are desirable and achievable. We believe the goal of a smoke-free environment in Saskatchewan can best be achieved through a gradual process which includes government consulting with the public.

The action we are recommending upon implementation, will result in a major change. By phasing out smoking in all public places we expect the health status of Saskatchewan to improve and medical costs resulting from tobacco use to decrease. This is a goal worthy of pursuit.

We thank the efforts of all and acknowledge the joint responsibility of all dedicated to this end - be they tobacco reduction activists, students, business people or members of the public. A co-operative effort by all will keep Saskatchewan clean, healthy and strong.

A handwritten signature in dark ink, reading "Myron Kowalsky".

Myron Kowalsky
Chair
MLA Prince Albert Carlton

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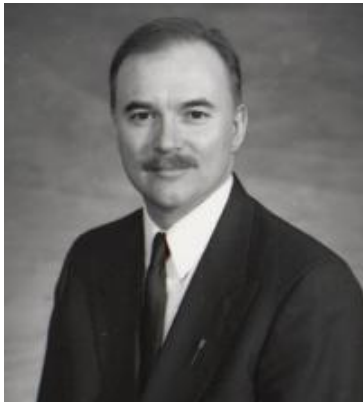
COMPOSITION OF THE COMMITTEE



***Mr. M. Kowalsky, Chair
Prince Albert Carlton***



***Ms. D. Eagles, Vice-Chair
Estevan***



***Mr. G. Addley
Saskatoon Sutherland***



***Ms. B. Bakken
Weyburn-Big Muddy***



***Mr. B. Bjornerud
Saltcoats***



***Ms. D. Higgins
Moose Jaw Wakamow***



***Mr. M. Wartman
Regina Qu'Appelle Valley***

STAFF

Mr. Gregory Putz, Deputy Clerk, Legislative Assembly of Saskatchewan
Mr. Viktor Kaczkowski, Committee Clerk
Ms. Tanya Hill, Research Officer
Ms. Sandra Gardner, Supervisor of Assembly Services
Ms. Zorka Ripplinger, Office Assistant

ORDERS OF REFERENCE

On December 9, 1999, on motion of the Honourable Ms. J. Junor, seconded by Mr. R. Gantefer, the Legislative Assembly created the all-party Special Committee on Tobacco Control, with the following terms of reference:

That the members Kowalsky, Higgins, Wartman, Addley, Eagles, Bjornerud, and Bakken be constituted a Special Committee on Tobacco Control and that the said Special Committee be authorized to consider and report, in the spring of the year 2000, on matters related to:

- a) the impact of tobacco use in Saskatchewan, especially children and youth;**
- b) the need for, and content of, provincial tobacco control legislation protecting children and youth;**
- c) strategies to protect the public from the health risks of second hand smoke, including consideration of smoke-free public place designations and jurisdictional authority related to tobacco use bylaws;**
- d) effective and appropriate strategies related to enforcement, pricing, education and public awareness as may contribute to prevention or reduction of tobacco use, especially by children and youth in Saskatchewan;**

And, that the said Special Committee have the authority to sit during the inter-session period and during the legislative session except when the Assembly is sitting; that the Committee have the power to send for persons, papers, and records, to examine witnesses under oath; to receive representations from interested parties and individuals; to engage such advisors and assistants as are required for the purposes of the inquiry; and to hold meetings away from the seat of Government in order that the fullest representations may be received without unduly inconveniencing those desiring to be heard.

On June 27, 2000, the Legislative Assembly further ordered “that the Special Committee on Tobacco Control be authorized, during any period of adjournment of the First Session of the Twenty-fourth Legislature, to make a report on its enquiries by filing the same with the Clerk of the Legislative Assembly, and that the report shall be distributed in accordance with *The Tabling of Documents Act*.”

ORGANIZATION

On December 14, 1999, the Committee held its first meeting and elected Mr. Myron Kowalsky as Chair, and Ms. Doreen Eagles as Vice-Chair. A Sub-committee on Agenda and Procedure (Steering Committee) was appointed, consisting of the Chair and Vice-Chair. The Committee agreed to seek research assistance, which was accomplished through an open competition. Ms. Tanya Hill was selected for her experience in the field of tobacco use prevention and was appointed to the position of Research Officer effective January 25, 2000.

METHOD OF OPERATION

Soon after the Committee was established it met to consider its terms of reference. It was agreed that hearings would be essential for the Committee to understand public opinion on the issue of tobacco use and control. The locations for hearings were selected in hope of getting a diffuse cross-section of opinion from all across the province – urban, rural, northern and southern. In total 17 communities all across Saskatchewan were visited. For a complete description of the Committee's activities prior to its issuance of its First Report, please refer to that report.

The Committee resumed its deliberations in November, 2000. It had been determined that the Committee needed to further investigate the issue of smoking in public places, specifically bars, restaurants and bingo halls. The Committee heard from representatives of the Hotel Association of Saskatchewan, the Canadian Restaurant and Foodservices Association, and the Saskatchewan Coalition for Tobacco Reduction (including Dr. James Repace, who spoke to the Committee by telephone from Baltimore, Maryland). After hearing this additional testimony, the Committee then undertook its preparation of this, the Committee's Final Report.

INTRODUCTION

In the Committee's First Report it was recognized that the Committee required further consultation before proceeding with recommendations that affect restaurants, bars, casinos and bingo halls. This Final Report is the result of further consultations with the hospitality industry and health organizations.

In keeping with the philosophy of its First Report, the Committee believes tobacco reduction initiatives should be directed towards youth. Evidence presented to the Committee suggests that children and youth are most vulnerable to the effects of tobacco, and are far more likely to start smoking than adults. Young people are susceptible to the pressures of society that indicates that smoking is a socially acceptable activity. Therefore, the Committee is left with the responsibility to develop recommendations that will denormalize tobacco use in the eyes of young people while protecting the public from the effects of exposure to environmental tobacco smoke.

Exposure to environmental tobacco smoke (ETS) is of concern to many people in Saskatchewan. Health organizations, businesses and citizens are apprehensive about the health effects caused by the exposure to ETS and the potential impact of controlling ETS in public places.

The World Health Organization, Health Canada, and the U.S. Surgeon General have all concluded that ETS is a class A carcinogen. These authorities have stated ETS is a hazard to human health and suggest that there is no safe level of exposure to the toxic compounds found in ETS. In addition, Physicians for a Smoke-free Canada state that for every eight people who die from smoking one person dies from exposure to ETS. Therefore, this would imply that more than 150 people die annually from ETS exposure in Saskatchewan.

The Committee heard evidence from health professionals, which suggests that ETS exposure causes or contributes to:

- 3-5% of all lung cancers.
- harmful effects on the cardiovascular and respiratory systems.
- increased rates of middle ear infections, pneumonia, sinus infections, and asthma in children.
- low birth weights, miscarriages, stillbirths, sudden infant death syndrome and other health implications for babies born to mothers exposed to ETS.

Due to advances in medical research regarding the health effects of ETS exposure, the trend throughout North America is for local, provincial and U.S. state governments to regulate exposure to ETS in public places. There are hundreds of jurisdictions that have considered strong evidence that justifies regulating smoking in public places in order to protect the health of the public.

Throughout the consultation process the hospitality industry has raised concerns regarding the economic impact of a smoking ban in their businesses. The Committee heard that there is a fear that restrictions may result in devastating consequences for some Saskatchewan hospitality business owners. As a result, the Committee's recommendations aim to balance the need for public health protection with the need to maintain a viable business environment in Saskatchewan.

PART 4 – PROTECTION

4.1 SMOKING IN PUBLIC PLACES

The Committee used the following definitions when considering issues regarding smoking in public places.

- "Enclosed public place" includes any enclosed location where members of the public, of all ages, have access. The definition does not include partially enclosed facilities.
- "Restaurant" includes any establishment that is enclosed and self-contained in which the main business is the service of food, and is normally open to the members of the public of all ages. This definition does not include food courts in shopping malls, bowling alleys, concessions, and other locations where the main attraction is something other than food service. "Bar" includes any lounge, tavern, beverage room, nightclub, casino, pool hall or other establishment that restricts access to people under the age of 19.

Provincial hospitality business associations and individual business owners raised concerns that suggested their businesses would be negatively affected by a complete smoking ban. These individuals acknowledged that exposure to ETS may have serious health implications, however, they maintained that they should have the freedom to make appropriate decisions regarding smoking policies based on the demand of their customers.

- Conversely, several other business owners testified to their success when they voluntarily restricted smoking in their establishments. The Committee reviewed several studies published in accredited medical journals, which suggested that the impact of complete smoking restrictions did not have overall negative economic impacts on the hospitality industry.

The Committee is sensitive to the concerns of business owners who fear that they might lose business as a result of smoking restrictions. As such, the Committee believes that by phasing in the restrictions in consultation with the industry, and by continually evaluating the economic impact, the effect on business will be minimized during the transition period.

The Committee was presented with evidence that suggested any amount of ETS is harmful and that the risk is amplified with increased concentrations of ETS. In areas that are not 100 percent smoke-free the Government should work with the hospitality industry to develop air quality standards to mitigate the harmful effects of ETS on employees and clients.

Recommendation 4.1a is the initial recommendation that was made by the Committee in the First Report (May 2000) regarding smoking in enclosed public places. Recommendation 4.1b is the result of further consultation and deliberation since the First Report was tabled.

Recommendation 4.1a

Smoking in
Enclosed
Public Places

The Government should await a further report from the Committee before proceeding with ordinances that may affect restaurants, bars and bingo halls. However, legislation should be developed that prohibits tobacco use in all enclosed public places where children have access.

Recommendation 4.1b

Smoking in
Restaurants,
Bars, Bingo
Halls and
Casinos

The Government must aim to phase out smoking in restaurants, bars, bingo halls and casinos. The following timeline for implementation is recommended:

<i>Effective Date</i>	<i>% of Non-Smoking Seats</i>
September, 2001	30%
July, 2002	40%
July, 2003	60%
July, 2004	80%
July, 2005	100%

In five years all establishments should be 100% smoke-free unless the bar, restaurant, casino or bingo hall opts to establish an enclosed, separately ventilated, designated smoking room (DSR) where access is restricted to people 19 years of age and older, and further that the DSR is no larger than 50% of the establishment's public seating capacity.

4.2 JURISDICTION

The Committee believes that the province has a responsibility to set a minimum standard for exposure to ETS in public places. The Committee contends that a provincial strategy controlling smoking in public places is required for several reasons. Firstly, a provincial standard will provide equal protection for all citizens throughout the province. Secondly, provincial legislation would provide consistent regulations among municipalities and provide support to those municipal jurisdictions currently without the means to implement and enforce such regulations. Finally, it would complement the comprehensive provincial tobacco reduction strategy that was recommended in the First Report of the Special Committee on Tobacco Control.

It is not the Committee's intent to take away the authority from municipalities to regulate smoking in public places. Rather, the intent is to enable municipalities to go further than the recommended provincial minimum standards. The Committee believes that because municipalities have a unique understanding of the needs within their communities they should be given the full authority to make stronger by-laws, and be given the ability to differentiate among different categories of public places and businesses.

Recommendation 4.2a

Provincial
Strategy

The Government must develop a strategy to address tobacco use in bars, casinos, restaurants, and bingo halls. This strategy should include:

- **education on the content of regulations restricting smoking in public places;**
- **education on the need to protect the public from ETS;**
- **effective and accurate monitoring of the effect of regulations on the hospitality industry; and**
- **assessment of the impact of regulations on smoking prevalence and health benefits throughout the province.**

Recommendation 4.2b

Municipal
Authority

Municipal governments must retain their power to set restrictions on smoking in public places that may go beyond the recommended provincial standard.

*The Urban
Municipalities
Act, 1984*

Recommendation 4.2c

Section 142 of *The Urban Municipalities Act, 1984* must be amended to allow municipalities the authority to differentiate among different categories of public places and businesses when regulating smoking in public places.

4.3 ENFORCEMENT

Jurisdictions that have implemented restrictions on smoking in public places have stated consistently that enforcement is a key component to the success of this regulatory scheme. Therefore, the Committee believes that effective and appropriate enforcement mechanisms must be put in place to assist and ensure compliance.

The Committee reviewed enforcement mechanisms used in other jurisdictions where smoke-free ordinances have been implemented. It was found that compliance rates with regulations pertaining to restaurants were generally above 90%. The Committee found that diligent enforcement combined with public and business awareness initiatives, prior to the issuance of financial ramifications for non-compliance, would result in effective compliance with the regulations.

Enforcement
Mechanisms

Recommendation 4.3a

Enforcement mechanisms must be established to ensure compliance with smoking in public places regulations. These mechanisms should include:

- **public and business education on regulations;**
- **signage;**
- **routine inspections of businesses;**
- **a system of responding to complaints regarding non-compliant businesses.**

Enforcement
Authorities

Recommendation 4.3b

Public health inspectors should be assigned as the authority to enforce provincial regulations and legislation regarding smoking in public places.

Funding

Recommendation 4.3c

Adequate funding should be directed to enforcement systems to ensure they are appropriate and effective.

4.4 INCENTIVES

The Committee believes that incentive programs are necessary to encourage and support businesses that choose to prohibit smoking in their establishments. These incentives will assist in denormalizing tobacco use in public while encouraging businesses to become smoke-free.

Web-site

Recommendation 4.4a

The Government should set up a web-site to promote smoke-free restaurants throughout Saskatchewan.

Recognition

Recommendation 4.4b

The Government should recognize smoke-free hospitality businesses with a Clean Air Certificate.

Signage

Recommendation 4.4c

The Government, in consultation with the hospitality industry, should develop signage with positive messages for those businesses that become smoke-free.

APPENDIX 1 – SUMMARY OF RECOMMENDATIONS

(The following summary includes the recommendations from both the First and the Final Report.)

PART 1 – TOBACCO REDUCTION STRATEGY

1.1 Development and Implementation of a Comprehensive Tobacco Reduction Strategy

- 1.1a The Department of Health shall develop and implement a comprehensive and sustained tobacco reduction strategy that is based on the recommendations put forth in this report.
- 1.1b The Saskatchewan Tobacco Reduction Strategy must set goals and timelines. While giving particular attention to youth, the goal should be to decrease the percentage of tobacco users by 50 percent over the next five years; and by another 50 percent in the following five years.
- 1.1c The Department of Health should develop methods that evaluate the effectiveness of the provincial tobacco reduction strategy. This should include, but not be limited to:
 - the monitoring of tobacco use prevalence among different age groups and high-risk segments of the population such as youth, women of childbearing age, and low-income people.
 - the assessment of the effectiveness of reduction strategies on different segments of the population.
 - the impact of smoke-free and tobacco access ordinances on businesses.

1.2 Funding of the Tobacco Reduction Strategy

- 1.2a The Government should increase the tobacco excise tax on cigarettes by 10¢ per package of cigarettes (0.4¢ per cigarette). Excise tax rates on other tobacco products should be comparable. The funds raised by this tax increase (\$5 million) must be specifically designated to fund the Tobacco Reduction Strategy, through the designated government departments, that reflects the recommendations in this report.
- 1.2b The Government must ensure appropriate and effective measures are in place that will prevent the smuggling of tobacco products into Saskatchewan.

PART 2 – PREVENTION

2.1 Academic Anti-Tobacco Education

- 2.1a The Department of Education must implement and provide the necessary resources to enable mandatory anti-tobacco education that is consistently reinforced from kindergarten to grade nine, and is included in the health and physical education curriculum in grades ten to twelve. Anti-tobacco education should:
- be age specific, and must reflect the developmental abilities of different age groups.
 - address the health and social consequences of tobacco use.
 - encourage students to believe in the anti-tobacco message in addition to learning it by rote. Students must understand the real life health effects of smoking through hands-on experiences and activities.
 - address underlying causes of tobacco use such as peer pressure and low self-esteem.
 - encourage peer education and mentoring opportunities.
 - be developed to address the specific cultural aspects of Metis and First Nations youth.
 - seek to denormalize the tobacco industry and tobacco use behaviour.
 - encourage cessation by youth smokers.
- 2.1b The Department of Health and the Department of Education should work cooperatively to develop and promote curricular resources that integrate tobacco education into various disciplines within the secondary school curriculum.
- 2.1c The implementation of the mandatory anti-tobacco curriculum, addressed in recommendation 2.1a, should commence in the fall of 2000.

2.2 Tobacco Specific Peer Education

- 2.2a Students Working Against Tobacco (SWAT) and similar tobacco specific peer education programs should be encouraged in all middle years and secondary schools throughout the province.
- 2.2b Students Working Against Tobacco (SWAT) should be encouraged to work with youth throughout the province. This may be accomplished by, but not limited to:
- the development of youth conferences, peer education workshops and focus groups on tobacco issues.
 - the sponsorship of anti-tobacco media campaigns.
 - the monitoring of tobacco prevention initiatives from a youth perspective.
 - the recognition and celebration of youth cessation and prevention accomplishments.

- 2.2c The Government should ensure that there is adequate and sustained funding and support for the provincial Students Working Against Tobacco (SWAT) program.

2.3 Community Based Anti-Tobacco Education

- 2.3a With resources provided by, but not limited to, the Department of Health, the District Health Boards should develop and implement tobacco prevention and education programs that address the specific needs of the local communities that they serve. Anti-tobacco information and resources should be made available to community based youth organizations to reinforce tobacco-free living among young people.

2.4 Public Education

- 2.4a The Department of Health must develop and implement a public education media campaign that addresses, but is not limited to, the following issues. This education campaign should:
- encourage awareness and support for tobacco reduction and protection policies and legislation.
 - address the realistic and damaging health effects of tobacco use.
 - encourage adult cessation.
 - address the harmful health effects of environmental tobacco smoke, especially on youth.
 - denormalize tobacco use among youth through the use of peer education, and Saskatchewan celebrities and role models.
 - specifically address the issues that concern First Nation and Metis people, women of childbearing age, and youth.
 - address the addictive nature of tobacco.

PART 3 – CESSATION

3.1 Cessation Programs

- 3.1a The Department of Health and District Health Boards should continue to examine cessation programs, identify those that are effective, and make this information available to health, education, and addiction professionals.
- 3.1b Public health and education professionals should encourage the establishment of peer support groups for addicted tobacco users with an emphasis on high-risk groups.

PART 4 – PROTECTION

4.1 Smoking in Public Places

- 4.1a The Government should await a further report from the Committee before proceeding with ordinances that may affect restaurants, bars and bingo halls. However, legislation should be developed that prohibits tobacco use in all enclosed public places where children have access.
- 4.1b The Government must aim to phase out smoking in restaurants, bars, bingo halls and casinos. The following timeline for implementation is recommended:

<i>Effective Date</i>	<i>% of Non-Smoking Seats</i>
September, 2001	30%
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In five years all establishments should be 100% smoke-free unless the bar, restaurant, casino or bingo hall opts to establish an enclosed, separately ventilated, designated smoking room (DSR) where access is restricted to people 19 years of age and older, and further that the DSR is no larger than 50% of the establishment's public seating capacity.

4.2 Jurisdiction

- 4.2a The Government must develop a strategy to address tobacco use in bars, casinos, restaurants, and bingo halls. This strategy should include:
- education on the content of regulations restricting smoking in public places;
 - education on the need to protect the public from ETS;
 - effective and accurate monitoring of the effect of regulations on the hospitality industry; and
 - assessment of the impact of regulations on smoking prevalence and health benefits throughout the province.
- 4.2b Municipal governments must retain their power to set restrictions on smoking in public places that may go beyond the recommended provincial standard.

- 4.2c Section 142 of *The Urban Municipalities Act, 1984* must be amended to allow municipalities the authority to differentiate among different categories of public places and businesses when regulating smoking in public places.

4.3 Enforcement

- 4.3a Enforcement mechanisms must be established to ensure compliance with smoking in public places regulations. These mechanisms should include:
- public and business education on regulations;
 - signage;
 - routine inspections of businesses;
 - a system of responding to complaints regarding non-compliant businesses.
- 4.3b Public health inspectors should be assigned as the authority to enforce provincial regulations and legislation regarding smoking in public places.
- 4.3c Adequate funding should be directed to enforcement systems to ensure they are appropriate and effective.

4.4 Incentives

- 4.4a The Government should set up a web-site to promote smoke-free restaurants throughout Saskatchewan.
- 4.4b The Government should recognize smoke-free hospitality businesses with a Clean Air Certificate.
- 4.4c The Government, in consultation with the hospitality industry, should develop signage with positive messages for those businesses that become smoke-free.

PART 5 – DENORMALIZATION

5.1 Youth Possession of Tobacco Products and Tobacco use on School Property

- 5.1a The Government should develop and implement legislation that prohibits youth, under the age of 18, from using and possessing tobacco products.
- 5.1b Provisions should be made to legally engage underage youth to conduct tobacco sales to minors' compliance checks under the supervision of tobacco enforcement authorities.

- 5.1c The fine for violations should be \$50.
- 5.1d The use of tobacco, by people of all ages, should be prohibited on kindergarten to grade twelve school property.

5.2 Sale of Tobacco Products

5.2a –5.2b Legal age to Purchase Tobacco Products

- 5.2a The legal age to purchase tobacco products, under provincial legislation, should be raised to the age of 18.
- 5.2b Only provincial and/or federal government issued photo identification are to be acceptable forms of proof of age when purchasing tobacco products.

5.2c Licensing of Tobacco Vendors

- 5.2c The Government must require all tobacco vendors, including locations where vending machines are permitted, to purchase a license authorizing them to sell tobacco products. A reasonable, one time licensing fee should be charged to tobacco retailers at a price that covers the administration cost of the licensing program.

5.2d – 5.2f Enforcement

- 5.2d The Government should consider the following enforcement procedures to ensure compliance with tobacco sales legislation. The following procedures are applicable to all licensed tobacco vendors. All fines would be issued through tickets.

1st Offence

- The individual or employee who sells tobacco to a minor is fined \$100.
- The holder of the tobacco vendor license where the sale takes place is issued a written warning outlining the nature of the offence that occurred and the consequences for further offences.

2nd Offence

- The individual or employee who sells tobacco to a minor is fined \$100.
- The holder of the tobacco vendor license is fined \$500 and issued a written warning outlining the consequences for further offences.

3rd Offence

- The individual or employee who sells tobacco to a minor is fined \$100.
- The holder of the tobacco vendor license is fined \$500 and issued a written warning outlining the consequences for further offences.

4th Offence

- The individual or employee who sells tobacco to a minor is fined \$100.
- The holder of the tobacco vendor license loses his/her license to sell tobacco for a period of one year, and is fined \$500.

5th Offence

- The individual or employee who sells tobacco to a minor is fined \$100.
- The holder of the tobacco vendor license permanently loses the license to sell tobacco at the location where the offence takes place.

The Department of Justice should develop commensurate warnings and restrictions applicable to the owner of the property and/or the lessee of the location where the tobacco vendor license is issued.

5.2e The Department of Justice should give authority to tobacco enforcement officers to ticket for offences under the federal *Tobacco Act, 1997*.

5.2f In order to assist tobacco retailers in educating their employees on tobacco sales legislation, the Government should ensure the appropriate dissemination of information to licensed tobacco vendors in regards to the provincial and federal legislation and regulations governing tobacco sales.

5.2g – 5.2h Enforcement Officers and Partnerships

5.2g Tobacco enforcement officials should be given peace officer status to ensure adequate enforcement authority.

5.2h The provincial government should seek to enter into an agreement with the federal government to ensure efficient and effective enforcement of provincial and federal tobacco control legislation within Saskatchewan.

5.2i – 5.2j Locations Where Tobacco Can be Sold

5.2i The sale of tobacco products should be prohibited within hospital and health care facilities.

5.2j Tobacco product vending machines must be restricted to age-restricted establishments.

5.2k – 5.2l Point of Sale Promotion of Tobacco Products

- 5.2k All displays, signage and promotional material associated with the sale of tobacco products should be prohibited in locations where tobacco is sold and where youth have access. Tobacco products should be kept in a manner where they are not visible to the public. This includes signage and promotional materials that advertise the price and/or availability of tobacco products on, or within the vicinity of the retail establishment.
- 5.2l Tobacconists, whose primary business is the sale of tobacco products, should be permitted to display and promote tobacco products in their establishments; provided that youth, under the age of 18, cannot enter the premises and that tobacco products, promotional materials, and displays cannot be seen from the outside of the establishment.

5.3 Packaging of Tobacco Products

- 5.3a The Government should explore the possibility of working with other provinces and the federal government on tobacco packaging issues including provincially focused health warnings, provincial tax markings, and plain packaging.

APPENDIX 2 – SUPPLEMENTARY LIST OF WITNESSES

(For a list of all other witnesses appearing before the Committee please refer to the Committee's First Report.)

Mr. Larry Bird	Regina	November 22, 2000
Mr. Les Brown	Regina	November 22, 2000
Mr. Wayne Chophonis	Regina	November 22, 2000
Mr. Bill Crowe	Regina	November 22, 2000
Mr. Brian Dionne	Regina	November 22, 2000
Mr. Ken Leschuk	Regina	November 22, 2000
Mr. Leon Ledohowski	Regina	November 22, 2000
Mr. Bill Nelson	Regina	November 22, 2000
Mr. Brent Petersen	Regina	November 22, 2000
Mr. Don Richardson	Regina	November 22, 2000
Mr. Rod Riddell	Regina	November 22, 2000
Dr. Ross Findlater	Regina	November 30, 2000
Ms. Mary Smillie	Regina	November 30, 2000
Dr. James Repace	Regina	November 30, 2000
Mr. Fred Soofi	Regina	November 30, 2000

APPENDIX 3 – SUPPLEMENTARY SUMMARY OF WRITTEN SUBMISSIONS AND CORRESPONDENCE

(For a list of all other written submissions and correspondence received by the Committee please refer to the Committee's First Report.)

Submission by the Regina Health District entitled "Economic Impact and Industry Linkages"	November 3, 2000
Submissions by the Hotels Association of Saskatchewan including: <ul style="list-style-type: none">- "Hotels & Air Quality: A Responsible Approach to Tobacco Control"- "Indoor Air Quality" information provided by Leo Ledohowski- letter from Scott Roberts, National Sales & Marketing Manager, Commercial Air Products, Honeywell International to Leo Ledohowski- document entitled "Executive Summary of Five Different Tests of Three Different Manufacturer's Equipment"- document entitled "Breathe Purified...Allergen Free Air"	November 22, 2000
Submission by the Canadian Restaurant and Foodservices Association entitled "Submission to the Saskatchewan Legislative Assembly Special Committee on Tobacco Control"	November 22, 2000
Submissions by the Saskatchewan Coalition for Tobacco Reduction including: <ul style="list-style-type: none">- "No Compromise for Health: Report to the All Party Committee on Tobacco Control" dated November 30, 2000.- Article entitled "Bartenders Respiratory Health After Establishment of Smoke-Free Bars and Taverns"	November 30, 2000
Correspondence from Allyne Knox	November 30, 2000
Correspondence from Mark von Schellwitz	December 6, 2000
Correspondence from the Hotels Association of Saskatchewan dated January 15, 2001.	January 30, 2001
Submission by the Saskatchewan Committee for Responsible Tobacco Retailing dated January 2001.	January 30, 2001

APPENDIX 4 – RESERVATIONS

By Mr. Bob Bjornerud, MLA, Ms. Brenda Bakken, MLA, and Ms. Doreen Eagles, MLA.

Recommendation 4.1b

We are unable to support this recommendation which calls for 100 per cent smoke-free seating in restaurants, bars, bingo halls and casinos within five years unless these businesses opt to install an **enclosed and separately ventilated** designated smoking room.

While we agree that more must be done to protect non-smokers from the reported effects of second hand smoke, this particular recommendation is not realistic.

The requirement that smoking rooms be separately ventilated is a financial impossibility for many businesses, especially restaurants and bars. The cost of this “option” realistically does not make it an option at all for many, if not most, businesses. Therefore, we feel the committee would be disingenuous in stating that such an option is open to business people.

For the above reason, we object to this recommendation.

Further, we want to take this opportunity to object to the process followed by the committee in deciding who was able to address committee members and who was not. Some members of the public, mainly those representing the business community, were not given an opportunity to make their views known despite repeated requests to appear before the committee. Such decision making, we feel, makes it look as though some members of the committee came to these hearings with a bias against the valid concerns of the very business community that will be affected financially by this report if implemented.

Bob Bjornerud, MLA

Brenda Bakken, MLA

Doreen Eagles, MLA