



Guide to a Smoke-free Workplace

INTRODUCTION

The Southern Nevada Health District would like to thank you for your interest in implementing a smoke-free workplace policy. We hope that this kit will provide you with the basic knowledge to develop and implement a policy that will benefit your employees and your business.

As more and more scientific evidence is mounting about the dangers of secondhand smoke, workplaces nationwide are going smoke-free to provide clean indoor air and protect employees and customers from the harmful, life-threatening effects of secondhand smoke (*American Lung Association*). According to the Centers for Disease Control and Prevention (CDC), involuntary exposure to secondhand smoke remains a common, serious public health hazard that is entirely preventable by adopting and enforcing appropriate regulatory policies. Smoke-free environments are the most effective method for reducing secondhand smoke exposure.

Health issues aside, restricting secondhand smoke exposure at work is good for business reasons as well. Smoke-free workplaces report reduced costs for cleaning and maintaining facilities and equipment and improved employee morale (*CDC, 2005*).

This kit details the costs and consequences of tobacco use, the benefits of a smoke-free workplace, how to support employees who smoke, and walks you through the step-by-step process of developing and implementing a smoke-free policy. The kit also includes resources to help you access more detailed information and a sample workplace policy.

For more information regarding tobacco prevention and control issues, contact the Office of Chronic Disease Prevention and Health Promotion at the Southern Nevada Health District at (702) 759-1270 or email tobaccocontrolprogram@snhdmail.org. You can also visit our website at www.gethealthyclarkcounty.org.

COSTS AND CONSEQUENCES OF TOBACCO

Health Consequences for Employees

Tobacco use is the leading cause of preventable death in the United States. It accounts for 440,000 deaths, or nearly one of every five deaths, each year in this country. In fact, more deaths are caused each year by tobacco use than by all deaths from human immunodeficiency virus (HIV), illegal drug use, alcohol use, motor vehicle injuries, suicides, and murders combined (CDC, 2002, 2003).

Exposure to secondhand smoke is the third leading cause of preventable death in the United States and is responsible for killing 53,000 nonsmokers each year (CDC, 2002). For every eight smokers who die each year as a result of their tobacco use, one nonsmoker is killed along with them (Glantz & Parmley, 1991). Secondhand smoke also affects children in dramatic fashion. Because their lungs are not fully developed, young children are particularly susceptible to secondhand smoke. Exposure to secondhand smoke is associated with an increased risk for sudden infant death syndrome (SIDS), asthma, bronchitis, and pneumonia in young children (National Cancer Institute).

According to a 2008 public opinion poll conducted by the

American Cancer Society in Clark County:

- 81 percent of Clark County adults agree that all Nevada workers should be protected from secondhand smoke.
- 86 percent of adults in Clark County reported that it was important that workplaces and indoor environments be smoke-free.

Financial Costs to Employers

Direct costs to the employer of tobacco use include increased health care costs. Indirect costs include lost productivity, absenteeism, recruitment and retention costs resulting from death and disability related to smoking, and increased worker's compensation payments (CDC).

In fact, the CDC puts a \$3,383 price tag on each employee who smokes: \$1,760 in lost productivity and \$1,623 in excess medical expenditures. In addition, estimated costs associated with secondhand smoke's effects on nonsmokers can add up to \$490 per smoker per year (Kristein, 1983). Overall, cigarette smoking and secondhand smoke cost \$92 billion in productivity losses annually, according to the CDC (2005).

Additional increased costs to employers involve property damage, cleaning and maintenance costs, and increased risk for fire and explosions in the workplace.

The Organization for Economic Cooperation and Development estimates that construction and maintenance costs are 7 percent higher in buildings that allow smoking than in buildings that are smoke-free (2000). The U.S. Environmental Protection Agency (EPA) estimates that smoke-free restaurants, for example, can expect to save

Of current smokers in Clark County, about 68 percent report they want to quit smoking completely (ATS, 2008).

about \$190 per 1,000 square feet each year in lower cleaning and maintenance costs. The EPA also estimates a savings of \$4 billion to \$8 billion per year in building operations and maintenance costs if comprehensive smoke-free indoor air policies were adopted nationwide (CDC, 2001).

Tobacco Laws in Nevada

Effective Dec. 8, 2006, the Nevada Clean Indoor Air Act prohibits the smoking of tobacco products in most public places and indoor places of employment.



The Act states that smoking tobacco in any form is prohibited within indoor places of employment including:

- Public and private school buildings and on public and private school grounds
- Child care facilities with five or more children
- All areas of grocery stores, convenience stores and drug stores
- All indoor areas within restaurants, including those in casinos or gaming establishments
- Bars, taverns and saloons that serve food
- Shopping malls and retail establishments
- Video arcades
- Government buildings and public places
- Movie theaters

- Indoor places of employment, unless specifically exempt by the Act

The Act states that smoking is permitted in:

- Areas within casinos where loitering by minors is already prohibited by state law per NRS 463.350
- Stand-alone bars, taverns and saloons that don't serve food
- Strip clubs and brothels
- Retail tobacco stores
- Private residences, including private residences that may serve as an office workplace, except if used as a child care, adult day care or health care facility

Smoking in all indoor places of employment is prohibited, unless the business is specifically exempted by the Act.

Employers are responsible for posting conspicuous "No Smoking" signs at every entrance. Employers are also required to remove all ashtrays and other smoking paraphernalia from their smoke-free facilities.

Free, downloadable "No Smoking" signs are available on the Southern Nevada Health District website and can be accessed at www.SouthernNevadaHealthDistrict.org or www.getthehealthyclarkcounty.org.

BENEFITS OF A SMOKE-FREE WORKPLACE

Protect your employee's health

- Employees who are exposed to smoke in the workplace were 17 percent more likely to develop lung cancer than those who were not exposed (*American Lung Association*).
- A smoke-free workplace may attract more employees since nearly 80 percent of adults in Clark County do not smoke (*BRFSS, SMART*).

Lower your costs

- CDC estimates that the economic costs of smoking are more than \$167 billion each year, including an additional \$75.5 billion in smoking-related medical expenditures.

The primary benefit of a smoke-free workplace is the protection of all employees from the health risks of secondhand smoke (CDC).

- Businesses pay an average of \$2,189 in worker's compensation costs for smokers compared with \$176 for non-smokers each year.
- The American Cancer Society reports that employees who smoke have an average insurance payment for health care of \$1,145, while nonsmoking employees average \$762 each year.
- The National Fire Protection Association found that, in 1998, smoking materials caused 8,700 fires in nonresidential structures, resulting in direct property damage of \$60.5 million.

Increase productivity and morale

- Employee morale suffers when nonsmoking employees are forced to endure exposure to secondhand smoke.
- Employees who take four 10-minute breaks a day to

smoke actually work one month less per year than workers who do not take smoking breaks.

- A national study based on American Productivity Audit data of the American workforce found that employees who smoked had approximately two times more lost production time per week than workers who never smoked, a cost equivalent of roughly \$27 billion in productivity losses for employers (2003).

Reduce absenteeism

- Smokers on average miss 6.16 days per year due to sickness (including smoking related acute and chronic disease), compared to nonsmokers, who miss 3.86 days of work per year.

SUPPORT FOR EMPLOYEES WHO SMOKE

Implementing a smoke-free policy in the workplace will impact both smokers and non-smokers alike. However, smokers will have to adjust to the change more immediately. It's important that management provides strong communication about the new policy to all smokers and provides ongoing support to smoking employees.

Remember, the goal is to secure a safe and healthful smoke-free workplace for all employees, not stigmatize employees who smoke. Providing cessation support is important because a new smoke-free policy may encourage smokers to quit. By providing support and information and directing employees to cessation





resources, a company can demonstrate to its smoking employees its commitment to their good health and welfare.

One good resource in Nevada is the Nevada Tobacco Users' Helpline™. The Helpline is committed to assisting your employees in becoming smoke-free.

At your place of business, a certified nicotine dependence counselor from Nevada Tobacco Users' Helpline™ will provide a one-hour informational class on tobacco use and nicotine dependence. Employees and their families will also have the opportunity to enroll in the Nevada Tobacco Users' Helpline™ confidential, intensive treatment program, which consists of:

- Free telephone counseling delivered by credentialed professional alcohol and drug counselors who specialize in treating nicotine dependence;
- Educational group therapy or home study psycho education; and
- Medication assistance, if necessary.*

**CALL: TOLL FREE
1-800-QUIT-NOW from
a Nevada area code**

**Medication assistance is available as funding allows and includes all FDA approved first-line medications. This includes all nicotine replacement therapies – the patch, gum, lozenge, nasal spray, and inhaler – as well as Zyban, Wellbutrin and Chantix. The Medication Assistance*

Program consists of six 30-day supplies. Patients pay a \$15 co-pay per 30-day supply.

Log on to www.livingtobaccofree.com for more information about Nevada Tobacco Users' Helpline™.

STEP BY STEP APPROACH TO IMPLEMENT A POLICY

Here are a few ideas to help make the implementation of your smoke-free policy successful:

- Seek employee (staff, management) support through reliable company communication channels (meetings, newsletters, payroll enclosures, bulletin boards, e-mails)
- Focus on the health and safety of everyone
- Provide real and visible opportunities for employee participation in the policy implementation
- Implement incentives that benefit your employees and patrons
- Provide assistance with quitting

Outlined below is a step by step approach for employers implementing a smoke-free policy. These recommendations are provided by CDC.

1. ORGANIZE YOUR APPROACH

Consider organizing a Secondhand Smoke Policy Committee with representatives of influential personnel – both smokers and nonsmokers.

Decide which departments and specific personnel will be involved in all phases of implementation and enforcement of a smoke-free workplace policy. Examples of personnel to involve include the following:

- Key administration or management
- Human resources
- Custodial
- Employee representatives
- Risk management
- Security
- Employees who smoke

Gather information and use this information to guide the implementation of the policy. Allowing employees to express their opinion will facilitate and guide implementation of the policy.

If union involvement exists, learn about how to work with labor unions to address employee secondhand smoke exposure in the workplace. Be sure to consult with union leadership representatives. Involve them from the start.

Throughout the process, focus on secondhand smoke, not smokers, as the problem that must be addressed. Take a sympathetic approach to employees who smoke and offer them help in quitting.

2. GATHER RELEVANT FACTS AND INFORMATION

Become familiar with the health hazards of secondhand smoke.

Learn about secondhand smoke and the workplace and the effect of smoke-free workplace policies.

Review a model policy for a smoke-free workplace. You can tailor this policy for your organization, but be sure to follow current law.

Contact your local health organizations, such as the American Cancer Society, the American Heart Association or American Lung Association if you are interested in having a third party work with you and your organization to develop a smoke-free workplace policy.

Find out what your current employee assistance/wellness program, HMO or private insurance company offers in terms of employee cessation programs. Determine how you

can best make use of those services. If your insurance company does not provide such services, have your human resources director or person who handles such issues negotiate to secure these services for your organization. Contact the organizations listed above for assistance.

3. EDUCATE YOUR EMPLOYEES

The approach you select to inform your employees that you are going to implement a new policy will depend on the size of your organization and the amount of education needed. You probably need to educate employees about the hazards of secondhand smoke before introducing a policy. This step provides the rationale for the policy.

Try some of the following methods to inform employees:

- Intranet
- Payroll stuffers (brochures, relevant articles, flyer)
- Regular articles in company newsletter
- Posters, displays, buttons
- Presentations
- Speakers
- Information kits
- Brown bag lunches

4. IMPLEMENT YOUR POLICY

Be sure the policy implementation is well planned and implementation procedures are clearly

described and communicated to all employees. Incomplete implementation only results in confusion.

Distribute a notice of the policy change to all employees from the chief executive officer. This letter should emphasize that the new policy is intended to protect employees' health.

Review the policy, enforcement procedures, and available support services at staff meetings. Be sure all supervisors are familiar with the enforcement procedures. Also clarify if "support services" means cessation services or support for implementation.

Post easy-to-read signs at all entrances and stairwells.

Provide information through awareness programs and handouts.

5. ENFORCE YOUR POLICY

Generally, the following statement inserted into your employee handbook can sufficiently address the workplace smoking policy:

Any violation of this workplace smoking policy will result in disciplinary actions, up to and including discharge under (insert name of organization or business) progressive discipline policy.

Smoke-free policies are enforced similarly to drug-free workplace policies. Structure your policy with the following points in mind:



- Enforce the policy in a fair and equitable manner.
- Distribute written information on the policy to all new employees.
- Provide a form to be kept in each employee's personnel file that states the employee has received a copy of the policy and enforcement procedures and that they have agreed to abide by the company's smoke-free workplace policy.
- Decide which department or individuals will handle complaints, address infractions, and enforce the new policy (e.g., department managers, human resources, risk management). Whatever you decide, make sure that these designated officers are trained in enforcement procedures, handling of filed complaints, and conflict management.
- Provide all personnel with the names and contact information of the personnel responsible for enforcing the policy.

You may want to conduct a survey of employees following implementation to assess the impact of the smoke-free policy.

Centers for Disease Control, 2006

SAMPLE POLICY FOR A SMOKE-FREE WORKPLACE

ABC Company Smoke-free Policy

ABC Company is dedicated to providing a healthy, comfortable, and productive work environment for our employees.

Numerous studies have found that tobacco smoke is a major contributor to indoor air pollution, and that breathing secondhand smoke (also known as environmental tobacco smoke) is a cause of disease in healthy nonsmokers, including heart disease, stroke, respiratory disease, and lung cancer. The National Cancer Institute determined in 1999 (Monograph #10) that secondhand smoke is responsible for the early deaths of up to 65,000 Americans annually.

The Americans With Disabilities Act, which requires that disabled persons have access to public places and workplaces, deems impaired respiratory function to be a disability.

The U.S. Surgeon General has determined that the simple separation of smokers and nonsmokers within the same air space may reduce, but does not eliminate, the exposure of nonsmokers to secondhand smoke. The Environmental Protection Agency has determined that secondhand smoke cannot be reduced to safe levels in businesses by high rates of ventilation. Air cleaners, which are only capable of filtering the particulate matter and odors in smoke, do not eliminate the known toxins in secondhand smoke. A significant amount of secondhand smoke exposure occurs in the workplace. Employees who work in smoke-filled businesses suffer a 25-50% higher risk of heart attack and higher rates of death from cardiovascular disease and cancer, as well as increased acute respiratory disease and measurable decrease in lung function.

The Centers for Disease Control and Prevention has determined that the risk of acute myocardial infarction and coronary heart disease associated with exposure to tobacco smoke is non-linear at low doses, increasing rapidly with relatively small doses such as those received from secondhand smoke or actively smoking one or two cigarettes a day, and has warned that all patients at increased risk of coronary heart disease or with known coronary artery disease should avoid all indoor environments that permit smoking.

Smoke-filled workplaces result in higher worker absenteeism due to respiratory disease, lower productivity, higher cleaning and maintenance costs, increased health insurance rates, and increased liability claims for diseases related to exposure to secondhand smoke.

In light of these findings, ABC Company shall be entirely smoke-free effective ____ [date].

Smoking shall not be permitted in any enclosed company facility. This includes common work areas, auditoriums, classrooms, conference and meeting rooms, private offices, elevators, hallways, medical facilities, cafeterias, employee lounges, stairs, restrooms, vehicles, and all other enclosed facilities. This policy applies to all employees, clients, contractors, and visitors. Smoking shall be permitted only at a reasonable distance (e.g., 25 feet or more) outside any enclosed area where smoking is prohibited so as to insure that secondhand smoke does not enter the area through entrances, windows, ventilation systems, or any other means.

Copies of this policy shall be distributed to all employees. No Smoking signs shall be posted at entrances to all company facilities.

Those employees who smoke and would like to take this opportunity to quit are invited to participate in the cessation programs being offered by the company. The success of this policy will depend on the thoughtfulness, consideration, and cooperation of both smokers and nonsmokers. All employees share in the responsibility for adhering to and enforcing this policy.

Signature of CEO or President

ADDITIONAL RESOURCES

American Cancer Society (ACS)

6165 S. Rainbow Blvd., Bldg. 12
Las Vegas, NV 89118
(702) 798-6877 • www.cancer.org

American Heart Association (AHA)

2355 Red Rock, Suite 103
Las Vegas, NV 89146
(702) 367-1366 • www.americanheart.org

American Lung Association (ALA)

3552 W. Cheyenne Ave., #130
North Las Vegas, NV 89032
(702) 431-6333 • www.lungusa.org

Americans for Non-Smokers Rights (ANR)

www.no-smoke.org

Campaign for Tobacco-Free Kids (CTFK)

www.tobaccofreekids.org

Centers for Disease Control and Prevention (CDC)

Making Your Workplace Smoke-free: A Decision maker's Guide
www.cdc.gov/tobacco/research_data/environmental/etsguide.htm

Taking Action against Secondhand Smoke- An Online Toolkit
http://www.cdc.gov/tobacco/ETS_Toolkit/index.htm

Nevada Cancer Institute (NVCi)

10000 W. Charleston Blvd., Suite 260
Las Vegas, NV 89135
(702) 821-0000 • www.nevadacancerinstitute.org

Nevada Tobacco Prevention Coalition (NTPC)

www.tobaccofreenv.org

Nevada Tobacco User's Helpline™ (NTUH)

A Division of the University of Nevada, School of Medicine
6375 W. Charleston Blvd., Suite A-172
Las Vegas, NV 89146
1-800-QUITNOW • www.livingtobaccofree.com

Southern Nevada Health District (SNHD)

Office of Chronic Disease Prevention and Health Promotion • Tobacco Control Program
400 Shadow Lane, Suite 101
Las Vegas, NV 89106
(702) 759-1270 • www.gethealthyclarkcounty.org

SMOKE-FREE COFFEE AND DOUGHNUTS, PLEASE

Extensive communications to explain your intent are essential to implementing a smoke-free policy, according to Kim Dionne, Director of Marketing for Bess Eaton Coffee Shops and Bakeries. Bess Eaton is a regional bakery in New England, and all of their 55 sites (retail, baking, and management) adopted smoke-free policies in January 1994. Prior to that, the company had no formal policy.

“The EPA conclusion that secondhand smoke is a Group A carcinogen made us want to eliminate ETS in our workplace,” Ms. Dionne explains. “We wanted to offer a clean and healthful environment to both our external customers and our internal customers – our employees.”

To achieve their goal of a smoke-free workplace, Bess Eaton worked closely with their local Lung Association. The company gathered key managers as a work group to develop implementation suggestions. The suggestions emphasized the need to explain that the policy is not against smoking or smokers but that it promotes the safest work environment possible.

Bess Eaton wasn't shy about the policy change, and they created a full-blown marketing campaign: “We had speakers and did radio and TV spots. We wanted to make a splash and let our customers know it was coming.” The policy was made effective on January 1, 1994, and for the next year the company supported its employees who smoked by fully paying for Lung Association smoking cessation classes.

Reactions to the policy have been very positive, with customers, employees, and management expressing satisfaction. Some changes take time, but everyone has been able to adjust. Dionne believes that productivity has improved along with the attitude of the employees.

“Though we were one of the first coffee shops in New England to do it and that could be seen as somewhat adventurous, we have been very happy with the results.”

Centers for Disease Control, 1996