

# **TOBACCO-FREE WORKPLACES: HEALTHIER & MORE PRODUCTIVE**





## TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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Dear Texas Employer:

Thank you for your interest in helping to provide healthier, more productive workplaces in Texas. Since tobacco is the leading cause of preventable death and disease in Texas, the information in the *Tobacco-Free Workplaces: Healthier & More Productive* toolkit can help you develop effective policies and supply important life-saving information for your employees.

Tobacco use is a health hazard. In Texas, the toll of tobacco use is personally and financially devastating. An estimated 24,500 Texans will die this year from their own tobacco use. This is more than the number who died from alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined (The Journal of the American Medical Association, JAMA, 2005).

According to the Centers for Disease Control and Prevention (2007), each adult tobacco user costs employers an average of \$1,800 in lost productivity and \$1,600 in medical expenditures annually. Tobacco-free workplaces can enhance productivity by reducing excessive tobacco-related absenteeism while also reducing insurance costs among employees who stop using tobacco as a result of workplace policies.

The *Tobacco-Free Workplaces: Healthier & More Productive* toolkit provides employers with a step-by-step guide for creating a tobacco-free worksite policy. The toolkit outlines the case for a tobacco-free workplace and for encouraging tobacco cessation. It also provides guidelines for getting employee "buy-in" and gives examples of successful model policies that other Texas businesses use to their benefit. The toolkit contains resources available for your business and employees.

Together we can build healthier communities by creating a workplace environment that promotes the health and well-being of employees and reduces health-care costs.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael D. Maples".

Michael D. Maples, Assistant Commissioner  
Mental Health and Substance Abuse Services Division

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**TOBACCO-FREE TOOLKIT**

# WORKSITE TOOLKIT: OVERVIEW

## About This Toolkit

"Tobacco causes more deaths than AIDS, alcohol abuse, automobile accidents, illegal drugs, fires, homicide, and suicide combined."\*

Tobacco use is the No. 1 preventable cause of death in the United States. It is responsible for one in every five American deaths. Tobacco use in any form is not only harmful for the person using the product, but also for nonsmokers and other people in the environment.

The goal of this toolkit is to help you provide a comprehensive, 100 percent tobacco-free workplace environment so you can:

- Provide a safe and healthy environment for employees.
- Protect all employees from exposure to secondhand tobacco smoke.
- Provide cessation support to smokers who want to quit smoking.

This guide provides you, the worksite decision maker, with information on how to design, implement, and evaluate comprehensive tobacco-free policies and related activities. Ideally, to protect all persons from exposure to secondhand smoke, companies will implement policies that require a tobacco-free environment in company buildings and other enclosed places and provide significant smoking-cessation support for their employees and covered dependents.

The guide provides the background information you need to make the decision to implement policies and related activities to eliminate exposure to secondhand smoke. It highlights the legal, scientific, human resource, facility, image, and economic reasons to become tobacco-free in the workplace.

Included are examples of model tobacco-free policies and additional options to help companies and other organizations design policies to fit their needs. It offers helpful resources for the company to develop smoking cessation activities to ensure help is available for employees who want to quit smoking.

Also, it provides step-by-step instructions for designing policies and related programs to meet the needs of the company, as well as additional resources, health consequences, checklists, timelines, and other materials to assist you in the process of becoming a tobacco-free workplace.

\*<http://jama.ama-assn.org/content/291/10/1238.abstract>

## GLOSSARY

This toolkit references “buzz” words that may need clarification. The following descriptions define the intended reference as used in this guide.

### **Definitions**

**Campus:** The buildings and grounds that support the work of a company.

**Cessation:** To discontinue the use of tobacco products.

**Policy:** The plan that outlines the goals and standard procedures of a company.

**Quitline:** A phone-based counseling and coaching program to assist people who want to quit tobacco use.

**Secondhand smoke:** Tobacco smoke that is dispersed into the atmosphere from burning tobacco products or exhaled by a smoker and is also known as side-stream smoke. According to the 2010 Surgeon General's report, this smoke contains 7,000 chemicals, 70 of which cause cancer, and is still a leading cause of preventable death in Texas and the United States.

**Spit/Chew tobacco:** These products are referred to as chew, dip, plug, smokeless, snuff, and spit tobacco and are available in various forms. A mixture of tobacco, sweeteners, various particles, and salts, they contain hundreds of chemicals that are poisonous to the human body. These forms of tobacco are placed in the mouth between the cheek and gums to release nicotine into the blood stream.

**Tobacco dependence:** The addiction to tobacco products, including cigarettes, cigars, pipes, or spit or chewing tobacco as a result of the nicotine found in the products.

**Tobacco products:** These products contain nicotine, a natural ingredient of tobacco: cigarettes, cigars, spit/chew, snuff, snus (pouch), orbs (mints), sticks (toothpicks), and strips (dissolvable).

**Tobacco use:** Smoking, chewing, dipping, or any other use of tobacco products.

**Workplace or Worksite:** The place where employees report to work, including buildings, parking lots, company vehicles, and the grounds where the company is located. It can also include off-campus areas such as construction sites and off-site work-related activities.

# WORKSITE TOOLKIT: MAKING A CASE FOR A TOBACCO-FREE WORKPLACE

## *Benefits of a Tobacco-Free Workplace*

According to the National Cancer Institute, most employees are nonsmokers, almost half of employees currently work in environments where smoking is prohibited in their work area or in public (shared) areas of their worksite, and more than 80 percent work for companies that have a tobacco use policy. Clearly, employers are addressing how to deal with tobacco use in the workplace. Listed are some of the many benefits for both employees and employers that accrue from a tobacco-free workplace.

Healthier workers are more productive workers, and it is clear that nonsmokers are healthier workers.

- In Texas, smoking costs \$1,800 per smoker per year in lost productivity.
- Employees who use tobacco are absent from work seven to 10 more days per year than nonsmokers.
- A study of current, former, and never smokers over time showed that current smokers had significantly greater absenteeism than never smokers, with former smokers in between. Former smokers also showed an improvement over time in productivity measures, compared to current smokers.
- Smoke breaks are disruptive, take time away from work, and may be viewed as unfair by fellow workers. One survey found that three 15-minute smoking breaks a day amounted to a full year of a worker's life spent smoking. Another found that employees who take four 10-minute breaks a day to smoke actually work one month less per year than workers who don't take smoking breaks.
- A study for the U.S. Navy showed that smokers had poorer job performance reviews.

### **For Employees:**

- A tobacco-free environment helps create a safe, healthful workplace.
- A well-planned and carefully implemented effort by the employer to address the effects of tobacco on both smoking and nonsmoking employees' health and the health of their families shows the company cares.
- Workers who are bothered by or especially sensitive to smoke will not be exposed to it at the worksite.
- Smokers appreciate a clear company policy about tobacco use at work.
- Morale increases when nonsmokers don't have to be exposed to secondhand smoke.
- Managers are relieved when a process for dealing with tobacco or smoking in the workplace is clearly defined.

### **For Employers:**

- A tobacco-free environment helps create a safe, healthful workplace.
- Direct health-care costs to the company will be reduced. A smoker who quits smoking could save employers an estimated \$960 in excess illness costs each year.
- For small businesses especially, which have employees who handle a variety of tasks, productivity can be greatly increased by reduced absenteeism.
- Workers' compensation costs are reduced. Businesses pay an average of \$2,189 in workers' compensation for smokers, compared with \$176 for nonsmokers.
- Dozens of companies offer discounts on life, disability, and medical insurance for non-tobacco users.
- Disability claims based on secondhand smoke exposure are eliminated.
- Employers are supported against any claims of "harassing" employees or visitors who smoke.
- The risk of fires is lower. The National Fire Protection Association found that in 1998 smoking materials caused 8,700 fires in nonresidential structures, resulting in a direct property damage of \$60.5 million.
- Smoke-free businesses commonly see fire insurance costs reduced by 25 to 30 percent.
- Maintenance costs go down when smoke, matches, spit cups, and cigarette butts are eliminated in facilities. Cleaning and maintenance made necessary by tobacco smoke and spit tobacco-related litter cost businesses about \$4+ billion per year nationwide.
- Office equipment, carpets, and furniture last longer.

## WHAT ARE YOUR OPTIONS?

When it comes to tobacco use, half-measures like designated smoking areas won't get you where you want to go. Because there is no safe level of secondhand smoke, only 100 percent tobacco-free policies fully protect workers' health. These policies also offer the greatest support to smokers trying to quit. Tobacco-use policies can take one of two forms:

**100 percent tobacco-free in all indoor and outdoor areas.** Tobacco users must leave company property to use any tobacco product, including smokeless tobacco. This is often called a comprehensive tobacco-free campus policy.

**100 percent smoke-free in all indoor areas, including company vehicles.** Smoking is restricted within specified distance of entrances, windows, and ventilation intakes to prevent smoke from drifting back into the building.

### TOBACCO-FREE POLICIES VERSUS SMOKE-FREE POLICIES

It is important to adopt the appropriate policy to meet the needs of your business or company when reviewing the language and options available. Consider the language of tobacco-free policies and smoke-free policies. The difference between these policies are described below.

We recommend the comprehensive 100 percent tobacco-free approach.

#### Minimum Policy:

A **Smoke-Free Workplace** policy meets the requirement to comply with minimal restrictions on clean indoor air regulations. It provides workers safe work environments and eliminates employer liability of secondhand smoke exposure by prohibiting tobacco smoking inside buildings, offices, and bathrooms. However, designated smoking areas with cigarette butt receptacles that are placed near entrances or exits can encourage smokers to congregate and to participate in smoking rituals. And public display of tobacco use can create a negative wellness image to nonsmoking employees, visitors, and clientele.

#### Better Policy:

A **Tobacco-Free Workplace** policy prohibits use of any tobacco use in all work areas, bathrooms, company vehicles, or private offices. This policy eliminates all use of tobacco products including spit tobacco, chew, or snus at the worksite (eliminates all tobacco use at the worksite). The policy discourages smokers from becoming multi (poly) product tobacco users to maintain nicotine use during work.

#### Good Policy:

A **Smoke-Free Campus** policy prohibits smoking while on all company property and in company vehicles. (Smokers may substitute spit tobacco or similar products to address nicotine cravings.) This policy eliminates the opportunity for smokers to congregate at designated smoking areas, thus increasing productivity. Smoking litter found on the grounds, in parking lots, and around receptacles is prevented. Secondhand smoke exposure for your employees and customers at the smoking areas is eliminated.

#### Best Policy:

A **Tobacco-Free Campus** policy prohibits use of all tobacco products on all company property, including buildings, parking areas, common grounds, and vehicles. Use of tobacco products within employee vehicles on company property is also prohibited. This is the BEST and MOST COMPREHENSIVE tobacco control policy. Signage on exterior grounds communicates the policy to all employees, visitors, consultants, clients, and vendors (eliminates all tobacco use at all times, everywhere).

Remember:

Smoke-free policies can encourage smokers to become dual tobacco product users (referred to as poly tobacco users).

Employees often replace cigarettes with smokeless tobacco products and new tobacco products like snus or orbs when smoking is prohibited.



## CONSIDER THE HEALTH CONSEQUENCES

Corporate leaders today are well aware that rising health-care costs are one of the biggest threats to their bottom lines. What is not as well-known is the significant role of smoking and other tobacco use in driving these costs. In fact, tobacco use is the leading preventable cause of death and disease in the United States. Business bears the burden of tobacco-caused illness — and resulting health-care bills — among employees, family members, and even retirees. Reducing tobacco use and its preventable costs is critical to optimizing profits and improving worker health and productivity.

Tobacco use harms virtually every organ in the body, causing multiple cancers, heart disease, chronic disease, chronic respiratory diseases, and numerous other ailments. It's no surprise then that tobacco-related illness results in almost \$100 billion in health-care costs each and every year, and business bears much of that burden. Private insurance pays for nearly 50 percent of smoking-related medical costs for people ages 19-64.

Even though they live significantly shorter lives, tobacco users on average incur \$15,000 to \$17,000 more in lifetime health-care expense than nonsmokers.

Of course, the worst cost is human life. Tobacco use kills more than 440,000 Americans every year, and smoking cuts lives short by an average of 12 to 14 years. Half of long-term tobacco users become ill and die of tobacco-related illnesses in middle age.

# HEALTH CONSEQUENCES OF TOBACCO USE (SMOKING)

Every exposure to the cancer-causing chemicals in tobacco smoke can damage DNA in a way that leads to cancer. Exposure to secondhand smoke has an immediate adverse impact on the cardiovascular system, damaging blood vessels, making blood more likely to clot, and increasing risks for heart attack and stroke. You don't have to be a heavy smoker or a long-time smoker to get a smoking-related disease or have a heart attack or asthma attack that is triggered by tobacco smoke.

Even low levels of smoke exposure, including exposures to secondhand tobacco smoke, lead to a rapid and sharp increase in dysfunction and inflammation of the lining of the blood vessels, which are implicated in heart attacks and stroke.

## **Mortality and Morbidity**

- Results in premature death
- Causes significant disease and disability

## **Cardiovascular Effects**

- Coronary heart disease
- Cerebrovascular disease (stroke)
- Atherosclerotic peripheral vascular disease

## **Cancer**

- Lung cancer
- Pancreatic cancer
- Laryngeal cancer
- Renal cancer
- Cancer of the oral cavity (lip, tongue, mouth, and pharynx)
- Associated with gastric cancer
- Esophageal cancer
- Bladder cancer

## **Lung Disease**

- Chronic bronchitis
- Emphysema

## **Women's Health Effects**

- Intrauterine growth retardation, leading to low-birth-weight babies
- Cervical cancer
- Probable cause of unsuccessful pregnancies

## **Other Health Effects**

- Addiction to nicotine
- Adverse interactions with occupational hazards that increase the risk of cancer
- Alteration of the actions and effects of prescription and nonprescription medicines
- Probable cause of peptic ulcer disease

## **Health Consequences of Secondhand Smoke**

- Lung cancer in nonsmokers
- Associated with higher death rates from cardiovascular disease in nonsmokers
- In children, associated with respiratory tract infections, increase prevalence of fluid in the middle ear, additional episodes of asthma, increased severity of symptoms in children with asthma, and a risk factor for new onset of asthma in children who have not previously displayed symptoms
- Associated with increased risk of sudden infant death syndrome (SIDS)
- Associated with increased irritant effects, particularly eye irritation, among allergic persons

## HEALTH CONSEQUENCES OF TOBACCO USE (SMOKELESS)

The use of smokeless tobacco products is undergoing an alarming resurgence in the United States. As companies, localities, and states ban smoking, the tobacco industry seeks to expand the use of smokeless tobacco through aggressive marketing and new products. Snus, a small discreet pouch of tobacco, is marketed to women, professionals, and even children as a more socially acceptable, less messy, and tasty nicotine alternative. Several national surveys have reported a higher prevalence of use among those employed in blue-collar occupations. While adult males have the highest prevalence of smokeless tobacco use (double the national average, with 14.8 percent chewing), in Texas use by young adult females is on the rise.

Smokeless tobacco has 28 known cancer-causing agents that are strongly linked to oral cancers. Smokeless tobacco users are 50 times more likely than non-users to contract cancers of the cheeks, gums, and inner surface of the lips, and have significantly higher incidence of cancers of the esophagus, larynx, stomach, pancreas, and prostate. One in three patients diagnosed with oral cancer dies from it.

Nicotine addiction is often more prevalent with smokeless tobacco users due to the concentration of nicotine and the direct placement of the product in the mouth. Nicotine in smokeless tobacco is absorbed at three to four times the rate of nicotine in cigarettes.

The health of non-tobacco using employees is compromised when biological waste (spit tobacco mixed with mucous and saliva) is disposed of in an unsanitary fashion (such as spitting into a cup).

### **Cancer**

- Cancer of the oral cavity (lip, tongue, mouth, and pharynx)

### **Women's Health Effects**

- Pregnancy-related problems

### **Other Health Effects**

- Leukoplakia (a lesion of the soft tissue on the gums that consists of a white patch or plaque that cannot be scraped off)
- Tooth decay
- Recession of the gums
- Other gum disease

## CALCULATE YOUR COMPANY'S TOBACCO LIABILITY

This is a partial list of conditions caused or exacerbated by tobacco use. Health plan reports may contain this information, or special reports can be generated by the health plans or by internal health-care data analysis systems. Benefits and human resource managers can use these data to help determine what you spend on tobacco use. It can also help measure the effectiveness of new programs or services you add.

### Calculate the costs of smoking-related diagnoses

CONDITIONS	ICD-9 DIAGNOSIS CODES	NUMBER OF CLAIMS	ESTIMATED PERCENT TOBACCO RELATED	COST PER DIAGNOSIS	COST TO YOUR COMPANY
Acute Myocardial Infraction	410.0				
Asthma	493.0				
Carcinoma, In situ, Bronchus and Lung	231.2				
Chest Pain	786.50				
Chronic Airway Obstruction	496.0				
Chronic Obstructive Pulmonary Disease	491.2				
Coronary Atherosclerosis	414.0				
Cough	786.2				
Diabetes Mellitus	250.0				
Dysplasia, Lung	748.5				
Emphysema, Obstructive	492.8				
Hypercholesterolemia	272.0				
Infection, Upper Airway	465.9				
Leukoplakia	528.6				
Metaplasia, Tracheobronchial tree	519.1				
Reduced Vital Capacity	794.2				

Source: Professional Assisted Cessation Therapy. Employers' Smoking Cessation Guide: Practical Approaches to a Costly Workplace Problem. 2002:20-21. [www.endsmoking.org](http://www.endsmoking.org)

# HOW MUCH DOES TOBACCO COST YOU?

In Texas, smoking costs an estimated \$3,400 per smoker per year. The cost is made up of \$1,600 in direct medical expenditures and \$1,800 in lost productivity. Factors considered in estimating these costs include:

- Greater health-care costs
- Increased absenteeism
- Work time spent on tobacco breaks
- Higher life insurance premium costs
- Greater risk of occupational injuries
- Costlier disability
- More disciplinary action

DO THE MATH				
_____	<b>X</b>	_____	=	_____
Total Number of Employees		2009 Texas Adult Smoking Rate		Number of Smokers (or, if known, enter # of employees who smoke)
_____	<b>X</b>	_____	=	_____
Number of Smokers		Estimated Health Costs		Total Health Costs
_____	<b>X</b>	_____	=	_____
Number of Smokers		Estimated Lost Productivity Costs		Total Lost Productivity Costs
<b>Your total cost per smoker is:</b>				
_____	<b>X</b>	_____	=	_____
Total Health Costs		Total Lost Productivity Costs		Total Cost Per Year

# WORKSITE TOOLKIT: IMPLEMENTING A TOBACCO-FREE WORKPLACE POLICY

## Ten Steps to Becoming Tobacco-Free

The **2010 Surgeon General's Report** reveals new scientific findings about cigarettes and how quickly they can damage your body, and it suggests that tobacco companies have altered their products to make them more addictive. The report makes it clear why we must protect others from the harmful affects of tobacco smoke. Because there is no safe level of secondhand smoke, only 100 percent tobacco-free policies fully protect workers' health. Here are steps to help make it easier for your business.

1. Establish a policy work group to develop your plan. Engage employees, including smokers, nonsmokers, and former smokers. Be sure to include representatives from different departments and recognized employee organizations (e.g., union, safety committee). Assign one or more senior managers to implement the new policy.
2. Gather information:
  - Legal, medical, and economic effects of smoking
  - Employee tobacco use, concerns about new policy, barriers to quitting
  - Example policies
  - Organizational complexities (i.e., ownership of building, labor contracts)
3. Create a plan and implementation timeline with preparation steps, the announcement date, interim steps, and opportunities to review the policy and process.
4. Chief executive officer should announce the policy to all employees in a meeting and in a letter.
5. Communicate often. Inform and educate employees using:
  - Manager trainings
  - Employee orientations
  - Intranet
  - Posters
  - Company newsletter
  - Paycheck inserts
  - Letters to families
  - Brown bag lunches
  - Closed-circuit television

Also consider enlisting others who communicate with your employees, such as unions or associations, to spread the message about cessation benefits and programs.

6. Plan to continue educational efforts beyond just the initial implementation period. Employees will benefit from continual reminders of the policy, consequences for violating the policy, and available resources to help them quit using tobacco.
7. Transform your environment by removing ashtrays and cigarette vending machines and installing "No Smoking" signs in prominent places. (Include these steps in the timeline.)
8. Enforce your policy. Determine early who will be responsible for enforcement and make sure they have the full authority to maintain compliance. A well-written policy should be very clear on the consequences for violating the policy. Consequences should be similar to those for violations of similar types of organizational policies.
9. Provide and promote effective cessation treatment, including counseling and medications at little or no cost. Voice and demonstrate your commitment to support smokers and tobacco users who want to quit, understanding that quitting is a process that can take multiple attempts with a variety of strategies.
10. Periodically evaluate and refine your policy.

For more information on developing a tobacco-free workplace and for an example of a detailed 12-month timeline and sample workplace policies, visit Smokefree in a Box at <http://www.globalSmokefree.com>.

## CREATING A COMPREHENSIVE TOBACCO-USE POLICY

Creating a tobacco-free workplace can take anywhere from four to six months or longer, depending upon the complexity and culture of your organization and the smoke-free laws in your community.

If you plan to introduce a new tobacco-use policy, begin with an understanding of your tobacco-cessation resources, the smoke-free laws and ordinances in your region [link to <http://txshsord.coe.uh.edu>], and the potential impact on your workforce. Clearly establish your intention to become tobacco-free and the rationale behind this decision. Then, with visible support from top management, develop a process that engages employees at all levels and supports tobacco users to quit.

Effective policies are clearly stated and include:

- Purpose of the policy
- Products covered under the policy (i.e., Does policy apply to smokeless tobacco products?)
- Definition of how the policy applies to employees, visitors, and others
- Physical boundaries of policy (e.g., private vehicles, company equipment, etc.)
- Support to help employees comply, including cessation services
- Clear enforcement rules and consequences
- Contact person who can answer questions and address concerns
- Policy review process

You can find an example tobacco-free policy in Appendix D: Sample Policies.

## KEY PRINCIPLES OF SUCCESSFUL TOBACCO POLICY IMPLEMENTATION

- Focus on smoke, not the smoker.
- Focus on health and safety regarding secondhand smoke, not individual rights.
- Ensure that restrictions and enforcement are equitable across job categories; treat all workers fairly, regardless of title or tobacco use status.
- Obtain and communicate management commitment and support.
- Provide training for middle managers and supervisors on policy communication and enforcement.
- Provide real and visible opportunities for employee participation in policy planning and implementation.
- Educate the workplace community about the hazards of combining secondhand smoke and materials used in work processes.
- Allow **four to six months from the time of the announcement to implementation**, depending on the size of the organization and the magnitude of the change from the old to the new policy.
- To maximize motivation, plan to implement the policy in conjunction with national events such as the American Cancer Society's Great American Smokeout in November or around New Year's Day (when people are making New Year's resolutions).
- Offer smoking cessation programs to all employees and their families before and after the policy change.
- Enforce the tobacco policy just as you would any other policy. Do not differentiate between smoking breaks and any other kind of breaks.
- Anticipate unintended effects (e.g., the concentration of smoke in designated areas).
- Continue to provide smoking cessation educational opportunities and programs after the policy has been implemented to support employees in their attempts to quit smoking and to prevent relapse.



# WORKSITE TOOLKIT: CESSATION BENEFITS

## *Types of Support for Employees Who Smoke*

A number of choices are available. Voluntary agencies, health departments, and national organizations have developed self-help materials (such as booklets, audiotapes, and videotapes) and group behavior-modification programs (either on-site or in a community setting). In some communities they also sponsor presentations and health fairs at worksites.

Employees who smoke can be offered a variety of assistance, from comprehensive programs to more limited referrals. To tailor a program to fit your company, you can mix and match from these options.

### **Match Support to Employee Needs**

One way to decide what kinds of support to offer is to look at the options most helpful for smokers at different stages of readiness to quit and make sure there is at least one supportive option available for each type of smoker.

### **New Ex-Smokers**

When smokers quit smoking, they may face physical discomfort, weight gain, and stress. The following steps help minimize these obstacles.

- A tobacco-free work environment may help these ex-smokers by eliminating cues to smoke (e.g., seeing others smoke, ashtrays).
- Nicotine replacement therapy reduces withdrawal symptoms.
- Most smoking cessation programs (self-help or formal) include nutritional information and exercise to help manage weight.
- Most cessation programs include stress management techniques such as relaxation training, positive imagery, and deep breathing to decrease the anxiety that surrounds quitting smoking.

### **Employees Who ARE Thinking About Quitting and Those Who Want Help to Quit**

Employers can support employees who want to quit by offering (or offering referral to) a variety of kinds of help, including self-help programs, formal cessation programs, counseling from a health-care provider, and pharmacological aides. Incentive programs also support smokers' attempts to quit.

### **Employees Who ARE NOT Thinking About Quitting**

Communication may help smokers who are not thinking about quitting consider the benefits of quitting. Options include:

- Providing information through occupational health staff
- Encouraging use of the Texas Tobacco Quit Line (1-877-YES QUIT)
- Placing articles in company newsletters on the benefits of cessation
- Showing posters and billboards that encourage quit attempts
- Offering health risk appraisals or other health assessments
- Participating in national and international campaigns such as:
  - Great American Smokeout (the Thursday before Thanksgiving)
  - National Employee Health and Fitness Day (the third Wednesday in May)
  - Tobacco Free Kids Day (late March or early April)
  - World No Tobacco Day (late May)

## OPTIONS TO SUPPORT EMPLOYEES WHO USE TOBACCO PRODUCTS

LEVEL OF SUPPORT	PROS	CONS
<p><b>Comprehensive</b></p> <ul style="list-style-type: none"> <li>• Offer and pay for tobacco cessation programs for employees and covered dependents that use tobacco products</li> <li>• Provide communication to all employees about the changes in tobacco use policies and support to be offered</li> </ul>	<ul style="list-style-type: none"> <li>• May enhance health status of employees</li> <li>• May help contain health-care costs</li> <li>• Allows employer to assess impact of cessation program</li> <li>• More likely to yield change in tobacco use behavior</li> <li>• Demonstrates employer's commitment to helping employees who use tobacco</li> </ul>	<ul style="list-style-type: none"> <li>• More expensive than other options</li> <li>• Requires a significant effort by the employer</li> </ul>
<p><b>Facilitation</b></p> <ul style="list-style-type: none"> <li>• Work with health-care providers (Insurers and Health Maintenance Organizations)</li> <li>• Provide self-help cessation to employees</li> <li>• Provide communication to all employees about the changes to tobacco use policies and support to be offered</li> </ul>	<ul style="list-style-type: none"> <li>• May enhance health status of employees</li> <li>• Takes advantage of existing resources</li> <li>• Does not require continuing effort or monitoring by employer</li> </ul>	<ul style="list-style-type: none"> <li>• Requires significant start-up effort</li> <li>• Health-care providers may be unwilling to provide support</li> </ul>
<p><b>Referral</b></p> <ul style="list-style-type: none"> <li>• Provide employees with information on community tobacco cessation programs</li> <li>• Provide self-help cessation materials</li> <li>• Provide communication to all employees about the changes to tobacco use policies and support to be offered</li> </ul>	<ul style="list-style-type: none"> <li>• Takes advantage of existing resources</li> <li>• Less expensive than comprehensive support</li> <li>• Easier to implement than comprehensive support or facilitation</li> </ul>	<ul style="list-style-type: none"> <li>• Less effect on tobacco use behavior and health-care costs</li> </ul>

# CESSATION MESSAGING

## Prepare Key Messages

The two key messages most employees need to know are:

- **Help** makes a difference.
- **Help** is available (through benefits or services).

Smokers in focus groups say they are most interested in learning about the kinds of help you provide. Make this a key part of your message.

## Provide Information

You can provide other helpful information, such as:

- The Texas Tobacco Quit Line: 1-877-YES QUIT (1-877-937-7848), which provides a free telephone consultation for people trying to quit and referrals to other cessation services offered by various health plans
- Local tobacco-cessation classes and support groups
- Stop-smoking tips and strategies

Provide a resource list of websites that include stop-smoking strategies.

## Use Encouraging and Hopeful Messages

Don't forget the power of storytelling. Success stories of employees who have quit smoking can motivate others to try. Feature these employees in publications and other venues.

## Timing Is Everything

People are ready to quit at different times, and the average smoker tries several times before quitting. That can be discouraging — for smokers, their families, their co-workers, and their employers. A person who resumes smoking after trying to quit may be discouraged from trying again. That's why it's important to assure people that help is available when they are ready to quit. Persistence does pay off: Of those who try to quit, half will ultimately succeed.

Common sense, research, and testimony from smokers and former smokers tell us they are unlikely to quit until they are ready. Thus, accessible information about how to get help can catch a smoker when he or she is prepared to quit. Employers are well-positioned to provide this information.

Employees need to be kept well-informed about changes to company policy, changes to health plan coverage, and the availability of services to help them quit tobacco use. The approaches you use to get the word out will depend on the size of your organization and the amount of education needed. You may also need to use different methods for different groups of employees.

## CESSATION SERVICES

### **Use Your Company's Health Plan To Help Employees and Their Families Quit Using Tobacco**

Nearly 80 percent of adult smokers in Texas want to quit, and 60 percent have made a quit attempt in the past year. Research shows that the most effective tobacco dependence treatment includes medication and coaching/counseling. In fact, tobacco users are two to three times more likely to quit when they can access effective services to help them. Businesses that have included a tobacco cessation benefit in their health plan report that this coverage has reduced total tobacco consumption, increased the number of tobacco users willing to undergo treatment, increased productivity, and increased the percentage of those who successfully quit.

### **Are Cessation Health Benefits Cost-Effective?**

- Tobacco cessation is more cost-effective than most other common and covered disease prevention interventions, such as treatment of hypertension and high cholesterol.
- It costs between 10 and 40 cents per member per month to provide a comprehensive tobacco cessation benefit (costs vary based on utilization and dependent coverage).
- Cost analysis has shown tobacco cessation benefits to be either cost-saving or cost-neutral. Overall, costs/expenditures to employers equalize at three years and benefits exceed costs by five years.

### **Questions to Ask Health Providers**

When reviewing current health plans or bidding for a new one, benefits managers can incorporate some or all of the following tobacco dependence treatment questions into written specifications:

- How does the health plan identify and document tobacco users and tobacco cessation interventions?
- What tobacco cessation medications are covered? How frequently are these offered, and for what period annually? Are multiple medications covered? Are multiple quit attempts covered in one 12-month period?
- What type of counseling (e.g., in-person, online, telephone) is covered, how often is counseling covered annually, and for what period (e.g., 90 days twice per year)?
- Describe the plan design for tobacco cessation (e.g., co-pay, etc.). Is the co-pay similar to other medications?
- Are over-the-counter medications, such as nicotine patches and gum, covered? Is there a co-pay?
- Who is eligible for tobacco cessation benefits? Are dependents covered? Does this include all covered individuals or only those with a drug benefit?
- What other education or counseling materials are provided (e.g., hard copy, online, other)?
- How does the plan motivate health-care providers to provide tobacco cessation counseling (e.g., bonuses)?
- Is the benefit promoted to employees? How?
- How is the percentage of tobacco users who have received treatment assessed? How is the success of the tobacco cessation initiatives evaluated?

## HEALTH BENEFIT CONSIDERATIONS

After reviewing what tobacco cessation benefits your health plan currently provides, consider taking the following steps.

- Learn about your employees. Conduct research to find out: How many employees use tobacco? How many intend to quit in the next six months? What do they currently know about their tobacco-cessation health benefits? What are the perceived barriers to quitting, especially in the workplace?
- Measure the toll of tobacco on your company. Determine the estimated impact on your company in terms of health-care costs, absenteeism, smoking breaks, life insurance, disability, workforce harmony, industrial accidents, and disciplinary action.
- Talk to your insurance consultant or broker about benefits, riders, products, or discounts designed to help employees quit tobacco.
- Determine ways to make tobacco-cessation benefits more accessible.
- Expand tobacco-cessation benefits to both employees and spouses as a way to encourage more support for quitting.
- Establish systems to measure what you do and the impact of any changes you make.

Tobacco cessation benefits that have been found most effective cover all of the following:

- FDA-approved medications, including both prescription and over-the-counter
- Counseling services, including telephone and individual counseling (While classes are also effective, few smokers attend them.)
- Several counseling sessions offered over a period of several weeks

Show your employees you want to help them quit and understand the chronic nature of tobacco dependence by designing a benefit that makes it easier for them.

- Eliminate co-payments or require employees to pay no more than the standard co-payment. Data show that smokers rarely use cessation services inappropriately and are much more likely to quit when no co-payment is required.
- Provide at least two courses of treatment, both medication and counseling, per year.

## HOW DO I MAKE CESSATION CONVENIENT FOR MY EMPLOYEES?

The workplace offers an ideal environment for encouraging smokers and spit tobacco users to quit and for offering convenient access to cessation services. Employees spend a lot of time at work, so making cessation services available at work and during working hours can eliminate some of the obstacles to quitting. In addition, employees are more likely to use cessation services if they are convenient, so you may want to consider offering release time for employees to attend cessation classes.

The types of services you choose to offer will impact how convenient cessation is for employees:

- The Texas Tobacco Quit Line is free to all Texans and offers full-day, evening, and weekend hours, as well as 24-hour voicemail. Allowing employees to call the Quit Line from work also increases the convenience of this service.
- Self-help programs are attractive because they offer privacy and flexibility.
- Smoking and tobacco cessation group programs can be offered right at the workplace. If your company does not employ enough tobacco users to make this a viable option, you can refer employees to programs in the community.
- Incentives are advantageous for both employees and employers because they are easy to set up and operate and because they are flexible and adaptable. Many types of incentives can be offered, from recognition in employee newsletters, to gym memberships, to cash incentives. Make sure not to offend nonsmokers. For example, you may want to offer incentives to all employees who are tobacco-free six months after the policy takes effect.
- Life insurance premiums.

Eliminating financial barriers to quitting can also make services more convenient to your employees and can help encourage more individuals to participate in treatment. If your company's health plan is a partner of the Texas Quit Line's NRT program, your employees will benefit from free access to up to eight weeks of NRT patches. If your company's plan is not involved in the program, your organization can become a partner itself. Or your company may want to choose to provide NRT directly as a self-funded benefit or to reimburse employees who use NRT products in an effort to quit tobacco.

A complete list of Quit Line/NRT health plan participants is available at [www.yesquit.org](http://www.yesquit.org) or 1-877-YES QUIT (1-877-937-7848).

How much will tobacco cessation benefits cost?

$$\begin{array}{l} \text{Number of employees} \\ \times 38\text{¢ per month} \\ = \text{total cost per month} \end{array}$$

*Costs vary based on utilization and dependent coverage.*

# TEXAS STATE QUITLINE SERVICES

## Access to Telephone Quitlines for Tobacco Users

Telephone quitlines offer a convenient and effective option for treating tobacco dependence by providing counseling services at no cost to the tobacco user. Some quitlines also offer access to free or discounted over-the-counter treatment medications. Direct access to the quitline can increase the number of tobacco users who quit and remain tobacco-free. There are many ways to improve employee access to and use of quitlines:

- **Work with your health plan to minimize or eliminate out-of-pocket costs.** Many existing Employee Assistance Programs (EAP) provide comprehensive quitline services (including screening, counseling, and medication assistance). Investigate your options under existing plans, and explore options to extend services to spouses and dependents.
- **Contract directly with a quitline vendor.** Provide quitline services to your employees directly from their desks or workstations. Working with a vendor can allow you to tailor the services to your workforce.
- **Promote the services of your state quitline.** All U.S. states and territories currently run a tobacco quitline and provide free services, although eligibility and extent of services vary from state to state. Your state quitline is available at this number: **1-877-YES QUIT or 1-877-937-7848**. Contact your state quitline or health department to investigate options to partner with the quitline in your area.
- **Communicate information on quitlines and other available services.** Promote available options to your employees through newsletters, payroll inserts, announcements, brochures, e-mails, and your intranet. If services are covered under your health plan, be sure to inform employees about them in the Summary Plan Description. Be sure to emphasize to employees that quitline services are confidential.

## COMPREHENSIVE CESSATION TREATMENT

Comprehensive tobacco-use treatment generally includes three components: screening, counseling, and medication (including over-the-counter nicotine replacement therapy). Below is a brief description of the model recommended coverage for each treatment component.

**SCREENING:** A medical professional asks the patient if he or she uses tobacco products and is ready to quit. Coverage should include brief counseling efforts by a health-care provider during office visits.

**COUNSELING:** A trained provider gives personalized guidance on ways to quit tobacco. Coverage for counseling should include at least four 30-minute sessions of individual (face-to-face), telephone, or group counseling. Follow-up should be included for recent quitters (less than one year) to prevent relapse.

**PHARMACY SUPPORT:** FDA-approved medications to help tobacco users quit. Coverage for medication should include all FDA-approved medications. These include over-the-counter and prescription nicotine replacement therapy — i.e., gum, patch, inhaler, nasal spray, and lozenge — and prescription non-nicotine medications — i.e., bupropion (Zyban®, Wellbutrin®) and varenicline (Chantix™). Coverage should also allow for use of two medications at a time.

While each of these services is effective alone, a combination of counseling and medication improves success rates, and coverage should allow both. In addition, coverage for up to two 90-day courses of medication and two courses of counseling should be included each benefit year. Co-pays and deductibles should be reduced as much as possible or eliminated to further encourage employees to quit.

By providing support for tobacco users to quit with proven effective methods, you can improve their health, increase their productivity, and reduce your health-care costs.

- **Promote existing coverage for tobacco treatment benefits.** Inform your employees of the benefits available to them through e-mail, newsletters, payroll inserts, and Summary Plan Descriptions. Communicate any benefit changes to employees as quickly as possible and encourage employees to talk to their health-care providers about effective treatments.
- **Inform your employees of available medications.** Send detailed information on the prescription and drug therapy coverage they can receive through their health benefits. Encourage them to use health savings accounts for services that are not yet covered under your plan.
- **Step up promotion of coverage at opportune times.** Many tobacco users try to quit at the beginning of the calendar year or just after new tobacco laws or policies are introduced by your community or state. (e.g., smoke-free air laws, tobacco tax increases). These policies help encourage tobacco users to try to quit, so make sure you remind your employees of their options for treatment.



# WORKSITE TOOLKIT: EVALUATION

## Evaluate and Adjust

You will want to evaluate the effectiveness of your tobacco-cessation promotion as you would other company investments. Ask employees for advice, formally and informally. Consider surveying employees to determine if your promotion efforts have made an impact. Seek information, not only about tobacco use but also measuring employee awareness of benefits or services, attitudes toward company promotions, etc. Armed with this information, you can adjust your program to be as effective as possible.

## Maintaining Your Tobacco Policy

It is important from time to time to review and, if necessary, revise your tobacco policy. Are there additional areas where tobacco use should be banned? Are there changes in insurance or cessation services available? Have changes in state or local laws occurred that require changes in the current policy? These are the types of questions that need to be addressed. Establish set times (e.g., every six months or annually) to conduct your review. Doing so will help you protect your employees while decreasing the economic impact of tobacco use on your company or organization.

### In the short term:

- Changes in exposure to secondhand smoke (SHS) in the work environment
- Number of employees attending cessation activities or using self-help materials
- Awareness of SHS policy
- Employee attitudes toward SHS policy and cessation activities
- Improved employee morale
- Less conflict between smokers and nonsmokers
- Enhanced quality of work
- Improved job satisfaction

### In the long term:

- Changes in number of employees who smoke
- Effect of cessation activities on successful quitting
- Changes in health risks for smokers and nonsmokers
- Enhanced corporate image
- Improved employee attitude toward health
- Reduced absenteeism
- Reduced health-care costs
- Lower accident rate
- Decline in turnover
- Fewer sick days
- Improved productivity
- Lower maintenance costs

You should evaluate your policy over the longer term (e.g., one to three years).

This step will require more effort and time, but it can provide valuable information, such as:

- Awareness of Tobacco-Free policy and cessation activities
- Participation in cessation activities
- Effectiveness of cessation activities
- Management support and policy enforcement
- Return on investment

# WORKSITE TOOLKIT: LEGAL ISSUES

## *Legal Implications of Secondhand Smoke at the Workplace*

In 1976 the first reported secondhand smoke lawsuit was filed. Since then the number and scope of suits has increased. By implementing tobacco-free policies, companies, government agencies, and other organizations can avoid lengthy and expensive litigation and penalties associated with secondhand smoke exposure by employees and visitors. A list of various federal, state, and local legal issues is provided below.

### **Tobacco Laws in Texas**

Texas does not have statewide legislation addressing clean indoor air standards related to secondhand smoke at this time. However, clean indoor air is addressed through local municipal ordinances. Current municipal ordinances can be located on the Texas Smoke-Free Ordinance Database website. <http://www.utmb.edu/shsordinances>

- **Local Community Clean Indoor Air Regulations**

Thirty-three Texas cities and 45 percent of Texans are covered by comprehensive smoke-free workplace ordinances. Sixty-eight percent of Texans support a statewide law that prohibits smoking in all indoor workplaces. To find out more about these communities visit the database at <http://txshsord.coe.uh.edu>.

- **Local Community Clean Outdoor Air Regulations**

Many communities such as Lufkin and Rosenberg were concerned about children's exposure to tobacco products in public outdoor places. In order to curb the exposure they have established tobacco-free public parks, zoos, and outdoor places. Other cities like Austin are working to protect the public by passing regulations to eliminate exposure to secondhand smoke and tobacco products in outdoor spaces.

### **Other Legal Issues Related To Smoking**

- **Workers' Compensation and Disability Benefits**

In recent years nonsmokers have been awarded workers' compensation and disability benefits as a result of being harmed by secondhand smoke while on the job.

- **Americans with Disabilities Act (ADA)**

Individuals with breathing sensitivities are protected under the ADA. As such, employers may be required to provide no-smoking accommodations for employees and others who frequent their establishments.

### **Occupational Safety and Health Act of 1970 (OSHA)**

The main federal law covering threats to workplace safety is the Occupational Safety and Health Act of 1970 (OSHA). OSHA requires employers to provide a workplace that is free of dangers that could physically harm employees. Although OSHA does not regulate tobacco smoke as a whole, it limits employee exposure to several of the main chemical components found in tobacco smoke. More information can be found at:

[http://osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=STANDARDS&p\\_id=9991](http://osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9991)

### **Rehabilitation Act of 1973**

It is unlawful for the federal government, federal contractors, and recipients of federal financial assistance to engage in disability discrimination. Employees have filed lawsuits alleging that employer failure to prohibit or limit workplace smoking or accommodate their respiratory affliction was unlawful discrimination.

### **Can I have a policy about hiring — or not hiring — people who smoke or use tobacco?**

Although much discussion has occurred around this question, there is currently no Texas law that would prohibit an employer from making employment decisions based on whether or not an employee smokes or uses tobacco products. Many companies now require their employees to be tobacco-free.

### **Can I legally charge tobacco users higher health insurance premiums?**

Some public and private employers are choosing to charge higher health insurance premiums for employees who use tobacco. Doing so can help employers recover some of the high costs associated with tobacco use.

Legally, companies do have the ability to charge higher premiums. However, some federal laws limit the way in which health-care policies can be structured.

For example, the Health Insurance Portability and Accountability Act (HIPAA), a collection of federal laws that govern employee health benefits, contains a nondiscrimination section, of which government plans can opt out. The section generally prohibits group health plans, such as those administered by employers, from requiring plan participants to pay more for their insurance simply because the participant has a "health factor." Nicotine addiction is considered to be a health factor.

However, there is a Wellness Program Exception to the nondiscrimination requirement. It states that employers may charge premium differentials as part of an overall "wellness program." Current federal regulations do not provide a definition for the term "wellness program," and it is not clear when or if new regulations will define the term. Therefore, if an employer can make a good-faith showing that higher insurance surcharges for tobacco users are part of an overall "wellness program," they can legally charge those employees higher health insurance premiums.

### **Working with Labor Unions**

Labor unions and management both want healthy workers, and a safe and healthy environment. Both have an interest in reducing health-care costs. Working with labor unions can be an essential part of gathering information. Three major, relevant labor issues should be addressed:

- Whether an employee has the right to use tobacco at the workplace,
- The relationship of smoking restrictions to collective bargaining, and
- Whether a focus on secondhand smoke is perceived as a diversion from addressing other occupational hazards.

As discussed earlier, no one has the right to impose a health risk on others, and because an employer has the common-law responsibility to provide a safe work environment, an employer has the right to restrict smoking on company premises and even refuse to hire someone because he or she would smoke on the job. In union-represented work environments, however, the employer may be obligated to subject the policy to collective bargaining, depending on contract provisions. Employers should attempt to work collaboratively with unions rather than act independently to restrict smoking, because management and unions share a fundamental common goal: providing a safe and healthful working environment. Issues such as smoking breaks and provision of smoking cessation support may arise, but these can be addressed within the context of providing a tobacco-free workplace.

To address the concern that focus on secondhand smoke is shielding the issue of other occupational hazards, you should turn to the scientific evidence that secondhand smoke is a major workplace hazard and needs to be reduced to the lowest possible levels.

### **Specific questions to address regarding unions include the following:**

- What unions are involved?
- Do the unions have a stated position on tobacco-use restrictions?
- Is there contract language or past practice that addresses tobacco use on the job by union members?
- What is the opinion of labor relations regarding whether a policy on smoking or tobacco use must be negotiated?
- Can unions be involved in a cooperative policy development effort?
- Is the current state of labor-management relations conducive to a change in smoking policy?

Source Information: [www.laborandtobacco.org](http://www.laborandtobacco.org)

## SMOKING IN THE WORKPLACE: SMOKERS' RIGHTS?

Tobacco use is not necessary to job performance and, therefore, cannot be used as a basis for asserting any right in a legal sense. That fact has not stopped smokers from suing for the so-called "right to smoke," but their claims have been consistently rejected by the courts. They have sought their "right to smoke" based principally on one of the following legal arguments:

- 1. Discrimination on the basis of a handicap:** Smokers might threaten to sue on the basis of handicap. This argument is not allowable under either the Federal Rehabilitation Act of 1976 or the Americans with Disabilities Act (ADA) of 1990. In one case, a smoker sought protection under the Federal Rehabilitation Act, which protects disabled persons from job discrimination. The smoker claimed her addiction to tobacco constituted a disability. The court, however, dismissed the suit as having no merit. Moreover, the ADA specifically states that smoking may be banned in workplaces to protect individuals with bona fide disabilities from tobacco smoke.
- 2. Constitutional right to smoke:** Although the tobacco industry likes to refer to smokers' "rights," smoking is not protected under the Constitution and smokers do not have a legal right to smoke in the workplace. Employers are free to set policies and implement restrictions that are necessary to provide a safe and healthy working environment. The courts have consistently upheld the constitutionality of statutes and rules that restrict or prohibit smoking in the workplace.

Several states have instituted "smoker protection laws," which prohibit employers from discriminating against employees and prospective employees with respect to hiring, compensation, promotion, or the terms, conditions, and privileges of employment, because of their legal use of tobacco products during non-work hours. These laws do not prevent an employer from regulating tobacco use at the workplace or during work hours.

Source: [www.no-smoke.org](http://www.no-smoke.org)

## WORKSITE TOOLKIT: FAQ

### Frequently Asked Questions on Tobacco Policy Issues

#### **Issue: Why is a tobacco-free worksite important?**

- Helps employees and visitors quit tobacco
- Reduces nonsmokers' exposure to secondhand smoke
- Tobacco in all forms (smoking, smokeless, and secondhand smoke) kills.
- Continuing to allow tobacco use represents a liability. And the employer has a responsibility to provide a safe and healthy workplace.
- Tobacco policies save costs associated with absenteeism, smoke breaks, life insurance, and health care.

#### **Issue: Does an employer have the authority to implement a tobacco-free policy?**

- Employers are free to set policies and implement restrictions that are necessary to provide a safe and healthy working environment.
- The courts have consistently upheld the constitutionality of policies that restrict or prohibit smoking in the workplace.

#### **Issue: Why should this policy cover smokeless tobacco?**

- There is no safe tobacco product.
- The spitting involved with smokeless products is unsanitary and a possible vehicle of disease.

#### **Issue: Will this policy affect patronage to company services?**

- Continuing to allow tobacco use may impact patronage, especially if complaints have been received.
- Most company patrons and employees, and most Texans in general, do not use tobacco.

#### **Issue: Do people have the “right” to use tobacco?**

- Smoking is a privilege. “Right to smoke” claims have been consistently rejected by the courts.
- The right of access to facilities is protected under the Americans with Disabilities Act for those with breathing and other disorders.
- Secondhand smoke policies prevent ex-smokers and nonsmokers from being exposed to the toxic substances in secondhand smoke.

#### **Issue: Smoking outside of worksites isn't illegal. Can a policy like this be enforced?**

- Worksites are allowed to enact extensive policies to address the issue.
- Company policies are enforced through company administrative actions.

#### **Issue: Do tobacco-free policies infringe on a person's private decisions?**

- Smoke-free policies do not restrict smokers from smoking. They simply restrict smoking in places where others breathe the air.
- Secondhand smoke policies respect the basic right to breathe smoke-free air for smokers and nonsmokers alike.
- An employer has a responsibility to provide a safe and healthy workplace.

#### **Issue: Instead of a policy, shouldn't nonsmokers just choose not to come around smokers?**

- Refer back to importance of policy above.
- Due to the nature of secondhand smoke, this does not adequately protect nonsmokers. A policy keeps nonsmokers from being involuntarily exposed.
- An employer has a responsibility to provide a safe and healthy workplace for employees and visitors.
- There are certain areas that nonsmokers cannot avoid, such as public entrances.

#### **Issue: What's wrong with smoking outside? Doesn't the air dilute the smoke?**

- According to research on secondhand smoke, particle concentrations in outdoor settings in some cases can be comparable to those in indoor settings.
- Exposure to secondhand smoke outdoors can adversely affect the health of persons with respiratory illnesses.

A full-page background image of a bright blue sky with scattered white clouds. The clouds are mostly wispy and thin, with a few larger, more distinct white clouds near the bottom. The sky transitions from a deep blue at the top to a lighter blue at the bottom.

## **APPENDICES**

# WORKSITE TOOLKIT: APPENDIX A — CHECKLISTS

## Timeline Checklist

Here is a quick and easy checklist to follow as you implement your tobacco-free policy.

### Four months from the date you want to go tobacco-free:

- Organize a committee to collect information about the impact to employees.
- Provide information on the benefits and reasons for this change.
- Post flyers or posters to help educate employees about the need to be tobacco-free.
- Gather input from the employees.

### Three months from the date you want to go tobacco-free:

- Draft a tobacco-free policy and communicate with employees about the policy (use e-mail, meetings, bulletin boards, and employee newsletters).
- Make any policy revisions needed after employees give their input.

### Two months from the date you want to go tobacco-free:

- Print and post the tobacco-free policy, highlighting the implementation date.
- Promote tobacco cessation resources.
- Provide in-service training to management and other key employees.

### One month from the date you want to go tobacco-free:

- Put up prominent tobacco-free signage.
- Highlight the availability of the Texas Tobacco Quit Line (1-877-YES QUIT) as well as other tobacco treatment counseling and medication options.

### On Implementation Day:

- Remove all ashtrays.
- Implement the policy.
- GO TOBACCO-FREE.**

### After you have gone tobacco-free:

- Follow up with employees and evaluate the success of your tobacco-free policy.
- Continue to promote tobacco cessation resources.
- Be positive with all employees.
- Enforce the policy vigorously.

## WORKSITE TOOLKIT: APPENDIX A — CHECKLISTS

### Tobacco-Free Workplace Policy Checklist

Following these steps will help you create a workplace policy on tobacco and smoking that works for your business and your employees:

- Announce your commitment to a tobacco-free workplace.
- Assign responsibility and authority for implementation to a member of senior management.
- Create a taskforce to plan implementation.
  - Include smokers, nonsmokers, and former smokers.
  - Include representation from officially recognized employee organizations.
- Develop a timeline.
  - Include a policy announcement date and a policy effective date.
  - Plan to phase in the new policy.
  - Plan for reviews of the policy by appropriate individuals or groups.
- Gather information, including:
  - Medical, legal, economic, and social effects of smoking
  - Examples of tobacco-free policies implemented by other organizations (see sample policies in Appendix D)
  - Facilities (physical constraints or leases with other organizations that may influence policy decisions)
  - Employees (percentage of nonsmokers and smokers, level of enthusiasm)
  - Existing policy on tobacco use, if any
  - Legal issues (legislations, regulations, union contracts, and other contracts)
- Announce the policy and implementation plan to all employees through a letter from the chief executive officer (see sample memos in Appendix E).
- Inform and educate employees using:
  - Training sessions for managers
  - Feedback sessions for employees
  - Company newsletter, paycheck inserts
  - Letters to families of employees
- Make changes to help the phase-in.
  - Install "Tobacco-Free Area" or "No Smoking" signs.
  - Remove ashtrays and receptacles for smoking materials away from facility entrances, windows, and ventilation systems.
- Consider what cessation services you will offer to employees and their families, such as:
  - The Texas Tobacco Quit Line (1-877-YES QUIT)
  - Counseling services
  - Medication coverage
  - Coverage for Nicotine Replacement Therapy
  - On-site or off-site cessation support classes
  - Self-help materials
  - Incentive programs
- Ask tobacco-free employees to support and encourage smokers and tobacco users.
- Plan for continuing support of tobacco users who want to quit.
- Evaluate and refine the policy.



# WORKSITE TOOLKIT: APPENDIX B — SURVEYS

## Employer Tobacco Policy Survey

Knowing the current status of your company or organization employee tobacco use policy is critical in determining future policy direction.

Date: \_\_\_\_\_

Name of workplace or building(s): \_\_\_\_\_

Address: \_\_\_\_\_

1. Does your agency, business or organization have a tobacco use policy?

Yes  No

Does the policy:

Prohibit tobacco use anywhere inside facilities (100% tobacco-free).

Permit tobacco use in designated areas only.

Prohibit smoking inside facilities and within 25 feet of entrances and exit ways, air intakes, and open windows.

Prohibit tobacco use inside facilities and on all premises owned/managed by the agency.

2. Does your workplace have signs indicating where tobacco use is prohibited?

Yes  No

3. Does your agency, business, or organization prohibit smoking while in vehicles used to conduct job-related functions?

Yes  No

4. Is there a process in place to inform customers, visitors, vendors, and employees about the tobacco policy that is in effect in your workplace facilities/premises/vehicles?

Yes  No

If yes, describe process \_\_\_\_\_

5. How do you perceive administrative support for a tobacco-free environment at your workplace?

High  Medium  Minimal

6. How do you perceive employee support for a tobacco-free environment at your workplace?

High  Medium  Minimal

# WORKSITE TOOLKIT: APPENDIX B — SURVEYS

## Employee Tobacco Survey

1. Is there an official policy that restricts tobacco use at your worksite?  
 Yes     No     Not Sure
  
2. Which of the following statements BEST describes your attitude toward your workplace tobacco policy?  
 I don't know my company's workplace tobacco policy.  
 I would prefer a less restrictive workplace tobacco policy.  
 I would prefer a more restrictive workplace tobacco policy.  
 I am satisfied with the current policy.
  
3. During the past two weeks, has anyone smoked in the area in which you work (indoors or outdoors)?  
 Yes     No     Not Sure  
If yes, please list the location(s): \_\_\_\_\_
  
4. Do you think that it is okay for a person to smoke around nonsmokers in the following settings:
  - a. Close to the entrance of businesses and public buildings?     Yes     No
  - b. In outdoor work areas?     Yes     No
  - c. In company vehicles?     Yes     No
  
5. Do you now smoke cigarettes every day, some days, or not at all?  
 Every day     Some days     Not at all
  
6. Do you currently use any other tobacco products such as cigars, pipes, or spit tobacco?  
 Yes     No
  
7. Does your employer offer a quit tobacco program or any other help for employees who want to quit using tobacco?  
 Yes     No     Not Sure
  
8. Do you use less tobacco each day because of your workplace tobacco policy?  
 I use tobacco but am not aware of my company's workplace tobacco policy.  
 Definitely yes                       Definitely not  
 Probably yes                          Probably not  
 I don't use tobacco.
  
9. Would you like to stop smoking?  
 Yes     No     Not Sure     I don't smoke
  
10. Would you like to stop using spit tobacco?  
 Yes     No     Not Sure     I don't use spit tobacco.
  
11. If you do use tobacco, which of the following are you MOST interested in to help you quit? (Please check one box only.)  
 I don't use tobacco.                       Medications (e.g., Wellbutrin®, Chantix™)  
 I use, but am not interested in quitting.     Rebate/incentive program  
 Counseling/coaching                       Other: \_\_\_\_\_  
 Cessation classes

12. Have you ever been diagnosed with a chronic respiratory disease such as asthma, chronic obstructive pulmonary disease, or chronic bronchitis?  
 Yes     No
13. Should the company offer tobacco cessation programs?  
 Yes     No
14. How important do you think it is to provide a 100% tobacco-free workplace? Please check one:  
 Not important     Somewhat important     Very important
15. I believe tobacco use impacts my employer's health-care costs, employee absences, employees' morale, and employees' job performance.  
 Agree     Disagree
16. Would you like to serve on the committee to plan to become tobacco-free and to plan to implement the policy?  
 Yes     No  
*(Provide your name if you would like to serve on the committee.)*  
Name: \_\_\_\_\_
17. Do you support the transition to a totally tobacco-free workplace?  
 Yes     No  
Comments: \_\_\_\_\_  
\_\_\_\_\_
18. Do you believe the company grounds should be entirely tobacco-free? Check the ones you agree with below.  
 The building should be entirely tobacco-free.  
 An outdoor area should be provided for smokers and chewers.  
 No smoking or chewing should be allowed in company vehicles.
19. Please indicate the extent to which you are bothered by secondhand smoke at work.  
 Frequently bothered     Seldom bothered  
 Occasionally bothered     Never bothered
20. If you are bothered by secondhand smoke at work, in what way are you bothered? (Check all that apply.)  
 Eye, nose, and throat irritation     Headaches  
 Concern for my long-term health     Pregnancy-related concerns  
 Interference with work performances     Other: \_\_\_\_\_
21. Please indicate the extent to which you are bothered by spit tobacco use at work.  
 Frequently bothered     Seldom bothered  
 Occasionally bothered     Never bothered
22. If you are bothered by spit tobacco use at work, in what way are you bothered?  
 Dirty, biological waste in work area     Company image of tobacco tolerance  
 Concern for long-term health-care costs     Other: \_\_\_\_\_  
 Interference with work performance

## WORKSITE TOOLKIT: APPENDIX B — SURVEYS

### Tobacco-Free Worksite Survey

Tobacco use remains the No.1 preventable cause of death and disability in the United States and in Texas. [Company] wants to do everything we can to help our employees improve their health so that they can live long and healthy lives. One of the most important things that we can do is to create and promote an environment that protects employees from secondhand smoke and supports our employees in their efforts to live a tobacco-free lifestyle. As part of that effort we are surveying our employees regarding their opinions and attitudes about a tobacco-free campus policy.

Please complete the attached survey and submit by [date]. It should take less than 10 minutes to complete. Your responses to this survey will be completely anonymous. Results will be presented in summary format.

Thank you for your cooperation.

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**Do you currently use one or more tobacco products? (Check one box.)**

Yes  No

**Which tobacco products do you currently use? (Check all that apply.)**

- Cigarettes  
 Smokeless tobacco (spit/chew/snus)  
 Cigars  
 Pipes  
 Other (please specify):

**Do you smoke or use other tobacco products during your work day? (Check one box.)**

Yes  No

**Have you ever quit or tried to quit smoking or using other tobacco products? (Check one box.)**

Yes  No

**What types of products or other services have you tried in your attempts to quit tobacco? (Check all that apply.)**

- |  |  |
|--|--|
| <input type="checkbox"/> Nicotine Replacement Therapy (Nicotine gum, patch, lozenge) | <input type="checkbox"/> Internet counseling     |
| <input type="checkbox"/> Zyban (Bupropion, Wellbutrin)                               | <input type="checkbox"/> Hypnosis                |
| <input type="checkbox"/> Chantix (Varenicline)                                       | <input type="checkbox"/> Acupuncture             |
| <input type="checkbox"/> Group counseling (e.g., Freedom from Smoking)               | <input type="checkbox"/> Willpower               |
| <input type="checkbox"/> Nicotine Anonymous  | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Quitline or other telephone counseling                      |  |

**If tobacco use were prohibited at your worksite campus (including outdoor areas), how would this affect the amount of tobacco you currently use? (Check one box.)**

- My tobacco use would not be affected; I would use the same amount.  
 I would use less tobacco.  
 I would use more at home or other places.  
 I would try to quit using tobacco.  
 I don't know.

## Tobacco-Free Worksite Survey

### What would help you to quit using tobacco?

	Won't help at all	Will help a little	Will help a lot
Time off work to attend cessation classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free cessation services at my worksite during the day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free cessation services at my worksite in the evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free Nicotine Replacement Therapy or other medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working at a tobacco-free campus worksite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____			

### In the past month, has anyone smoked or used other tobacco products in the area in which you work? (indoors OR outdoors?)

Yes  No

If yes, list locations: \_\_\_\_\_

### How bothered are you when you are exposed to cigarette smoke at work in the following places: outside areas at your workplace, including entrances to buildings, building grounds, courtyards and patios, and parking lots? (Check one box)

- Not at all bothered  
 Somewhat bothered  
 Very bothered

### How important is it for you to work in a tobacco-free campus worksite? (Check one box)

- Not at all important  
 Somewhat important  
 Very important

### Do you support the transition of your worksite to a tobacco-free campus? (Check one box.)

Yes  No

### Are you interested in serving on a committee to plan and implement a tobacco-free campus at your worksite? (Check one box.)

Yes  No  Maybe

Please provide us with your contact information if you are interested or possibly interested in serving on a committee.

Name \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

# WORKSITE TOOLKIT: APPENDIX C — ASSESSMENT FORMS

## Compliance and Internal Assessment (Evaluation) Form

### Signage and Tobacco Observation Logs

To help you gather valuable information to determine whether your current policy is effective, you can use the simple Tobacco Observation assessment sheet. The log can help to pinpoint situations that need to be addressed and should be conducted on all time periods and over several days. The assessments should be conducted without prior knowledge of employees other than staff involved in the actual survey.

<b>SIGNAGE OBSERVATIONS</b>	
Date of observation	
Number of entrances	
How many building entrances have signs indicating that no tobacco use is allowed within 25 feet of entrance?	
How many building entrances have ashtrays located within 25 feet of building entrances?	
How many ashtrays located within 25 feet of the entrances are marked with "for extinguishing purposes only" or similar language?	
Are all smoking and nonsmoking areas designated with signs?	YES    NO
Is the "No Smoking" language at least 1.5 inches high and do the signs contain a universal no-smoking symbol?	YES    NO
If no for either of above, which areas need signs?	

<b>TOBACCO OBSERVATIONS</b>	
Date of observation	
Time of Observation: ____ a.m. / p.m. until ____ a.m. / p.m.	
Do you see tobacco-related litter (cigarette butts, empty cigarette packets, or spit cups) in indoor nontobacco areas?	YES NO
Do you see tobacco-related litter (cigarette butts, empty cigarette packets, or spit cups) in outdoor areas within 25 feet of windows or doorways?	YES NO
Do you see tobacco-related litter (cigarette butts, empty cigarette packets, or spit cups) in outdoor nontobacco areas?	YES NO
Do you see smoking or smell tobacco smoke in nonsmoking areas?	YES NO
If yes, where do you see smoking or smell tobacco smoke?	
How many people do you see smoking?	
How many people do you see using spit tobacco?	
How many of the tobacco users are employees?	
How many of the tobacco users are visitors?	

# WORKSITE TOOLKIT: APPENDIX C — ASSESSMENT FORMS

## Assessment Worksheet

<b>BENEFITS OR SERVICES WE PROVIDE</b>			
Benefits	Insurance Provides	Employer Provides	Co-Pay / Deductible
Medications Type:			
Number of Counseling Sessions			
Other			



# WORKSITE TOOLKIT: APPENDIX D — SAMPLE POLICIES

## Template and Sample Policies

The following template and sample policies are presented to help you determine the best style for your company or organization.

Sample policies shown represent a range from general, as indicated by Sample Policy I or comprehensive, as indicated by Sample Policy II. You may find that combining elements of more than one of the following policy styles best meets your organization's particular needs.

### Template for a Model Tobacco-free Policy

#### 1. Rationale

Statement of Intent: Background Information

This should briefly explain why the company/organization is introducing a formal approach to tobacco in the workplace and some key data and facts about the company/organization's previous stance (if any) and the dangers of smoking. Include the date that the policy will be introduced (or reinitiated).

#### 2. Objectives (of the policy)

- To minimize exposure of employees to tobacco smoke while in the workplace or while engaged in the organization's business
- To consider the welfare of all employees.
- To provide a consistent approach to break entitlements for smokers and nonsmokers.

#### 3. Application of the policy

Clearly state that the policy applies to all employees, subcontractors, and visitors.

#### 4. Smoking provision

Clearly indicate where (if at all) smoking is permitted on company sites, including buildings, car parks, company vehicles, and other external areas. Also state when smoking is permitted during the work day — for example, on designated breaks.

#### 5. Employee welfare / cessation support

Outline how cessation support will be available to staff either internally or externally, and how it can be accessed.

#### 6. Failure to comply

Indicate the process for dealing with employees who breach the policy.

#### 7. Review

Set a date for formal review and state this in the written policy. Formal reviews should take place every 12–18 months.

**SAMPLE POLICY I**

**Model Tobacco Policy for a Tobacco-Free Workplace**

\_\_\_\_\_ Company Name \_\_\_\_\_ No-Tobacco Policy:

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

Smoking harms nearly every organ of the body, causing many diseases and reducing the health of smokers in general. (*The Health Consequences of Smoking: A Report of the Surgeon General, 2004*). Use of spit tobacco, cigars, pipes, and other tobacco products also lead to disease and death (*American Cancer Society*). There is no safe level of exposure to secondhand smoke (*The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, 2006*).

In light of these findings, \_\_\_\_\_ Company Name \_\_\_\_\_ shall be entirely tobacco-free effective \_\_\_\_\_ Date \_\_\_\_\_.

Tobacco use will be strictly prohibited within all company work areas. Tobacco use is prohibited within 25 feet of building entrances, open windows, or air intakes. This policy applies to all employees, clients, contractors, and visitors.

Copies of this policy shall be distributed to all employees. Signs shall be posted at all building entrances.

This policy is being announced three months in advance in order to facilitate a smooth transition. Those employees who smoke or use spit tobacco and would like to take this opportunity to quit are invited to participate in the cessation program being offered by this company.

The success of this policy will depend upon the thoughtfulness, consideration, and cooperation of tobacco users and non-tobacco users. All employees share in the responsibility for adhering to and enforcing this policy. Violations of this policy will be handled through the standard disciplinary procedure.

\_\_\_\_\_  
Signature of CEO or President

*Adapted from Americans for Nonsmokers' Rights*

**SAMPLE POLICY II**  
**Model Tobacco-Free Policy**

**Policy**

Due to the acknowledged hazards arising from exposure to secondhand smoke, it shall be the policy of \_\_\_\_\_ to provide a tobacco-free environment for all employees and visitors. This policy covers the smoking of any tobacco product and the use of smokeless or "spit" tobacco and applies to both employees and visitors of \_\_\_\_\_.

**Definition**

1. There will be no use of tobacco products (e.g., cigarettes, pipes, cigars, spit tobacco) within the facilities at any time.

The decision to provide or not provide designated smoking areas outside the building will be at the discretion of management or other decision-making body.

The designated smoke areas will be located at least 25 feet from the main entrance, other exits and entrances, open windows, or air intakes.

All materials used for smoking, including cigarette butts and matches, will be extinguished and disposed of in appropriate containers. Supervisors will ensure periodic cleanup of the designated smoke area if not properly maintained (for example, if cigarette butts are found on the ground), and it can be eliminated at the discretion of management or other decision-making body.

[For a policy that extends to include company property, substitute the following: There will be no use of tobacco products within the facilities or on the property of \_\_\_\_\_ at any time.]

2. There will be no tobacco use in \_\_\_\_\_ vehicles at any time.

There will be no tobacco use in personal vehicles when transporting persons on \_\_\_\_\_ authorized business.

3. **Breaks:** Supervisors will discuss the issue of smoking breaks with their staff. Together they will develop effective solutions that do not interfere with the productivity of the staff.

**Procedure**

1. Employees will be informed of this policy through signs posted in \_\_\_\_\_ facilities.
2. Visitors will be informed of this policy through signs, and their host will explain it.
3. The \_\_\_\_\_ will assist employees who wish to quit smoking by facilitating access to recommended smoking cessation programs and materials.
4. Any violations of this policy will be handled through the standard disciplinary procedure.

## SAMPLE TOBACCO-FREE WORKPLACE POLICY

[Name of Company]

### 1. PURPOSE

1.1 \_\_\_\_\_ desires to promote the health and wellness of employees by incorporating a total “tobacco-free” workplace. Subsidiaries can individually manage their transition to a “tobacco-free” workplace based on their current smoke-free status, but must be totally tobacco-free by no later than \_\_\_\_\_.

1.2 To be in compliance with this policy, companies must communicate the tobacco-free work-place policy to employees and develop site-specific implementation plans in conjunction with site management, Human Resources, and Health & Safety no later than \_\_\_\_\_.

1.3 Each affiliate is expected to establish a company policy of its own that incorporates each of the elements described in this corporate policy. Where local laws restrict certain concepts in the policy, it is expected that the local company policy will be modified to be permissible under the law.

### 2. PRODUCTS COVERED

2.1 The personal health hazards related to all tobacco products, which include but are not limited to, smoking (e.g., cigarettes, pipes, cigars, hookah, etc.) and/or using smokeless tobacco (e.g., dip, snuff, chew, plugs, pouches, etc.) have been well-documented. The health hazards of smoke affect the smoker and the nonsmoker who is exposed to the secondhand smoke. It is the intent of \_\_\_\_\_ to provide all employees with a work environment conducive to good health.

### 3. APPLICATION OF POLICY

3.1 This policy is applicable to all employees, contractors, and visitors while on the property at any of our locations worldwide. As necessary, this policy will be modified to comply with local laws regulating designated tobacco use.

3.2 All employees, contractors, and visitors are prohibited from using tobacco at \_\_\_\_\_ company workplaces. The workplace is defined as inside all company-owned or leased facilities, as well as outside on the grounds and parking lots and in personal vehicles on company property. This policy also applies to company-sponsored meetings and events on or off company premises. Prohibited uses include but are not limited to smoking (e.g., cigarettes, pipes, cigars, hookah, etc.) and/or using smokeless tobacco (e.g., dip, snuff, chew, plugs, pouches, etc.).

3.3 Tobacco-cessation and awareness programs, behavioral modification tools, referrals, and resources will be made available to employees who desire to stop tobacco use.

3.4 Employee noncompliance with the policy will result in disciplinary action.

3.5 Any questions regarding this policy should be referred to the local Human Resources and/or Health & Safety representative.

# WORKSITE TOOLKIT: APPENDIX E — SAMPLE POLICY ANNOUNCEMENT LETTERS

## Policy Announcement Memo

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### MEMO TO ANNOUNCE [COMPANY]'s TOBACCO-FREE CAMPUS POLICY

**TO: All Employees**

**FROM: CEO or HR Representative**

**RE: Tobacco-Free Workplace**

**DATE: [THREE MONTHS PRIOR TO POLICY EFFECTIVE DATE]**

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Effective [DATE], [COMPANY] will implement a campus-wide tobacco-free policy for all employees and visitors in order to provide a clean, healthy, productive, and safe environment for all.

This policy will apply to:

- All [COMPANY] employees on all shifts;
- Customers, vendors, clients, and all other visitors; and
- Members of committees, including our Board of Directors.

Smoking will be prohibited on all [COMPANY] -owned and/or -leased locations/premises; all internal and external areas; parking garages and parking lots; all entrances and exits; and all company -owned and/or -leased vehicles.

In addition, use of all tobacco products, including smokeless/chewing tobacco, will be prohibited. Company sponsored events — both on our premises and at external locations, where appropriate — will be tobacco-free.

Compliance with these guidelines will be strictly enforced and policy violations will be subject to the standard disciplinary actions of the company.

The policy is being announced three months in advance in order to give tobacco users time to adapt to its restrictions and to facilitate a smooth transition to a tobacco-free environment. Those employees who use tobacco products and would like to quit are invited to participate in the cessation programs being offered by the company (please see attached schedule of events).

Any questions you may have regarding this policy should be directed to \_\_\_\_\_ at extension \_\_\_\_\_.

Thank you for your cooperation.

### MEMO TO EMPLOYEES

As an employer, (company name) is dedicated to providing a healthy, comfortable, and productive work environment for its employees.

The Environmental Protection Agency has declared secondhand smoke to be a "Class A carcinogen" known to cause cancer in nonsmokers. The Surgeon General has concluded that the simple separation of smokers and nonsmokers within the same air space does not eliminate the exposure of nonsmokers to secondhand smoke. The poisons in smoke pose a danger right away. Sudden blood clots, heart attacks, and strokes can be triggered by tobacco smoke. Some of our employees and clients already suffer from respiratory diseases, heart disease, or allergies and are particularly susceptible to the negative health consequences of exposure to secondhand smoke.

In light of these findings, (company name) shall be entirely tobacco-free effective (date effective). The company acknowledges that tobacco use is a matter of personal choice. No one is requiring tobacco users to quit. We are only asking that there be no tobacco use on company premises. A variety of options will be made available to employees who are interested in programs for quitting tobacco use.

The new tobacco policy will cover all campuses of this corporation.

Copies of this policy will be distributed to all employees. Signs will be posted in appropriate places.

As we move toward a tobacco-free work environment, smokers, spit tobacco users, and nonsmokers need to work together to ensure a safe and healthy workplace. Between now and (date effective), you will receive more information to ensure that implementation of the policy goes smoothly.

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*Signature*

---

*Date*

# WORKSITE TOOLKIT: APPENDIX F — INCENTIVE AFFIDAVIT FORM

## NON-TOBACCO USE INCENTIVE AFFIDAVIT FORM 2011

PLEASE KEEP A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS.

Return to XYZ Company Human Resources | Suite 300 | XYZ, TX 78750  
website: www.xyzcompany.org/hr | e-mail: benefits@xyzcompany.org

### PART I

Thank you for being committed to achieving a healthier lifestyle. For this effort, we offer you a contribution to your Health Reimbursement Arrangement Account or your Health Savings Account.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Employee SS # : \_\_\_\_\_ Daytime Phone # : \_\_\_\_\_

Department: \_\_\_\_\_ Division or Unit You Work For: \_\_\_\_\_

### PART II

#### NON-TOBACCO USE INCENTIVE

\$120.00 to be deposited by XYZ Company into a Health Reimbursement Agreement Account or Health Savings Account on behalf of this employee. Please note that if your effective date for benefits is after 1/1/2011, the amount of this incentive will be prorated accordingly. You are eligible for this incentive if you have been tobacco-free for at least six months prior to signing this affidavit and you remain tobacco-free through the end of calendar year 2011. This incentive applies only to employees enrolling in medical coverage through employment at XYZ Company. Simply sign and date this form in the area below. Please be sure to read the disclosure statement following the signature line below.

My signature indicates that the information on this form is true and correct. Any person who knowingly and with intent to injure, defraud, or deceive the Insurer and files a statement of false, incomplete, or misleading information may be guilty of a felony of the third degree. This is a misappropriation of XYZ Company funding. I understand that XYZ Company may, at its discretion, conduct future testing to confirm compliance with non-tobacco use. I understand that XYZ Company may recover its contribution from me if testing confirms my use of tobacco. I understand that XYZ Company may recover its contributions from me if I am discovered to have used tobacco products during the period beginning six (6) months prior to signing this affidavit and ending at midnight December 31, 2011. I also understand that my department head will receive a list of all employees in my department who have submitted a signed Non-tobacco Use Incentive Affidavit.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**Please have your supervisor sign the form below confirming that he or she is aware that you are claiming this benefit.**

\_\_\_\_\_  
*Supervisor's Signature*

\_\_\_\_\_  
*Supervisor's Printed Name*

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[www.dshs.state.tx.us/tobacco](http://www.dshs.state.tx.us/tobacco)



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