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# SMOKE-FREE ONTARIO ACT: HOW THE ACT AFFECTS DAY NURSERIES AND PRIVATE HOME DAY CARE



## Smoke-Free Ontario Act How the Act Affects: Day Nurseries and Private Home Day Care

### The Basics

- The Smoke-Free Ontario Act came into force on May 31, 2006.
- The Act prohibits smoking in enclosed workplaces and enclosed public places in Ontario in order to protect workers and the public from the hazards of second-hand smoke.

### Day Nurseries and Private Home Day Care

Smoking is prohibited in a day nursery licensed under the *Day Nurseries Act*. In addition, where private home day care is provided under the *Day Nurseries Act*, the entire premises must be smoke-free at all times whether children are present or not.

Private home day care is provided under the DNA in a private home under a licence issued by the Ministry of Children and Youth Services to a private-home day care agency. A private home day care provides temporary care for reward or compensation for five children or fewer who are under ten years of age in a private residence other than the home of the parent/guardian of the child. Homes are supervised and monitored by the agency.

For further information, the Ministry of Children and Youth Services website address is [www.children.gov.on.ca](http://www.children.gov.on.ca).

### Responsibilities of Operators

- Ensure that everyone is aware that smoking is prohibited.
- Remove ashtrays and any object that serves as one.
- Ensure that no one smokes on the premises.
- Ensure that a person who does not comply does not remain on the premises.
- Post *No Smoking* signs at all entrances, exits, washrooms, and other appropriate locations. For information on acquiring required signage, please contact your local public health unit.

### Enforcement

Local public health units will carry out inspections and investigate complaints in day nurseries and places where licensed private home day care is provided in order to enforce the Act.

## **Penalties**

There is no maximum corporate fine listed in the SFOA for contravention of this section of the Act, meaning the fine amount would be left up to a justice of the peace, in accordance with general statutory requirements. An individual could be subject to a maximum fine of \$5,000.

This fact sheet is intended as a quick reference only. For more information, please contact your local public health unit.

You may also obtain information by calling toll-free:

- **INFOline** 1-866-396-1760
- **TTY** 1-800-387-5559

Hours of operation: Monday to Friday, 8:30am - 5:00pm

For more information on the Smoke-Free Ontario Act, please visit the Ontario Ministry of Health and Long-Term Care website: [Ontario.ca/smokefree](http://Ontario.ca/smokefree).

**May 2007**

## SMOKING IN MOTOR VEHICLES WITH CHILDREN PRESENT



### Smoke-Free Ontario Act

#### How the Act Affects:

#### SMOKING IN MOTOR VEHICLES WITH CHILDREN PRESENT

#### THE LAW

- As of January 21, 2009, the Smoke-Free Ontario Act prohibits persons from smoking or having lighted tobacco in a motor vehicle if another person who is less than 16 years old is inside the vehicle.
- Any person – driver or passenger – in a motor vehicle, who is smoking while someone else under the age of 16 is present, will be committing an offence.
- The law applies to both moving and stationary vehicles and will apply to motor vehicles, regardless of whether any window, sunroof, rooftop, door, or other feature of the vehicle is open.

#### PURPOSE

- To protect children from the harmful health effects caused by exposure to second-hand smoke in motor vehicles.

#### SECOND-HAND SMOKE AND CHILDREN

- Second-hand smoke in motor vehicles can be up to 27 times greater than in a smoker's home.
- Children are especially vulnerable to second-hand smoke because they breathe more air relative to body weight. As a result, they absorb more tobacco smoke toxins than adults.
- Children who breathe second-hand smoke are more likely to suffer health problems such as Sudden Infant Death Syndrome, asthma, and cancer and cardiac disease later in life.
- Exposure to second-hand smoke has also been linked to lower cognitive test scores compared with children who were not exposed.

#### ENFORCEMENT

- Ontario police have the authority to enforce the prohibition of smoking a cigarette, or lighting tobacco in a motor vehicle if another person who is less than 16 years old is inside the vehicle.
- Voluntary compliance is our primary objective.
- Persons who fail to comply with the prohibition may be ticketed, or if charged and found guilty, be subject to a fine of \$125.

#### MORE INFORMATION

[www.ontario.ca/smokefree](http://www.ontario.ca/smokefree)

For help quitting smoking, contact Smokers' Helpline at 1-877-513-5333 or [www.smokershelpline.ca](http://www.smokershelpline.ca).

January, 2009

## SECONDHAND SMOKE

### *What is Secondhand Smoke?*

Secondhand smoke comes from two sources:

- Mainstream smoke – the smoke first inhaled by the person who smokes and then exhaled.
- Sidestream smoke – the smoke that goes into the air from the end of a burning cigarette containing twice the nicotine and tar than mainstream smoke and five times the carbon monoxide.

Cigarettes burn for approximately 12 minutes and people who smoke usually only inhale for 30 seconds. As a result, people who smoke and people who do not smoke alike are breathing in both mainstream and sidestream smoke.

### *Health Risks of Secondhand Smoke Exposure*

Secondhand smoke contains toxic chemicals including at least 70 which can cause cancer. A person who does not smoke and is exposed to secondhand smoke has a 25 per cent increased chance of developing lung cancer. Every year in Canada, secondhand smoke causes 800 deaths from lung cancer and heart disease in non-smokers.

Health risks of secondhand smoke exposure include:

- cancer (of the lungs, sinuses, brain, breast, uterus, cervix, thyroid, as well as leukemia and lymphoma)
- heart disease and stroke
- the aggravation of asthma, allergies, and angina
- reduced ability to take in and use oxygen
- increased heart rate and blood pressure
- eye irritation, headache, nasal discomfort, sneezing, coughing, sore throat, nausea, and dizziness

### *Secondhand Smoke Exposure during Pregnancy*

Nicotine speeds up the heartbeat of the fetus and can slow down the growth of a baby's lungs and breathing passages.

Carbon monoxide can reduce the oxygen supply to the fetus by 25 per cent which can lead to lower birth weights.

## ***Secondhand Smoke Exposure and Children's Health***

Infants and children breathe in more secondhand smoke than adults because they have higher respiratory rates.

Children exposed to secondhand smoke are at risk of:

- an increased risk of developing cancer and heart disease as an adult
- impaired lung function
- middle ear infections
- food allergies
- an increased risk of sudden infant death syndrome (SIDS)
- chronic respiratory illness, such as asthma
- a possible negative impact on behaviour, attention and cognition

The health hazards associated with secondhand smoke do not disappear after lit tobacco is put out. The toxins that are released by the burning tobacco will stick to exposed surfaces including hair, skin, fabric, walls, carpet, furniture, and toys. They also attach to dust particles and then circulate in the air and are inhaled. This more recently studied contamination is called third hand smoke (THS). Children who crawl or play on the floor can pick up the toxins on their hands and swallow them when putting their hands in their mouths or chewing on toys that have been exposed to secondhand smoke.

## ***Protect Your Family and Friends from the Dangers of Secondhand Smoke Exposure***

- Make your home and car smoke free.
- Ask caregivers, including family, not to smoke around you and your children.
- Talk with your landlord about making the units in your apartment building smoke-free.  
[www.smokefreehousingon.ca](http://www.smokefreehousingon.ca)

For more information on how to make your home and car smoke free, how to change your tobacco use (reduce and/or quit), or for resources on tobacco, contact *Health Connection* at 705-721-7520 or 1-877-721-7520 or visit [www.simcoemuskokahealth.org](http://www.simcoemuskokahealth.org).