

## **Tobacco Free Ireland**

**Action Plan** 



Tús Áite do Shábháilteacht Othar Patient Safety First Tobacco Free Ireland, the report of the Tobacco Policy Review Group, was endorsed by Government, and published in October 2013. It builds on existing tobacco control policies and legislation already in place in this country, and sets a target for Ireland to be tobacco free (i.e. with a smoking prevalence rate of less than 5%) by 2025. Tobacco Free Ireland was the first policy document to be launched under the Healthy Ireland framework and will play a major part in achieving the vision set out in Healthy Ireland. The two key themes underpinning Tobacco Free Ireland are the protection of children and the denormalisation of smoking.

Tobacco Free Ireland addresses a range of tobacco control issues and initiatives and contains over 60 recommendations. This high level action plan, drawn up in consultation with those who will lead out on the recommendations, outlines the responsibilities, actions necessary and timelines for the implementation of the recommendations. Some of the recommendations have already been commenced and some of them, by their very nature, are on-going. The implementation of many of the recommendations is dynamic and the action plan will be subject to annual review so as to monitor progress. As part of the annual review process, a detailed report will be prepared and published outlining the progress to date and any actions necessary to ensure the implementation of the recommendations in Tobacco Free Ireland.

Chapter and	Recommendation	Lead	Action	Time frame
no.				
<u>eneral</u> 11.1	Develop an action plan with timelines for the phased implementation of the recommendations in Tobacco Free Ireland.	DOH TACU <sup>1</sup>	<ol> <li>Action plan developed in consultation with key stakeholders.</li> <li>Review and update action plan annually.</li> </ol>	<ol> <li>Complete Q4 2014</li> <li>Annual Report on TFI produced in Q1 each year, beginning 2015</li> </ol>
5.1	Take steps to ensure that all government officials, employees of state agencies and members of any government branch (executive, legislative and judiciary) responsible for setting and implementing tobacco control policies and for protecting those policies against tobacco industry interests are aware of their obligations under article 5.3 of the WHO FCTC <sup>2</sup> and are aware of the Guidelines developed to assist in meeting these obligations.	DOH TACU	Continue to advise all appropriate Government Departments, State Agencies with WHO FCTC guidelines on article 5.3.	Initiate 2014 and on- going
rotection of ch	ildren and denormalisation of tobacco use in Ireland			
7.1	The protection of children must be prioritised in all of the initiatives outlined in the policy.	1. DOH TACU 2.DOH H&W P <sup>3</sup> 3. HSE <sup>4</sup>	All initiatives to be examined with a view to maximising the impact on children where appropriate.	Initiate Q1 2014 and on- going
7.2	Denormalisation must be a complementary underpinning theme for all of the initiatives within the policy.	1. DOH TACU 2. DOH H&W P 3. HSE	All initiatives to be evaluated with a view to maximising denormalisation.	Initiate Q: 2014 and on- going
7.3	Develop and introduce legislation to prohibit smoking within the campuses of primary schools, secondary schools and child care facilities.	DOH TACU	<ol> <li>Review previous legislation for primary and secondary schools and check if it could be fit for purpose.</li> <li>Define child care facilities and explore how legislation might be framed.</li> <li>Initiate legislative process.</li> </ol>	1. Initiate Q2 2016 2. Initiate Q2 2016 3. Initiate Q3 2016
7.4	Promote tobacco free campuses for all third-level institutions in consultation with key stakeholders.	DOH H&WB P	Health and Wellbeing Programme to engage with Higher Education Institutes and other stakeholders to introduce tobacco free campuses as part of Healthy Campus initiative. Engage with 3rd level institutions to promote tobacco free campuses. Liaise with ASH Ireland on work to date in this area.	Initiate Q2 2014 and on- going

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7.5	Promote tobacco free campuses for all health care, governmental and sporting facilities in consultation with key stakeholders.	1.HSE 2. DOH H&W P	<ol> <li>HSE to continue implementation of tobacco free campuses on its sites.</li> <li>DOH H&amp;WB P to engage with Healthy Ireland Cross-Sectoral group to promote tobacco free campuses.</li> <li>DOH H&amp;WB P working with a corporate partner to develop a tobacco free campus toolkit for general use.</li> </ol>	1. On-going 2015 2.On-going 201 3.On-going 201
7.6	Further develop the tobacco free playgrounds initiative in conjunction with the local authorities by way of voluntary measures or by the introduction of bye-laws.	DOH H&W P	DOH H&WB P to engage with Inter- Departmental Group on Local and Community Development and the	Initiate Q2 2014
7.7	Promote tobacco free environments and in particular parks and beaches in conjunction with the local authorities by voluntary measures or by the introduction of bye-laws.		City and County Managers Association to include health and wellbeing as a key pillar in economic and community planning process. Liaise with ASH Ireland on work to date in this area.	
7.8	Evaluate the tobacco free environment initiatives with a view to the introduction of legislation if required.	DOH TACU	DOH TACU and H&WB P to evaluate 7.4 to 7.7 to assess progress and need for further action.	Initiate Q1 2016
egislative com	pliance and regulating the retail environment			
8.1	Continue to actively promote compliance with and enforce all provisions of the Public Health (Tobacco) Act 2002 as amended.	HSE	HSE Annual Service Plan commitment.	On-going
8.2	Introduce fixed penalty notices (on the spot fines) for offences.	DOH TACU	To be explored in Retail Licensing Bill.	See 8.7 to 8.12 below
8.3	Develop capacity within the HSE's Environmental Health Service to maintain consistent and sustained enforcement of all aspects of the tobacco control legislation.	HSE	Compliance levels reviewed and legislative provisions with most non- compliance targeted. Standard operational protocols in place, reviewed annually.	On-going
8.4	Develop special investigation capacity within the HSE's Environmental Health Service to assess compliance by tobacco manufacturers.	HSE	The reconfiguration of the Environmental Health Service will consider this recommendation.	Q2 2015
8.5	Introduce legislation for the publication of information in respect of any person on whom a fine, other penalty or conviction was imposed by a Court ('name and shame').	DOH TACU	Build on current HSE system for reporting on convictions and prosecutions via new Retail Licencing Bill.	See 8.7 to 8.12 below
8.6	Collaborate with other EU <sup>5</sup> countries in relation to compliance measures for tobacco ingredient reporting.	DOH TACU	Engage with European Commission to facilitate the transposition of the Tobacco Products Directive by May 2016.	Initiate Q2 2014
	Regulate the tobacco retail environment.	DOH TACU	Consider the implementation of recommendations 8.7 to 8.12 in the forthcoming Retail Licencing Bill.	1. Initiate Q 2014 2. Memo to

Chapter and	Recommendation	Lead	Action	Time frame
no. Monitor tobacc	o use and prevalence		1	
9.1	An active research and survey programme on tobacco should be put in place to include areas such as supply and demand, prevention and treatment, exposure to second-hand smoke and industry marketing initiatives.	DOH TACU HSE DOH H&WB P	<ol> <li>Engage with key stakeholders to identify research requirement.</li> <li>Surveillance of tobacco use through HSE Tracker, Healthy Ireland and Health Behaviour in School Children Surveys.</li> </ol>	1.Initiate Q1 2015 2. Q2 2014 and on-going
9.2	This survey programme is to include a single, reliable and regular collation of smoking prevalence rates.	DOH TACU	Standardised survey questions on tobacco developed in conjunction with HSE and WHO	2014 and on- going
9.3	Tobacco control measures should be continuously evaluated to ascertain impacts and outcomes.	DOH TACU HSE	Evaluation built in to all tobacco control measures and carried out as appropriate, e.g., Audit of tobacco free campus, tobacco control legislation, QUIT campaign, training in Brief Interventions and other measures and reported on. See 10.3 below.	2014 and on- going
Protect people	from tobacco smoke			
9.4	Develop and introduce legislation prohibiting smoking in cars where children are present, based on international evidence and good practice.	DOH TACU	Facilitate the progress of the Protection of Children's Health (Tobacco Smoke in Mechanically Propelled Vehicles) Bill 2014.	Complete Q1 2015
9.5	Undertake a social marketing campaign focusing on the risks to children from exposure to second-hand smoke with particular reference to smoking in cars (and information on future legislation in this regard).	HSE	Await outcome of 9.4 and resources for same.	Initiate 2015
9.6	Monitor the effectiveness of the current smoke free legislation, including the review of existing exemptions and the monitoring of compliance with these provisions.	DOH TACU HSE	Joint DOH TACU and HSE group to review all tobacco control legislation quarterly.	Initiate Q4 2014
Offer help to qu 9.7	Identify a lead person with clear lines of responsibility for the co- ordination of smoking cessation services within the health service to ensure a national approach.	HSE	Lead in place.	Complete Q2 2014
9.8	Develop comprehensive national smoking cessation guidelines. These to include the minimum level of service provision that each service provider needs to have in place.	HSE	<ol> <li>Publish national standards for the intensive tobacco cessation support programme.</li> <li>Train all intensive tobacco cessation specialist staff in delivering behavioural support based on best practice and newly published standards.</li> <li>Assess minimum level of service provision with the implementation of the new integrated "one-stop" model QUIT service.</li> </ol>	<ol> <li>Publish in 2013.</li> <li>Online and face to face training to be commissioned for 2014.</li> <li>On-going through 2015 and 2016</li> </ol>
9.9	Undertake targeted approaches for specific groups, particularly young people, lower socioeconomic groups, pregnant and post-partum women and patients with cardiac and respiratory disorders.	HSE	Specialist smoking cessation staff trained to deal with specific groups. Referral pathways to support these groups via a "one-stop " model being developed.	Q2-Q4 2014 and on-going

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9.10	Establish a national database for the collection and collation of data from all smoking cessation services.	HSE	Develop a business case for a National Tobacco Cessation Service Patient Management System.	Initiate 2014 and progress 2015
9.11	Train all frontline healthcare workers to deliver interventions for smoking cessation as part of their routine work.	HSE	<ol> <li>Training targets set for number of staff to be trained in Brief Intervention Smoking Cessation HSE Annual Service Plan.</li> <li>Very Brief Advice on-line training to be offered to all staff.</li> </ol>	1. 2014 and on- going. 2. Develop for 2015
9.12	Examine evidence (national and international) regarding outcomes of the use of NRT <sup>6</sup> and other approaches.	DOH TACU	Engage with key stakeholders with a view to carrying out an evidence based review or health technology assessment on NRT and other smoking cessation approaches.	Initiate Q2 2014
9.13	Establish a regulatory framework for nicotine products in the context of discussions at EU level.	DOH TACU	<ol> <li>Retail Licencing Bill to include non-medicinal nicotine products.</li> <li>Implementation of EU Tobacco Products Directive.</li> </ol>	See 8.7 to 8.12 above see
9.14	Increase investment in mass media quit campaigns.	HSE	Significant increase in investment secured for QUIT campaign, subject to continuous evaluation.	2014 and on- going
9.15	Advocate for the removal of VAT from NRT.	DOH TACU	Discuss with Department of Finance the feasibility of minimising the rate of VAT on NRT patches subject to the EU VAT. Directive	Q1 2015
9.16	Make NRT more widely available, including in outlets where tobacco products are sold.	DOH TACU	The Health Products Regulatory Authority (HPRA), formerly the Irish Medicines Board has authorised an NRT product to be sold in general retail and grocery outlets.	Initiate Q3 2014 and on going
9.17	e dangers of tobacco	HSE	See 9.14 above.	2014 and on-
9.17	dangers of tobacco.	HJL	See 9.14 above.	going
9.18	Enhance educational initiatives aimed at preventing young people from starting to smoke, in line with best international practice within the Healthy Ireland framework.	DOH H&W P	DOH H&WB P engaging with Dept of Education and Skills to ensure an effective approach to health and wellbeing. Also leading out on implementation of Outcome 1- Active and Healthy, Physical and Mental Wellbeing in Better Outcomes, Brighter Futures.	2014 and on- going
	Monitor the implementation of regulations for pictorial warnings.	1.DOH TACU 2. HSE	Joint DOH TACU and HSE group to review all tobacco control legislation quarterly.	Initiate Q4 2014
9.19				
9.19	Undertake continued evaluation of campaigns and programmes.	1.DOH TACU 2. HSE	See 9.3.	2014 and on- going
9.20			See 9.3.	
9.20	Undertake continued evaluation of campaigns and programmes. n tobacco advertising, promotion and sponsorship Continued implementation and monitoring of the national inspection		See 9.3.	

napter and no.	Recommendation	Lead	Action	Time frame
9.22	Review existing legislation to ensure that it is fit for purpose to deal with new and emerging measures and marketing programmes adopted by the tobacco industry.	1.DOH TACU 2. HSE	Joint DOH TACU and HSE group to review all tobacco control legislation quarterly.	Initiate Q 2014
9.23	Robustly defend the legal challenge by the tobacco industry to the point of sale measures introduced in 2009.	DOH TACU	Await further developments in this area.	On-going
9.24	Develop legislation for the introduction of standardised/plain packaging for tobacco products.	DOH TACU	Facilitate the progress of the Public Health (Standardised Packaging of Tobacco) Bill 2013.	Complete Oireachtas process Q1 2015 and commence legislation in lir with Tobacco Products Directive May 2016
9.25	Work with the EU to ensure successful implementation of the proposed revision of the Tobacco Products Directive.	DOH TACU	Engage with European Commission to facilitate the transposition of the Tobacco Products Directive by May 2016.	Initiate Q2 201
9.26	Work with media regulators and the entertainment industry around the portrayal of smoking in the media.	DOH TACU	Review the portrayal of smoking in national media.	Initiate Q1 2015
9.27	Monitor developments in relation to brand stretching at a global and European level.	DOH TACU	Monitor tobacco industry activity in conjunction with WHO FCTC and European Commission and review accordingly.	On-going
9.28	Examine and monitor the existing tobacco legislation to ensure that it is inclusive of contemporary forms of communications.	1.DOH TACU 2. HSE	Joint DOH TACU and HSE group to review all tobacco control legislation quarterly.	Initiate C 2014
se taxes on 1 9.29	tobacco products The Departments of Health and Finance and the Office of the Revenue Commissioners are to work in closer collaboration in relation to fiscal matters relating to tobacco and on measures to reduce the illicit trade of tobacco.	DOH TACU	Engage with Department of Finance and Revenue Commissioners.	2014 and on- going
9.30	Annual excise duty increases on tobacco products should be applied over a continuous five year period.	DOH TACU	DOH TACU to discuss this recommendation with the Dept of Finance.	2014 and on- going
9.31	Increase duty on roll-your-own and other tobacco products to reduce the price differential between cigarettes and other tobacco products.	DOH TACU	DOH TACU to advocate for such increases.	2014 and on- going
9.32	Remove tobacco from the consumer price index.	DOH TACU	Discuss with Central Statistics Office and other relevant bodies.	Initiate Q1 2015
9.33	Introduce a tobacco industry levy or similar mechanism which could be ring fenced to fund health promotion and tobacco control initiatives including support to end the illegal trade.	DOH TACU	Discuss with Department of Finance.	Initiate Q1 2015
9.34	Consider the introduction of an environmental levy in the context of the Government's waste policy "A Resource Opportunity", the application of economic instruments and the review of producer responsibility.	DOH TACU	Discuss with Department of the Environment, Community and Local Government.	Initiate Q1 2016
9.35	Continue collaboration with national and international partners on strategies to reduce illicit trade.	DOH TACU	Discuss with Departments of Finance, Justice and Equality, Revenue Commissioners, European	On-going

Chapter and	Recommendation	Lead	Action	Time frame
<u>no.</u> 10.1	Government Departments, and state agencies including the Health Service Executive will continue to liaise and work with the non- governmental organisations in order to achieve policy aims set out in this report.	1. DOH TACU 2 DOH H&W P 3. HSE	<ol> <li>Ensure on-going engagement via:</li> <li>DOH engagement with governmental, state agencies and NGOs<sup>7</sup>,</li> <li>Healthy Ireland Council,</li> <li>HSE Health Services Tobacco Control Partners group.</li> </ol>	Initiate Q1 2014 and on- going
10.2	Continued participation and engagement at EU level in the context of the revised Tobacco Products Directive.	DOH TACU	Engage with the European Commission to facilitate the transposition of the Tobacco Products Directive by May 2016.	Initiate Q 2014
10.3	All Government Departments and state agencies should actively engage with and implement the WHO FCTC, the Protocol to Eliminate the Illicit Trade in Tobacco Products and the FCTC Implementation Guidelines.	DOH TACU	<ol> <li>Sign WHO FCTC protocol.</li> <li>Arrange to put in place the measures to facilitate ratification in the light of obligations set out in the Tobacco Products Directive.</li> <li>Implement protocol within recognised timeframes as set down by the ratified protocol.</li> </ol>	1. Complete Q4 2013 2. Initiate Q4 2014 3. Await 40 country ratification
10.4	Collaboration with other national and international partners in the area of tobacco control should be continued to further develop the evidence base in support of new initiatives and to evaluate the impact of current measures.	DOH TACU	Continue to liaise with EC, WHO and other international bodies to review new tobacco control initiatives as they emerge with a view to incorporate them into practice in Ireland if they facilitate Tobacco Free Ireland by 2025.	On-going
10.5	Collaborate on a North/South basis, in particular through the North South Ministerial Council, on measures to reduce tobacco consumption.	DOH TACU	Continue to work with North South Ministerial Council on tobacco control.	On-going
10.6	Support greater national and international collaboration and participation on research programmes to strengthen the evidence base for new measures.	DOH TACU	Continue to liaise with European Commission, WHO and other international bodies to review new tobacco control initiatives as they emerge with a view to incorporate them into practice in Ireland if they facilitate Tobacco Free Ireland by 2025.	On-going
Legend	<ol> <li>DOH TACU: Department of Health Tobacco and Alcohol Control Unit.</li> <li>WHO FCTC: World Health Organisation Framework Convention on To</li> <li>DOH H&amp;W P: Department of Health Health and Wellbeing Programm</li> <li>HSE: Health Service Executive.</li> <li>EU: European Union.</li> <li>NRT: Nicotine Replacement Therapy.</li> <li>NGOs: Non-Governmental Organisations.</li> </ol>	bacco Control.		1

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