Meeting of the WHO European Region national tobacco control counterparts Ankara, Turkey, 18–20 Sept 2012

Making smoke-free laws work: experience from Hungary

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activities of Focal Point for Tobacco Control (FPTC) *before* adoption of Act for the Protection of Non-smokers

Act for the Protection of Non-smokers PRO

- 2008. Impact assessment made by FPTC: "Monitoring of the possible effects and provisional cost-benefit estimation of the aggravation of the Act for the Protection of Non-smokers by taking account the recommended measures based on international experiences."
- The Focal Point for Tobacco Control provided an expert report about the study at the request of the Ministry of Health.
- 2009. Health Impact Assessment. Modification of the Act XLII of 1999 on the Protection of Non-Smokers and Certain Regulations on the Consumption and Distribution of Tobacco Products. Health Impact Assessment Working Group, Faculty of Public Health, University of Debrecen.
- September 2010. Health Committee of the Parliament placed on the agenda the discussion on smoking.

Act for the Protection of Non-smokers CONTRA

2008. The Hospitality Industry ordered a study about the social-economic effects of the smoking bans in hospitality venues from the Institute for Political Science, Hungarian Academy of Sciences.

activities of FPTC *before* adoption of Act for the Protection of Non-smokers

Act for the Protection of Non-smokers **PRO**

- November 2010. FPTC published a background document including international and Hungarian data, conclusions and related objectives, action plans and indicators of the following topics: situation, primary prevention, support of smoking cessation, protection of non-smokers, regulation of tobacco products, products imitating tobacco products (E-cigarette), policy, social and institutional background of tobacco control and the necessary conditions of the implementation.
- 25 February: 15 FIDESZ (goverment party) Members of the Parliament submitted a separate motion for the Parliament about the aggravation of the Act for the Protection of Nonsmokers.
- This indicated serious media reaction so the Ministry of National Resources, Focal Point for Tobacco Control, FIDESZ representatives made statements for the TV, radio and printed press: "In those countries where similar strict ban was introduces the trade of hospitality industry didn't decrease."
- 27 February: FPTC contacted the health policy related professional organizations including the Hungarian Alliance for Tobacco Control (HATC) umbrella organization. The FPTC required their support and participation in the communication concerning the modification of the Act.

Act for the Protection of Non-smokers CONTRA

Representatives of the hospitality and tobacco industry reported in the media about serious reduction of benefit from the VAT and excise duty, and prospective decrease of trade in the hospitality sector.

activities of FPTC *before* adoption of Act for the Protection of Non-smokers

Act for the Protection of Non-smokers PRO

- The Focal Point For Tobacco Control asked data from the international experts of the WHO, EU, European Network for Smoking Prevention (ENSP) and the National Tax and Customs Administration.
- The translation and the up-to-date document are available on the homepage of the FPTC.
- 3 March: On the homepage of the National Public Health and Medical Officer's Service a report was published: "Tobacco control is a public health interest".
- The FPTC asked for the support of the Smoke Free Partnership, international members of the ENSP in letter to send an e-mail to the Members of the Parliament, Health Commission and decision makers in favour of the aggravation of the Act for the Protection of Non-smokers.
- With coordination of WHO Country Office WHO expertise was provided throughout the entire debate, and brought evidence, press statements and RD's letter to Prime Minister and each MP proved to be essential support.
- Zsofia Pusztai, Head of Country Office, World Health Organization Country Office for Hungary welcomed the legislative proposal regarding the Act modification in a statement.
- 5 March: Letter from Zsuzsanna Jakab Regional Director for Europe, WHO) to Viktor Orbán Prime Minister and János Lázár Fraction Leader to support the introduction of the Act modification.
- 8 March: The Health Committee of the Hungarian Parliament discussed the proposals. The FPCT provided professional background with an impact assessment.

Act for the Protection of Non-smokers CONTRA

 4 March: Study of the National Tax and Customs Administration went public:

introduction of the new Act in this year can cause 50 billion Forint deficit in the budget. (this was a very serious statement, because total revenue from VAT + Excise Tax was 352 billion Ft last year so they said 1/7 of total revenue will be lost)

Activities of FPTC *before* adoption of Act for the Protection of Non-smokers

Act for the Protection of Non-smokers PRO

- 16 March. The discussion of proposals for Act modification was finished in the Parliament. The final voting was delayed owing to the lack of the necessary consensus of parties to realize the final voting and the discussion of modification in proposals on the same day. However standard proposal was developed.
- April. The FPTC published its opinion about the study of the National Tax and Customs Administration on the Index Internet portal referring on the selfish and subjective usage of data, information provision for the population from one viewpoint and deception: e.g. this concludes for the expected Hungarian effects of the Act modification from the first month of the implementation of total smoking ban in Spain. Furthermore it reports additional effects such as decreased alcohol consumption. These irrelevant data was also counted in the deficit of hospitality industry. Reduction in the trade only happened in Ireland, because the excise duty of the alcohol drink was increased. Owing to this the alcohol consumption was transferred to homes.
- April: Contact was made with the Public Health Department, Office of the Chief Medical Officer concerning the monitoring of the compliance with the Act (protocol report) and development of IT system.
- The Focal Point For Tobacco Control asked data from the international experts of the WHO, EU, European Network for Smoking Prevention (ENSP) and the National Tax and Customs Administration.

Act for the Protection of Non-smokers CONTRA

 Representatives of hospitality and tobacco industry reported scaring decrease of benefit from VAT, excise duty and future reduction of trade in hospitality venues.

activities of FPTC *before* adoption of Act for the Protection of Non-smokers

Act for the Protection of Non-smokers PRO

- On the day of press conference the FPTC made a summary for the media with data of European countries, which have implemented similar smoking ban. The document emphasize the inefficiency of technological solutions in protection from the harmful effects of tobacco smoke, because it has not minimal safe level and decrease of trade in hospitality is not expected in Hungary. The summary was published on the public homepage of the National Public Health and Medical Officer's Service by communication experts and was sent to representatives of media and online news portals.
- 20th April. After the consultation with the FPTC the WHO Country Office for Hungary provided a press release regarding the press conference of hospitality industry to compensate the information was said.

Act for the Protection of Non-smokers CONTRA

- 19 April. In the last days before the final voting the tobacco and hospitality industry organized a conference with a press conference, where the Croatian Chamber of Commerce and Industry and the Chamber of Café of Izmir from Turkey were invited to present the data on deficit of their national hospitality industry.
- Tamas Haber, honorary chairman of the Trade Association of Hungarian Caterers introduced the research of Századvég, which reported future drastic decrease in domestic hospitality trade.
- Smoking cabine (smoke & talk) was presented as a possible solution for smokers to smoke in enclosed areas for examle in restaurants.

activities of FPTC *after* adoption of Act for the Protection of Non-smokers

- On 26th April (2011) the Hungarian Parliament modified the Act on the Protection of Non-smokers with an extremely high majority (84% yes votes).
- End of April:
- Preparing a short summary (in Hungarian and English) about the adoption of Act for the Protection of Non-smokers with its contents placed on the FPTC homepage
- and sent to the GlobaLink (internet based network of experts in tobacco control)
- EU Focal Points (focal points for tobacco control)
- WHO counterparts (national contact persons for tobacco control)
- members of ENSP
- In the Ministry of National Resources the "Steering Committee" has been established. The FPTC was nominated for the coordination of measures regarding Act modification. The compilation of project plan has begun in cooperation with the involved governmental institutes, civil associations and authorities and WHO as member.

the main regulations of the amendment of the Act on the protection of nonsmokers

SMOKING IS **PROHIBITED**:

- in rooms of public institutions that are open to the public
- on means of public transport, in means of public transport in local public transport services, on trains in local railway services, on buses/coaches in domestic intercity public transport services based on service schedules as well as on passenger trains in scheduled railway services
- in workplaces
- in the following areas qualifying as public area: underpasses open to passenger traffic and in other connection spaces of public passageways with closed air spaces, in playgrounds in public places and within 5 meters of the external borderlines of playgrounds, in the areas of railway operation facilities in place for the provision of public railway services and in the accessories of the railway track that are open to the public, in the stops and stations constructed or designated to passengers boarding or alighting from the means of public transport, in waiting areas or rooms, and within a distance of 5 meters of the external borderlines of outdoor stops or waiting areas

the main regulations of the amendment of the Act on the protection of nonsmokers

SMOKING IS **PROHIBITED**:

- no smoking area may be designated even in open air spaces in public education institutions, in child welfare and child protection institutions, in the premises of health service providers
- the smoking ban also applies in case of apartment houses in enclosed rooms of common use unless at least four fifth of the owners decide otherwise

SMOKING IS PERMITTED:

- Smoking area may be designated in a closed air space for detainees held in penitentiary institutions and prisons (including those with mental disorders), for psychiatric patients in psychiatric institutions, in workplaces where the corrected effective temperature is over 24C° and -with certain conditions- in workplaces and establishments with increased risk or risk of fire and explosion and risk of fire. (example: oil refinery)
- **Cigar rooms of hotels** which are already operating at the time of the coming into effect of the Act could also apply for derogation.

activities accompanying the modification of the Act

- media campaign against passive smoking, motivating for cessation and informing about the Act
- establishing a telephone service informs about methods and services for cessation and give opportunity for the caller to notify non– compliances with the law
- designing and distributing indications of smoking prohibition and designated smoking areas
- introduction of 42 pictorial health warnings
- research, baseline surveys 18+, 18-,
- study on the social and economic burden of smoking in 2010
- survey on indoor air quality of hospitality venues
- control of compliance
- developing template for record used for control of compliance, and software for data processing
- Social Renewal Operational Program (TÁMOP) public health programs
 - support of quitting

 healthy lifestyle programs to educate for health and change attitudes in local settings of health promotion media campaign against passive smoking, motivating for cessation and informing about the Act

- Spots (30–40 sec) short films (3–5 min)
- Billboards
- Websites:
 - "Ne szívj tovább!" <u>http://neszivj.postr.hu/</u>
 - "Fellélegezhetünk!" <u>http://fellelegezhetunk.hu/web/</u> (Finally we can breathe freely!)
 - the website of the National Public Health and Medical Officer Service <u>https://www.antsz.hu/</u>
 - the website of the Focal Point for Tobacco Control <u>http://www.fokuszpont.dohanyzasvisszaszoritasa.hu/</u>,
 - website on cessation aid <u>http://www.leteszemacigit.hu/</u>.
- TV broadcasts
- Newspaper articles

spots





http://www.leteszemacigit.hu/sites/default/files/ne_szivj_tovabb_szerelmespar.mp4





spots

"From January only trains are allowed to smoke at railway stations."

"Moreover, nobody is allowed to puff in the courtyard of hospitals."

"Whoops, Oszi!"

"There are no designated smoking areas in the offices anymore!"

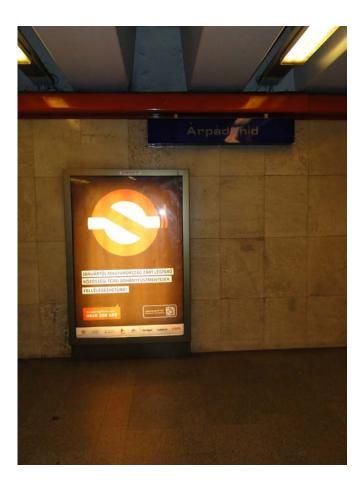
"If you light up in defiance of the ban you may lose even 50.000 HUF." (about 170 EUR)

"For more information please visit the following website: <u>www.antsz.hu</u> "



http://www.leteszemacigit.hu/sites/default/files/tch3_a1_email.mov

billboards





websites



http://fellelegezhetunk.hu/

"Fellélegezhetünk" means" we can breathe freely again" in Hungarian. On one side this phrase refers to the possibility to breath fresh air again but on the other side it also means we can breathe a sigh of relief.



http://neszivj.postr.hu/ http://neszivj.postr.hu

The first meaning of "Ne szívj" is "do not smoke (a cigarette)"

but it is a frequently used slang word meaning "don't suck it up" (used for saying that someone has to accept a difficult or unpleasant situation even if they do not want to).

TV broadcasts



Dr.Enikő Szabó





Dr.Zoltán Vokó, Dr.Zsófia Pusztai, Tibor Demjén



Dr.János Mucsi



Dr. Miklós Szócska





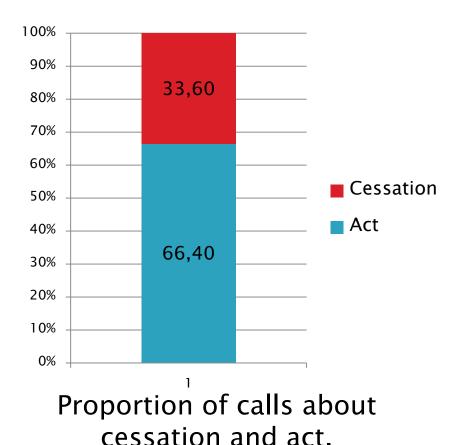


online and printed newspaper articles



Fotó: MTI/AP/Lionel Cironneau

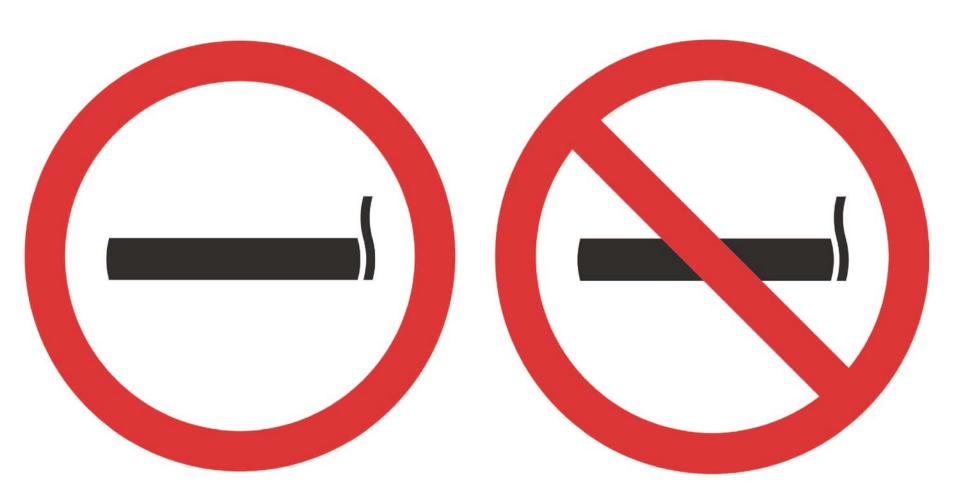
establishing a telephone service informs about methods and services for cessation and give opportunity for the caller to notify non-compliances with the law



- the notifications reported to the telephone service are forwarded to the competent local authority
- the telephone service
 - charging the local tariff
 - the number is 06 40 200 493.

designing and distributing indications of smoking prohibition and designated smoking areas

- According to the amendment of the Act on the protection of nonsmokers, areas under smoking restriction and the areas, rooms and public areas designated for smoking must be prominently marked by an inscription or by some other suitable unambiguous indication.
- The design recommended for the indication is available on the website of the NIHD.
- Phone number and website address are also indicated.
- The following indications are intended to be made obligatory.



DOHÁNYZÁSRA KIJELÖLT HELY

SMOKING AREA ZONE FUMEUR RAUCHERZONE МЕСТО ДЛЯ КУРЕНИЯ

TILOS A DOHÁNYZÁS

NO SMOKING **INTERDICTION DE FUMER RAUCHEN VERBOTEN** КУРЕНИЕ ЗАПРЕЩЕНО

A dohányzásról leszokáshoz segítséget kaphat, illetve törvényszegés észlelése esetén észrevételt tehet A dohányzásról leszokáshoz segítséget kaphat, illetve törvényszegés észlelése esetén észrevételt tehet az alábbi telefonszámon: 06 40 200 493 www.leteszemacigit.hu

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introduction of 42 pictorial health warnings

- The introduction of the pictorial warnings on tobacco packages in January 2013 will also be an important progress. The measure is supported by the four fifth of the Hungarian population.
- the measure aims at the prevention of taking up smoking by indicating its harmful effects
- and emphasizes the responsibility of the smoker towards other people in connection with passive smoking
- 42 pictorials will be rotated, rotation will be registered, rules on rotation: difficulties in negotiations









Védje a gyermekeket: ne tegye ki őket a dohányfüst belélegzése veszélyének



A dohányzás lassíthatja a vér áramlását, és impotenciát okozhat





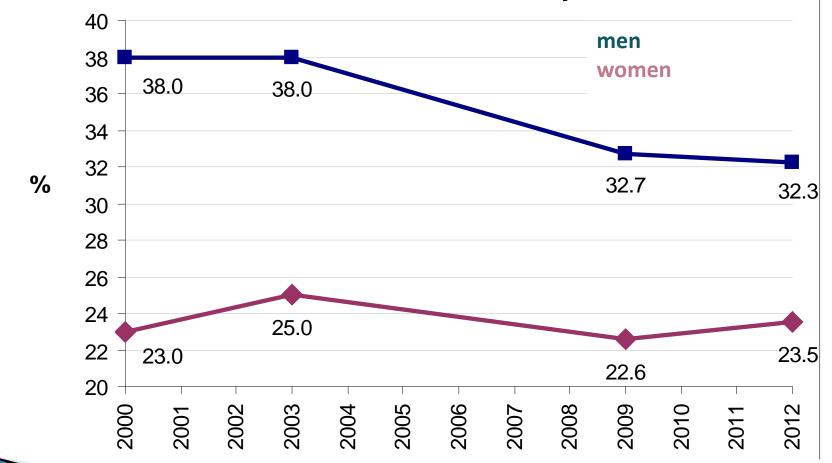
szívrohamot és agyvérzést okoz

research, baseline survey 18+

- The implementation of population survey (18 years old and above) by questionnaire was in the beginning of 2012. The survey gathered data on the smoking habits of the adult population, on the prevalence of active and passive smoking, on cessation, on attitudes about the amendment of the Act on the protection of nonsmokers and on compliance with it, on opinions about the plain packaging of tobacco products.
- Since 2000 the number of regular smokers has decreased, there is no relevant change for women.
- The number of cigarettes smoked decreased by 8% since 2009. The proportion of cigarettes and roll your own cigarettes has significantly changed: the use of roll your own has doubled reaching the one third of cigarettes consumed.
- Two third (66%) of the smokers smoke in their homes. 12% of the nonsmokers is exposed to cigarette smoke in their homes.

the prevalence of daily smokers between 2000 and 2012 by gender (%)

18 years old and above



research, baseline survey 18-

- according to the data of the 2012 Global Youth Tobacco Survey (13-15 years old)
 - 20% were occasional smoker
 - 7% daily smoker
 - 5% ex–smoker
 - 68% have never tried smoking
- among daily smokers the most popular place for smoking was their own homes (84%) and social events (77%)
- every second (52%) daily smoker smokes in other people's homes or in a restaurant (56%), 48% in pubs

research, baseline survey 18-

- 60% of daily smokers buy cigarettes in stores, shops or kiosks
- 42% of daily and occasional smokers buy cigarettes in stores, shops or kiosks.
- 58% of daily and occasional smokers (42% of daily smokers) were not rejected because of their age when buying their cigarettes (2008 52%, 2003 71%).
- 14% of the 13-15 age group is exposed on a daily basis to tobacco smoke in their homes, 62% is occasionally exposed.
- Only 23% live in a smoke free home.
- Only the third of young smokers is willing to quit.

NEW study on the social and economic burden of smoking in 2010

- Based on the data of 2010 in Hungary 20.470 people died in consequence of smoking which is one sixth (16%) of total mortality. Among men it is the one quarter (23%), among women it is one tenth (9%) of total mortality.
- On average, male smokers shorten their life with at least 16 years and female with at least 19 years.
- Two-thirds of years of life loss fell into the economically most active, 35-65 age period.
- > State incomes from smoking in 2010 were over 360 billion HUF.

- Direct and indirect expenses of smoking in Hungary were more than 441 billion HUF in 2010.
- Balance of individual and state expenses and incomes of smoking was 80 billion HUF loss in 2010.

the survey on indoor air quality of hospitality venues

- The collaborators of the Air Hygiene Unit of the National Environmental Health Institution, the Focal Point for Tobacco Control in the National Institute for Health Development, the Public Health Services of the VI. VII., VIII, IX. dictricts of Budapest elaborated and conducted a survey on the interior air quality of hospitality venues.
- The fractions under 2,5 µm of the floating dust (PM_{2,5}) were selected as an indicator material, because this dust fraction is very sensitive to indoor smoking. The diameter of particles of cigarette smoke is between the fine and ultrafine particle domain (0,02 2 µm).

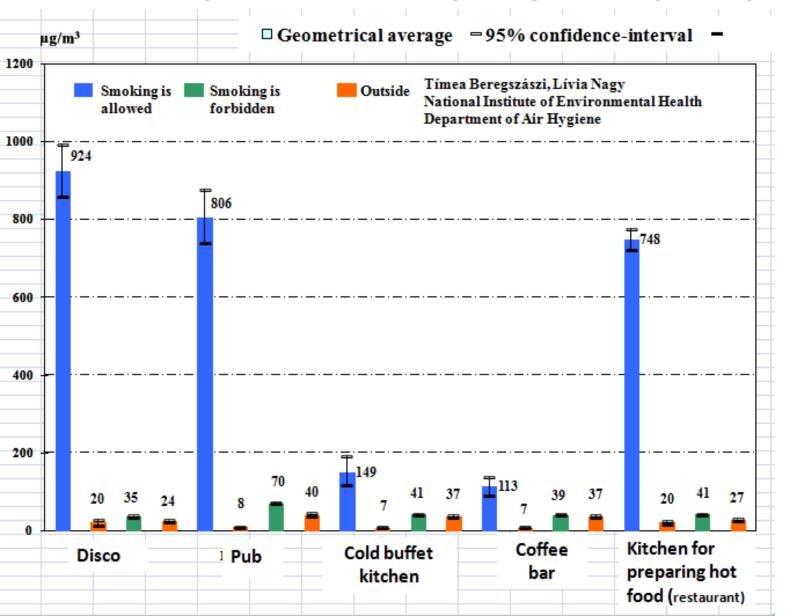
SidePak AM510



the survey on indoor air quality of hospitality venues

- The results of the survey clearly proved that there is a relevant improvement in the indoor air quality. The mass concentration of the particles under 2,5µm was significantly higher (p<0,001) in all of the units that were controlled if there were smoking in the given unit. There was a decrease of around 90% in the average PM_{2,5} concentration in all of the enclosed places that were controlled after the amendment of the law.
- The measurings in front of hospitality venues (outdoor), the results on PM_{2,5} characterising outdoor areas proved that the main source of high aerosol concentration under 2.5 µm was cigarette smoke in the indoor places controlled.

the survey on indoor air quality of hospitality venues



- The control of the compliance with the Act on the protection of nonsmokers is performed by the policy administration services of public health of the government offices and the subregional public health institute services.
- The records used for the control with10 different annexes.
- These annexes are specific for these locations because of the different regulations:
 - 1. penal institution
 - 2. health care provider
 - 3. public institution
 - 4. means of public transport
 - 5. public education institutions, child care, child welfare institutions
 - 6. public area
 - 7. workplaces
 - 8. psychiatric institution
 - 9. hotel
 - 10. hospitality venues

The adequate annexes must be used during the control process. Here is an example for checking hospitality venues for example a restaurant.

10. Melléklet

A nemdohányzók védelméről szóló törvény betartásának hatósági ellenőrzéséről készített

			ellenőrzési terv szerinti azonosítójú jegyzőkönyvhöz
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Szórakoztató, vendéglátó-ipari szolgáltatást nyújtó közforgalmú intézmény

máshova nem sorolt egyéb szórakoztatás, szabadidős tevékenység (9329) 🗖, vidámparki, szórakoztatóparki

tevékenység (9321) □, éttermi, mozgó vendéglátás (TEÁOR 5610) □, italszolgáltatás (TEÁOR 5630), rendezvényi étkeztetés (TEÁOR 5621) □, egyéb vendéglátás (TEÁOR 5629) □

A jegyzőkönyvben ezen mellékletben feltett kérdésekre vonatkozó további információ rögzítésre került-e?*

Ellenőrzési kérdések			*	
		Nem	igen	nem
1. A nemdohányzók védelmével kapcsolatosan rendelkezik-e belső szabályzattal, utasítással?				
 Dohányzóhely kijelölése nélkül is lehet az ellenőrzött helyen, rendezvényen dohányozni? (pl. dohánytermék-bemutató) 2. § (3) bek. a) pont 				
3. A szórakoztató, vendéglátó-ipari szolgáltatást nyújtó közforgalmú intézmény üzemeltetője az intézményt <i>nemdohányzó intézménnyé nyilvánította</i> ? 4. § (6) bek. <i>Nem válasz esetén ugorjon a 11. kérdéshez.</i>	г л ц Ј			
4. A nemdohányzó intézménnyé minősítés tényét jól látható és egyértelmű felirat vagy jelzés alkalmazásával az intézmény- nek a közforgalom számára nyitva álló bejáratánál, valamint a <i>vendégforgalom</i> által igénybe vett valamennyi helyiségében feltüntették? 4. § (6) bek.				
5. Nemdohányzó intézmény esetén van-e a dohányzás számára kijelölt <u>nem</u> zárt légterű hely? 4. § (6) bek.				
6. A munkáltató által <i>nemdohányzó munkahellyé nyilvánított</i> és kizárólagos rendelkezése alatt álló létesítményekben, illetve helyiségekben a <i>munkavállalók</i> számára <i>zárt légterű</i> dohányzóhely van-e kijelölve? 4. § (1) bek.				
7. Nemdohányzó munkahely esetén van-e a munkavállalók részére dohányzásra kijelölt nem zárt légterű hely? 4/A. § (1) bek.				
8. A nemdohányzó munkahellyé nyilvánítás tényét jól látható és egyértelmű felirat vagy jelzés alkalmazásával jelölték-e úgy, hogy a személyforgalom számára nyitva álló valamennyi bejáratnál, valamint nem kizárólag a munkavállalók által igénybe vett valamennyi helyiségben vagy az ezekhez vezető közlekedőfolyosókon – valamennyi igénybevevő által jól látható módon – fel van tüntetve? 4/A. § (1) bek.				

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- A new software developed for the summarizing of the data was needed which also fits to the document filing system.
- With the aid of the software, the accurate and detailed analysis of the data registered with the new records is enabled (f.ex. what are the conditions of the non-compliance, what are the most frequent non-compliances). The analysis prepared by the software helps in the monitoring of the effects of the Act.
- The access to the experiences in the form of electronic data assist in the elaboration of methods for a more effective execution of the controls.

this is the electronic version of annex for hospitality venues 10. MELLÉKLET

Szórakoztató, vendéglátó-ipari szolgáltatást nyújtó közforgalmú intézmény

Máshova nem sorolt egyéb szórakoztatás, szabadidős tevékenység (9329) Vidámparki, szórakoztatóparki tevékenység (9321) Éttermi, mozgó vendéglátás (TEÁOR 5610) Italszolgáltatás (TEÁOR 5630), Rendezvényi étkeztetés (TEÁOR 5621) Egyéb vendéglátás (TEÁOR 5629)

Ellenőrzési kérdések	Igen	Nem	A jegyzőkönyvben ezen mellékletben feltett további kérdésekre vonatkozó további információ rögzítésre került e?	
			Igen	Nem
1. A nemdohányzók védelmével kapcsolatosan rendelkezik-e belső szabályzattal, utasítással?	•			2
 Dohányzóhely kijelölése nélkül is lehet az ellenőrzött helyen, rendezvényen dohányozni? (pl. dohánytermék bemutató) 2. § (3) a) 	Θ	ø	Θ	ø
3. A szórakoztató, vendéglátó-ipari szolgáltatást nyújtó közforgalmú intézmény üzemeltetője az intézményt nemdohányzó intézménnyé nyilvánította? 4. § (6) ("Nem" válasz esetén ugorjon a 11. kérdéshez.)		Ø		ď
4. A nemdohányzó intézménnyé minősítés tényét jól látható és egyértelmű felirat vagy jelzés alkalmazásával az intézménynek a közforgalom számára nyitvaálló bejáratánál, valamint a vendégforgalom által igénybe vett valamennyi helyiségében feltüntették? 4. § (6)	Ø	Ø	Ø	
5. Nemdohányzó intézmény esetén van-e a dohányzás számára kijelölt nem zárt légterű hely? 4. § (6)	1	Ø	ø	
6. A munkáltató által nemdohányzó munkahellyé nyilvánított és kizárólagos rendelkezése alatt álló létesítményekben, illetve helyiségekben a munkavállalók számára zárt légterű dohányzóhely van-e kijelölve? 4. § (1)	ď	Í	Ø	
7. Nemdohányzó munkahely esetén van-e a munkavállalók részére dohányzásra kijelölt nem zárt légterű hely? 4/A. § (1)	Ø	1	1	
8. A nemdohányzó munkahellyé nyilvánítás tényét jól látható és egyértelmű felirat vagy jelzés alkalmazásával jelölték-e úgy, hogy a személyforgalom számára nyitva álló valamennyi bejáratnál, valamint nem kizárólag a munkavállalók által igénybe vett valamennyi helyiségben vagy az ezekhez vezető közlekedőfolyosókon – valamennyi igénybevevő által jól látható módon – fel van tüntetve? 4/A. § (1)	Ø	Ø	Ø	
9. A nemdohányzó munkahellyé nyilvánításról való döntés kollektív szerződésben van meghatározva? 4/A. § (2) a) ("Igen" válasz esetén ugorjon a 11. kérdéshez.)		Ń	Ø	
10. A nemdohányzó munkahellyé nyilvánításról való döntés a munkavállalók kezdeményezésére vagy egyetértésükkel lett meghatározva? 4/A. § (2) b)	Ø	đ	Ø	
11. Zárt légtérben van a dohányzóhely kijelölve? 2. § (2) (Nemdohányzó munkahely esetén ugorjon a 18. kérdéshez.)		ø		2
12. Van-e a dohányzás számára kijelölt nem zárt légterű hely? 4. § (1)		ď	1	

printscreen of the software



Jegyzőkönyv kitöltő a Nemdohányzók Védelméről szóló Torvény betartásának ellenőrzéseiről



Jogi személy Természetes személy



verzió: 1.01 belépve: Demjén Tibor

Excel export

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Azonosító (Iktatószám)	Állapot Bírság	Befizetve	Hat. idő	Ellenőrzött helysz. Üzemeltető+Rend.jogos.személy/Term. személy név	Létrehozva Ügyintéző	
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2012/09/031/01/01/044 (NINCS IKTATVA!)	ŀ			Saner 2000 Bt Asztalosműhely Saner 2000 Bt Gulyás Lajos	2012-09-04 Csátiné Kemecsei Andrea (kemecsei.andrea)	Magndz
2012/09/030/01/02/053 (NINCS IKTATVA!)				GÉL ABC Görbeháza-Bagota, Orgona u. 8. Képes Istvánné Képes Istvánné	2012-09-04 Andirkó Ildikó (bujdoso.gaborne)	Magndz.
2012/07/051/01/04/005 (NINCS IKTATVA!)				8060 Mór, Szent István tér 6 WA-Mór Kft Szatzckerné Ruff Nikolett	2012-09-04 Nemesné Urbán Katalin (nemesne katalin)	Mognéz.
2012/09/031/01/01/043 (NINCS IKTATVA!)				Gulyás Panzió Saner 2000 Bt. Gulyás Lajos	2012-09-04 Csátiné Kemecsei Andrea (kemecsei.andrea)	Mognéz
2012/07/051/01/04/004				Mór, Dózsa Gy u.1 Szamira Bt	2012-09-04 Nemesné Urbán Katalin	Megnéz

- The results in compliance with the Act are available from the 1st January 2012 when the Act was entered into force with three months grace period.
- 40 917 units were checked from which 1 117 units were objected, the number of authority measures taken were 687.

data from National Public Health and Medical Officer Service and Subregional Public Health Institute Service

All p offic	1/08/2012							
Con	Controls performed in 2012 for the protection of nonsmokers							
	Type of institution according to the annex o	The number of						
	The type of unit controlled	The number of units controlled	The number of units objected	authority measures taken				
1	penal institution	24	17					
2	health care provider	6 492	89	40				
3	public institution	7 772	287	167				
4	means of public transport	159	6	7				
5	public education institutions, child care, child welfare institutions	3 806	84	32				
6	public area	620	45	47				
7	workplaces	14 440	260	146				
8	psychiatric institution	30	3	2				
9	hotel	863	17	11				
10	hospitality venues	6 721	323	218				
Total		40 917	1 117	687				

social Renewal Operational Program (TÁMOP) public health programs

- establishment of a National Methodological Center on Quitting (source: 840.732 EUR) (Social Renewal Operational Programme /TÁMOP/-6.1.2/11/04/A)
 - Content: establishment of a supporting methodological center for quitting, provision of a personal advisory line for the public, trainings for pulmonologists, education of GP's regarding minimal intervention against smoking
- development of points for quitting on the basis of Pulmonary Care Institutes (source: 1.412.429 EUR)(TÁMOP-6.1.2/11/04/B)
 - Content: free of charge group counseling for quitting available in Pulmonary Care Institutes

healthy lifestyle programs to educate for health and change attitudes in local settings of health promotion (source: 16.814.635 EUR, 3363 EUR-33.630 EUR / application) (TÁMOP-6.1.2/11/1)

- Healthy lifestyle programs for health education and attitude changing in subregions (source about: 23.540.490 EUR, 84.073 EUR – 420.366 EUR / application) (TÁMOP– 6.1.2/11/3)
 - Content: health promotion activity, organized by health promoting offices integrated into outpatient care and based on risk assessment, in cooperation with primary care and other partners
 - settings, target groups: settlements under 10 000 people, day-nursery, kindergarten, workplaces (health care institutes as well), especially related people because of their health state and risk status, available by civil services, health care institutes/providers
 - supported activity: "Implementation of smoking prevention and quitting programs"

comprehensive health promotion in schools (source: total- 16.814.635 EUR) (TÁMOP-6.1.2)

Settings: primary schools

- Smoking prevention in supported activities
 - short intervention concerning smoking in primary care (mandatory)
 - support of quitting in sub-regions by the maintenance of cooperation of pulmonary care institutes in primary care and sub-regions. (mandatory)
 - implementation of local community actions in the field of smoking prevention to aim and support the observance of the <u>Act XLII of 1999 on</u> <u>the Protection of Non-Smokers and Certain Regulations on the</u> <u>Consumption and Distribution of Tobacco Products</u>" (facultative)
 - quitting programs for employees in primary and special care (facultative)
 - health promotion programs in the field of smoking prevention (facultative)

tobacco prevention programs for children

- Tobacco prevention program in kindergartens http://www.dohanyzasvisszaszoritasa.hu/eng/ovodai_dohanyzas_megelozesi_program.html
- "Smoking is sticky" ("Ciki a cigi") school-based program http://www.dohanyzasvisszaszoritasa.hu/eng/iskolai_megelozesi_program_3-5.html
 - Game-software for 5-10 years old children
 - "Smoking is sticky" homepage <u>http://www.dohanyzasvisszaszoritasa.hu/eng/cikiacigi.html</u> (target population : 5-8, 9-14, 15-20 age groups)
 - Portable Touch Screen Computer (PTSC)
 http://www.dohanyzasvisszaszoritasa.hu/eng/iskolai_megelozesi_program.html
 - School-based smoking prevention education package for grades 3-5 and 6-10.
 - syllabus
 - interactive presentation
 - text-assistance-book
 - lifelike sized, knockdown demonstration puppet presenting diseases caused by smoking



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