Briefing on Stage 2 amendments to the Public Health (Wales) Bill

January 2016

The British Medical Association (BMA) is an independent professional association and trade union representing doctors and medical students from all branches of medicine all over the UK and supporting them to deliver the highest standards of patient care. We have a membership of over 153,000, which continues to grow every year. BMA Cymru Wales represents over 7,500 members in Wales from every branch of the medical profession.

Tobacco and nicotine products
In our written and oral evidence at Stage 1 we expressed our support for the proposals in the Bill as introduced to ban the use of e-cigarettes in enclosed and substantially enclosed public places. We are concerned that the use of e-cigarettes in such circumstances can reinforce the normalcy of smoking behaviour; that e-cigarettes contain nicotine which, although less harmful than tobacco, is highly addictive; that e-cigarettes have been found to contain other substances which may harm health; that the WHO has warned of the potential adverse effects of exposure to toxicants and particles in e-cigarette vapour; and that studies have shown by-standers can be exposed to vapour emitted from e-cigarettes. We also support taking a precautionary approach in the light of a lack of clear evidence at present regarding the long-term effects of e-cigarette use.

Whilst our preference would be for the retention of the proposals initially put forward in the Bill for restricting the use of e-cigarettes in enclosed and substantially enclosed public places, we acknowledge the Minister’s decision to amend this section, and fully support amendments 143, 149, 150, 151, 152, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 167, 168, 169, 170, 171, 172, 173 and 221 to enable the use of e-cigarettes to be banned in a defined list of premises (as outlined in amendment 221). We would therefore encourage members to support these amendments to ensure that the proposals for restricting the use of e-cigarettes can be taken forward.

Consequently, we would also oppose amendments 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15 and 16, tabled by Kirsty Williams AM with support from Darren Millar AM, as these seek to completely remove the proposed ban on e-cigarettes in enclosed and substantially enclosed public places.

As part of the oral evidence we provided, we expressed concern that e-cigarettes may be refilled with other substances, such as legal highs. We would therefore offer our support to amendment 145 tabled by the Minister which will ensure that a nicotine inhaling device is counted as such for the purposes of the Bill whether filled with nicotine e-liquid or not. We would also support amendment 147, also tabled by the Minister, which broadens the definition used for nicotine inhaling devices.

Special Procedures
We previously suggested that the Bill should be amended to bring additional procedures under the scope of the proposed licensing system. We are therefore happy to express our support for amendments 118, 119, 120, 121, 122, 123, 124, 125, 126, 127 and 132 proposed by Darren Millar AM, as these would expand the list of special procedures to be licensed.
We would also support amendments 180, 182, 184 and 185, tabled by the Minister, which seek to ensure tighter criteria around infection control, standards of hygiene and first aid as part of the proposed licensing system for special procedures.

**Pharmaceutical Services**

Whilst expressing support for the general intention of the proposals relating to pharmaceutical needs assessments, we previously called for safeguards to remove the risk of any threat to the viability of dispensing GP practices. We are grateful for the assurances the Minister has provided that he will involve us in designing the detail of how pharmaceutical needs assessments will be conducted and that the contribution of dispensing doctors will be explicitly recognised as part of any pharmaceutical needs assessments. We would also express our support for amendment 140 proposed by Darren Millar AM. This would place on the face of the Bill a requirement that regulations must specify that local health boards will need to consider the impact pharmaceutical needs assessments may have on the services provided by those with general medical services contracts when they are preparing, publishing, reviewing or revising them.