

June is *National Safety Month*

According to the National Safety Council, injuries are a leading cause of disability for people of ALL ages. Nearly 350 Vermonters lose their lives to injuries each year, and thousands more suffer serious, sometimes permanent disabilities as a result of their injuries. It is often injury - not disease - that is the leading killer of children, adolescents, and young adults. On average, there are more than 4,250 injury-related hospitalizations and 68,420 injury-related emergency department visits each year among Vermont residents.

This month, we encourage you and your patients to focus on injury prevention, which can include falls, prescription drug abuse, and distracted driving. Distracted driving (including texting, eating, or possibly reading this email) is responsible for 1 in 5 crashes nationally.

Safe travelling: Are you or your patients traveling this summer? Our colleague ran across this site that offers listings on allergy-friendly hotels and creates a rating based on indoor, outdoor, and skin irritant controls for free. [Allerpass](#)

Asthma and Environmental Health: Asthma Educational Video

Our partners at Rutland Regional Medical Center (RRMC) and the Rutland Community Health Team shared this educational video on asthma that was created by Sarah Cosgrove. This video outlines the causes, symptoms, environmental factors that affect exacerbations, and treatment of asthma in an understandable manner. Feel free to share with patients, families, and other colleagues!

[Asthma Video](#)

Special thanks to Sarah Cosgrove, RCP, AE-C, CTTS-M.

Smoking and Asthma

Big news for tobacco prevention in Vermont!

As of July 1, 2014, the secondhand smoke provisions outlined in Act 135 (H.217) will begin. This is a major victory for us, as it expands workplace and public place protections against secondhand smoke, and e-cigarettes. The act prohibits smoking in a car occupied by a child eight years of age or younger. It also bans the sale of liquid or gel substances containing nicotine in Vermont unless the product is contained in child-resistant packaging.

This will also affect establishments:

- Lodging establishments: H.217 designates the sleeping quarters and adjoining rooms rented to guests in hotels, motels, and other lodging establishments as

Upcoming Events

[Certified Asthma Educator](#)

Institute: June 30-July 1

[Champ Camp:](#)

August 17- August 22

[Asthma Advisory Panel](#)

Quarterly Meeting: August 22

Did you know?

*35 million people suffer from pollen allergies.

*Due to climate change, the pollen season now lasts on average 2 weeks longer.

Source: Asthma and Allergy Foundation of America

Publications

[Vermont State Asthma Plan](#)

[The Burden of Asthma in Vermont](#)

[Healthy Vermonters 2020](#)

Quick Links

[VDH Asthma Program](#)

[Controlling Asthma](#)

[Tools for Managing Asthma](#)

[Asthma Surveillance](#)

[Resources & Information](#)

[Envision Program](#)

workplaces that must be smoke-free. Those establishments' common areas are already designated as smoke-free public places.

- State-owned property: The bill creates a 25-foot smoke-free zone around all buildings owned by the State. This restriction does not include adjacent properties not owned by the state, e.g. sidewalks or areas owned by neighboring businesses. Additional areas of property or grounds owned by or leased to the state may be designated as smoke-free as well.
- State-operated hospitals: H.217 creates a smoke-free campus for state-owned and operated hospitals or secure recovery facilities. This affects the Vermont Psychiatric Care Hospital.
- Motor vehicles: H.217 prohibits smoking in motor vehicles occupied by children restrained by a "child passenger retraining system" (i.e. car seat or booster seat) punishable by a \$100 fine. Functionally, this means that it pertains to children eight years old and younger.

Tobacco-free school grounds and childcare facilities:

- Public schools: H.217 expands the definition of products **prohibited on school grounds to include tobacco substitutes, namely e-cigarettes**. It also creates one policy for the entire state by removing language that required each school board to adopt its own tobacco policy. The new tobacco policy applies to school grounds and school-sponsored functions, regardless of whether children are present, and includes all persons, not just students. School boards may adopt confiscation policies.
- Childcare facilities: H.217 prohibits the use of tobacco products and tobacco substitutes in licensed child care centers and afterschool programs at all times - both indoor and on the grounds. For licensed or registered family child care homes, use of tobacco and tobacco substitutes will be prohibited while children are in care. In addition, if smoking occurs on the premises when children are not in care, parents must be notified of possible exposure.

Changes to E-Cigarette Requirements:

- Amends the definition of tobacco substitutes: H.217 adds language to the definition of tobacco substitutes to clarify that FDA-approved cessation products are not considered to be tobacco substitutes and are therefore not restricted.
- Requires child-safe e-liquid packaging: *Liquids or gels containing nicotine are required to be contained in child-resistant packaging*. This excludes cartridges are containers that are not designed to be opened by the consumer.

Please keep in touch!

Let us know if you have any questions -- or if there's an asthma-related issue you'd like to know more about.

Take care,

Jane

Jane Wolforth, MPH
Asthma Program Manager
Division of Health Promotion and Disease Prevention
Vermont Department of Health
jane.wolforth@state.vt.us



YOU CAN QUIT.
WE CAN HELP.

VERMONT DEPARTMENT OF HEALTH
1-800-QUIT-NOW (784-8669) 802Quits.org

Join Our Mailing List!

(802) 951-0156