Smokefree-in-a-Box
A Guide for Companies Going Smokefree
INTRODUCTION

Over the past 20 years, workplaces around the world have seen a sweeping movement towards smokefree air policies. Many companies have adopted smokefree policies voluntarily to protect workers and customers from the proven dangers of secondhand smoke. Other companies have created smokefree workplaces to comply with existing laws. Companies that have gone smokefree have found that these
policies save money as well as lives. The policies also improve worker satisfaction and the company’s public image.

The purpose of this toolkit is to help you design and implement a smokefree workplace. While there is no “one-size-fits-all” plan for going smokefree, this toolkit draws from the experience of workplaces around the world to provide the basic elements of an effective smokefree plan.
Companies should adapt the advice in this toolkit to fit their unique circumstances.

Experience from smokefree companies shows that proper implementation of these policies requires planning and coordination. This toolkit provides senior leadership, managers, and staff with easy-to-use advice on what to do from the moment your company decides to implement a smokefree policy.

For more information on the Global Smokefree Partnership or on smokefree policies, please visit the Global Smokefree Partnership Web site at www.globalsmokefreepartnership.org or email info@globalsmokefreepartnership.org.

This toolkit is a project of the Global Smokefree Partnership, a multi-partner initiative formed in 2005 to promote effective smokefree air policies worldwide. The partnership involves more than 300 organizational and individual members from more than 60 countries worldwide, and it is hosted by the American Cancer Society and the Framework Convention Alliance.
<table>
<thead>
<tr>
<th>TABLE OF CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smokefree Workplaces: The Essential Facts.................................................. 6</td>
</tr>
<tr>
<td>Myths and Realities of Smokefree Workplace Policies ................................... 11</td>
</tr>
<tr>
<td>Making Your Workplace Smokefree: A Timeline of Activities............................ 14</td>
</tr>
<tr>
<td>Employee Support for a Smokefree Workplace................................................ 19</td>
</tr>
<tr>
<td>Designing a 100% Smokefree Workplace Policy............................................... 22</td>
</tr>
<tr>
<td>Sample Workplace Health and Wellness Program............................................... 28</td>
</tr>
<tr>
<td>Communication Strategies for a Smokefree Workplace........................................ 29</td>
</tr>
<tr>
<td>Helping Employees Quit Smoking........................................................................ 32</td>
</tr>
<tr>
<td>Monitoring and Evaluating the Impact of a Smokefree Workplace Policy.............. 35</td>
</tr>
<tr>
<td>Are you Ready? A Smokefree Workplace Implementation Checklist........................ 37</td>
</tr>
<tr>
<td>Company Profiles: How Did They Go Smokefree?............................................... 39</td>
</tr>
<tr>
<td>Case Study: The Dow Chemical Company........................................................... 39</td>
</tr>
<tr>
<td>Case Study: Johnson &amp; Johnson........................................................................... 43</td>
</tr>
<tr>
<td>Resources on Smokefree Workplace Policies.................................................... 47</td>
</tr>
<tr>
<td>General Smokefree Resources............................................................................ 48</td>
</tr>
<tr>
<td>Acknowledgments................................................................................................. 50</td>
</tr>
</tbody>
</table>
SMOKEFREE WORKPLACES: THE ESSENTIAL FACTS

Employers and governments worldwide are taking decisive action to protect workers from the harm caused by secondhand smoke. Hundreds of millions of people worldwide are protected by 100% smokefree policies in their workplace, and this number is growing rapidly.1 Three major developments are driving the global trend towards smokefree workplace policies:

1. There is overwhelming consensus among medical and scientific authorities worldwide that secondhand smoke is a major public health threat, and that the only effective way to protect the public is to eliminate secondhand smoke from all workplaces and public places.2

2. Smokefree air policies have proven to be popular, effective, and well-respected in diverse places such as France, Hong Kong, Ireland, Italy, New Zealand, the United Kingdom, and Uruguay.3

3. The Framework Convention on Tobacco Control (FCTC) – the international tobacco control treaty – imposes a legal obligation on the more than 150 countries that have ratified the treaty to adopt effective smokefree air laws.5 Guidelines adopted by the treaty’s governing body in 2007 make it clear that only comprehensive smokefree air laws will meet the treaty’s requirements.6

Health Risks of Secondhand Smoke

Secondhand smoke, also known as environmental tobacco smoke, is a complex mixture of some 4,000 chemical compounds, including almost 70 known or probable human carcinogens.7 Health and scientific authorities around the world agree that secondhand smoke is a serious threat to human health and that effective action must be taken to reduce exposure. Their conclusions include:

- The International Labour Organisation (ILO) estimates that each year about 200,000 workers die because of exposure to secondhand smoke in the workplace.8

- Secondhand smoke is a major cause of disease in non-smokers, including lung cancer, coronary heart disease, and cardiac death.9

- There is no safe level of exposure to tobacco smoke.10

- Food service workers have a significantly greater risk of dying from lung cancer than the general population, in part because of secondhand smoke exposure in the workplace.11
• Cadmium, benzene, lead, and arsenic are just a few of the over 4,000 hazardous chemical components of secondhand smoke that are also toxins common to blue-collar workplaces. Synergistically, cigarette smoke and workplace toxins can multiply the risk of getting lung cancer by as much as 53 times in blue-collar workers.12

Smokefree policies save lives and protect employee health.

• Numerous studies have documented significant declines in hospital admissions for heart attacks following the implementation of comprehensive smokefree laws.13

• Respiratory symptoms among bar workers in Scotland decreased by 26 percent after smokefree legislation was implemented in 2006; asthmatic bar workers experienced reduced airway inflammation and reported an improved quality of life.14

• Seven out of every 10 smokers want to quit smoking,15, 16 and smokefree policies can help smokers quit successfully by reducing environmental triggers and not allowing smoking to be the norm.17

• A review18 of smokefree workplaces internationally concluded that smokefree workplaces lead to:
  - A four percent decrease in the number of smokers
  - Three fewer cigarettes a day smoked by continuing smokers

Only comprehensive smokefree policies are effective at eliminating exposure to secondhand smoke; partial measures do not work.

• Guidelines for implementing the FCTC’s legally binding smokefree air requirements call for 100% smokefree indoor workplaces and public places and declare that the use of ventilation, filtration, and “designated smoking areas” are not effective.19

• The US Surgeon General has concluded that ventilation and filtration technologies and separation of smokers and non-smokers within the same air space do not provide effective protection from the health risks of secondhand smoke.20

• The same report concluded that exposure of non-smokers to secondhand smoke cannot be controlled by air cleaning or mechanical air exchange.
Smokefree policies are good for business.

- Well-designed, independent studies have shown that smokefree laws do not have a negative economic impact on the hospitality or tourism industry.\(^{21}\)

- Benefits for employers include increased employee productivity, reduced sickness in employees from smoking and secondhand smoke exposure, reduced injuries, and reduced risk of fire damage. In Taiwan, such benefits have been quantified at over US $1 billion a year.\(^{22}\)

- If all US workplaces were smokefree, it would save over $60 million in medical costs within the first year and an estimated $280 million in the first seven years.\(^{23}\)

- In New York City, business tax receipts in the city’s bars and restaurants increased by 8.7 percent and hospitality sector jobs increased by more than 10,000 in the first year after the city’s smokefree law took effect.\(^{24}\)

Smokefree compliance rates are high.

- The overwhelming majority of people and businesses comply with smokefree laws. Typically, compliance levels are higher than 90 percent.\(^{25}\)

Table 1

<table>
<thead>
<tr>
<th>Compliance rates in smokefree jurisdictions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>98%</td>
</tr>
<tr>
<td>Ireland</td>
<td>94%</td>
</tr>
<tr>
<td>Italy</td>
<td>98.5%</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>96.3%</td>
</tr>
<tr>
<td>New York City</td>
<td>97%</td>
</tr>
<tr>
<td>New Zealand</td>
<td>97%</td>
</tr>
<tr>
<td>Norway</td>
<td>97%</td>
</tr>
<tr>
<td>Ottawa</td>
<td>95%</td>
</tr>
<tr>
<td>Scotland</td>
<td>94.2%</td>
</tr>
<tr>
<td>Wales</td>
<td>98%</td>
</tr>
</tbody>
</table>
References


MYTHS AND REALITIES OF SMOKEFREE WORKPLACE POLICIES

As your company begins to consider implementing a smokefree policy, you may have to respond to a variety of myths concerning secondhand smoke and the impact of smokefree policies that have been perpetuated by the tobacco industry and its allies.

Below are some common myths along with the facts needed to set the record straight.

Myth: “Secondhand smoke is not harmful to health.”

**Facts:** Every major scientific body in the world, including the World Health Organization, the International Agency for Research on Cancer, and the US Centers for Disease Control and Prevention, have reached the same conclusion: Secondhand smoke is a serious health threat and a significant cause of disease and death.\(^1\)\(^2\)\(^3\)

The US Surgeon General’s 2006 Report on the Health Consequences of Involuntary Exposure to Tobacco Smoke found that secondhand smoke exposure causes disease and premature death in children and adults who do not smoke. The report concluded that there is no safe level of exposure to secondhand smoke.\(^4\)

Studies that do not show a correlation between secondhand smoke and disease are typically funded by the tobacco industry.\(^5\) The tobacco companies have paid scientific consultants across the world to attack the scientific evidence that secondhand smoke harms health.\(^6\)

Myth: “Smokefree policies violate an individual’s right to smoke.”

**Fact:** The right of a person to breathe clean air takes precedence over any possible right of smokers to pollute the air other people breathe.

Myth: “Ventilation systems and separate rooms for smokers provide adequate protection from secondhand smoke.”

**Facts:** Ventilation systems and designated smoking rooms do not provide effective protection to the public and workers from the deadly effects of secondhand smoke.\(^7\)

The American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE), the international standard-setting body for indoor air quality, concluded that there is no safe level of exposure to secondhand smoke and that ventilation and other air filtration technologies cannot eliminate the health risks caused by secondhand smoke exposure.\(^8\)
Internal British American Tobacco (BAT) documents reveal that the company knew that air filtration and ventilation systems were ineffective, yet still promoted the technology as a viable option to smoking restrictions. According to the documents, BAT’s interest in ventilation systems was primarily "to negate the need for indoor smoking bans around the world."\footnote{9}

**Myth:** “Smokefree laws will result in more smokers smoking in their homes and will expose more children to the dangers of secondhand smoke.”

**Facts:** International evidence suggests that smokefree laws reduce children’s exposure to secondhand smoke. Smokefree laws encourage adults to quit.\footnote{10} When fewer adults smoke, children’s exposure to secondhand smoke is reduced.\footnote{11} Smokefree laws also encourage people to adopt smokefree homes voluntarily.\footnote{12,13}

After smokefree workplaces were introduced in Australia, the proportion of family homes with smoking restrictions nearly doubled.\footnote{14} Similar results were found in the United States.\footnote{15}

**Myth:** “Smoking restrictions are not appropriate in our country.”

**Facts:** More than 200 million people worldwide are protected by 100% smokefree laws, and many more are protected by employer policies. Smokefree policies have been successfully implemented in every region. It is appropriate to protect all people from death and illness caused by secondhand smoke, no matter what country they live in.\footnote{16} No one is immune to the health risks from secondhand smoke.
References


MAKING YOUR WORKPLACE SMOKEFREE: A TIMELINE OF ACTIVITIES

This model timeline suggests six months of lead time to implement a 100% smokefree policy in a large organization. Smaller companies and companies that already have strong smoking restrictions in place may be able to move more quickly. All recommended activities should be adapted to fit the specific circumstances of each workplace.

<table>
<thead>
<tr>
<th>Months</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Assign overall responsibility to a respected manager to coordinate the development and implementation of a 100% smokefree policy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Form a working group to coordinate and implement the project.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Gather information: Conduct a situation analysis and assess employee readiness through a survey and outreach. The survey should provide information on the overall level of support for a smokefree workplace, the percentage of smokers and their concerns, the level of interest in quitting, the level of interest in cessation products and services, and other issues.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Use the results of the survey and outreach to predict areas that may be challenging, and develop strategies to address each challenge.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Develop a draft policy statement that reflects recommendations from the working group and that is based on research and outreach.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Develop an overall implementation plan to support the draft policy statement, including a communications plan and timeline.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Secure the approval of senior management for the draft policy statement and implementation plan.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. Before announcing the new policy to the entire staff, meet with senior and mid-level managers and inform them of the following:
   - What immediate steps they should take to implement the policy
   - How information will be communicated to staff (e.g., signage, employee letters)
   - What their responsibilities are (e.g., to ensure that policy requirements are met)
   - What key messages they should emphasize to employees

9. Announce the new policy and the timeline for implementation to employees.

10. Ensure that appropriate mechanisms are in place to monitor and respond to feedback from managers and staff throughout the implementation process.

11. Implement the communications plan. Messages should include:
   - A rationale for the policy
   - Information on the health harms of tobacco smoke and exposure to secondhand smoke
   - A timeline for implementation of the policy
   - The availability and types of cessation assistance

12. Finalize plans to address your employees’ cessation needs. Consider working with insurance providers to offer smoking cessation products and services (e.g., nicotine replacement therapy and counseling) to employees at no cost.
13. Plan a high-profile event or promotional activity, such as an employee health day, to celebrate the implementation of the smokefree policy. Engage top management and possibly political figures and/or the media.

14. Prepare for physical changes that must take place for the policy to go into effect (e.g., make sure that no tobacco will be sold onsite and ashtrays and cigarette butt receptacles will be removed; if implementing a 100% smokefree campus, ensure that “smoking shelters” will be eliminated from company premises).

15. Train or brief managers on:
   - How they can support employee efforts to quit
   - Enforcement and disciplinary procedures for breaches of the policy
   - Logistical and administrative changes that will take place as a result of implementation of the policy (e.g., posting of signs, inclusion of policy in employee manuals/handbooks, etc.)

16. Develop signs and communications materials that will be used when the policy goes into effect. Sign text may include:
   - “No Smoking”
   - “This is a smokefree workplace.”
   - “This company is smokefree.”
   - “This company and these grounds are smokefree.”

17. Make sure that job postings for new staff and new employee orientation materials state the smokefree workplace policy.

18. Formally announce implementation of the smokefree policy. Hold a high-profile event or promotional activity to celebrate the first day, if possible.

<table>
<thead>
<tr>
<th>Months</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>13.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Months</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>Annually</td>
</tr>
<tr>
<td>--------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>----</td>
<td>----</td>
<td>----</td>
<td>----</td>
<td>---------</td>
</tr>
<tr>
<td>19. Beginning on the first day, prominently display signs and make visitors to the facility aware of the policy (e.g., on visitor badges).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Remove ashtrays and cigarette butt receptacles. Make sure no tobacco is sold on the premises. If implementing a 100% smokefree campus policy, eliminate “smoking shelters” from company premises.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Suggest that top management officials walk through company premises, especially areas where employees have traditionally smoked in the past, during the first few days after the policy takes effect, as a visible show of support for the policy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Continue the communications campaign, providing messages that promote a smokefree lifestyle, thanking employees for their support and efforts to make the smokefree policy a reality, and informing employees of the types of cessation assistance available.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Clarify policy provisions and adjust implementation and enforcement procedures as necessary, based on results from the monitoring process.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 24. Continue to monitor and respond to input and feedback from employees and management. Specifically monitor the following:  
- The implementation and enforcement process (i.e., identify any areas of non-compliance or confusion and make sure the policy is being applied in an equitable manner)  
- The utilization of cessation services and products offered by the company | | | | | | | | | | | | | |
<table>
<thead>
<tr>
<th>Months</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>25. Document lessons learned through the implementation process.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Debrief the working group, and assign duties for ongoing activities related to responding to employee questions and comments and evaluating the impact of the smokefree policy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Meet with senior management and report on lessons learned, the results of process and outcome evaluations, and ongoing activities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Evaluate indicators involving:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The number of smokers and interest in quitting (both in general and among those who received cessation services through the employee health services) three, six, and 12 months after the implementation of the policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Employee compliance with policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Employee participation in cessation programs and utilization of medications offered</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Physical changes in company environment to support policy implementation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Employee satisfaction with policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Employee visits to the company Web page explaining the smokefree policy (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note: Refer to the section entitled “Monitoring and Evaluating the Impact of a Smokefree Workplace Policy” for more details.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Report evaluation results to the working group and top management.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Celebrate your smokefree success in conjunction with national/regional/international events such as World No Tobacco Day or International Labor Day. Use those opportunities to market the cessation programs and services offered by your company.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
EMPLOYEE SUPPORT FOR A SMOKEFREE WORKPLACE

The success of your smokefree workplace policy depends on the understanding and support of your employees. Fortunately, in most workplaces, the level of support is high from the outset. Without proper care and planning during implementation, however, misunderstandings and resistance can arise. Therefore, gaining and sustaining a high level of employee support is the overarching goal of your implementation plan.

Important actions and principles for success include:

Assign overall responsibility for policy development and implementation to a senior manager with good relationships throughout your company. It is important for employees to see that your company’s leadership is committed to the policy and that the initiative is well managed by someone they trust.

Create a Smokefree Policy Working Group to help develop and implement the policy. The working group should include smoking and non-smoking employees who are respected “opinion leaders” within the company. The working group could include one or more members of senior management, human resources, union leaders (if relevant), and representatives from human resources, the communications staff, buildings and maintenance, and other relevant departments and divisions. The basic decision to create a 100% smokefree workplace should be made by your company on the basis of health information and the advice of medical authorities, and should not be questioned by the working group. All other matters regarding the policy and its implementation should be open to the working group’s input and advice. It is suggested that the working group continue meeting regularly after the implementation of the smokefree policy to help monitor its impact and manage future tobacco policy initiatives (for example, expanding a smokefree policy to a workplace campus or implementing a tobacco-free policy).

Begin with a situation analysis and assessment of employee readiness. As with any initiative, begin the process by gathering information about current practices within your company, recent experiences by similar companies that have become smokefree, and the current level of support for a smokefree workplace among employees. Much of this information can be gathered through informal research and outreach by the Smokefree Policy Working Group. An employee survey, however, can be very helpful in assessing opinions and ensuring that all employees have an opportunity to be heard. Information needed should include answers to the following questions:

• What is the current policy and practice concerning smoking and smoking breaks?

• What percentage of employees smoke?

• Is smoking more prevalent among some staff members or departments?
• What are the most popular locations for smoking now?

• What is the current level of support for a 100% smokefree policy?

• What are the main concerns employees have about a 100% smokefree policy?

• What is the level of knowledge of the health risks of smoking and secondhand smoke?

• What is the level of interest in quitting smoking?

• What is the level of interest in smoking cessation counseling and medications?

Other important information, such as copies of any previous policies on smoking in the workplace, the status of smoking in any union contracts, and whether smoking policies are included in any current property leases, can be obtained through internal research.

**Use the assessment to predict areas that may be a challenge and to develop strategies for each challenge.** Supervisors need to be prepared to address a variety of concerns. For example, do some employees say they will quit their jobs if they cannot smoke at work? Do some believe that a smokefree policy would be unfair? Is there a particular department or office where opposition to the policy is unusually high?

**Develop a written policy statement.** Your statement should explain the rationale for the policy, details about where the policy applies, and consequences for non-compliance. For more information on developing a written policy, see the section entitled “Designing a 100% Smokefree Workplace Policy.”

**Ensure that the policy and its enforcement are fair to smokers and non-smokers, across job categories.** Make sure that smokers and non-smokers receive equal work breaks, for example.

**Develop and implement a communications plan.** Your communications plan will ensure that all employees understand what is expected of them under the policy and the health rationale for the policy. For more guidance on developing a communications plan, see the section entitled “Communication Strategies for a Smokefree Workplace.”
Ensure that employees have a chance to voice any concerns about the policy and its implementation. Continued involvement by the Smokefree Policy Working Group is important because compliance with smokefree policies is higher when employees are consulted and involved in the process. Every member of the working group should be engaged in outreach. The section entitled “Monitoring and Evaluating the Impact of a Smokefree Workplace Policy” discusses ways to solicit feedback from employees.

Ensure that meaningful opportunities for feedback continue after the policy is implemented. Your company needs to know about any problems or perceived problems over time.

Demonstrate your company’s commitment to employee health by providing effective smoking cessation information and benefits. The implementation of a smokefree policy can be a great motivation for smokers to quit. Your company should offer “best practice” cessation options to support smokers trying to quit. For more information on smoking cessation in the workplace, please see the section entitled “Helping Employees Quit Smoking”.

Make it a family-oriented initiative, if possible. Extending cessation benefits to employees’ family members has been found to increase smokers’ accountability and encourage them to stop smoking. Involving family members and covered dependents in cessation programs has been demonstrated to be more likely to yield changes compared to focusing only on the employee in the workplace.¹

DESIGNING A 100% SMOKEFREE WORKPLACE POLICY

The goal of your smokefree workplace policy is to promote a healthy and productive work environment for all employees. A worker-friendly policy should clearly communicate your company’s concern for the health and well-being of all employees and should be designed to treat all workers fairly.

The policy should be put in writing, clearly identifying both the goals and the steps necessary to meet those goals. Whenever possible, the new policy should be integrated with similar programs and procedures on health and safety in the workplace, as is shown in the diagram “Sample Workplace Health and Wellness Program”. The policy statement should emphasize goals including providing a healthy workplace, supporting workers who want to quit smoking, and protecting all employees from secondhand smoke.

The written policy should include:

- The purpose of the policy
- A connection between the policy and company values
- A time frame for implementation
- A clear statement that the policy applies to everyone: employees, visitors, sub-contractors, and others
- A clear statement that tobacco use is not allowed anywhere in company buildings or on company property; if there are exceptions they should be noted (See discussion below.)
- A description of the support available for smokers, such as counseling and smoking cessation services
- The consequences of non-compliance
- The names and contact information of designated staff members who can answer questions related to the policy
Most elements of the written policy are straightforward. Several points, however, require special attention. These include:

**Compliance.** In general, smokefree policies tend to be self-enforcing, with high compliance rates. Non-compliance with the policy should be handled in the same manner non-compliance is handled with your company’s other policies. It should be made clear that compliance with the policy is a condition of employment. The first response to non-compliance by a staff member should also involve counseling about the policy and the reasons behind it.

**Does the policy apply outdoors?** To provide adequate protection for non-smokers, indoor workplaces should be 100% smokefree. Some workplaces allow employees to smoke outdoors, in designated areas located away from doors and windows. However, there is a growing trend toward providing a completely smokefree property, indoors and out. The rationale for not allowing smoking outdoors is to provide a healthy work environment that fully supports employees who wish to quit smoking. Eliminating outdoor smoking also eliminates cigarette litter issues and the need to enforce rules regarding designated smoking areas. If your company allows outdoor smoking, the written policy should specify where such smoking is permitted, and appropriate arrangements should be made to minimize cigarette litter.

This toolkit includes a model smokefree workplace policy and sample smokefree and tobacco-free policies from other companies that you may customize to fit your needs.
Model Smokefree Workplace Policy

[Note: This model policy may be easily adapted to implement a tobacco-free policy if your company chooses to do so.]

[company name] is dedicated to providing a healthful, comfortable, and productive workplace for all its employees.

The health hazards related to smoking are well-documented. These health hazards impact both the smoker and the non-smoker who is exposed to secondhand smoke. Therefore, [company name] will provide a smokefree workplace to all of its employees and all visitors.

**Principles**

- This policy will apply to all persons, at all times, in company-owned or leased buildings and vehicles [if feasible: “and on company-owned or leased outdoor property”].

- This policy will be implemented no later than [date of implementation].

- This policy also applies to company-sponsored meetings and events on or off company premises.

- [If feasible: “This policy applies to personal vehicles on company property, including parking lots.”]

- Smoking of all types (including but not limited to cigarettes, bidis, kreteks, pipes, and cigars) is prohibited.

- Tobacco cessation and awareness programs, referrals, and resources will be made available to employees who desire to stop using tobacco. [Include information about where to go to receive help or information on quitting smoking.]

- Compliance with the smokefree workplace policy is mandatory for all employees and persons visiting the company, with no exceptions. Employee non-compliance with the policy will result in disciplinary action.

- This policy will be enforced through administrative action by supervisors and managers. Supervisors are responsible for ensuring that employees under their direction are aware of the policy and comply with it and for taking appropriate action to correct non-compliance. Supervisors are responsible for ensuring that all employees are notified of the new policy and receive a copy of the policy.
• Any person who observes violations of the policy may report these violations to the supervisor of the employee in question. Once the employee’s supervisor has been notified of a violation, or if the supervisor directly observes a violation by an employee under his or her direction, the supervisor is responsible for discussing the violation with the employee and taking appropriate disciplinary action. If the problem persists, an employee who observes violations of the policy can speak to [company department, name, and phone number for complaints].

• Any disputes involving this policy should be handled through the company’s established procedures for resolving work-related problems.

• Questions regarding this policy should be referred to [provide contact information for one or more staff designated to handle inquiries].

Sample Smokefree Workplace Policies

**Johnson & Johnson**
Worldwide Tobacco-Free Workplace Policy

1. POLICY

1.1 Johnson & Johnson and its affiliates desire to promote the health and wellness of their employees by incorporating a total “tobacco-free” workplace. Companies 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 January 1, 2007.

1.2 To be in compliance with this policy, companies must communicate the tobacco-free workplace policy to employees and develop site-specific implementation plans in conjunction with site management, Human Resources, and Health & Safety no later than January 1, 2006.

1.3 Each affiliate is expected to establish a company policy of its own which 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. PURPOSE

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., snuff, chew-gutka, jarda, betel quid, etc.) have been well-documented. The health hazards related to smoking impact both the smoker and the non-smoker who is exposed to secondhand smoke. It is the intent of Johnson & Johnson companies to provide all employees with a work environment conducive to good health.

3. APPLICABLE

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 smoking areas.

3.2 All employees, contractors, and visitors are prohibited from using tobacco at Johnson & Johnson company workplaces. The workplace is defined as inside all Johnson & Johnson company-owned or leased facilities, as well as outside on the grounds and parking lots, and inside company-owned or leased vehicles and personal vehicles on company property. This policy also applies to company-sponsored meetings and events on or off company premises. Prohibited uses of tobacco include but are not limited to smoking (e.g., cigarettes, pipes, cigars, hookah, etc.) and/or using smokeless tobacco (e.g., snuff, chew-gutka, jarda, betel quid, 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 non-compliance 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.
Welch Allyn Smokefree Workplace Policy

PURPOSE
To provide clean air in all Welch Allyn Affiliated Company work environments.

AFFECTS
All Welch Allyn Affiliated Company employees, agency temporary, contract employees, and all non-employees.

POLICY
No smoking or lighting of cigarettes, cigars, pipes, or other substances on company property. Property is defined as office or plant site or building and any motor vehicle owned by a Welch Allyn Affiliated Company.

Violations of this policy will be treated according to the following progressive counseling schedule. Steps 2-4 will be documented in the employee’s file.

1. First time an employee is found smoking results in a verbal warning, including a review of the policy.

2. Second time results in a written warning.

3. Third time results in a one-day leave without pay, to consider the seriousness of the situation.

4. Fourth time results in termination.

For violations in areas of volatile substances or products damageable by smoke, step 3 or 4 may be invoked directly.

The Dow Chemical Company

In North America, all Dow property and meetings are smokefree. All Dow Health Services facilities are tobacco-free.

Globally, all Dow buildings and meetings are smokefree. Designated outside smoking areas are still allowed.
SAMPLE WORKPLACE HEALTH AND WELLNESS PROGRAM

- Nutrition and Physical Activity
- Stress Management
- Tobacco Control
- Health Screenings

Cessation

- Referrals to cessation resources in community
- Free cessation counseling for employees and their families
- Informational and self-help materials
- Reimbursement for medications and services
- Free cessation medication
- Outreach and awareness campaign

100% Smokefree Policy
COMMUNICATION STRATEGIES FOR A SMOKEFREE WORKPLACE

Developing and implementing a communications plan that tells employees what they need to know about the new smokefree policy – and one that does so in a positive way – is central to the overall success of the policy. Key elements of a communications plan include a listing of the target audiences, effective messages and appropriate messengers for each audience, the appropriate media or methods to reach each audience, and a timeline for all activities.

**Identifying target audiences.** For most companies, there are four primary audiences:

- All employees affected by the policy
- Managers who need special briefing and training about their role in implementing the policy
- Shareholders, customers, and the general population
- Mass media

**Developing effective messages.** Your communications plan should use the results of the situation analysis and outreach (discussed in the section entitled “Employee Support for a Smokefree Workplace”) to identify information and messages each audience needs to understand. Strategies for developing effective messages include:

- Keep all communications positive and focused on your company’s genuine interest in promoting health and safety.
- Make sure employees understand that the policy will be implemented fairly in a process in which smokers and non-smokers are represented, and that feedback and ideas from staff are welcome.
- Avoid any messages that could appear negative or insensitive to smokers.
- Ensure that all employees understand the health rationale for the policy: Research shows unequivocally that secondhand smoke is a significant health risk; medical authorities agree that all workplaces should be completely smokefree; and ventilation systems cannot remove all of the toxic chemicals and gases from the air.
• Ensure that managers and supervisors know what is expected of them and are prepared to implement the policy.

• Be sure to communicate the timeline for implementation of the policy.

• Promote company-supported smoking cessation counseling and treatment opportunities, beginning one to three months in advance of implementation. Employees need time to decide to quit smoking. They also need to know from the outset that your company wants to help them quit.

• After the implementation of the policy, thank employees for their support and their efforts to make the smokefree policy a reality.

Choosing the best messengers. The person who delivers a message is often as important as the message itself.

• Include a visible role for senior corporate executives as communicators; it is important for your company to signal the commitment of top management to the new policy.

• Involve other effective messengers. Respected doctors or nurses within your company, union leaders, and charismatic employees who are skilled communicators and committed to the policy all could play an important role.

• If possible, include messages from popular, well-known personalities outside of your company, such as politicians or sports stars committed to smokefree air.

Delivering your messages. Key messages should be delivered repeatedly in advance of the implementation date using all available means of communication.

• For reaching employees, effective delivery methods include email, meetings, trainings, your company’s Web site, blogs, newsletters, paystubs, bulletin boards, and signs. Make sure the policy is included in employee orientation materials and job postings.

• For reaching shareholders and the general population, the mass media and your company’s annual report can be used to highlight the company’s commitment to employee health and well-being.
• For reaching the mass media, consider disseminating press releases and feature articles, holding news conferences and interviews, or holding special events to draw attention to your company’s smokefree efforts.

• Special events and promotional activities can be effective ways to deliver key messages. Consider scheduling a special event on implementation day. For example, implementation could be timed to coincide with a national or international no-smoking day, and your company could work with health officials or health groups to host a media event on that day. Your company could also sponsor a health fair on or in advance of implementation day. Other promotional activities could include a poster contest, a countdown until the launch of the policy, or incentives for employees who quit smoking during the first month.

**Developing a Timeline.** Your communications plan should include a timeline to ensure that appropriate messages are delivered at each stage of the implementation process, beginning approximately four months in advance, if possible, and continuing past the implementation of the policy, as needed.
HELPING EMPLOYEES QUIT SMOKING

Offering assistance to employees who would like to stop smoking benefits both employers and employees alike. For employees, the benefits are profound because most smokers would like to quit, and smoking cessation can significantly improve health and quality of life. For employers, the benefits include reducing the high costs of absenteeism, medical care, lost productivity, and cleaning and maintenance related to smoking. Reduced smoking rates among employees can also improve your company’s image and employee morale.

Smoking cessation initiatives can be especially important and cost-effective if implemented one to three months in advance of a smokefree workplace policy. This will allow the cessation program to help employees who would like to quit smoking ahead of the policy and will give the program a chance to mature before demand increases in response to the smokefree policy. Workplace smoking cessation initiatives are also affordable. They are widely regarded as the “gold standard” of healthcare cost-effectiveness.

Due to the wide variation in health care systems and employer practices among countries, no single approach to helping employees quit will work everywhere. The following helpful guidelines, however, can be adapted to the size and culture of your company. These include:

**Rely on an interdepartmental working group to develop and oversee smoking cessation assistance.** For ease of coordination, the same working group that is overseeing implementation of the smokefree workplace policy could also be asked to oversee development or enhancement of smoking cessation assistance offered by your company. Activities of the working group should include:

- Assessing the current cost of smoking to your company and the potential benefits that could be achieved through a smoking cessation initiative
- Using surveys and/or focus groups to assess the level of interest among employees in smoking cessation products and services
- Researching available resources
- Deciding on an approach and making appropriate recommendations to management
Determine the level of support to provide. Your company can provide smoking cessation programs and support ranging from “comprehensive” to “facilitative” to “referral-based,” as described below:

- **Comprehensive:** Fully-funded benefits are provided on-site.

- **Facilitative:** The employer provides extensive information, including self-help materials, and makes some cessation services available.

- **Referral-based:** Employers refer employees to community-based programs and materials.

Integrate smoking cessation assistance into your company’s other health and wellness programs. Occupational health and wellness staff involved in stress management, nutrition and physical activity, health screenings, and other programs offered by your company should be trained to assess, educate, and refer smokers to appropriate cessation information and programs as part of their work. The diagram labeled “Sample Workplace Health and Wellness Program” shows how smoking cessation fits into other programs.

Evaluate the success of the cessation assistance offered. Your company should evaluate both short-term benefits of the cessation assistance, such as enhanced employee awareness, improved morale, higher quality of work, increased job satisfaction, and long-term outcomes such as:

- Increased productivity

- Reduced employee absenteeism

- Prevention of injuries

- Reduced risk of fire damage

- Increased employee retention

- Enhanced opportunities for corporate social responsibility

Consider coordinating the collection of this information with the evaluation of the smokefree workplace policy.
Choose appropriate smoking cessation resources. Cost-effective smoking cessation products and services that your company could consider offering as part of a cessation program include:

- Individual cessation counseling
- Group counseling
- Telephone counseling
- Informational and self-help materials
- Smoking cessation medications, including nicotine replacement therapy (NRT)
- Referrals to cessation programs and information in the community

All of these approaches to cessation are effective when properly implemented; some smokers are more easily motivated by one approach than another. Studies have shown that cessation medications provide much better results when paired with counseling, so ideally your company would provide employees with access to both.

The following publications provide more detailed information about how your company can help employees quit smoking and about smoking cessation products and services:

Employers’ Smoking Cessation Guide: Practical Approaches to a Costly Workplace Problem, 2nd Edition
Professional Assisted Cessation Therapy 2002

Policy recommendations on smoking cessation and treatment of tobacco dependence World Health Organization (WHO) 2003

Tobacco in the Workplace: Meeting the Challenge. A handbook for employers.
WHO Copenhagen 2002
http://www.euro.who.int/document/e74819.pdf

MONITORING AND EVALUATING THE IMPACT OF A SMOKEFREE WORKPLACE POLICY

Monitoring
Throughout the planning, implementation, and enforcement process, it is important to have a system in place to collect feedback on the new policy from employees and managers. The Smokefree Policy Working Group and the manager in charge of implementing the policy should consider a variety of feedback mechanisms, including:

- Informal outreach by the Smokefree Policy Working Group
- Periodic anonymous employee surveys (consider using a service such as www.surveymonkey.com)
- A feedback mechanism through your company’s intranet site
- Email inviting feedback
- A suggestion box
- Meetings that include time for questions

Be sure to address employee and management comments, suggestions, and concerns in a timely, thoughtful manner. Clarify policy provisions and adjust implementation and enforcement procedures as necessary.

Evaluation
Six months following policy implementation and annually thereafter, it is recommended that your company conduct an evaluation of the policy. Evaluation allows your company to measure the results of the policy and its implementation and make improvements, as needed, to sustain the smokefree workplace. Consider assessing the following:

- Health Impact
  - Measure the impact of the policy by determining the number of smokers and their interest in quitting before and after the smokefree policy implementation (both in general and among those who received cessation services through the employee health services). Ideally, this information would be collected before the policy is implemented; three, six, and 12 months after implementation; and annually thereafter.
• Operational Impact
  - Determine whether the policy is being applied equally to employees, managers, senior managers, visitors, etc., perhaps through a confidential survey.
  - Identify areas of non-compliance.
    - Are all company buildings smokefree, including company-owned or leased facilities? If you have a 100% smokefree campus policy, are outdoor areas and parking lots, company-owned or leased vehicles, and personal vehicles on company property smokefree?
    - Are company-sponsored meetings and events on or off company premises smokefree?
  - Determine whether necessary physical changes to company premises have been made.
    - Is tobacco being sold on company premises?
    - Do ashtrays and cigarette butt receptacles exist on company premises?
  - Track employee participation in cessation programs.

• Employee Satisfaction
  - Measure employees’ (including management) satisfaction with the policy and its implementation.
  - Measure employees’ satisfaction with the cessation programs and services provided.

• Communications
  - Track employee visits to your company Web page explaining the smokefree policy (if applicable).
  - Identify areas of confusion around the policy and/or its implementation, and find ways to avoid them.
  - Determine whether the existing signage informing employees and visitors of the policy is appropriate and sufficient.
  - Track the number of occasions when requests for support or information could not be met. (Delayed or inadequate support or information should also be judged as failure to provide support.)

The lessons learned and data collected from the monitoring and evaluation process should be documented and reviewed by management and the Smokefree Policy Working Group. The results of monitoring and evaluation will not only guide your development of ongoing activities to ensure the success and sustainability of the smokefree policy, but also will be useful in promoting your company’s smokefree success to external audiences.
ARE YOU READY? A SMOKEFREE WORKPLACE IMPLEMENTATION CHECKLIST

Before implementing your smokefree policy, have you ...

☐ Assigned overall responsibility to a respected manager as a smokefree policy coordinator to develop and oversee policy implementation?

☐ Built support for and raised awareness of the impending policy among employees and management?

☐ Provided a way for employees and management to provide input and feedback on the smokefree policy implementation?

☐ Researched and decided on the smoking cessation tools (services and products) your company will offer?

☐ Planned a high profile event or promotional activity, such as an employee health day, to celebrate the implementation of the smokefree policy?

☐ Prepared for the physical changes that must take place for the policy to go into effect (e.g., making sure that ashtrays and cigarette butt receptacles will be removed from company premises)?

☐ Trained or briefed managers on the implications of the policy?

☐ Developed signage that will be posted and communications materials that will be used when the policy goes into effect?

☐ Created a Smokefree Policy Working Group composed of smoking and non-smoking employees who are respected “opinion leaders” within your company?

☐ Ensured that employees have access to smoking cessation tools and counseling either on-site or through referrals to outside resources?

On the day your smokefree policy is to be implemented, have you ...

☐ Ensured that job postings for new staff and new employee orientation materials state that your company has a smokefree workplace policy?

☐ Prominently displayed signage and made visitors to the facility aware of the policy (e.g., on visitor badges)?

☐ Formally announced the policy, ideally in conjunction with a high-profile event or promotional activity, such as an employee health day?
- Removed ashtrays and cigarette butt receptacles and, if implementing a 100% smokefree campus policy, eliminated “smoking shelters” from company property?

- Ensured that no tobacco products are sold on company premises?

After your smokefree policy is implemented, have you ...

- Continued the awareness campaign, providing messages that promote a smokefree lifestyle and thanking employees for their support and efforts to make the smokefree policy a reality?

- Continued to monitor and respond to input and feedback from employees and management?

- Evaluated the impact of your efforts and documented lessons learned and future needs?

- Met with the Smokefree Policy Working Group and senior management to discuss the results of the policy evaluation and ongoing activities?

- Celebrated your smokefree workplace policy success in conjunction with national/regional/international events such as World No Tobacco Day and International Labor Day?

See “Making Your Workplace Smokefree: A Timeline of Activities” for more details about these tasks.
COMPANY PROFILES: HOW DID THEY GO SMOKEFREE?

Case Study: The Dow Chemical Company

Company description (from company Web site, www.dow.com)

With annual sales of $54 billion and 46,000 employees worldwide, Dow is a diversified chemical company that combines the power of science and technology with the "Human Element” to constantly improve what is essential to human progress. The Company delivers a broad range of products and services to customers in around 160 countries, connecting chemistry and innovation with the principles of sustainability to help provide everything from fresh water, food, and pharmaceuticals to paints, packaging, and personal care products. For more information, visit www.dow.com.

Motivation to go smokefree

As part of its commitment to employee health and wellness, Dow established a smokefree policy at its North American locations over 15 years ago. The Dow planning team intentionally anchored the decision to implement a smokefree policy with existing corporate policies and priorities and with the expectations of supporting good health and delivering shareholder value. The smokefree policy was aligned with the company’s global Environment, Health, and Safety Policy (to support the protection of individuals from adverse health impacts) and local safety policies (which prohibited smoking for safety reasons).

Smokefree policy

In 2003, Dow’s Health Services and Human Resources departments updated the policy in response to the increasing evidence related to the adverse health effects of secondhand smoke.

The new policy involved two parts:

1) Extending its North American smokefree policy to Dow property and meetings, including outdoor areas, and implementing a tobacco-free policy at Dow Health Services facilities (e.g., fitness centers)

2) Implementing a smokefree buildings and meetings policy globally (Designated outside smoking areas would still be allowed.)

Dow spent approximately 18 months planning for the implementation of the new policy. The policy was introduced like any other companywide policy; a clear plan was put in place, deadlines were set, and each step of implementation was approved and documented by the appropriate personnel. A review of local practices and gaps was completed, and tools such as a geographic implementation checklist were provided to aid each region in local implementation. A comprehensive communications plan was also developed and implemented, and customized messages were created for various stakeholders – management, Human Resources, union representatives, employees – and disseminated through the full range of communication vehicles. Opportunities and support for
Employee tobacco cessation were also provided well in advance of the policy start date to help encourage tobacco-free lifestyles and ease the transition to the policy. After the rollout of the policy, local adjustments were made as needed. The policy was also incorporated into Dow’s quality assurance and audit processes.

**Results achieved**

Employee tobacco cessation rates, which are tracked as part of Dow’s health assessment program, have improved since the implementation of the policy. Dow’s global rate of tobacco use is currently 18 percent. By 2014, Dow aims to reduce the prevalence of tobacco use in each of its geographic regions by 10 percentage points.

**Obstacles faced**

1. **Geography-specific challenges**
   To implement the policy in Germany and the Netherlands, Dow needed approval from the “works councils,” or representative employee groups, which created a layer of bureaucracy and led to implementation delays. A key point to take away is to understand the full scope of the decision-makers and to allow adequate time in the implementation plan for extra communication and decision-making. It is also essential to have strong evidence to support the policy recommendations, understand the minimum requirements of the policy, and be open to some flexibility (or more time for implementation) in some areas.

   Some sites in the Asia Pacific region have also proved challenging given the high rates of tobacco use and the lack of cessation expertise, services, and medication/nicotine replacement therapy availability. Dow is working with regional health services staff to increase their skills and self-efficacy in addressing tobacco use in both individual counseling and population-based health promotion. Customizing communication materials to be consistent with local resources is important to make them more useful and more credible. In some places, additional resources are allocated to the implementation of local tobacco cessation programs.

2. **Lack of understanding of global needs and resources**
   Extensive research was required to understand the cultural aspects of tobacco use and the cessation options available to Dow’s global employee population. At Dow, a global tobacco cessation subject matter expert relies on input from regional contacts around the world to ensure that policy, clinical guidelines, and resources are consistent with known best practices, drive progress, and allow for local flexibility where necessary.

3. **Lack of transparency**
   It can be difficult to assess how effectively the policy is being implemented in more remote locations.

   - Dow’s tobacco policy is listed, by worksite, on the employee benefit Web site as part of the company’s commitment to and pride in offering a healthy workplace.
• Including messaging about Dow’s tobacco-free workplace policy as part of the company-wide No Tobacco Day and in the company’s sustainability goals encourages grassroots inquiries if local practice deviates from the global expectation.

• Making the policy part of the company audit process and keeping tobacco on the topic list for health-related site visits and update meetings helps to identify (potential) changes in the policy.

Lessons learned

• Do your research. Understand the cessation opportunities available at your global locations and their local laws/customs regarding tobacco use.

• Be able to provide the rationale and business case for implementing a tobacco-free worksite. Ensure that your employees realize that the decision to go tobacco-free is not arbitrary or punitive. Not only is employee health important to the company, but tobacco use results in reduced productivity and increased health risks, both of which affect the company’s bottom line.

• Recognize that quitting tobacco use is an emotional and personal issue for people – and that it can be hard work. Be supportive of your employees’ quitting efforts, but be sure in your communications and plans that non-tobacco users do not feel punished or unappreciated because they do not use tobacco.

• Consider the greater community. There may be opportunities to take advantage of tobacco control successes within your community – for example, the passage of smokefree legislation – to generate momentum for your tobacco-free workplace policy. By the same token, it may be possible to create changes in tobacco control policy in your community by implementing a tobacco-free policy at your workplace. Suppose there is a small community where there are only two major employers. Consider meeting with the other large employer to discuss whether they would be interested in implementing a smokefree policy at the same time.

• Reinforce the policy via constant communications and monitoring. Reinforcing the policy and monitoring its implementation will help ensure that the policy becomes part of the company’s culture and that all new employees and contractors understand it as a mandatory company policy. Recognize that you need consistent support to help employees and family members quit, that relapse is possible, and the desire to quit may come well after the policy launch. Hold tobacco cessation campaigns at regular intervals year after year – not only when the tobacco-free policy is implemented.
• Keep thinking about how to get to your end goal of a tobacco-free environment. Dow No Tobacco Day takes place every May in conjunction with World No Tobacco Day. It is an opportunity for the company to reinforce the tobacco-free message and to encourage people to think about quitting tobacco use. The event also includes site-specific challenges to provide a supportive environment of no-tobacco use (e.g., sites in Japan close their outside smoking huts for at least the day).

• Reward worksites that take action to create a tobacco-free workplace. Dow has a Healthy Workplace Index, which is an internal tool to measure and encourage sites to create a supportive environment (and culture) that encourages employees to practice healthy behaviors. “Smoke-free workplace” is one indicator in this index, and worksites receive a higher score on that measure if they do not have designated smoking areas.

• Consider implementing a policy that covers all forms of tobacco. One unexpected, negative outcome of the smoke-free policy was a probable increase in smokeless tobacco use among employees. Dow has since increased efforts to inform its employees about the health consequences of smokeless tobacco and dispel the myth that smokeless tobacco is a safe alternative to cigarettes. Dow has also reframed its goal as a tobacco-free workplace as opposed to a smokefree workplace and consistently uses tobacco (vs. smoking) use/cessation in its messaging.
COMPANY PROFILES: HOW DID THEY GO SMOKEFREE?

Case Study: Johnson & Johnson

Company description (from company Web site, www.jnj.com)

Johnson & Johnson is a worldwide family of 250 companies marketing health care products throughout the world.

The companies’ more than 119,000 employees are engaged in producing products that serve a broad segment of medical needs. They range from baby care, first aid, and hospital products to prescription pharmaceuticals, diagnostics, and products relating to family planning, dermatology, and feminine hygiene. They are located in 75 countries and sell products in over 150 countries.

Johnson & Johnson is the world’s most comprehensive and broadly-based manufacturer of health care products as well as a provider of related services for the consumer, pharmaceutical, and professional markets.

Motivation to go smokefree

Johnson & Johnson acknowledges that employee wellness is crucial to the success of the business and considers it its responsibility to provide employees with the resources to lead healthier lives. In accordance with this credo and to create, promote, and sustain an organizational culture of health, Johnson & Johnson implemented a tobacco-free workplace policy on January 1, 2007.

Smokefree policy

Johnson & Johnson’s tobacco-free policy prohibits tobacco use at all operating company locations (i.e., property, buildings, leased buildings, company vehicles, and company-sponsored meetings). Given the varying legislative and political landscapes of the areas in which it operates, Johnson & Johnson allowed each of its affiliates to establish a company policy of its own that incorporated the elements described in the corporate policy. Affiliates were also permitted to modify the policy to be in compliance with local, state, or regional laws or collective bargaining agreements.

Johnson & Johnson provided its affiliates with education and materials to facilitate the rollout and implementation of the policy. A global toolkit including culturally sensitive implementation plans and materials to support employee behavior change was disseminated to Johnson & Johnson companies.

Results achieved

As a result of the tobacco-free policy, 98 percent of Johnson & Johnson’s companies were tobacco-free as of March 2008. One hundred percent compliance with the policy has been achieved in Asia Pacific, Latin America, and North America.
Non-smokers mentioned the following benefits as a result of the policy:

- Eliminated the odor of tobacco in the office or elevators
- Made them proud to be working at a health care company
- Eliminated their anxiety about secondhand smoke
- Facilitated communication with smokers (Smokers do not leave their desk as often as before to take “smoke breaks.”)

Smokers mentioned the following benefits as a result of the policy:

- Helped them to quit smoking
- Increased their quit attempts
- Reduced the number of cigarettes they smoked
- Encouraged them to think more actively about quitting smoking

**Obstacles faced**

1. **Partial exemptions based on local laws (requiring an outside smoking area)**
   
   To overcome this obstacle, Johnson & Johnson positioned the policy as an employee health and safety issue rather than an issue of complying with local tobacco control laws.

2. **Compliance challenges**
   
   Johnson & Johnson provided advance communication with employees and offered cessation assistance on an ongoing basis to encourage compliance among its employees. The tobacco-free policy was also encouraged as part of an overall wellness culture rather than as a one-off initiative.

3. **Lack of cessation products in the market, i.e., China**
   
   In some markets, cessation medications are not available.

4. **Co-resident smokers**
   
   Finding that employees would be more successful at quitting if other smokers in their households quit as well, Johnson & Johnson offered cessation support to families of employee smokers.
Lessons learned

- Obtain management support of the tobacco-free policy. Gain the support of both senior management and local management. Make sure these individuals understand the objectives of and expectations for the policy, as well as the strategies for implementation and their role in that process.

- Assess your current situation and build the business case for going tobacco-free. Conduct an analysis of your employees’ smoking behavior (i.e., proportion of employees who are smokers) and readiness for a tobacco-free policy. Consider the smokefree policies of other global organizations. Conduct ongoing reviews of literature and best practices.

- Establish a team comprised of employees from all levels and departments of the company ("Smokefree Policy Working Group") and enlist the team to develop an integrated implementation and communication plan. The Team should include employees from Management, Labor, Health and Safety, Human Resources, and Operations. Also partner with Employee Benefits to leverage resources and coverage for nicotine replacement therapy and evidence-based cessation medications and programs. Engage labor unions.

- Allow for sufficient lead time for policy implementation, perhaps between six and nine months if a tobacco policy already exists and between nine and eighteen months if a tobacco policy does not already exist.

- Communicate the policy to employees. Keep it visible. Develop a corporate communications plan that allows for ongoing (at least annual) marketing of the policy. Develop communications plans and marketing kits for your company locations. Announce the policy and the timeline for implementation and cessation activities. Communicate the management’s full support of the policy. Use the full range of communications vehicles, for example, email announcements, tobacco control events in the community, the company intranet, posters and fliers, and the company newsletter.

- Implement any necessary environmental changes. Remove ashtrays from company premises, remove vending machines that sell tobacco, and post “tobacco-free facility” signage.
• Offer support to employees and their family members through workplace tobacco cessation initiatives before and after the effective date. Consider the various types of tobacco cessation programs and resources available, including those that are self-paced and offered on-site or online. Utilize resources available in the local or regional community. Integrate cessation offerings with Employee Health Services (e.g., Employee Assistance, Occupational Health and Wellness). Explore options for coverage of evidence-based tobacco treatment including counseling and medications.

• Evaluate the outcomes of the policy. Develop and/or utilize measurement or assessment tools to monitor progress towards policy implementation. Adjust your strategy as needed. Track and report business results, best practices, and lessons learned to the Smokefree Policy Working Group and senior management. Outcome measures include employee satisfaction with the policy and cessation interventions, changes in employees’ smoking behaviors (i.e., percentage of employees who are non-smokers, percentage of employees who quit or attempted to quit one year after implementation of the policy), business results (i.e., cost-avoidance through risk reduction, reduction in medical claims/cost), utilization of cessation offerings, compliance with the policy, and percentage of companies/affiliates that have successfully implemented the policy.

• Consider phasing-in the policy in locations where you might face greater resistance. In Japan, for example, Johnson & Johnson Medical implemented its tobacco-free policy in four phases. Phase one involved separating smoking areas from smokefree areas. Phase two involved removing smoking areas and offering a tobacco control e-learning program to employees. Phase three involved announcing the forthcoming worldwide tobacco-free policy, implementing a “no smoking during office hours” policy, and providing cessation support programs. Phase four involved implementing the tobacco-free workplace policy.
RESOURCES ON SMOKEFREE WORKPLACE POLICIES

Action on Smoking and Health-London. Smoking in the Workplace. 

American Cancer Society. Guide to quitting smoking. 
http://www.cancer.org/docroot/PED/content/PED_10_13X_Guide_for_Quitting_Smoking.asp?sitearea=&level=

Campaign for Tobacco-Free Kids. Toolkit for Implementing Smoke-free Laws. 
http://www.goingsmokefree.org/tools/business.html


Johnson & Johnson. Collection of materials for going smoke free. (Unpublished)

http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11381

http://www.prevent.org/workplaceguide

http://www.wmitchell.edu/TobaccoLaw/resources/Policies.pdf

U.S. Department of Health and Human Services Centers for Disease Control and Prevention. Implementing a Tobacco-Free Campus Initiative in Your Workplace. 
http://www.cdc.gov/nccdphp/dnpa/hwi/toolkits/tobacco/index.htm

http://www.cdc.gov/tobacco/secondhand_smoke/workplace_guide.htm

World Bank. Smoke-free workplaces. 

http://www.euro.who.int/document/e74819.pdf

http://www.euro.who.int/document/e74820.pdf
GENERAL SMOKEFREE RESOURCES

Action on Smoking and Health – London
http://ash.org.uk

Adoption of the guidelines for implementation of Article 8.
World Health Organization (WHO), Conference of the Parties to the WHO Framework Convention on Tobacco Control, second session, decision FCTC/COP2(7).

American Cancer Society

• “Enacting Strong Smoke-free Laws:
The Advocate’s Guide to Legislative Strategies”

• “Enforcing Strong Smoke-free Laws:
The Advocate’s Guide to Enforcement Strategies”
http://www.cancer.org/docroot/AA/content/AA_1_7_PDF_Enforcement_Strategy.asp?

Americans for Nonsmokers’ Rights
http://www.no-smoke.org

Specific page on international smokefree efforts:
http://no-smoke.org/learnmore.php?id=174

Campaign for Tobacco-Free Kids – International Resource Center
http://tobaccofreecenter.org/smoke_free_laws

Cancer Research UK
http://info.cancerresearchuk.org/publicpolicy/briefings/prevention/tobaccocontrol

Centers for Disease Control and Prevention – Smoking and Tobacco Use
http://www.cdc.gov/tobacco

Framework Convention Alliance
http://www.fctc.org

• Basic Factsheets in Arabic, English, and Spanish:
http://www.fctc.org/index.php?item=factsheets

• Documents in French:

Global Smokefree Partnership
http://www.globalsmokefreepartnership.org

• “Smokefree: The Facts” – 12 factsheets on key aspects of smokefree policies
  - Available in English at:
    http://tobaccofreecenter.org/smoke_free_factsresources
  - Available in Spanish at:
    http://tobaccofreecenter.org/es/smoke_free_factsresources
- Available in French at:
  http://tobaccofreecenter.org/fr/smoke_free_factsresources

- Available in Portuguese at:
  http://tobaccofreecenter.org/pt/smoke_free_factsresources

- Page on Secondhand Smoke:
  http://www.fctc.org/index.php?item=topics&code=15

Johns Hopkins Bloomberg School of Public Health Institute for Global Tobacco Control
http://www.jhsph.edu/global_tobacco

Low-cost research for advocacy

Smokefree Partnership Europe
http://www.smokefreepartnership.eu

Smokefree Partnership Europe – “Lifting the Smokescreen: 10 reasons for going smokefree”
http://www.smokefreepartnership.eu/IMG/pdf/Lifting_the_smokescreen.pdf

Smoke-Free Workplaces in Ireland: A One Year Review
http://www.otc.ie/Uploads/1_Year_Report_FA.pdf


UK Chartered Institute of Environmental Health – Resources on national smokefree legislation and enforcement
http://www.idea.gov.uk/idk/core/page.do?pageId=6493757

World Health Organization – Country Cases on Enforcement of Tobacco Control legislation

WHO – Implementation and Enforcement of Tobacco Control Legislation

WHO Framework Convention on Tobacco Control
http://www.who.int/tobacco/fctc/text/final/en

WHO MPOWER Report

WHO Policy Recommendations on Exposure to Secondhand Smoke
ACKNOWLEDGMENTS

The information and data included in this toolkit were based on contributions from our partner organizations, big and small, involved in tobacco control around the world.


Director, Global Smokefree Partnership: Cassandra Welch

Project Manager: Antonella Cardone

Project Coordinator: Ami Valdemoro

Writers: Catherine Jo, Sylvana Rochet-Belleri, John Bloom

Editor: Liddy Leitman

Design: Sanders Designs

Production of this toolkit has been made possible through a financial contribution from Johnson & Johnson.
The Global Smokefree Partnership is co-hosted by the American Cancer Society and the Framework Convention Alliance.