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INTRODUCTION

Welcome!

Thank you for taking the time to consider making your worksite tobacco-free!

As you start this process, it is likely that you have many questions. This toolkit will help answer these questions and guide you through the entire process of implementing a tobacco-free worksite policy. Choosing to go tobacco-free is one of the best decisions you can make for your worksite and your employees!



Topics you can learn more about within this toolkit:

1. Who is this toolkit for?

This toolkit can be used by any worksite making the choice to go tobacco-free. The information in this toolkit is relevant for hospitals, corporate businesses, small businesses, commercial businesses, industry, K-12 schools, colleges and universities, and many others.

2. How do I use this toolkit?

This toolkit contains step by step instructions on how to implement a tobacco-free worksite policy. You can follow this toolkit in its entirety or skip around to the sections that most pertain to you and your worksite.

3. My worksite is already smoke-free. Why should we update our policy to tobacco-free?

Implementing a tobacco-free worksite policy involves more than simply stating that smoking is prohibited in buildings or on the grounds. A comprehensive tobacco-free policy prohibits the use of all tobacco and tobacco-like products in company buildings, on company grounds, and in company owned vehicles. By only prohibiting smoking, you may send a message that the use of other tobacco products is acceptable¹. All tobacco products are harmful².

Implementing a tobacco-free policy ensures that smokers do not replace cigarettes with other tobacco products during work hours¹. For more information on what is included in a comprehensive tobacco-free policy, see pages 25-26.

4. My worksite is already tobacco-free. What can the American Lung Association do for me?

Congratulations on your tobacco-free worksite! We are able to offer worksites in our service area: cessation resources, media awareness, and marketing via our website at no cost! If your worksite is looking to update to a nicotine-free policy, more options may be available. To find out how to take advantage of these opportunities, please call **515-309-9507**.

5. Will implementing a tobacco-free worksite policy improve the health of my employees?

Yes! Smoking and using other forms of tobacco impact almost every organ in the body³. Using tobacco can lead to cancers, cardiovascular and respiratory issues, and even death³. Research has shown that implementing tobacco-free worksite policies can help users quit⁴⁻⁷! For more information on the negative health effects of tobacco, see pages 6-11.

Topics you can learn more about within this toolkit: (continued)

6. Will implementing a tobacco-free worksite policy save my company money?

Yes! For every smoker that successfully quits, an employer can save \$5,816 annually due to reduced absenteeism, increased productivity, and decreased healthcare costs⁸. To see how much money this policy change could save you, see pages 11-13.

7. Have other worksites made the decision to go tobacco-free?

Yes! Many businesses across Iowa and the United States have taken this important step toward employee health and cost-savings. For a list of Central Iowa worksites that have made the decision to implement a tobacco-free policy, please see page 14.

8. Is it legal to implement a tobacco-free policy?

Yes. The U.S. Constitution does not grant individuals a right to smoke or a right to use tobacco products⁹. Smokers are not a protected group of people under the Equal Protection Clause of the U.S. Constitution⁹. For more information about legal issues surrounding a tobacco-free worksite policy, please see the Online Tobacco Resources links within the Additional Resources section of this toolkit .

9. What resources are available to help my employees quit using tobacco products?

There are many resources available to help your employees stop smoking or using other tobacco products. These resources include telephone counseling through Quitline Iowa, group counseling through the American Lung Association's Freedom From Smoking[®] course, and web-based cessation support. For more information, please see page 28 and the Additional Resources section at the back of this toolkit.

10. If I need additional assistance throughout this process, who can I contact?

If your worksite is located within Polk, Dallas, Marshall, Jasper, Warren, Union, Adair, or Madison County in Iowa, please contact the American Lung Association at **515-309-9507** for further assistance with this policy change.

If your worksite is located outside of this region, the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control can help you locate resources within your county. They can be reached at **515-281-6225**.

**The information provided in this document is not intended to be legal advice. Please consult an attorney for additional information.*



REASONS TO GO TOBACCO-FREE

THERE ARE THREE MAJOR REASONS TO IMPLEMENT A TOBACCO-FREE POLICY AT YOUR WORKSITE.



Reason #1:

Update existing smoke-free policies.



Reason #2:

Improve the health of all employees and visitors.



Reason #3:

Reduce employer costs..

"The benefits of being smoke-free are great - I feel better, breathe easier and am saving almost \$125 a month by not buying cigarettes."

- Mark Watson, GuideOne Insurance

REASONS TO GO TOBACCO-FREE

Reason # 1: Update Existing Smoke-free Policies



Tobacco-free policies go beyond simply stating that smoking is prohibited in buildings or on the grounds. A comprehensive tobacco-free policy prohibits the use of all tobacco and tobacco-like products in company buildings, on company grounds, and in company owned vehicles.

A smoke-free policy eliminates the use of cigarettes and other smoked forms of tobacco. These other forms can include cigars, little cigars, cigarillo, pipes, and hookahs¹⁰. A tobacco-free policy will upgrade any smoke-free policies to also include other harmful tobacco products. Some of these products include: chewing tobacco, snuff, dip, snus, and electronic nicotine delivery systems (ENDS), such as electronic cigarettes. These products are not safe alternatives to cigarettes, as all tobacco products cause serious health problems². To ensure that smokers do not replace cigarettes with other tobacco products during work hours, it is important to implement a tobacco-free policy¹.

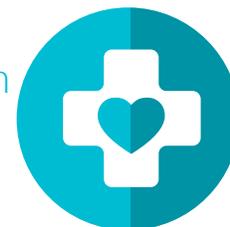
When updating or implementing a tobacco-free policy, businesses should also consider making their policy nicotine-free by including electronic cigarettes in their definition of tobacco products. Electronic cigarettes (also referred to as e-cigarettes or e-cigs) are considered tobacco products by Food and Drug Administration (FDA) standards¹¹. E-cigarettes are designed to produce an aerosol that contains

nicotine and other toxic chemicals¹². These products are battery operated, vary in appearance, and little is known regarding the extent of the health problems that these products could create¹¹. For current information on e-cigarettes, please contact the American Lung Association in Iowa.

It is important to note that a nicotine-free policy should make exceptions for the use of FDA approved nicotine replacement therapies that are used for the purpose of tobacco-use cessation. There are 7 FDA approved medications for tobacco cessation¹³⁻¹⁴. These come in the forms of patches, gums, nasal sprays, inhalers, lozenges, and prescription medications¹³⁻¹⁴. Electronic cigarettes are not approved as a cessation method¹⁵.

For more information on the various forms of tobacco, see the Tobacco Products 101 fact sheet on the next page.

Reason #2: Improve the Health of all Employees and Visitors



More people in the United States die prematurely due to tobacco use than any other cause¹⁶. Approximately 480,000 Americans and 5,100 Iowans die each year as a result of smoking and exposure to second-hand smoke¹⁶⁻¹⁷. Implementing a tobacco-free policy at your worksite can help tobacco users quit and extend their lives.

“As a medical and health sciences university, we are committed to improving the health of our community, so going tobacco-free in 2006 was not a difficult decision. By eliminating tobacco on college and university campuses we can protect the health of a large number of students, faculty, staff and visitors.”

- President Angela Walker Franklin, Des Moines University

TOBACCO PRODUCTS 101



Cigarettes: Tobacco rolled into a paper wrapping. The smoke produced by cigarettes contains 7,000 chemicals. Seventy of these chemicals have been proven to cause cancer.

Light Cigarettes: These may be labeled “low-tar,” “mild,” “light,” or “ultra-light.” In 2010, the use of this terminology in labeling was banned. These are not a safer alternative to regular cigarettes.

Cigars, Cigarillos, and Little Cigars: These are bundles of dried and cured tobacco that are rolled in a paper wrapping. These could be flavored, making them appealing to youth and young adults. These are not a safe alternative to cigarettes.

Hookah: These products allow for the inhalation of smoke from flavored tobacco products. Also referred to as water pipes, hookahs are not a safe alternative to other forms of tobacco.

Menthol Cigarettes: These are cigarettes that contain a minty flavoring. These are not also not a safe alternative to regular cigarettes.

Snuff: A dry form of tobacco that can be inhaled through the nose. This is not a safe alternative to smoking.

Electronic Cigarettes (e-cigs): These products produce an aerosol of nicotine and other chemicals that are inhaled. They can look like traditional cigarettes, cigars, or even pens. These are particularly dangerous because as of early 2015, they have not been regulated by the FDA. These are not safe alternatives to cigarettes and are not approved for tobacco-use cessation. For information on FDA approved tobacco-cessation medications, please see page 29.

Chewing Tobacco: A smokeless tobacco that users typically place between their cheek and gums. Tobacco juices are usually spit out, but some users may swallow these juices. This is not a safe alternative to smoking.

Snus: Moist snuff that is placed in a small pouch and placed between the cheek and gums. This product does not require the user to spit. This is not a safe alternative to smoking.

Dissolvable products: lozenges, orbs, strips, and sticks that can be consumed similarly to candy or other dissolvable food item. These products also do not require any form of spitting. These products are not a safe alternative to smoking.

Source: <http://betobaccofree.hhs.gov/about-tobacco/index.html>

REASONS TO GO TOBACCO-FREE

Current Tobacco Use in the United States and Iowa

In 2013, 19.5% of Iowa adults reported being current smokers¹⁸. This is slightly higher than the national rate of 19.0%¹⁸. In addition to cigarette smoking, 4.9% of Iowa adults used chewing tobacco, snuff, or snus¹⁸. This is higher than the national level of 4.2%¹⁸.

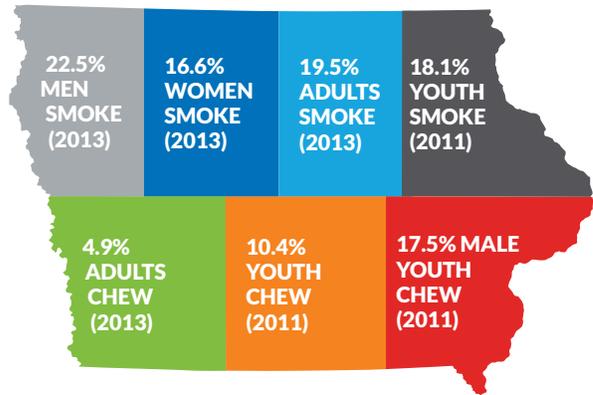
Tobacco use in youth is a cause for concern as well. In 2011, 25.3% of Iowa high school students reported they were current users of a tobacco product (cigarettes, smokeless tobacco, or cigars)¹⁹. This was higher than the national level of 23.4%¹⁹. Iowa high school students reported the same level of cigarette smoking as the nation, with 18.1% reporting they were current smokers at the time of the survey¹⁹. In Iowa, this translates to 30,700 students¹⁷.

In addition to smoking, 10.4% of Iowa high school students reported being users of smokeless tobacco products such as chewing tobacco, snuff, or dip¹⁹. When looking at only male high school students in Iowa, this number increased to 17.5%¹⁹. Iowa fares much worse than the nation on this measure, as only 12.8% of high school males report smokeless tobacco use nationwide¹⁹.

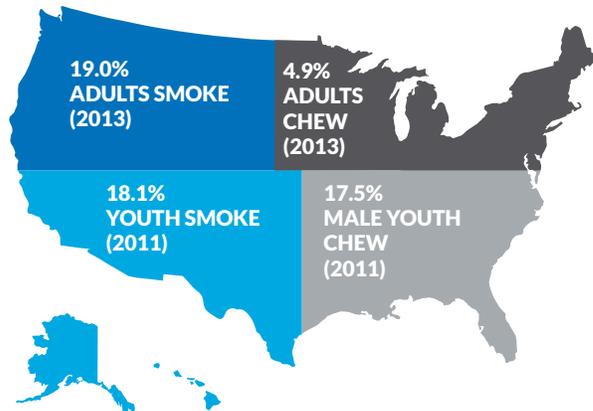
Consequences of Tobacco Use

In 1964, the Surgeon General of the United States released a report stating that smoking cigarettes is a cause of both lung cancer and chronic bronchitis²⁰. Today, more men and women die of lung cancer than any other cancer²¹. In Iowa, an estimated 1,770 people will die from cancers of the lung and bronchus in 2015²². Smoking increases a man's risk of dying from lung cancer by 80% and a woman's risk by 90%²³. The effects of tobacco use do not end at lung cancer. Tobacco users can have negative health effects in almost every organ of their body³.

IOWA TOBACCO USE



NATIONAL TOBACCO USE

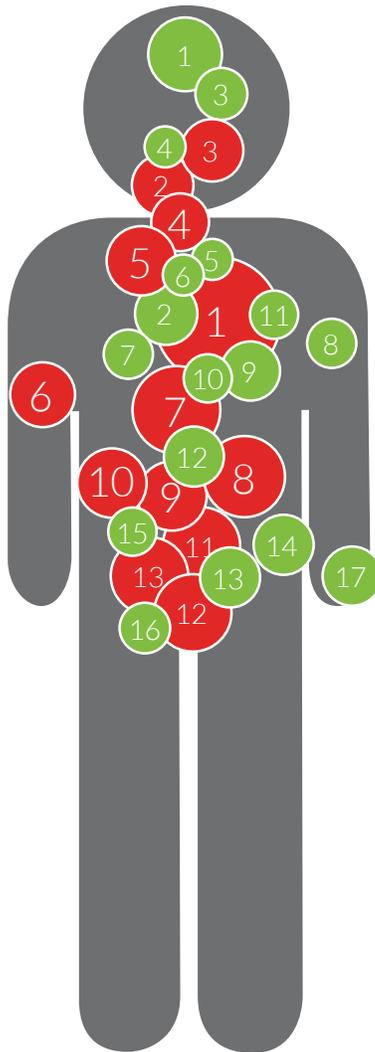


“During our efforts to establish a tobacco-free work environment, we began to realize the important significance and far-reaching impact this initiative will have on the lives of our employees, their families, our clients, and the communities we serve across Iowa.”

-Dan Dean, MPA, Lutheran Services in Iowa, Director of Capacity Development

Tobacco use effects almost every part of the body

TOBACCO USERS ARE AT AN INCREASED RISK FOR A LONG LIST OF HEALTH CONDITIONS.



Tobacco use has been proven to cause the following cancers¹⁶:

1. Lung, Trachea, and Bronchus Cancer
2. Oropharynx Cancer
3. Cancers of the Lip and Oral Cavity
4. Laryngeal Cancer
5. Esophageal Cancer
6. Acute Myeloid Leukemia
7. Stomach Cancer
8. Liver Cancer
9. Pancreatic Cancer
10. Kidney Cancer
11. Cervical Cancer
12. Bladder Cancer
13. Colorectal Cancer

Beyond cancer, tobacco-use has also been proven to cause¹⁶:

1. Strokes
2. Coronary heart disease
3. Vision loss due to cataracts and macular degeneration
4. Periodontitis (serious gum infection that can end in tooth loss)
5. Aortic aneurysm
6. Early abdominal atherosclerosis
7. Pneumonia
8. Atherosclerotic peripheral vascular disease
9. Chronic obstructive pulmonary disease (COPD)
10. Tuberculosis
11. Asthma
12. Diabetes
13. Reproductive health issues
14. Hip fractures
15. Ectopic pregnancy
16. Erectile dysfunction
17. Rheumatoid arthritis
18. Immune dysfunction
19. Heart Disease

"My father is another reason that made me decide to quit. He passed away five years ago from lung cancer, so I wanted to do it for him and for my mother, so she wouldn't have to see another family member suffer like my father did. As a result of my decision and success, my wife has quit smoking and two of my children and my brother are now on Chantix. My goal is to have my family smoke-free by this summer."

-Eugene D. Wheeler Jr., GuideOne Insurance

REASONS TO GO TOBACCO-FREE

The Effects of Secondhand and Thirdhand Smoke

Non-smokers that are exposed to cigarette smoke can also suffer negative health effects. Secondhand smoke has been proven to cause strokes, lung cancer, and coronary heart disease in adult non-smokers¹⁶. Pregnant women exposed to secondhand smoke have an increased risk of delivering a low birth weight infant¹⁶. It is estimated that 42,000 Americans die each year from secondhand smoke exposure, with the majority of these being from lung cancer and heart disease^{16, 24}.

Secondhand smoke also causes numerous health issues for infants and children. Infants that are exposed to secondhand smoke have an increased risk of sudden infant death syndrome (SIDS)¹⁶. Children exposed to secondhand smoke are also more likely to suffer from ear infections, coughing, sneezing, bronchitis, pneumonia, and shortness of breath²⁵⁻²⁶. Children with asthma that are exposed to secondhand smoke are more likely to suffer from severe asthma attacks²⁵⁻²⁶.

Individuals are exposed to thirdhand smoke when they are forced to inhale the chemicals from tobacco products that remain on a smoker's clothing, hair, or skin²⁷. The chemicals from tobacco products that cause thirdhand smoke can also linger on carpets, furniture, window treatments, within vehicles, and on various other surfaces²⁷. Workers that take smoke breaks and then return to the office can expose their coworkers to this deadly mix of chemicals.

Tobacco-free Policies Help People Quit

According to the Community Preventive Services Task Force, smoke-free worksite policies "...reduce consumption by continuing smokers, increase smoking cessation attempts, increase the number of smokers who successfully quit, and reduce the prevalence of tobacco use among workers⁵."

This is especially important because smokers that quit before age 30 can almost entirely eliminate their

risk of dying prematurely of a smoking-related cause and smokers that quit before age 40 reduce their risk of early death by 90%^{16,28}. Beyond this, smokers who quit at any age will see health benefits and quality of life improvements²⁸.

WHEN SMOKERS QUIT 

20 MINUTES	Heart rate drops
12 HOURS	Carbon monoxide level in blood drops to normal.
2-12 WEEKS	Heart attack risk begins to drop. Lung function begins to improve.
1-9 MONTHS	Coughing, sinus congestion, fatigue and shortness of breath decrease.
1 YEAR	Increased risk of coronary heart disease is half that of a smoker's.
5 YEARS	Stroke risk is reduced to that of a nonsmoker's five to 15 years after quitting.
10 YEARS	Lung cancer death rate is about half that of a continuing smoker's. Risk of cancer of the mouth, throat, esophagus, bladder, kidney and pancreas decrease.
15 YEARS	Risk of coronary heart disease is back to that of a nonsmoker's.

Many recent studies have been able to show that implementing tobacco-free or smoke-free policies at worksites help people quit!

- In 2007, the University of North Carolina Health Care System implemented a tobacco-free worksite policy. Nearly 66% of tobacco users reported making a quit attempt in the preparation for and aftermath of this policy change. This was much higher than the state average for quit attempts of 56.8%. Sixty percent of those that reported quit attempts or cessation success following the policy change indicated that the policy helped them make this life change⁶.
- A New York hospital implemented a smoke-free campus policy in July of 2006. Prior to the policy implementation in 2005, 14.3% of hospital employees reported smoking. In 2007, following the implementation of the policy, only 9% of employees reported themselves as smokers⁴.
- A study of a worksite with over 3,000 adults in South Korea found that smoking decreased by 6.4 percentage points after implementing a smoke-free policy. For smokers that did not quit, they averaged 3.7 fewer cigarettes each per day⁷.

Tobacco-free and smoke-free worksite policies have the ability to help tobacco-users quit.

Reason # 3: Reduce Employer Costs

In Iowa, \$1.28 billion per year is spent on healthcare costs as a direct result of smoking and \$1.21 billion is lost in productivity¹⁷. Tobacco users cost employers in terms of increased absenteeism, reduced productivity as a result of nicotine addiction, missed work time due to smoke breaks, and increased healthcare expenses⁸.



WHAT TOBACCO USERS **COST** EMPLOYERS

2.6 DAYS Increased Absenteeism

It is estimated that smokers miss approximately 2.6 more days of work than their nonsmoking peers each year⁸.

1% LESS Reduced productivity as a result of nicotine addiction

A smoker can start to feel withdrawal symptoms within 30 minutes of their last cigarette/tobacco use¹⁶. These withdrawal symptoms, as a result of nicotine addiction, can interfere with an employee's ability to effectively perform his or her job. It is estimated that smokers are 1% less productive than nonsmokers⁹. In a worksite with many smokers, these productivity losses can add up!

5.5 DAYS Missed work time due to smoke breaks

While every person is different, a recent study estimated that the average smoker takes two 15 minute smoke breaks per day in excess of regularly scheduled and allowed breaks⁸. This results in 5 ½ days per year of paid time that an employee is not working.

8% HIGHER Increased healthcare expenses

A recent study estimated that the healthcare expenses of a smoker are approximately 8% higher than the expenses for a nonsmoker⁸. For employers that self-insure their employees, this can drastically increase the total amount spent on healthcare costs. Even employers who purchase private insurance are likely to see an increase in healthcare expenses due to their smoking employees⁸. Smokers are likely to have more insurance claims, and this could require employers to pay higher premiums⁸.

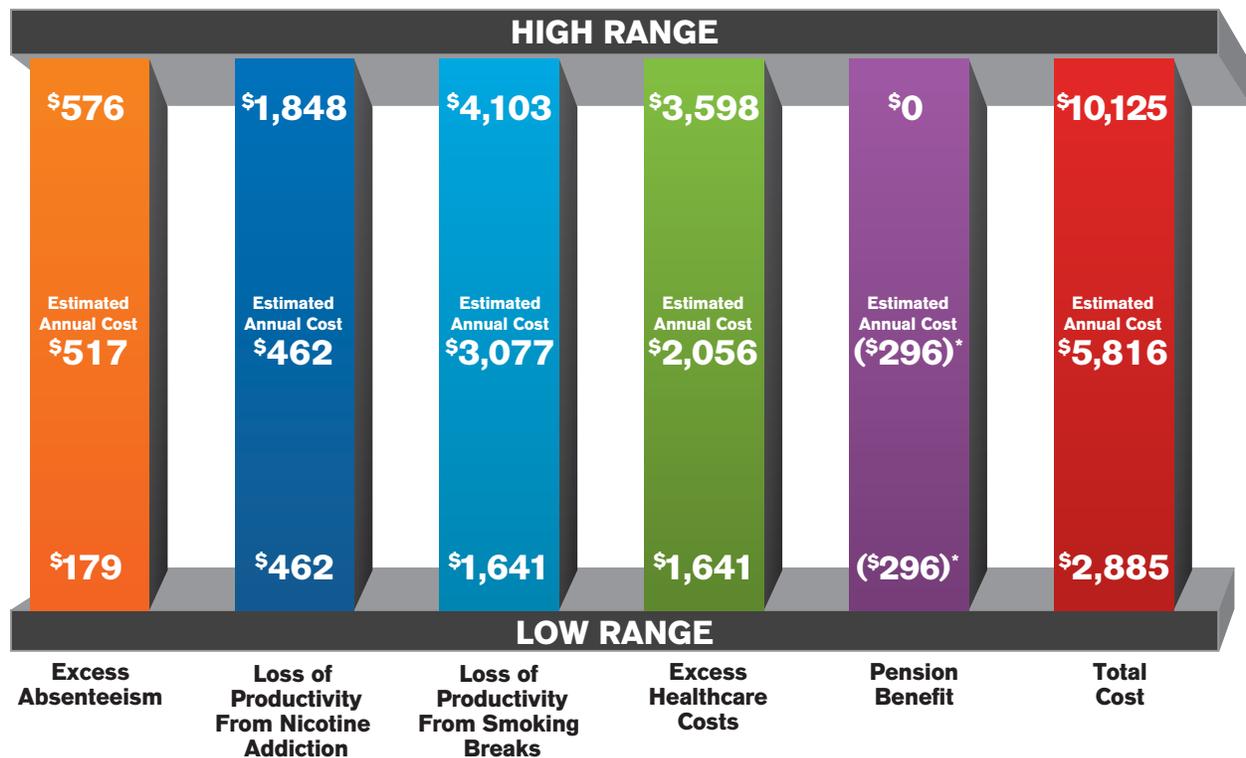
REASONS TO GO TOBACCO-FREE

A recent study found that for every smoker that quits, an employer can save between **\$2,885 and \$10,125 annually**⁸. The breakdown of these potential savings can be seen in the table below. It is clearly evident that implementing a tobacco-free worksite policy can reduce costs for your business.

You can easily estimate the number of smokers at your worksite, the productivity losses of your business due to tobacco use, your excess healthcare costs due to smoking, and the total amount of money your company could save by helping all tobacco using employees quit. Just fill in the simple template on the following page.

By implementing a tobacco-free worksite policy, you could help your employees quit. This life change will not only improve their health and quality of life, it will also save you money!

Total Annual Excess Cost of a Smoking Employee to a Private Employer

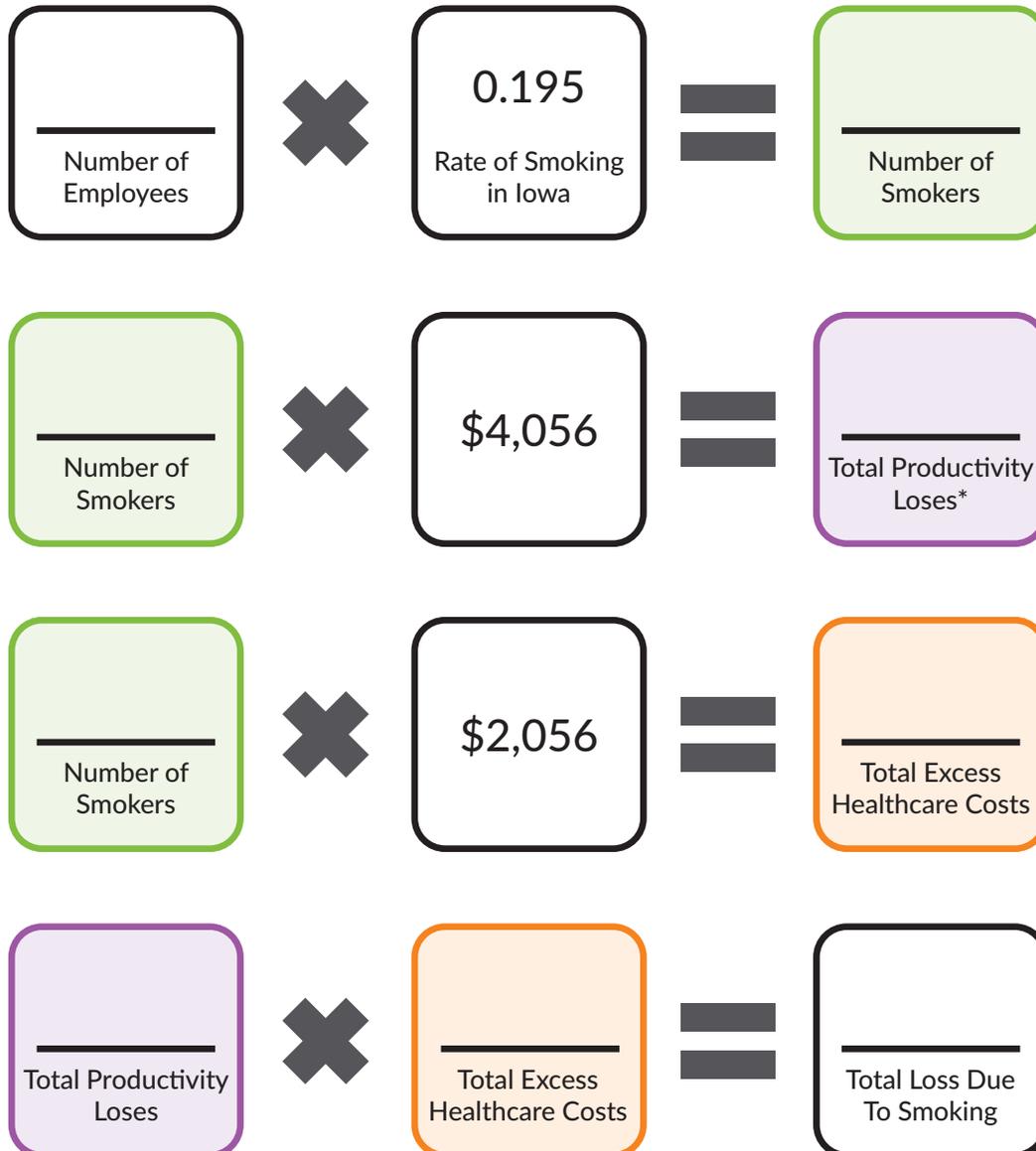


*For employers with defined-benefit plans.

“My decision to quit smoking resulted after my company announced that it was going tobacco-free. I knew I wouldn’t be able to quit cold turkey, so I started taking the drug, Chantix. After only one week of being on the drug, I was entirely smoke-free and have never looked back.”

- Eugene D. Wheeler Jr., GuideOne Insurance

ESTIMATING THE ANNUAL COST OF A TOBACCO USING EMPLOYEE⁸



**Productivity losses include costs associated with increased absenteeism, reduced productivity as a result of nicotine addiction, and missed work time due to smoke breaks.*

REASONS TO GO TOBACCO-FREE

Tobacco-free Worksites in Central Iowa

Below is a list of just some of the worksites in Central Iowa that have made the important decision to make their worksites tobacco-free. The American Lung Association in Iowa is continuously helping worksites implement tobacco-free policies.

If you already have a tobacco-free policy, great! We are able to offer your worksite free cessation resources, as well as advertise your worksite via our list below.

Accumold	Moehl Millwork
Affiliates Management	NCMIC
Ankeny Fire Department	On With Life
August Home Publishing	Optimae Life Services
Broadlawns	Perry Lutheran Home
Childserve	Planned Parenthood of the Heartland
DART	Prairie Vista Village
Des Moines University	Prelude Behavioral Services
Emerson-Fisher	Primary Health Care
Employee & Family Resources	Proteus, Inc.
Eyerly Ball	Southern Prairie YMCA
Greater Des Moines YMCA	Spring Valley Retirement Center
Greater Regional Medical Center	Spurgeon Manor
GuideOne Insurance	Storey Kenworthy
HIRTA Public Transit	UnityPoint Health
Holmes-Murphy	Urbandale Health Care Center
Iowa Correctional Institution for Women	Wellmark Blue Cross and Blue Shield
Kemin Industries Inc.	Wesley Life
LifeWorks	Windsor Windows & Doors
Members Group	Youth Emergency & Shelter Services of Iowa
Madison County Healthcare System	Youth & Shelter Services
Marshalltown YMCA	
Mercy Medical	

"It is our belief that by eliminating tobacco use at our facilities, we are providing a healthy work environment for our employees, a healthy environment of care for our patients and families, and we are contributing to reducing the health care costs associated with tobacco use."

- David H. Vellinga, Mercy Medical Center - Des Moines, President and CEO



IMPLEMENTING A TOBACCO-FREE POLICY

So far, we have given you three very important reasons to consider making your worksite tobacco-free;

to upgrade any smoke-free policies to tobacco-free policies, to improve the health of your employees, and to save you money. After deciding that a tobacco-free worksite policy is right for your business and your employees, it is time to begin the policy implementation process. This may seem overwhelming at first, but the following pages of this toolkit will guide you through the following steps.



- 1 Sample Tobacco-free Policy Implementation Timeline
- 2 Develop Messaging on Why you are Implementing this Policy
- 3 Assemble a Tobacco-free Committee or Workgroup
- 4 Select a Timeline and Implementation Date
- 5 Assess Tobacco Use at the Worksite
- 6 Tobacco-free Policy Employee Survey
- 7 Develop a Comprehensive Policy
- 8 Review Insurance Change Options
- 9 Determine Cessation Options
- 10 Determine Enforcement Strategies
- 11 Develop and Disseminate Educational Materials
- 12 Install Adequate Signage and Remove any Smoking Huts, Ashtrays, and Receptacles
- 13 Implementation Day Celebration
- 14 Evaluate Effectiveness of Policy

Please remember that each worksite is unique and has different needs while going through this process.

Some suggestions within this toolkit may not be applicable or feasible for your situation. Focus on what is best for your worksite and employees. If you need additional assistance in determining the best steps and timeline for your worksite, there are free resources available to you.

If your worksite is located within Polk, Dallas, Marshall, Jasper, Warren, Union, Adair, or Madison County in Iowa, please contact the American Lung Association at **515-309-9507** for further assistance with this policy change.

If your worksite is located outside of this region, the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control can help you locate resources within your county. They can be reached at **515-281-6225**.

IMPLEMENTING A TOBACCO- FREE POLICY



Sample Tobacco-free Policy Implementation Timeline

The Implementing a Tobacco-free Policy section of this toolkit begins with a list of activities. This list of activities is presented within a six month implementation timeline. Each of these activities will be described in detail in the following pages, offering examples and helpful hints along the way. The shaded boxes of the timeline indicate suggested months for each activity to occur. For more information on determining the best timeline for your worksite, see page 20 of this toolkit.

LIST OF ACTIVITIES						
MONTH 1	Develop messaging on WHY you are implementing this policy	Assemble a tobacco-free committee or workgroup				
MONTH 2	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Select a timeline and implementation date	Assess tobacco use at the worksite		
MONTH 3	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Review insurance change options	Determine enforcement strategies	Develop and disseminate educational material	Determine and promote cessation options
MONTH 4	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Determine enforcement strategies	Develop and disseminate educational material		
MONTH 5	Develop a comprehensive tobacco-free policy	Determine enforcement strategies	Develop and disseminate educational material	Install adequate signage and remove any smoking huts, ashtrays, and receptacles		
MONTH 6	Determine enforcement strategies	Develop and disseminate educational material	Implementation day celebration			
ON GOING ACTIVITIES	Develop and disseminate educational material	Evaluate effectiveness of policy				

"I quit on July 11, 2006, during a vacation with my children and grandchildren. The key to becoming successful at quitting is to have the right attitude to really want to quit."

- Tom McLean, Mercy Clinics, Inc.

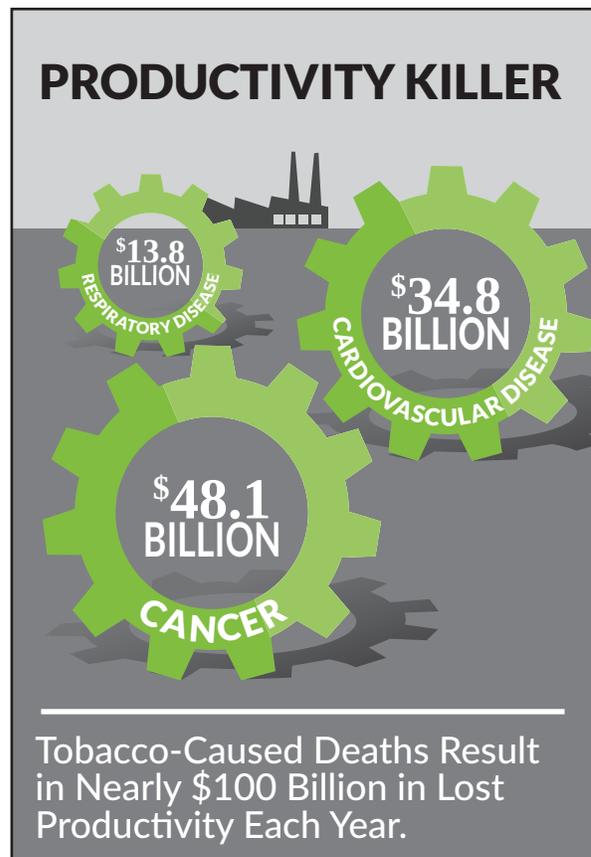
Develop Messaging on Why you are Implementing this Policy

It is important to develop messaging on why these changes will be taking place very early in the policy implementation process. By doing this, you can ensure that a positive and consistent message is sent to all impacted by these changes. Notifying employees, clients, vendors, neighbors, and other community members early in the process allows them to express their opinions, get involved in the process, and prepare for the changes. The purpose of this messaging is to state the employer's intention to develop and implement a tobacco-free worksite policy. This message should either come from company leadership or be accompanied by a letter of support from this leadership.

This message will be unique to each worksite. However, below are some examples of things to include:

- Why you have decided to go tobacco-free.
- How a tobacco-free policy aligns with your organization's vision, mission, and strategic goals.
- How a tobacco-free policy can improve the health of employees and visitors.
- The anticipated policy implementation date (if known).
- The organization's plan for proceeding (using committees and subcommittees).
- Ways for employees to provide comments and concerns.
- Ways for employees to get involved in the policy implementation process.
- Where employees can find additional information and look for updates.

An example of the messaging used by Mercy Medical Center in Des Moines when implementing their tobacco-free worksite policy can be found in the additional resources section of this toolkit.



Source: American Legacy Foundation

"At GuideOne Insurance, our employees are one of the company's greatest assets and competitive strengths. Because we care about the overall wellbeing of our employees, we felt that becoming a tobacco-free company would provide a healthier work environment for our team members, while reducing the health care costs associated with tobacco use."

-Jim Wallace, GuideOne Insurance, Chairman, President and CEO

IMPLEMENTING A TOBACCO-FREE POLICY

Assemble a Tobacco-free Committee or Workgroup

Depending on the size of your worksite, a tobacco-free committee or workgroup may be a crucial part of your implementation process. This committee can take responsibility for many of the activities. Committee members can also provide ongoing support after the implementation has occurred.

Some large worksites may choose to break their committee into sub-committees based on the skills and expertise of the people involved. For example, a worksite could assemble an education subcommittee, a marketing subcommittee, and a facilities subcommittee. These could all be overseen by a steering or advisory committee. If this structure is used, it is highly recommended that current and former tobacco users be included within each subcommittee. An example of the responsibilities of various subcommittees can be found on page 19.

Below is a list of individuals you may want to involve on a committee.

- Human resources staff
- Facilities and operations staff
- Current and former tobacco users
- Any union or labor group representatives
- Communications/public relations representatives
- Employee benefits specialists
- Occupational health and safety representatives
- Managers, supervisors, department heads, others in leadership roles
- Employee wellness staff
- Opinion leaders within the worksite
- Security staff
- Policy/legal representatives

In a smaller business, the committee may be made up of only a few members. These individuals could include a human resources representative, a manager, and a business owner. While subcommittees are not necessary, the tasks on page 19 can provide a good example of activities to include throughout the policy implementation process.

While it is encouraged to develop a committee to gather input and provide support to the policy implementation process, some worksites may determine this is not feasible. It is perfectly acceptable to not have a committee. You might find it best to have your Wellness Department and/or Human Resources staff take the lead on this initiative. If that is the case, those individuals can easily take care of the responsibilities on the following page.



For every smoking employee that quits, an employer could save an average of \$4,056 annually due to increased productivity⁸.

Example of Responsibilities by Committees and Subcommittees*

*Please disregard if you have decided a committee is not appropriate for your worksite.

Steering/Advisory Committee

- Set policy implementation date
- Create overall timeline
- Determine subcommittees needed
- Select subcommittee chairs and help recruit participants
- Approval and oversight of committee activities
- Update affiliate office managers on progress of policy implementation
- Education Subcommittee
 - Create education subcommittee timeline
 - Develop the tobacco-free policy
 - Develop educational materials about the policy
 - Identify community resources and decide how best to utilize them
- Provide resources for those who want to quit tobacco
- Work with public relations/marketing subcommittee to address communication to visitors

Public Relations/ Marketing Subcommittee

- Create public relations/marketing subcommittee timeline
- Create theme/campaign/logo
- Create messaging
- Create internal/external signage
- Media relations/press releases
- Business-to-business communication

Facilities Subcommittee

- Create facilities subcommittee timeline
- Remove any smoking huts, ashtrays and receptacles
- Install signage on property

Approximately 480,000 Americans and 5,100 lowans die each year as a result of smoking and exposure to second-hand smoke¹⁶⁻¹⁷.



IMPLEMENTING A TOBACCO-FREE POLICY



Select a Timeline and Implementation Date

Many businesses choose to make this policy change over a six month or one year time frame. However, some may require more or less time. The timeline for implementing a tobacco-free worksite policy is influenced by the size of the worksite, the number of individuals involved in making decisions related to the policy, the number of employees and locations that will be affected, the anticipated public impact, and various other factors.

This six month timeline has been provided as a guide. However, blank six month and twelve month timelines have also been provided in the Additional Resources section at the back of this toolkit. These blank timelines can be filled in according to the timeline that works best for your business.

LIST OF ACTIVITIES						
MONTH 1	Develop messaging on WHY you are implementing this policy	Assemble a tobacco-free committee or workgroup				
MONTH 2	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Select a timeline and implementation date	Assess tobacco use at the worksite		
MONTH 3	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Review insurance change options	Determine enforcement strategies	Develop and disseminate educational material	Determine and promote cessation options
MONTH 4	Develop messaging on WHY you are implementing this policy	Develop a comprehensive tobacco-free policy	Determine enforcement strategies	Develop and disseminate educational material		
MONTH 5	Develop a comprehensive tobacco-free policy	Determine enforcement strategies	Develop and disseminate educational material	Install adequate signage and remove any smoking huts, ashtrays, and receptacles		
MONTH 6	Determine enforcement strategies	Develop and disseminate educational material	Implementation day celebration			
ON GOING ACTIVITIES	Develop and disseminate educational material	Evaluate effectiveness of policy				



Assess Tobacco Use at the Worksite

During the early stages of this implementation process, it may be beneficial for committee members to conduct a broad assessment of tobacco use at the worksite. Gathering additional information now will allow you to get a better picture of the current state of tobacco use with your employees and prepare you for future evaluation of the policy (if you choose to do so).

Please know that while these suggestions can improve the tobacco-free worksite policy implementation process, they are not required. Conduct the strategies that are applicable to your worksite and possible with your resources. American Lung Association staff members are happy to meet with you in person to discuss this process and help determine what is best for your worksite.

Here are some ideas of information to gather at this point in the process:

1. Research what your current policies are in relation to smoking and tobacco use. If changes have occurred to these policies in recent years, see if any information exists related to the policy change process. This may better inform you on the steps you should take and any issues that you may encounter²⁹.
2. Research what tobacco cessation options are currently available to your employees. This includes an analysis of current insurance benefits for coverage of cessation counseling and/or medications²⁹.
3. If applicable, meet with any union representatives to determine if there are any contract issues that may impact the policy implementation process²⁹.
4. Ask human resources if they can provide the number of tobacco related complaints they have received in recent years. While the nature of the complaints may be confidential,

a general number can provide an indication of the need for this policy change²⁹.

5. Designate a committee member to perform a walking assessment of the entire worksite at various times throughout the day. On this walk, make note of the number and location of people seen using tobacco products on the property. Also look for cigarette butts or other tobacco related waste on the property. By conducting this assessment at various times throughout the day (in the morning, around lunch, and mid-afternoon), you can get an idea of the amount of tobacco use taking place during the workday²⁹.
6. Conduct an anonymous and confidential survey* of employees to determine the number of tobacco users at your worksite, the types and amounts of products they use, their interest in quitting, the cessation options they find most appealing, and their feelings toward a tobacco-free campus. This survey could be administered through email, using web-based survey software, or with paper copies that can be deposited anonymously in a collection box. This could also be incorporated into any regularly scheduled employee health assessment. Regardless of how survey data is collected, make sure to seek permission and follow any data collection rules that may exist in your workplace²⁹.

Tobacco-free Policy Employee Survey

*An example of an employee assessment survey can be seen on the following page. This survey is also located within the Additional Resources section at the back of this toolkit. Please feel free to remove this page from the toolkit, make copies, and use as a survey tool for your worksite. You may also choose to make a survey that is personalized for your worksite. If you choose to create your own survey, please feel free to use the questions provided as a guide.

IMPLEMENTING A TOBACCO- FREE POLICY

Tobacco-free Policy Employee Survey

Our company is considering introducing a tobacco-free worksite policy that acknowledges the needs of both tobacco users and non-tobacco users. Please take a few minutes to complete this survey.

Your response is completely confidential. Please do not give your name on this form.

1. Do you currently use tobacco or tobacco-like products? (circle one) Yes No*
***If no, please skip to question 7.**

2. If yes, please indicate what form(s)? (circle all that apply)
 - a. Cigarettes
 - b. Little cigars or cigarillos
 - c. Hookahs
 - d. Chewing tobacco, snuff, dip, or snus
 - e. Dissolvable products (lozenges, orbs, sticks, strips)
 - f. E-cigarettes
 - g. Other _____

3. If you smoke cigarettes, approximately how many cigarettes do you smoke per day? (circle one)
 - a. Less than 5
 - b. 5 to 10
 - c. 11 to 20
 - d. 21 to 40
 - e. More than 40

4. If you use smokeless tobacco, how many cans/tins/pouches/etc. do you use per week?
 - a. Less than 1
 - b. 1 to 2
 - c. 3 to 4
 - d. More than 4

5. If you use an electronic nicotine delivery system (e-cigarette, personal vaporizer, vape pen, e-hookah, etc.) do you also use another form of tobacco? (circle one) Yes No

IMPLEMENTING A TOBACCO- FREE POLICY

6. If you are a tobacco user, are you interested in quitting? (circle one) Yes No Maybe

7. If you are interested in quitting, which of these options would you consider to help you quit? (circle all that apply)

- a. I am not interested
- b. Telephone counseling
- c. Online counseling
- d. Group counseling at work
- e. Individual counseling at work
- f. Time off to attend group counseling away from work
- g. Nicotine replacement therapy medications
- h. Cash incentive or fee reimbursement for attending counseling
- i. Other service to help you quit (please list) _____

8. Are you ever bothered by tobacco, secondhand smoke, or the scent of smoke on hair or clothes while at work? (circle one) Yes No

a. If yes, please comment: _____

9. Would you be in support of a tobacco-free worksite policy? (circle one) Yes No

a. Please provide any additional comments or concerns about this company implementing a tobacco-free worksite policy: _____

IMPLEMENTING A TOBACCO- FREE POLICY



Develop a Comprehensive Policy

A comprehensive tobacco-free worksite policy includes all tobacco and “look-a-like” products and encompasses the entire property. Tobacco and tobacco-like products that should be listed as prohibited substances while on the worksite grounds include but are not limited to:

- Cigarettes
- Electronic cigarettes
- Cigars
- Chewing tobacco
- Snuff
- Pipes
- Dissolvable tobacco products
- Snus

Locations that this policy should apply to include but are not limited to:

- all buildings (including those owned, leased, rented, or maintained by your organization)
- all property grounds
- parking lots and ramps (including while inside privately owned vehicles)
- plazas and contiguous sidewalks within 300 feet of the property
- company owned vehicles

People that would be covered under a comprehensive tobacco-free policy include all those that step onto the property. These include but are not limited to:

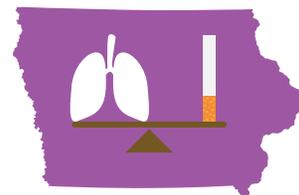
- Employees
- Visitors
- Patients (for healthcare facilities)
- Vendors
- Clients
- Contract workers
- Volunteers

Other important things to include in a comprehensive tobacco-free policy include:

- The sale or distribution of any tobacco products on the property is prohibited.
- The procedures for the implementation of the policy.
- The effective date for this policy.
- Any new rules or regulations related to hiring new employees.
- Plans for enforcement of the policy and consequences for violations.
- Any new cessation benefits or options that will be made available to employees.

A model tobacco-free worksite policy can be seen on the following page and within the Additional Resources section of this toolkit. If interested in an electronic version, please contact the American Lung Association at **515-309-9507**.

An estimated 1,770 Iowans will die from cancers of the lung and bronchus in 2015²².



Model Tobacco-free Workplace Policy

Purpose:

Tobacco use is widely recognized as a major preventable cause of many diseases in smokers and nonsmokers alike. As X is committed to providing a safe, healthy, comfortable and productive environment for all who visit or work in and around our facilities, X has been designated as a tobacco-free institution. The success of the policy will depend upon the thoughtfulness, consideration and cooperation of all tobacco users and non-users alike.

Policy:

Smoking or other use of tobacco or tobacco-like products (examples include but are not limited to cigarettes, electronic cigarettes, cigars, chewing tobacco, snuff, pipes, snus, etc.) during business hours or on company property, at any time, is strictly prohibited. This includes any emerging tobacco product or simulated smoking device. This also includes all nicotine products not regulated or approved by the Food and Drug Administration (FDA). Prohibition includes any and all buildings, owned, leased, rented and areas maintained by X; any grounds, parking lots, ramps, plazas or contiguous sidewalks (within 300 feet); and in vehicles owned or leased by X. Use of tobacco or tobacco-like products in any vehicle of any employee, contractor, vendor or visitor when on X property is prohibited. This policy applies to all off-campus sites including clinics, office buildings or any X programs operated offsite. The distribution or sale of all tobacco products is prohibited.

There are no designated smoking areas within any X location or on any grounds. Ash receptacles and spittoons are not available on company property. All X employees, while representing the company, shall not use tobacco products. Adherence to this policy requires that tobacco users refrain from using these products while on campuses and when at work/on company business.

All employees, visitors, vendors, volunteers or any person coming on grounds or to the facility must comply with this policy.

This policy is in compliance with regulations and directives of the Joint Commission standards.

The policy complies with the Iowa Smokefree Air Act in the Iowa Code.

Responsibility:

All persons coming onto X property and/or entering the buildings are required to comply with this policy. All employees share in the responsibility for enforcing the policy.

Procedures:

- The policy will be communicated through WEBSITE, intranet, job postings, media coverage and signage at each location.
- All persons are asked to extinguish and/or cease from using all tobacco or tobacco-like products before coming onto properties as noted above.
- Those who smoke or use tobacco products shall ensure that the odor of tobacco is not present when on X property.

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- Visitors or other non-employees will be politely informed of any policy violation and provided with information explaining the policy in a supportive and educational manner. Continued non-compliance may result in Security escorting the individual from the property.
- Applicants and interviewees will be advised that X is a tobacco-free worksite. As a part of the application process each applicant will acknowledge in writing that they understand X's policy and attest that they do not use tobacco as a requirement for further consideration.
- Employees are advised of the provisions of this policy during new employee orientation.
- All employees are authorized and encouraged to communicate and reinforce this policy with courtesy and diplomacy to any person whom they see violating the policy.
- Supervisors are responsible to ensure that employee violations of the Tobacco-free Worksite Policy are administered promptly and consistently.
- Employees, spouses and domestic partners who wish to quit using tobacco will be given information on recommended tobacco cessation programs, alternatives to tobacco use (e.g. Nicotine Replacement Therapy) and/or materials.
- Employees who violate the policy will be subject to disciplinary action up to and including termination as per X's progressive discipline process.

Effective Date for Current Employees:

DATE

Employment Application Statement:

I acknowledge and understand that X is a tobacco-free employer and that I do not use tobacco or tobacco-like products as clearly defined in the Tobacco-Free Worksite Policy. I further understand that X is relying on my acknowledgment that I do not use tobacco or tobacco-like products as a condition of its consideration of my employment. I understand that false or misleading information given in my application, interview(s), or any supplemental information in the employment process may result in termination. I understand, also, that I am required to abide by all rules and policies of X.

Effective Date for All New Hires

All new hires must comply with the Tobacco-Free Worksite policy as of X.



Review Insurance Change Options

It is important to review your company's health insurance options as you develop a tobacco-free policy. Specifically, you will want to research any current proceedings that differentiate tobacco users from non-tobacco users on insurance premiums. You will also want to investigate the current benefits your company provides for tobacco cessation services. The transition to a tobacco-free environment may serve as encouragement for employees to quit. Offering tobacco cessation services can provide the assistance your employees need to be successful³⁰. To ensure this process runs smoothly, involving human resources representatives in the implementation process is crucial.

The Affordable Care Act and Tobacco Cessation

The Affordable Care Act mandates that most health insurance plans cover preventive services recommended by the United States Preventive Services Task Force. Tobacco cessation interventions are listed as preventive services.

To meet this requirement, plans must cover (without requiring any cost-sharing):

- Tobacco use screening
- At least two tobacco cessation attempts per year for tobacco users. Each cessation attempt includes:
 - a. Four cessation counseling sessions that are each at least 10 minutes in length (telephone, group, or individual counseling) and
 - b. A 90-day treatment regimen of all FDA approved tobacco-cessation medications when prescribed by a healthcare provider.

Source: <http://www.dol.gov/ebsa/faqs/faq-aca19.html>



Determine and Promote Cessation Options

The Centers for Disease Control and Prevention (CDC) has found that 68.8% of adult smokers are interested in quitting³¹. Tobacco cessation programs offered at worksites as part of a comprehensive tobacco-free policy can help tobacco users achieve this goal³. It is important to remember that tobacco users are addicted to nicotine; and this addiction is very difficult to overcome. Sensitivity to the needs of tobacco users is important as you provide resources to help them quit. There are many cessation program options that can help your employees quit. Some of these include³²:

- A doctor visit to provide advice about quitting
- Internet-based cessation counseling
- Group-based cessation counseling
- Nicotine replacement therapy and medications
- Telephone cessation counseling

While cessation counseling and nicotine replacement therapies have both been proven as effective ways to help tobacco users quit, research has found that individuals that receive counseling and medication support simultaneously are more successful in their quit attempts³³.

IMPLEMENTING A TOBACCO- FREE POLICY

In Iowa, there are many resources that employers can utilize to help their employees quit. These options include telephone and internet-based counseling through Quitline Iowa and the American Lung Association's Freedom From Smoking® group-based counseling.

Quitline Iowa: Telephone and Internet-based Counseling

Telephone-based quitlines are recommended by the Community Preventive Services Task Force based on strong evidence of effectiveness for tobacco cessation³⁴. Quitline Iowa provides individualized tobacco cessation counseling either by telephone or online. Quitline Iowa can provide support for users of all types of tobacco products and is available 24 hours a day, 7 days a week. The contact information for Quitline Iowa is:

Phone: 1-800-QUIT-NOW (800-784-8669)

Online: www.quitlineiowa.org

Quitlines are available through other states as well.



For worksite locations in multiple states, refer to the state health department for the state in question to locate local Quitline information. For more information on Quitline Iowa, please see the brochure in the Additional Resources section of this toolkit.

American Lung Association's Freedom From Smoking®: On-site Cessation Classes

Freedom From Smoking® is the American Lung Association's gold standard smoking cessation program. The program launched in 1975 and has been revised through the years to provide the most current cessation information. Freedom From Smoking® classes are run by a facilitator who guides the conversation. Participants learn tools and techniques for quitting tobacco and gain additional support and ideas from fellow participants.

The 8 session Freedom From Smoking® classes address:

1. benefits of quitting
2. how to deal with withdrawal/recovery symptoms
3. importance of social support
4. weight control
5. stress management
6. resisting the urge to use tobacco
7. relapse and success

Freedom From Smoking® also has an online alternative. This may be ideal for multiple worksite locations. This can be found at www.ffsonline.org.

For worksites that implement a tobacco-free policy or update an existing policy, and are located in our service area, Freedom From Smoking® is available at no cost. For more information, please contact the American Lung Association in Iowa.

"I'm proud to say that I haven't smoked since I quit on March 23, 2006. The cessation class helped tremendously, along with the prescription of Zyban."

- Sherry Anderson, Mercy Clinics, Inc.

Nicotine Replacement Therapy and other Cessation Medications

There are 7 FDA approved tobacco cessation medications¹³⁻¹⁴. Using nicotine replacement therapies in conjunction with individual or group-based counseling has been shown to increase the chances of successful cessation when compared to counseling alone³³. See the table below for a list of therapies and common brand names:

FDA Approved Tobacco Cessation Medications ^{13-14, 35}		
Method	Availability	Common Names
Nicotine Patches	Over the Counter	Nicoderm CQ, Nicotrol, Habitrol, Prostep
Nicotine Gum	Over the Counter	Nicorette
Nicotine Lozenges	Over the Counter	Commit
Nicotine Inhaler	Prescription	Nicotrol inhaler
Nicotine Nasal Spray	Prescription	Nicotrol NS
Bupropion SR	Prescription	Zyban®
Varenicline	Prescription	Chantix ®



Tobacco users may experience negative health effects in almost every organ of their body³.

IMPLEMENTING A TOBACCO- FREE POLICY

Incentives

Companies may wish to offer incentives to encourage employees to participate in tobacco cessation counseling activities or to reward employees who have successfully quit. We recommend rewarding employees for quitting. Below are some examples of incentives that a company could consider:

- Allowing cessation classes be held on the clock
- Reimbursing the employee for the cessation class if the employee successfully completes all sessions*
- Inviting employees with tobacco-using spouses, neighbors, or friends to participate in any provided cessation classes
- Providing nicotine replacement therapy to employees for a set number of weeks, a set number of months, or a specific dollar amount*
- Allowing any established fitness reimbursement to go toward nicotine replacement therapy*
- Reimbursing employees for fitness efforts to assist in quitting (gym memberships, at-home fitness equipment, etc.)
- Target gift card after completing class or quitting
- Additional paid time off or vacation day (full or half day)
- Public recognition at staff meetings for their willingness and courage to quit at 10 days, 1 month, 3 months, 6 months, 1 year, etc.
- Lunch/Dinner with significant other or friend paid for by CEO, President, manager, etc. to recognize quit attempt
- Office pizza party or office potluck to celebrate successful quit attempts or those who are trying to quit

**For those who do not already have comprehensive tobacco cessation coverage through health insurance plan.*

“My success at quitting is mostly due to the new drug, Chantix. GuideOne also offered a free smoking cessation class that was designed by the American Lung Association that I took advantage of. It was encouraging to hear about others’ struggles, accomplishments and goals of how they were going to remain smoke-free.”

- Mark Watson, GuideOne Insurance



Determine Enforcement Strategies

The first step in enforcing a tobacco-free worksite policy is to ensure that all staff and visitors are aware of the policy and the reason for its implementation. Taking the time to thoroughly educate employees, vendors, clients, neighbors, and the community of the new policy's content and the reason for the change will make it less likely that individuals will violate the policy. This education should be provided on a continual basis, with reminders being part of ongoing communications at your organization. Installing tobacco-free signage throughout the worksite will also provide notification of the policy to all who enter. In many cases, simply ensuring that everyone is aware of this policy will be sufficient to achieve compliance³⁰.

While it is hopeful that all will respect the tobacco-free policy of your worksite, it may be difficult to achieve 100% compliance of any policy. A tobacco-free worksite policy can be enforced in the same manner as other company policies. For worksites that have established progressive discipline policies for worksite policy violations, this same process can be used to enforce a tobacco-free worksite policy (see table). Asking employees to sign a document that states that they have read and understand the new policy and the disciplinary actions that will take place if they are in violation can be helpful toward compliance as well³⁰.

Worksites may also find it helpful to provide information to employees on how to handle situations in which they encounter other employees or visitors violating this policy. For example, staff may be

Sample Progressive Discipline Policy for Violation of Worksite Policies

First Offense	Verbal Warning
Second Offense	Written Warning
Third Offense	Further Disciplinary Action, May Result in Termination
Fourth Offense	Termination

asked to politely inform violators that this worksite is tobacco-free and instruct them on where they can find additional information about the policy. Employees may also be instructed on who to notify if individuals refuse to comply. This could be a security officer for visitors or a human resources representative for other employees. Some worksites may also find it beneficial to provide a means for staff to anonymously submit complaints. A confidential "Complaint Form" could be made available online or in written form, and this may reduce anxiety associated with reporting a co-worker. Each worksite must decide what enforcement strategies will work best for them and their employees³⁰. Example Q & A documents and role playing exercises that have been used by other worksites to prepare for the policy change can be found in the Additional Resources section of this toolkit.

"Basically, we implemented a new policy because it supported our initiatives to promote employee health and the Iowa Smoke-Free Air Act of 2008. It benefits our employees by protecting them from unhealthy exposure to secondhand smoke and provides a supportive environment conducive to quitting the use of tobacco which we all know is the single most preventable cause of disease, disability and death in the US."

- Paul Gregoire, Vice President, Emerson-Fisher

IMPLEMENTING A TOBACCO- FREE POLICY



Develop and Disseminate Educational Materials

While implementing a tobacco-free worksite policy it is important to develop and disseminate educational materials for a variety of impacted groups.

Strategies should be developed for reaching out to:

- Employees
- Visitors
- Patients (if a healthcare facility)
- Job applicants and new employees
- Vendors, partners, and clients
- Surrounding worksites/neighbors
- General public/ community
- Board of Directors

Strategies for reaching these audiences include:

- Tobacco-free signage
- Company website
- Company intranet
- Email
- Newsletters
- Letter from company leadership
- Pamphlets for visitors
- Appointment card announcements
- Insert with pay slip
- Newspaper articles
- Social media
- Job applications
- Admittance forms or other check-in paperwork (for patients at healthcare facilities)
- Posters/displays/bulletin boards throughout worksite
- Employee handbooks
- Window clings on company vehicles
- Discussion at staff meetings/trainings
- Guest speakers
- New employee orientation
- Mass media (press releases, articles, features, news conferences, conducting interviews, hold special event)

This education should continue on an ongoing basis.

If the number of tobacco users remains constant, 55,000 Iowa children that are currently under the age of 18 will eventually lose their lives to a smoking-related cause¹⁷.

Install Adequate Signage and Remove any Smoking Huts, Ashtrays, and Receptacles

It is important that worksites implementing a tobacco-free policy make changes throughout their buildings and grounds prior to the effective date of the new policy. One important step is to remove any smoking huts, ashtrays, and receptacles. This will ensure that a consistent message is being sent in reference to the policy changes taking place.

Additionally, it is very important that worksites install tobacco-free signage prior to the effective date of the new policy. These signs should be posted near entrances and throughout the grounds and facilities to make the new policy known to everyone who spends time at the worksite. It may also be beneficial to post these in areas that smokers gathered prior to the policy change to serve as a reminder. These tobacco-free worksite signs should be posted in addition to any smoke-free signage that is already visible.

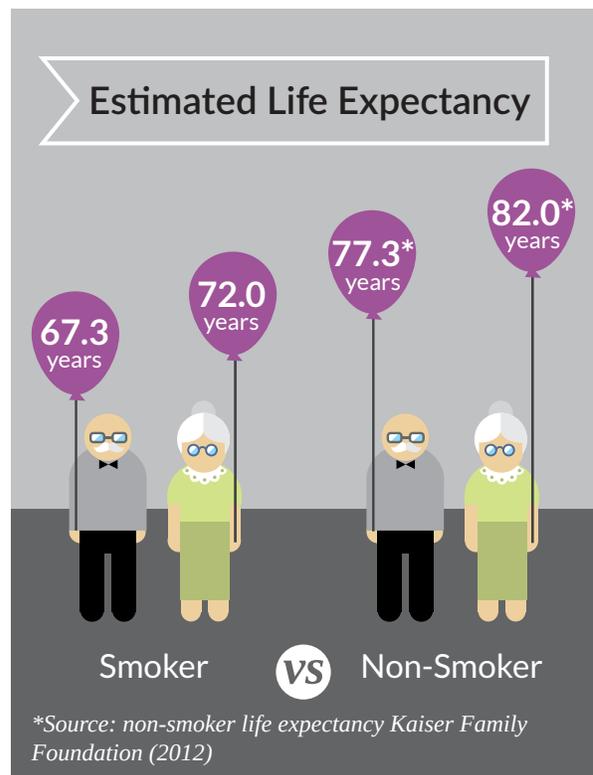
For worksites in Polk, Dallas, Marshall, Jasper, Warren, Union, Adair, or Madison County in Iowa, free signage may be available. Please contact the American Lung Association at **515-309-9507** for more information on how your worksite can obtain free signage.

If your worksite is located outside of this region, the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control can help you locate resources within your county. They can be reached at **515-281-6225**.

Smokers die an average of 10 years earlier than their non-smoking peers^{24,28}.

Implementation Day Celebration

Worksites may find it rewarding to have implementation day celebrations. To kick-off the new policy, employers may choose to invite staff and community members to an on-site event. This could also be an opportunity to invite members of the media to share your company's commitment to health and wellness. An implementation day celebration could also be as simple as bringing in baked goods or allowing employees to have a potluck lunch. While certainly not required, a celebration such as this can raise awareness about the new policy and cessation options and serve as encouragement for employees to quit.





Evaluate Effectiveness of Policy

One additional step that you can take after you implement a tobacco-free policy is to evaluate the effectiveness of this policy change. You may wish to know if your tobacco-free policy has helped employees quit using tobacco products, reduced the amount of tobacco they use throughout the day, or saved your company money³⁶. Much of your ability to evaluate these changes will be dependent on the information gathered prior to the change (see Assess Tobacco-Use at Worksite)³⁶. Planning ahead and considering your evaluation needs prior to implementing the policy can help you get the results you want³⁶. Undertaking evaluation activities may seem daunting, but there are some simple ways that you can analyze the effect this policy has had on your worksite. Here are a few ways to evaluate your policy:

1. Conduct follow-up surveys of employees³⁶.

If you conducted an employee assessment prior to implementing your policy, you may be able to conduct a follow up survey to analyze changes. This could help you determine the level of employee awareness regarding the new policy and new cessation options. This could also be an opportunity for employers to ask for any concerns or suggestions. We recommend conducting this follow-up survey six months after the policy is implemented³⁶.

2. Conduct follow-up assessments of the worksite³⁶.

If you performed a walking assessment of the worksite prior to policy implementation you can observe and record changes in the number of people smoking on the grounds and a reduction in cigarette butts or other tobacco product waste throughout the worksite³⁶.

3. Work with your health insurance provider to compare healthcare costs prior to and following the implementation of the policy³⁶.

Depending on how health insurance is provided to your employees, you may be able to quantify the cost savings of a tobacco-free worksite policy. If you wish to conduct an evaluation in this manner, begin working with your insurance provider prior to the policy implementation³⁶.

4. Utilize a Health Risk Assessment to determine changes in tobacco usage³⁶.

If your worksite participates in annual Health Risk Assessment activities, you may be able to use this as a method of determining how many of your employees used tobacco products prior to the policy and any changes to this number in the years following the policy implementation³⁶⁻³⁷.

“I would encourage any organization considering this move, to realize that you can have a dramatic impact on the health of our community by going tobacco-free.”

- President Angela Walker Franklin, Des Moines University



CONCLUSION

Thank you for taking the time to consider making your worksite tobacco-free!



thank you

This toolkit has provided information on three important reasons to implement a tobacco-free policy; to update any smoke-free policies to tobacco-free policies, to improve the health of your employees, and to save you money. It also provided a list of suggested activities to assist with the policy implementation process and a sample timeline to follow when conducting these activities. If you need additional information or assistance with any of the activities provided in this toolkit, free resources are available to you.

If your worksite is located within Polk, Dallas, Marshall, Jasper, Warren, Union, Adair, or Madison County in Iowa, please contact the American Lung Association at **515-309-9507** for further assistance with this policy change.

If your worksite is located outside of this region, the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control can help you locate resources within your county. They can be reached at **515-281-6225**.

The American Lung Association in Iowa would like to thank the individuals and worksites that have contributed quotations, sample policies, sample Q & A documents, sample role playing exercises, and other information to this toolkit. A special thanks to Kelsey Feller, Spring 2015 Intern, for updating this toolkit.



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ADDITIONAL RESOURCES

Memo

Mercy Medical Center-Des Moines

To: Mercy Family
From: David H. Vellinga, President and CEO
Date: June 1, 2005
Re: Campus-Wide Tobacco-Free Policy

At Mercy Medical Center – Des Moines, we care about providing a healthy environment for our employees, patients and visitors. That’s why we, along with our affiliated clinics and facilities, plan to implement a new policy that will make our campuses entirely tobacco-free by July of next year. We believe that by making this change, we are addressing the inconsistency of providing a healthy environment for all who come to our health care facilities while permitting the use of tobacco products on our campuses.

It is our belief that by eliminating tobacco use at our facilities, we are providing a healthy work environment for our employees, a healthy environment of care for our patients and families, and we are contributing to reducing the health care costs associated with tobacco use.

A combined Mercy – Des Moines and Iowa Health – Des Moines Tobacco-Free Task Force consisting of employees, nurses and physicians, smokers and non-smokers, who represent key areas of our hospitals – has been established to develop, implement and communicate about the new policy, which will take effect on July 1, 2006. The policy makes a strong statement about the dangers of tobacco consumption by banning its use on our campuses (grounds, facilities, both owned or leased), our vehicles, as well as employees’ vehicles parked at our facilities.

On a national level, many notable hospitals and health care systems have also chosen to implement a tobacco-free policy, including Johns Hopkins University School of Medicine, Kaiser Permanente in California and Covenant Healthcare System in Michigan.

What is our plan of action?

Over the next year, we are planning several educational programs for our patient care employees to assist them in preparing for patient and family issues related to being a tobacco-free environment. In addition, various tobacco cessation initiatives, including tobacco replacement therapies, will be available to assist our employees and the community with their no smoking efforts.

You can also look forward to additional communication pieces regarding our new policy, timeline for implementation, and our efforts to help our employees, patients and families adjust to a tobacco-free environment.

We have known for years that tobacco cessation is the number one thing Americans can do to improve their health and increase their life expectancy. I look forward to your support of this important community health initiative.



Ready to Quit?

Contact Quitline Iowa today to get started! To enroll:

- www.QuitLineIowa.org
- 1-800-QUITNOW (784-8669)

What you receive when you enroll:

- Quit Coach® — You will have expert support and assistance whenever you need it, over the phone, from coaches who specialize in helping people quit tobacco.
- Quitting Aids — Your quit coach will teach you what type, dose and duration of nicotine substitute or other medication is right for you and teach you how to use it.
- Quit Guide — An easy-to-use workbook to help you stick with your quitting plan will be mailed to you.



QUITLINE IOWA
1 800 QUIT NOW | 1 800 784 8669
www.QuitLineIowa.org

Fighting for Air

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Produced with funding from the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control.

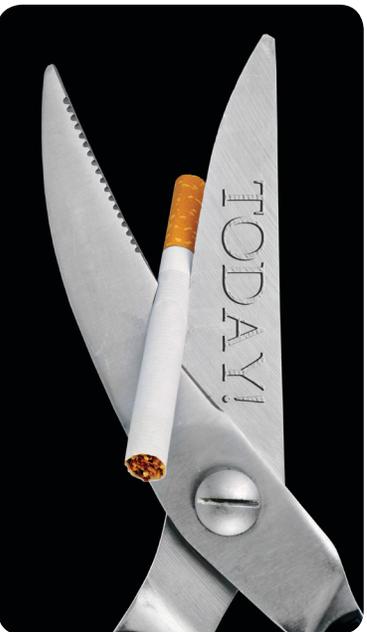
When Smokers Quit



Fighting for Air

Tips to Help You Quit:

- Set a firm quit date.
- Throw away all tobacco products.
- Take a pledge to have a tobacco-free home and/or vehicle.
- Stock up on low-calorie snacks, sugar-free gum and mints.
- Think about what activities you will do when you have a strong urge to use tobacco products.
- Anticipate risky situations (based on your triggers) and what you will do in those situations.
- Practice deep breathing.
- Consider nicotine replacement therapy (talk to your healthcare provider).
- Have a good support system set up.
- Write down the reasons why you want to quit and be specific.
- Think positively! Cravings last 3-5 minutes. If you've made it tobacco-free for 5 minutes, you can make it another 5 minutes!



Secondhand Smoke:

- Secondhand smoke is the smoke given off by a burning tobacco product and the smoke exhaled by a smoker.
- More than 70 chemicals in secondhand smoke are known to cause cancer, including lung cancer.
- Secondhand smoke has also been associated with heart disease in adults and sudden infant death syndrome, ear infections and asthma attacks in children.
- Every year, secondhand smoke causes more than 3,000 lung cancer deaths in nonsmokers.
- 231,000 lowa children are exposed to secondhand smoke at home.
- There is no safe level of exposure to secondhand smoke.

Thirdhand Smoke:

- Thirdhand smoke refers to the cigarette byproducts that cling to smokers' hair and clothing, as well as household fabrics, carpets and other surfaces.
- Thirdhand smoke is harmful to adults, children and pets.

Sources: www.cancer.gov
www.mayoclinic.com

After You Quit:

20 Minutes	Heart rate drops.
12 Hours	Carbon monoxide level in blood drops to normal.
2 Weeks to 3 Months	Heart attack risk begins to drop Lung function begins to improve.
1 Month to 9 Months	Coughing, sinus congestion, fatigue and shortness of breath decrease.
1 Year	Increased risk of coronary heart disease is half that of a smoker's.
5 Years	Stroke risk is reduced to that of a nonsmoker's five to 15 years after quitting.
10 Years	Lung cancer death rate is about half that of a continuing smoker's.
15 Years	Risk of cancer of the mouth, throat, esophagus, bladder, kidney and pancreas decrease.
15 Years	Risk of coronary heart disease is back to that of a nonsmoker's.

Source: 2004 U.S. Surgeon General's Report, *The Health Consequences of Smoking*.

*We Help People Just
Like You Quit Tobacco
Every Day.*



Ready to quit?

***1.800.QUIT.NOW (1.800.784.8669)
www.quitlineiowa.org***



QUITLINE IOWA

1 800 QUIT NOW | 1 800 784 8669

Quitline Iowa will help you create an easy-to-follow quitting plan to help you get ready, take action, and live the rest of your life tobacco free.

Support Available to You



Phone Coaching: An expert Quit Coach® staff member will support you over the phone, whenever you need it. They will help you choose nicotine replacements, if they are right for you, and help you set a quit date with your goals in mind.



Online Coaching: Membership to the Web Coach® website, a private, online community where you can complete activities, track your progress and join in discussions with other tobacco users trying to quit.



Quit Guide: We send you a printed workbook to reference in any situation to help you stick with your quitting plan.



Text Support: In addition to calls and website access, you can receive supportive text messages on your mobile phone to help you prepare to quit, use medications correctly, manage urges and avoid relapse.

"I kept saying to myself how much I want to live to be there for my granddaughter and be a role model for her. I said to myself I better stop today so I can prevent more complication with my diabetes. So now I called you, and I quit. Thanks for being there for me."

- Actual Quitline Iowa Participant



QUITLINE IOWA

1 800 QUIT NOW | 1 800 784 8669

Produced with funding from the Iowa Department of Public Health, Division of Tobacco Use Prevention and Control.

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Tobacco-free Policy Employee Survey

Our company is considering introducing a tobacco-free worksite policy that acknowledges the needs of both tobacco users and non-tobacco users. Please take a few minutes to complete this survey.

Your response is completely confidential. Please do not give your name on this form.

1. Do you currently use tobacco or tobacco-like products? (circle one) Yes No*
***If no, please skip to question 7.**

2. If yes, please indicate what form(s)? (circle all that apply)
 - a. Cigarettes
 - b. Little cigars or cigarillos
 - c. Hookahs
 - d. Chewing tobacco, snuff, dip, or snus
 - e. Dissolvable products (lozenges, orbs, sticks, strips)
 - f. E-cigarettes
 - g. Other _____

3. If you smoke cigarettes, approximately how many cigarettes do you smoke per day? (circle one)
 - a. Less than 5
 - b. 5 to 10
 - c. 11 to 20
 - d. 21 to 40
 - e. More than 40

4. If you use smokeless tobacco, how many cans/tins/pouches/etc. do you use per week?
 - a. Less than 1
 - b. 1 to 2
 - c. 3 to 4
 - d. More than 4

5. If you use an electronic nicotine delivery system (e-cigarette, personal vaporizer, vape pen, e-hookah, etc.) do you also use another form of tobacco? (circle one) Yes No

6. If you are a tobacco user, are you interested in quitting? (circle one) Yes No Maybe

7. If you are interested in quitting, which of these options would you consider to help you quit?
(circle all that apply)

- a. I am not interested
- b. Telephone counseling
- c. Online counseling
- d. Group counseling at work
- e. Individual counseling at work
- f. Time off to attend group counseling away from work
- g. Nicotine replacement therapy medications
- h. Cash incentive or fee reimbursement for attending counseling
- i. Other service to help you quit (please list) _____

8. Are you ever bothered by tobacco, secondhand smoke, or the scent of smoke on hair or clothes while at work? (circle one) Yes No

a. If yes, please comment: _____

9. Would you be in support of a tobacco-free worksite policy? (circle one) Yes No

a. Please provide any additional comments or concerns about this company implementing a tobacco-free worksite policy: _____

6 Month Implementation Timeline

Month	1	2	3	4	5	6	Ongoing
Develop Messaging On Why This Policy Change Will Happen							
Assemble A Tobacco-Free Committee Or Workgroup							
Select A Timeline And Implementation Date							
Assess Tobacco Use At The Worksite							
Develop A Comprehensive Tobacco-Free Policy							
Review Insurance Change Options							
Determine Cessation Options							
Determine Enforcement Strategies							
Develop And Disseminate Educational Material							
Install Adequate Signage And Remove Of Any Smoking Huts, Ashtrays, And Receptacles							
Implementation Day Celebration							
Evaluate Effectiveness Of Policy							

Model Tobacco-free Workplace Policy

Purpose:

Tobacco use is widely recognized as a major preventable cause of many diseases in smokers and nonsmokers alike. As X is committed to providing a safe, healthy, comfortable and productive environment for all who visit or work in and around our facilities, X has been designated as a tobacco-free institution. The success of the policy will depend upon the thoughtfulness, consideration and cooperation of all tobacco users and non-users alike.

Policy:

Smoking or other use of tobacco or tobacco-like products (examples include but are not limited to cigarettes, electronic cigarettes, cigars, chewing tobacco, snuff, pipes, snus, etc.) during business hours or on company property, at any time, is strictly prohibited. This includes any emerging tobacco product or simulated smoking device. This also includes all nicotine products not regulated or approved by the Food and Drug Administration (FDA). Prohibition includes any and all buildings, owned, leased, rented and areas maintained by X; any grounds, parking lots, ramps, plazas or contiguous sidewalks (within 300 feet); and in vehicles owned or leased by X. Use of tobacco or tobacco-like products in any vehicle of any employee, contractor, vendor or visitor when on X property is prohibited. This policy applies to all off-campus sites including clinics, office buildings or any X programs operated offsite. The distribution or sale of all tobacco products is prohibited.

There are no designated smoking areas within any X location or on any grounds. Ash receptacles and spittoons are not available on company property. All X employees, while representing the company, shall not use tobacco products. Adherence to this policy requires that tobacco users refrain from using these products while on campuses and when at work/on company business.

All employees, visitors, vendors, volunteers or any person coming on grounds or to the facility must comply with this policy.

This policy is in compliance with regulations and directives of the Joint Commission standards.

The policy complies with the Iowa Smokefree Air Act in the Iowa Code.

Responsibility:

All persons coming onto X property and/or entering the buildings are required to comply with this policy. All employees share in the responsibility for enforcing the policy.

Procedures:

- The policy will be communicated through WEBSITE, intranet, job postings, media coverage and signage at each location.
- All persons are asked to extinguish and/or cease from using all tobacco or tobacco-like products before coming onto properties as noted above.
- Those who smoke or use tobacco products shall ensure that the odor of tobacco is not present when on X property.

- Visitors or other non-employees will be politely informed of any policy violation and provided with information explaining the policy in a supportive and educational manner. Continued non-compliance may result in Security escorting the individual from the property.
- Applicants and interviewees will be advised that X is a tobacco-free worksite. As a part of the application process each applicant will acknowledge in writing that they understand X's policy and attest that they do not use tobacco as a requirement for further consideration.
- Employees are advised of the provisions of this policy during new employee orientation.
- All employees are authorized and encouraged to communicate and reinforce this policy with courtesy and diplomacy to any person whom they see violating the policy.
- Supervisors are responsible to ensure that employee violations of the Tobacco-free Worksite Policy are administered promptly and consistently.
- Employees, spouses and domestic partners who wish to quit using tobacco will be given information on recommended tobacco cessation programs, alternatives to tobacco use (e.g. Nicotine Replacement Therapy) and/or materials.
- Employees who violate the policy will be subject to disciplinary action up to and including termination as per X's progressive discipline process.

Effective Date for Current Employees:

DATE

Employment Application Statement:

I acknowledge and understand that X is a tobacco-free employer and that I do not use tobacco or tobacco-like products as clearly defined in the Tobacco-Free Worksite Policy. I further understand that X is relying on my acknowledgement that I do not use tobacco or tobacco-like products as a condition of its consideration of my employment. I understand that false or misleading information given in my application, interview(s), or any supplemental information in the employment process may result in termination. I understand, also, that I am required to abide by all rules and policies of X.

Effective Date for All New Hires

All new hires must comply with the Tobacco-Free Worksite policy as of X.

Wellmark Tobacco-Free Workplace Policy and FAQ



I. Belief Statement

Wellmark constantly strives to assist employees and their dependents in reaching optimal personal health. We are committed to providing a healthy, constructive, and productive work environment for our employees, contractors, vendors and visitors.

II. Rationale

Tobacco use causes short-term health issues and is a risk factor for chronic lung and heart disease, stroke, and several forms of cancer. It is the single most preventable risk factor for death and disease. Tobacco use may also impact the health of others through second hand smoke.

We are enhancing our current Smoking and Tobacco Use Policy to be a Tobacco-Free Workplace to better align with our commitment to the health of our employees and their families, and in support of our overriding strategic priority of creating a sustainable health care system.

III. Business Policy for all Workplace Locations in Iowa

Our company is committed to the health of our employees and their families. We are equally committed to ensuring that all workforce members portray an image that is consistent with this policy. The success of the policy will depend on the thoughtfulness and cooperation of each member of Wellmark's workforce.

Policy

- Smoking or other use of tobacco or tobacco-like products (examples include but are not limited to cigarettes, e-cigarettes, cigars, chewing tobacco, snuff, pipes, etc.) during business hours, or on company property at any time, is strictly prohibited.
- Prohibition includes any and all buildings, owned, leased, rented and areas maintained by Wellmark; any grounds, parking lots, ramps, and contiguous sidewalks (within 300 feet); and in vehicles owned or leased by Wellmark.
- Use of tobacco or tobacco-like products in any vehicle of any employee, contractor, vendor or visitor when on Wellmark property is prohibited.
- There are no designated smoking areas within any Wellmark location or on any grounds. Ash receptacles and spittoons are not available on company property.
- All Wellmark employees, while representing the company, shall not use tobacco products.
- All employees, contractors, vendors and visitors must comply with this policy.

Responsibility

Anyone coming onto Wellmark property and/or entering the buildings is required to comply with this policy. All employees share in the responsibility for enforcing the policy.

Procedures

- The policy will be communicated on Wellmark.com and the Wellmark Web intranet, job postings, and signage at each location.
- All persons are asked to extinguish and/or cease from using all tobacco or tobacco-like products before coming onto properties as noted above.
- Those who smoke or use tobacco products shall ensure that the odor of tobacco is not present when on Wellmark property.
- Visitors or other non-employees will be politely informed of any policy violation and provided with information explaining the policy in a supportive and educational manner. Continued non-compliance may result in Security escorting the individual from the property.
- Applicants and interviewees will be advised that Wellmark is a tobacco-free workplace. As a part of the application process each applicant will acknowledge in writing that they understand Wellmark's policy and attest that they do not use tobacco as a requirement for further consideration.
- All employees are authorized and encouraged to communicate and reinforce this policy with courtesy and diplomacy to any person whom they see violating the policy.
- Leaders are responsible to ensure that violations of the Tobacco-free Workplace Policy are administered promptly and consistently.
- Employees, spouses and domestic partners who wish to quit using tobacco will be given information on recommended tobacco cessation programs, alternatives to tobacco use (e.g. Nicotine Replacement Therapy) and/or materials.
- Violation of this policy may result in discipline, up to and including termination.

Effective Date for Current Employees

Effective October 1, 2010, all Wellmark owned, leased offices, building structures, and property in Iowa will be entirely tobacco-free.

Employment Application Statement

I acknowledge and understand that Wellmark is a tobacco-free employer and that I do not use tobacco or tobacco-like products (examples include but are not limited to cigarettes, e-cigarettes, cigars, pipes, snuff and chew) as written in its Tobacco-Free Workplace Policy. I further understand that Wellmark is relying on my acknowledgement that I do not use tobacco or tobacco-like products as a condition of its consideration of my employment. I understand that false or misleading information given in my application, interview(s), or any supplemental information in the employment process may result in termination. I understand, also, that I am required to abide by all rules and policies of Wellmark.

Effective Date for All New Hires

All new hires must comply with the Tobacco-Free Workplace policy as of June 1, 2010.

Frequently Asked Questions: Wesley Acres

On July 1, 2006, Wesley Acres is implementing a completely tobacco-free campus policy for employees and visitors. Tobacco use will be prohibited for employees, residents, and visitors both indoors and outdoors on all properties owned and cared for by Wesley Acres. In preparation for this transition, employees have asked questions about what a tobacco-free environment means to them. The following are frequently asked questions and responses regarding the tobacco-free campus.

Q: Why are we becoming totally tobacco-free?

A: Tobacco use is the leading cause of disease and death in the US. As an organization that is concerned about the health of our community, we need to take action to help people take control of their health. Our organization has made a commitment to participate with local and state partners to create healthy communities; this is a step in that direction.

Q: How does this policy differ from our existing smoking policies?

A: Our existing policy prohibits smoking inside any facility but allows employees and visitors to smoke in designated outdoor areas. Effective July 1, 2006, employees will not be allowed to smoke or use any tobacco product anywhere on Wesley Acres property inside or outside, which include personal vehicles and vehicles leased or owned by Wesley Acres.

Q: Why don't we continue to have designated smoking areas?

A: Eliminating tobacco use on our campus supports those who are trying to quit, and helps to eliminate employees', residents', and visitors' exposures to 2nd hand smoke. Strong tobacco odors have been known to trigger allergy or asthma reactions with fellow workers, residents, and visitors. Tobacco odors on others can serve as a trigger for the desire to smoke in persons attempting to quit. In compliance with the promotion of a healthy environment, we need to effectively eliminate the 2nd hand smoke that may trigger adverse health effects for employees, residents, and visitors who

are attempting to make positive life changes. Eliminating tobacco use completely is the most effective and considerate way for us to provide the best possible environment.

Q: What does this mean to Wesley Acres staff?

A: Employees who do NOT choose to stop using tobacco products will need to learn how to not smoke and manage their tobacco use (i.e., by the use of nicotine replacement therapy) while they are working for Wesley Acres. Several support programs are planned for staff includes: Freedom From Smoking tobacco cessation program and Nicotine Replacement Therapy reimbursement. The Freedom From Smoking cessation classes are also open to family and community members.

Q: Will I have to quit by July 1, 2006?

A: Becoming a tobacco-free workplace and campus does not mean you have to quit. What it means is that you will not be able to smoke or use tobacco products on the grounds of Wesley Acres or while on work time. However, we will encourage everyone to quit because of the great health benefits associated with being tobacco free.

Q: Can I smoke in my car at work?

A: Again, the policy states that no tobacco use by employees is allowed while on Wesley Acres property, including parking areas. You will not be able to smoke in your car if it is parked on the grounds of Wesley Acres or on work time. You will also not be able to smoke in your car if it is parked at Des Moines University or the other neighboring areas.

Q: What if I smell like smoke?

A: Our new policy that will become effective July 1, 2006, states that you are not able to smell like tobacco smoke, perfume, or other odor masking products. If you do smoke at home or during your lunch break off-campus, then you will need to have a change of clothes that does not smell like tobacco smoke.

Q: As a current smoker who does not want to quit, what could I do to prepare for this policy?

A: Prior to July 1, 2006, you may want to try working through a full shift using (i.e., Nicotine Replacement Therapy) to determine what assistance you will need throughout your workday. Remember: One cigarette equals 1 mg of NRT. Therefore, if you are a pack-a-day smoker then you will want to use the NRT that equals 21 mg/day.

Q: How will the new policy be enforced?

A: This policy will be enforced like the other policies at Wesley Acres. Under the tobacco-free environment policy, employees who use tobacco in non-smoking areas (anywhere on the property) will be reported to their department director and supervisors. These managers will take action that is necessary to address the problem according to the Wesley Acres progressive discipline policy. Continued smoking infractions by employees can result in termination, based on our policy.

Q: Do other employers have a similar policy or plan?

A: In the past 10 years, many organizations (large and small) all around the country have adopted or are adopting Tobacco-Free Environment policies. Several Iowa hospitals have already implemented the Tobacco-Free Environment Policy with success. The local businesses include: Des Moines University, Mercy Medical Clinics, Iowa Health System (Iowa Lutheran and Iowa Methodist Hospitals), Broadlawns Hospital, and Planned Parenthood of Iowa.

Q: How will the support and cessation programs work?

A: There are many different forms of support available for employees who are interested in quitting smoking.

- a. Any employee who is interested in quitting smoking will be eligible for 100% reimbursement (up to \$20) to attend the Freedom From Smoking tobacco cessation class. The Freedom From Smoking sessions will be offered free of charge to employees during 2006 at Wesley Acres. These seven-week group sessions are based on materials developed by the American Lung Association. Research has shown the advantages of participating in a group format. The larger support base from other group members going through the same process is very helpful when an individual is developing smoking cessation coping strategies. For more information, contact Mary Heisterkamp at 271-6596. Our first session will begin Thursday, January 26th. The class will be held every Thursday for seven-weeks in the Theater from 3:00 – 4:00 p.m. The initial cost is \$20 paid to Wesley Acres the first day of class. Each employee who completes all 7 classes will be reimbursed 100% at the end of the session. Other classes will be offered throughout 2006 at various days and times. Notification of the classes will be posted in our newsletter and bulletin boards.

- b. Any employee who is interested in quitting smoking will be eligible for up to \$50 reimbursement for non-prescription nicotine replacement therapy. Using pharmacological aids can dramatically increase a person's chances of quitting for good and are strongly recommended to anyone who is considering quitting tobacco use. Wesley Acres will reimburse up to \$50 for tobacco replacement therapy to any employee who has completed all 7 Freedom From Smoking cessation classes. The receipts must be sent to Jennifer Fenstermacher, Executive Assistant, for reimbursement with their completed class certificate signed by the instructor. All Wesley Retirement Services insurance plans will cover certain prescription forms of NRT as of February 1, 2006. Please check with Kimberly Newton, Human Resources, for more information.
- c. Quitline Iowa (1-800-784-8669). Employees are encouraged to use other resources such as the toll-free Iowa Tobacco Quit Line professional counseling services. Counselors are available from 8:00 a.m. to midnight, seven days a week to provide support while you quit. You can also visit their website: www.quitlineiowa.org
- d. Employee Assistance Program. Employees are eligible to contact our Employee Assistance Program. Mercy – EAP Des Moines also wants to help you, and can offer support as you develop a plan to quit. This is a free service for all of our employees. Call 515-271-6150 or toll-free 1-877-271-6100 for more information.

Q: How do I resist temptation?

A: Every time you try to block a thought out of your mind, you drive it deeper into your memory. By resisting it, you actually reinforce it. This is especially true with temptation. You don't defeat temptation by fighting the feeling of it. The more you fight a feeling, the more it consumes and controls you. You strengthen it every time you think of it. Since temptation always begins with a thought, the quickest way to neutralize its allure is to turn your attention to something else. Don't fight the thought, just change the channel of your mind and get interested in another idea. This is the first step in defeating temptation. The battle is won or lost in your mind. Whatever gets your attention will get you. Sometimes this means physically leaving a temptation situation. This is one time it is okay to run away. To avoid being stung, stay away from the bees. Do whatever is necessary to turn your attention to something else.

Role Play Exercises

These role-playing exercises are intended to help staff become comfortable discussing the Tobacco-Free Environment policy in a respectful and supportive manner. Clinical staff will receive additional role-playing examples during the policy education. Common sense should be used for every situation.

Information cards that explain the policy and support options are available in each department and at information desks. They may be distributed to anyone using tobacco products in prohibited areas.

All staff should review and practice these suggested dialogue when a person is observed using tobacco products on hospital/clinic property.

Mercy Medical Center – Des Moines Policy Enforcement Role-Playing Exercises: Outdoor Encounters with Staff, Visitors and Patients

If you see a person using tobacco products on hospital/clinic property:

Introduce yourself and say, “Excuse me Sir (Ma’am). All of our property, grounds and parking areas are tobacco-free. There is some helpful information about our policy and quitting resources on the information cards at the entrances. I understand this is difficult for you, but would you please extinguish your cigarette now. Thank you.”

“Where am I (staff) allowed to smoke?”

“No where on our property.” [continue with:]

For MMC/MCAP: “Nicotine gum is available inside at the outpatient pharmacy. Smoking cessation support information is available in the information cards at the entrances.”

“Where am I (visitor) allowed to smoke?”

“No where on our property. You must leave our property if you wish to smoke.” [continue with:]

For MMC/MCAP: “Nicotine gum is available inside at the outpatient pharmacy. Smoking cessation support information is available in the information cards at the entrances. Contact the nurse manager on the unit you are visiting for a free care kit. Patients are not allowed to leave the property.”

“Where am I (patient) allowed to smoke?”

“I’m sorry if this upsets you, but for your safety, patients are not allowed to leave our property. Your nurse can assist you with other options for your nicotine cravings.”

“Can I (staff) smoke in my car?”

“No, the policy states no staff member is to use tobacco products in your car or on company time.”

“Can I (visitor) smoke in my car?”

“We would appreciate it if you would respect our policy and if you would not use tobacco products while on our property. There are many patients, visitors and staff who are trying to quit, and even smelling smoke on another person can trigger nicotine cravings.”

“Why are you making me leave hospital property?”

“I understand this is really difficult for you, but our campus has recently become tobacco-free so you are unable to use tobacco while you are here. There is some helpful information about our policy and quitting resources on the information cards at the entrances. If you want to talk to someone, contact the nurse manager on the unit you are visiting for a free care kit.”

“What are you going to do if I continue to smoke here?”

“Smoking is not permitted on the hospital campus. Please extinguish your cigarette now.” (Then walk away).

“I have to have a cigarette! My loved one is very ill or just passed away.”

“I’m very sorry about your loved one. Is there anything else I can do to help?”

“How am I supposed to get through the day without smoking?”

“Free care kits are available in nursing units that might help you, and there is nicotine gum for purchase at the outpatient pharmacy. [Provide assistance if requested. Walk away if no help is requested.] (After hours: call the House Supervisor for nicotine gum.)

“I’m afraid to leave the property at night and want to smoke.”

“You may go inside and get nicotine gum that will take away your craving. You can purchase gum inside at the outpatient pharmacy.” (After hours: “If you would like to try the gum, ask your nurse for assistance.” Nurse: call the House Supervisor) [If the individual becomes very upset, walk away and contact public safety if you believe the safety of others is at risk.]

“I cannot use the nicotine gum (patient, contraindications, don’t like gum).”

“Let’s go inside the hospital so I can provide you an information card or brochure with smoking cessation information and other options. Also, feel free to talk to the manager on the unit you are visiting to determine other options available.”

Mercy Medical Center – Des Moines Policy Enforcement Role-Playing Exercises: Unit Situations with Patients, Families and Visitors

“Where am I (visitor) allowed to smoke?”

“Nowhere on our property. You may leave our property if you wish to smoke. Nicotine gum is available at the outpatient pharmacy. I have a care kit that might help you. Smoking cessation support information is also available in the information cards at the entrances. Patients are not allowed to leave the property.”

Staff believes the patient is smoking in the bathroom.

“I just want to remind you that we are a tobacco-free institution inside and outside on all the property. Would you like me to contact your physician about an order for nicotine gum or other nicotine replacement therapy to help with the cravings while you are in the hospital?” [Contact public safety or follow normal procedures for smoke in the facility.]

Patient wants to go outside to smoke.

“We are now a tobacco-free institution inside and outside on all the property. Would you like me to talk with your physician about an order for nicotine gum or other nicotine replacement therapy while you are here? This may help with the cravings.”

The patient has been in the hospital before July 1, 2006, implementation of the policy.

Patient: “The aide took me outside to a shelter to smoke when I was here the last time, why can’t they take me outside now?”

Staff Member: “We are an entirely tobacco-free environment now. In an effort to promote health and wellness, no one can use tobacco products on any of our property. Would you like me to contact your physician for an order for nicotine gum or other nicotine replacement therapy while you are here? This may help with the cravings. We have information about the smoking cessation classes available for you as well.”

Public Safety Script for Parking Area Enforcement

If Security Officers observe staff members smoking in a car on our property, the following response should be made:

“Excuse me Sir (Ma’am). Tobacco use is not permitted on our property. Staff members are prohibited from smoking during the workday on company time.” [If situation escalates, follow normal enforcement procedure.]

Schedulers, registration and physician office staff script

“I’d like to let you know in advance that our property is entirely tobacco-free as of July 1, 2006. Use of tobacco is not permitted on any maintained property, grounds or parking areas. Nicotine replacement therapy will be available to hospitalized patients. Patients will not be allowed to leave the hospital to smoke. Nicotine gum will be available for purchase for family members and visitors at the outpatient pharmacy.

Online Tobacco Resources

Advocacy and Education

American Cancer Society: www.cancer.org

American Legacy Foundation: www.americanlegacy.org

Americans for Nonsmokers' Rights: www.no-smoke.org

Campaign for Tobacco-free Kids: www.tobaccofreekids.org

Iowa Department of Public Health: <http://www.idph.state.ia.us/TUPAC/>

Iowa Tobacco Prevention Alliance: www.smokefreeiowa.org

Mayo Clinic – Nicotine Dependence Center: www.mayoclinic.org/ndc-rst/

Tobacco Control Legal Consortium: <http://tclconline.org/>

Tobacco Law: www.tobaccolawcenter.org

U.S. Centers for Disease Control and Prevention: www.cdc.gov/tobacco

U.S. Department of Health and Human Services: <http://betobaccofree.hhs.gov/>

U.S. Surgeon General: www.surgeongeneral.gov/tobacco

Cessation

American Lung Association: <http://lunghelpline.org>

Freedom From Smoking: <http://www.ffsonline.org/>

Quitline Iowa: www.quitlineiowa.org

Quitting Smokeless Tobacco: www.quitsmokeless.org