



Northern Ireland
Assembly

COMMITTEE FOR
HEALTH, SOCIAL SERVICES AND
PUBLIC SAFETY

OFFICIAL REPORT
(Hansard)

Sunbeds Bill: Royal College of Nursing

10 June 2010

NORTHERN IRELAND ASSEMBLY

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HEALTH, SOCIAL SERVICES
AND PUBLIC SAFETY**

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Members present for all or part of the proceedings:

Mr Jim Wells (Chairperson)
Mrs Michelle O'Neill (Deputy Chairperson)
Mrs Mary Bradley
Mr Alex Easton
Mr Tommy Gallagher
Mr Sam Gardiner
Mr John McCallister
Mrs Claire McGill

Witnesses:

Dr John Knape) Royal College of Nursing
Ms Janice Smyth)

The Chairperson (Mr Wells):

I welcome Janice Smyth and John Knape of the Royal College of Nursing (RCN), both of whom have been before the Committee in various guises. You know the routine by now: you have 10 minutes in which to make a presentation, and I will then throw open the session to members' questions. By listening to the earlier witnesses, you have an indication of the type of questions that will come your way.

Ms Janice Smyth (Royal College of Nursing):

The Royal College of Nursing thanks the Committee for Health, Social Services and Public Safety for the opportunity to comment on the Sunbeds Bill, and we hope that members will find the brief presentation helpful.

As the Committee will be aware, the RCN campaigned publicly for the introduction of legislation to regulate the sunbed industry in Northern Ireland. We are pleased that the Department of Health, Social Services and Public Safety (DHSSPS) listened to the views of the Royal College of Nursing, together with those of the many organisations and individuals who shared the RCN's concerns, and acted promptly to introduce the legislation in the Assembly. We recognise the fact that the opportunity to introduce the Bill during the current mandate has, in turn, necessitated a tight legislative timetable. However, it is important that the legislation be as robust as possible to maximise its capacity to protect the public. I will return to that theme.

The health issues surrounding the use of sunbeds, particularly for young people, are well known to the Committee by now, and we do not intend to address those today in the limited time available. I will instead focus, as requested, on the draft legislation as laid before the Assembly.

The RCN supports the stated primary policy objectives of the Department in drafting the legislation. Those objectives are to prevent the use of sunbeds by any person under 18 years of age and to ensure that those aged over 18 who intend to use sunbeds are better informed about the associated health risks and are better protected against the harm caused by ultraviolet radiation. In general, we believe that the Bill will make a significant contribution to achieving those objectives.

However, the RCN has some remaining concerns, which I will highlight sequentially. If no commentary is provided on a specific clause in our briefing paper, it may be reasonable to infer that the RCN is content with the wording and intention of that clause. Clauses 1 and 2 seek to prohibit the use of sunbeds by, and the sale or hire of sunbeds to, those who are under 18 years of age. The RCN endorses the Bill in that respect but shares the concerns previously expressed by members of the Committee about unregulated access to sunbeds by young people in private homes.

The RCN fully accepts that legislation must be enforceable and that regulating what happens

in people's homes is rarely straightforward, invariably challenging and sometimes unwise. However, we do not see the point in seeking to protect young people in the ways that the legislation envisages while leaving open such an obvious loophole that would allow an adult to hire a sunbed and then provide unsupervised, unregulated and unlimited access to it for young people. The fact that a legislative measure may be difficult to enforce is not in itself a justification for inaction if it is the right thing to do. We urge the Committee and the Department to reflect on the issue once more.

Although the RCN has no specific comments on clause 3, which deals with the remote sale or hire of sunbeds, we feel constrained once again to point out the anomaly of legislation that seeks to regulate the use of sunbeds for health reasons yet continues to permit the unregulated use of sunbeds in the home. For that reason, there is a case to be made for the introduction of a comprehensive ban on the private sale or hire of sunbeds. We realise that that would be highly contentious, but we also believe that it would be a significant step towards enhancing public health through the elimination of unregulated access. It is regrettable that the Department has already indicated that it has no intention of moving in that direction.

The RCN welcomes the fact that the Department has acted to prevent the development in Northern Ireland of the type of self-service, coin-operated sunbeds that have proved to be so damaging, particularly to young people in areas of social deprivation in other parts of the United Kingdom.

The provision of appropriate and accessible health information and advice is an essential component of all public health initiatives. The RCN fully supports the proposals that are outlined in clauses 5, 6 and 7. We believe that the content of the proposed written information and notices should be standardised across Northern Ireland to ensure that robust and consistent messages are provided to the public. Accordingly, we would like the stem of clause 5(11) strengthened from "The Department may prescribe" to "The Department shall prescribe". The Public Health Agency should be responsible for drafting the wording.

The RCN strongly supports the intention underlying clause 8 on protective eyewear. We have no comments about the draft wording, which, we believe, goes as far as is reasonably possible in enforcing compliance without violating the privacy of the individual sunbed user.

The RCN notes that the DHSSPS intends to provide more detail on the training requirements through subsequent subordinate legislation, for reasons that we understand. More detail on the proposed content of such training will be important, as will be an indication of who will provide, quality assure, accredit and evaluate it. The training must focus on minimising the health risks associated with sunbed use and, as such, should encompass those responsible for the remote sale or hire of sunbeds for private use.

The RCN understands that the Chartered Institute of Environmental Health is preparing an accredited UK training programme, and it would be helpful to know whether the DHSSPS plans to adopt that programme for Northern Ireland. It is important that checks are undertaken to ensure that sunbed operators employ only trained staff to ensure public protection. We note that departmental officials previously advised the Committee that they are still considering whether to include provisions for compulsory staff training in the Bill. The RCN hopes that the Department will agree to do so in the interests of public protection.

Although the RCN has no specific comments to offer on the wording of clauses 12 and 13, which deal with enforcement by district councils, consideration of those clauses inevitably leads to the issue of licensing. The RCN shares Committee members' concerns about the Department's reluctance to countenance the establishment of a licensing system. Today, I hear that that position has changed, which is helpful.

The Chairperson:

I hoped that you had picked up on my introductory remarks to the previous witnesses. The position on licensing has changed.

Ms Smyth:

The Royal College of Nursing welcomes the legislative intention to regulate the sunbed industry in Northern Ireland. We commend the Department and the Committee for their attention to the matter. It is a clear example of how political will and shared commitment can, literally, save lives.

In responding to the consultation, many RCN members, particularly those who work in cancer services and see the tragic consequences of sunbed use, urged the RCN to campaign for an outright ban on sunbeds other than for closely regulated medical purposes. That is still their

position and our long-term goal. Although the RCN accepts the fact that that is not a realistic objective at present, we hope that the passage of the Bill will be a first step towards a complete ban on sunbeds, just as those of us who campaigned for a public smoking ban believe that that was a first step towards the long-term objective of a tobacco-free Northern Ireland.

Finally, I pay tribute to the work of the 2009 RCN Northern Ireland Nurse of the Year, Iona McCormack. Many members will know Iona, and she would have been with us today had she not been in Australia. She is a clinical nurse specialist based at Belfast City Hospital and holds clinics in the Belfast Trust and South Eastern Trust areas. Iona set up a nurse-led screening service to improve patient outcomes through the early detection of skin cancer. Her role is unique in that she is able to provide treatment and care throughout a patient's journey from diagnosis to surgery to follow-up treatment. She seeks advice on complex cases from leading dermatologists and dermoscopists around the world. Her innovative service has increased the early detection of melanoma, which has lead not only to a much better prognosis but to the prevention of unnecessary surgery and scarring.

Patients value the continuity of care and sensitivity that Iona provides. She has broken down boundaries to promote changes in practice and, ultimately, to improve services for patients. We should be proud of the fact that we have a world-class service in Northern Ireland and mindful of how innovative nursing care, such as that provided by Iona, can transform health and social care services and the lives of the people of Northern Ireland. If Iona were here, she would say that sunbeds should be banned completely.

The Chairperson:

John, would you like to add any comments?

Dr John Knape (Royal College of Nursing):

No; I have nothing to add.

The Chairperson:

I met Iona at the RCN Christmas function. She made that point clearly, and she also made me extremely jealous by telling me that she was going to Australia on secondment.

Ms Smyth:

Yes; she is.

The Chairperson:

She is a lucky girl.

Ms Smyth:

She will not be sitting in the sun, in case anyone was wondering about that. She will be avoiding the sun.

The Chairperson:

You clearly expect the Committee to home in on the issue of banning sunbeds. I played devil's advocate with our earlier witnesses by asking whether they wanted an outright ban on sunbeds, which is a controversial issue. You would like a total ban on the sale or hire of sunbeds to private homes. The Department points out that, if that were to happen, the use of sunbeds will be driven underground. Under the current proposals, there will be clear instructions on documentation, warnings will be placed on units, and it will be an offence to allow a minor to use such facilities. If sunbeds were to be banned completely, that would run the risk of people obtaining them from the Irish Republic or elsewhere. People could order them over the Internet and import them, and we would have absolutely no control over what happens.

Ms Smyth:

We do not know whether the underground use of sunbeds would happen. People will always have the right to do what they want to do as long as it is legal, and they cannot be prosecuted for it. However, I am here as a registered nurse and a healthcare professional.

Many nurses in our membership are experts in cancer services and hold very strong views about the use of sunbeds. They see needless death, pain and suffering, and there is a body of evidence that states that the use of sunbeds increases that risk. They think that sunbeds are not a necessity and that people should not use them for cosmetic purposes. Sunbeds have a place in the treatment of some dermatological skin conditions, but they are used under very controlled circumstances on those occasions. Our members believe that that is where it should end.

The Chairperson:

We are told that three deaths a year in Northern Ireland are related to sunbed use. That is dreadful. Do you see folk in your hospitals who can say categorically that they are there because of sunbed misuse and not because they went to Spain?

Ms Smyth:

Nurses do not say that. Iona, who is the expert, says that there is a body of evidence to suggest that the use of sunbeds most certainly increases the risk. There is also a body of evidence that states that the use of sunbeds by children under a certain age greatly increases that risk. However, no individual can come into hospital and say that they have not been exposed to sunlight. There is also evidence that our Celtic skin, or fair skin, is more susceptible than other people's skin. We have a growing problem here. There are more than three deaths a year now in Northern Ireland; I believe that the rate is documented as higher than that.

The Chairperson:

The rate is higher only in the sense that that is our proportion of the overall UK total. The difficulty with that is that it could be 20 deaths or it could be none.

Ms Smyth:

However, one death is one too many for a family or for a nurse who sees the devastating effects. A sunbed is not a necessity; a particular skin shade may be very nice, and some of us may use other methods to avoid looking pale, but we should not use appliances that we know will harm us.

The Chairperson:

A man is a wee bit more limited in what he can use.

Ms Smyth:

I would not be so sure about that. There is a large range of cosmetics for men; it is a growing industry, I hear. *[Laughter.]*

The Chairperson:

What is your view of the proposal that fines can be downgraded to fixed penalty notices — spot fines that do not require court appearances and mean that the individual does not get a record?

Ms Smyth:

I listened to the previous witnesses' evidence. I reflected on what they said about building penalties into the licensing system. That is one way to deal with the problem. However, there is no doubt that a £50 fine will be no deterrent to anyone in the sunbed industry who does not comply with the rules. Some of those businesses are lucrative concerns.

Mrs O'Neill:

I agree with your suggestion to change the phrase "may prescribe" to "shall prescribe" in clause 11.

This may be an unfair question. We have talked about regulation for young people accessing sunbeds at home, and you said that you accepted that that would be difficult. Do you have any ideas about how to do that, apart from an out-and-out ban?

Ms Smyth:

Our preference would be that people should not be allowed to hire or buy sunbeds for use in the home. Policing on outright ban on sunbeds would be extremely difficult. To be perfectly honest, in the current economic climate, why would we use resources to do that? Our alternative solution is to not allow the sale or hire of sunbeds for private use.

Mrs O'Neill:

We know that training is being developed by the Chartered Institute of Environmental Health. When will that training be ready?

Ms Smyth:

I am not sure. It is imminent, which takes me to your question about the secondary legislation. Training should be prescribed in secondary legislation. There must be a recognised and accredited training programme.

The Chairperson:

The Committee is due to hear evidence from the Chief Environmental Health Officers Group next week. We will be able to explore that idea further with them and determine their perception of what can be enforced and what cannot.

Mr Gardiner:

Janice, I support you 100%. I would ban sunbeds. People who pay for artificial sun and then expect to take a bed in an acute hospital beside people who are dying of cancer — who have not brought it on themselves — are a cost to the Health Service. People who use sunbeds deprive other people who are ill through no fault of their own of a hospital bed; they do not deserve to jump the queue and receive first-class treatment. The Bill does not go far enough. I would ban sunbeds because the people who use them are the same as smokers; they bring their illness on themselves. Other people are being pushed to the back of the queue.

The Chairperson:

I did not detect a question in that contribution. I will be surprised if you disagree with that.

Ms Smyth:

I do not disagree. However, human beings are complex, come from various backgrounds, have different abilities and have had different opportunities in life. As the previous witnesses said, we must conduct a public health campaign. I am not sure that everybody understands how harmful sunbeds are, and, as healthcare professionals, we have an obligation to educate them.

Mr Gardiner:

That is why I support the proposals, Chairman. I do not have a question; I want to offer support.

Mrs O'Neill:

I want to correct something for the record. I said earlier that I agree with the comments on clause 11; I meant to say clause 5(11).

The Chairperson:

We all spotted that but did not want to correct you. *[Laughter.]* For the sake of argument, let us assume that, unfortunately, we cannot ban the hire or sale of sunbeds for use in private homes. I see much merit in what you are saying. However, if the ban does not happen, are you content with the provisions that a sunbed, if hired, carries a clear label that states how dangerous it is, warns against overexposure and that it is illegal for a sunbed to be used by a minor? The paperwork associated with the transaction should carry the same information. On the assumption that a full ban will not happen, is that arrangement sufficient?

Ms Smyth:

The secondary legislation will need to be very specific about what records should be maintained when hiring out sunbeds, including to whom they have been hired, what information the client has received and confirmation that the person has received the warning notice and understands that people who are under the age of 18 should not use the bed. Secondary legislation should be used to specify what records must be maintained to satisfy the regulating authority — namely, the local council— and that business is being conducted in accordance with the legislation.

The Chairperson:

That is useful guidance on what should be included in secondary legislation. Three or four points have been put forward. The problem is that secondary legislation takes a long time to come about and, sometimes, does not arrive at all. We are depending on the Department to abide by its indication that that will happen. It is difficult to compel the Department to act.

Mr McCallister:

I apologise for missing the start of your presentation. Is there a risk that an outright ban on sunbeds might drive the whole practice underground? That will lead to even less regulation and control.

Ms Smyth:

The Chairperson asked about that. It may or may not lead to such a scenario. However, that is not a justification for not banning the hire or sale of sunbeds. That theory has been put forward, but we honestly do not know the answer. However, as I said before John McCallister arrived, nurses who are RCN members and are experts in cancer care support an outright ban. They pick up the devastation at the other end and are familiar with the body of evidence on the subject. They do not want only a ban on hire and sale; they support a total ban except for use in healthcare for some dermatological conditions under very controlled circumstances.

Mrs M Bradley:

Could we ban private hire beds? We have no control over them at all.

The Chairperson:

We can consider that. However, we are lucky to have any legislation in place in the available time span. If we had tried to include licensing in the primary legislation, the Bill would have

been delayed. Therefore, we have accepted and welcomed the fact that secondary legislation will be required. If we try to take radical measures such as a ban on the private use of sunbeds, we could, perhaps, run the risk of having no legislation at all. It is a case of half a loaf being better than none. A ban on private use is too strong a provision to include in secondary legislation. It would simply go in as a regulation. It is an interesting debate, and it will be discussed during the Committee's line-by-line scrutiny of the Bill.

Do members have any further questions? Many of the issues were covered by the previous witnesses, and departmental officials have also given evidence.

Ms Smyth:

I have thought of something else in connection with the secondary legislation. I did not think about it when John Knape was preparing our evidence, and it sprung to mind only when the Chairperson was questioning us earlier.

In the secondary legislation, the person in control of a business should be identified and registered as such. It is important that a business using sunbeds, or hiring or selling sunbeds, names one person as being in control of the business and that that person is responsible for ensuring that business is conducted in accordance with legislative requirements. It is also important to register not only that person but the premises in which the sunbeds are used.

The Chairperson:

We spotted that one. If someone owns a chain of sunbed parlours, he or she could simply close down one premises and move the business to a premises down the street.

The Committee has noticed that many sunbed businesses are located in areas of social deprivation. The people who are least likely to acquire the information are using sunbeds.

Mr McCallister:

If businesses were closed down, it is worrying that the owners could set up in the name of partners or other people in a different council area. If someone is banned in the Omagh District Council area, can he or she set up in Banbridge District Council area?

The Chairperson:

We want to examine that issue.

Thank you very much you for your evidence. It has been very useful.