



Sub-Committee to Review Smoking on Campus Research: Additional detailed information

This file is a compilation of the following information:

- 1) Successful Tobacco Policy Change Seminar notes
- 2) Conference Call with Swagelok Company
- 3) Hocking College Summary
- 4) Taking the initiative summary
- 5) Data Collected summary

1) Successful Tobacco Policy Change Seminar notes (Nov. 29, 2007)

Ty Patterson has established a Center of Excellence for Tobacco-Free Campus Policy at his institution, Ozarks Technical Community College. He has not only helped his community college become smoke free, he has helped several other institutions do the same. The Center hosts a yearly seminar each spring to support this activity across the nation. As Director of the Center of Excellence, Ty travels to institutions that seek help in the process of implementing a Tobacco-Free Policy.

- 1) Ty Patterson
 - a) He is also VP for Student Services. Has been in Student Services and higher education for 37 years. Started in this policy area in 1997
 - b) Ozarks opened in 1991 with 1,100 students. Now has 10,000 students and 1,000 employees.
- 2) Smoking-related problems
 - a) Underage smokers
 - b) Cigarette butts on the ground
 - c) Smoking near doorways
- 3) Smoking policy-related options
 - a) Can designate locations to smoke – “smoke centers”
- 4) How they did it
 - a) Took 1.5 years to present the policy; Board established the policy
 - b) Adopted policy in 1999 to implement in 2003 “Smoke-free in 2003”
 - c) Provided smoking cessation training to counselors to provide to individuals, but nobody took advantage of it
 - d) Need clear mission/reason for establishing policy; this helps generate buy-in
 - i) Do not use the mission of getting people to quit smoking

- ii) Do want clean environment/clean air; want respect with regard to 2nd hand smoke; focus on education, communication, compliance – they actually had little signage around campus
 - iii) Always listen and respect; do not act punitively. Work with safety and security on approach; be disarming. Cultivate culture of mutual respect for all. Responsible smokers do not smoke in public. Take a leadership role in your community.
 - iv) Set expectations: likely not going to be 100% compliant and how are you going to deal with this; want practical application of policy, not research-oriented
 - v) The 2003 mark began with little fanfare. For the first 14 months, the policy was not enforced. Enforcement began October 2004. There have been 50 violations since then. The penalty is \$15 fine or 2 hours of work. Process is 1) provide a warning, 2) see it again, 3) issue citation.
- 5) Potential cons
- a) Politically correct defense
 - b) People will quit/leave – only 2 long-time smoking employees left the institution
- 6) Policy implementation options
- a) Distribute 4” x 4” cards outlining policy
 - b) Thank you signage inside buildings
 - c) Community advisory committee: choose members for influence, support, etc., in the community
- 7) Other relevant information
- a) Saint Charles Community College implemented policy in one year; John McGuire is the current president
 - b) Ty has little experience with unions
 - c) Resources include the American Lung Association, the American Heart Association, the American Cancer Society, etc.
 - d) Smokeless tobacco has not been as big of an issue as smoking tobacco, but this is where the trend is headed

Michael F. Roizen, M.D. is the Chief Wellness Officer at the Cleveland Clinic and he has played a leadership role in the campaign for a tobacco free campus. The Clinic’s implementation of Smash the Ash on July 4, 2005 set the pace for many other Northeast Ohio hospitals. The Clinic's current new policy of pre-employment screening for nicotine use again has raised the bar of tobacco policy change. Michael Roizen has published over 155 peer-reviewed scientific papers, 100 textbook chapters, 30 editorials, 9 lay medical books, four of which have been New York Times #1 bestsellers. His work is quoted in numerous print media including Newsweek, the Los Angeles Times, the New York Post, and he has been interviewed on ABC, CBS, NBC, The Fox Network, and CNN.

1. Reason to go smoke-free
 - a. Prevent illness/foster health: change the current quality of life curve. If you quit smoking before you are 35, the life curve of the ex-smoker is undistinguishable from that of a non-smoker
 - b. Be competitive: lower healthcare costs
 - c. Good for costs, employability of graduates, sports teams, graduates live longer
 - d. You foster what happens around you
 - i. 10-15% of college freshman smoke
 - ii. 30-40% of college seniors smoke
2. Other relevant information
 - a. We have 2x the chronic disease as Europe
 - b. Touchstone's Disney films will no longer have smoking in them starting Sept. 1, 2007
 - c. The Clinic works with the American Lung Association
 - d. The Clinic would be happy to serve on an advisory committee
 - e. There are 5 (?) tobacco treatment centers
 - f. Start exercising 30 days prior to quitting smoking. On 31st day stop smoking and start weight management
3. Smoke-free policy
 - a. How they did it:
 - i. Communicated the change 3-6 months in advance and the communication came from the top (the CEO)
 - ii. Set the date (July 4, 2005)
 - iii. NO Exceptions – even in cars or on the institution's property
 - iv. Strict enforcement: 1 warning and then you are fired!
 - v. Free nicotine replacement
 - vi. Did not hire smokers – this is legal in 36 states.
 - vii. Error: Called the campaign “Smash the ash!” which provides the movement with a negative connotation. Should have been something like “Live beautifully!” Need to think in terms of how the smoker will feel.
4. Results
 - a. Reduced heart coronary disease
 - b. Tobacco cessation decreased high blood pressure
 - c. Letters and emails were in favor 17:1.
 - d. 1,200 people signed up for smoking cessation and 50% succeeded.
 - e. Smoking employees reduced from 15% to 11.4%.
 - f. Smoking applicants reduced from 15% to 2%.
 - g. There was no shortage of employees (this is a common assumption in the healthcare field)

5. Challenges

- a. Policy applies to visitors
- b. Employees working 12-hour shifts

Sandy Opacich is HR Director at Medical Mutual, a leader in worksite tobacco policy. As a large Ohio employer tobacco policy fits into an overall wellness program. Medical Mutual also offers the quit line and NRT to all of its customers. Has been HR Director for six years; started in 2001.

1) How they did it

- a) Smoke-free workplace policy was implemented as part of a larger wellness campaign and required a culture change and a lot of communication.
- b) Provided: On-site fitness centers, On-site health screenings, Healthy café and vending, on-site smoking cessation through EAP, Ohio quit line and patch provided for free
- c) People earned points for discounts on their medical premiums or toward gift cards
- d) Incorporated wellness and policy in new employee orientation, management training, provided intranet notices and reminders.
- e) 1999: Let people smoke in designated areas
- f) 2005: Follow state law
- g) September 2006: not hiring smokers; require urinalysis. Have not lost any candidates yet. (healthcare costs are 21% more for smokers)
- h) Results:
 - i) From 2003 to 2006 went from 18% to 11% tobacco use. Estimated that \$625/year is saved per employee that quits smoking
 - ii) Overall response has been positive

2) Tips

- a) The fear of negative feedback is greater than the actual negative feedback received
- b) Wellness was ranked 3rd of 21 topics highly rated by employees in the 2007 employee survey
- c) Employers currently bear the burden of 80% or more the cost of healthcare!!!
- d) Consider reactions of key sponsors/supports, etc. Listen to key stakeholders
- e) Requires commitment and support from the top
- f) Cons: can be considered a “slippery slope” – unfair violation of personal rights, what’s next?
- g) Overall, most smokers want to quit

Darren Nealy J.D. is the Assistant Director of The Tobacco Public Policy Center at Capital University Law School. He works with school Boards across the state to implement a 100% tobacco-free schools policy. In Ohio, only students are prohibited from using or possessing tobacco products on school grounds. It is up to individual school districts to regulate tobacco use on school grounds by staff and visitors.

- 1) Overall statement: There is no *right* to smoke
- 2) Statistics
 - a) 128 school districts in Ohio have gone tobacco free
 - b) Entire states have gone tobacco free for schools, including Arkansas and North Carolina
- 3) Requirements of a TRUE tobacco free policy
 - a) States who it applies to: everyone
 - b) Specifies what it applies to: smoke free and tobacco free are not the same
 - c) States where the policy applies: everywhere – buildings, school grounds, vehicles, etc.
 - d) Allows for NO exceptions – no designated buildings; no designated times
- 4) Resources
 - a) The Tobacco Public Policy Center is happy to supply schools with cessation information, signage/announcements and enforcement tips

2) Conference Call with Swagelok Company

Reaching Employees through Smoking Policy Change

Date: Tuesday, April 22, 2008

Phone Conference: 10:00 am - 10:30 pm eastern

Speaker: Paula N. Elliott, HR assistant Swagelok, Project Manager; Swagelok Company

Listeners: Jessica Carmean, Mark Deering, Amy Gilliland

Description: “Thinking of changing your company’s worksite smoking policies? Want to know what other Ohio companies are doing. Please attend a free smoking policy conference call when Paula N. Elliott will cover her company’s campus wide smoke free policy and use of the Ohio Tobacco Quitline.”

Note: Handouts, podcast available online at <http://www.healthyohio.org/smoke/>

Overview

- Enlisted help/support of upper management, which was 100% behind efforts
- Emphasize “making strides to health and wealth”
- Logo – take action (link business strategy with movement & accepting challenge)
- Emphasis from consumers of health to stewards of own health
- Not targeted at smokers, rather at tobacco/smoke
- 70% of associates susceptible to cancer, heart disease, other
- Found examples of companies that had gone smoke-free online (i.e., Cleveland Clinic, Jergen’s, Midwest Express). Contacted each and spoke to HR mgr.

Everyone helpful. Discussed:

- o Enforcement
- o Education
- o Policies

- Enlisted team of HR generalists and front-line employees (associates) to garner enthusiasm

Timeline of Events

- July: Decided to be tobacco-free by the end of the year (2007), but did not communicate this at this time. New policy was implemented as part of an overall health and wellness initiative.
- Developed policy language – used internet and existing programs/policies
- August: Asked for policy approval from legal
- Ohio Quitline – very helpful, sent volunteers to each site twice with tradeshow displays from mid-Sept to end of year. Fun events with stress balls and lollipop giveaways. Had not announced policy yet, but people seemed positive.
- National Jewish Medical Research – provides cessation kits (\$28 per kit – Ohio Quit-line pays a matching \$28). Up to 4 wks of free patches and telephone counseling – potential additional 4 wks of patches
- Posted Quitline fliers and posters at end of August
- Task force meetings
- Beginning of November: President sent out letter explaining commitment to health and safety of associates, announcing intent to change and create an environment that supports healthy behaviors. Included fliers from Quit-line.
- Mid-November – additional communication in conjunction with the national smoke-out
- January 1 – tobacco-free
- Bulletin – Last day before Christmas shutdown, announced new tobacco free policy. Banned tobacco from all property, parking lots, tree-lawns. Changed designated smoking areas to picnic areas.
- Need to clock out to leave campus and smoke
- Applies to everyone – associates, visitors and contractors
- Bulletin regarding policy re-read upon return from Christmas break in January

Other

- Also implemented 12-week “Living Lean” program for weight loss/fitness. 6,000 pounds lost by 700 participants.
- Planning an 8-week walk in conjunction with the American Heart Association

Questions

1. **Percentage of smokers?** Does not know, may have been 15-20%
2. **How many have quit smoking as a result of policy?** Currently only 6 associates go off campus to smoke
3. **Do smokers pay different insurance premiums?** Not at this time, no current plans in this direction.
4. **How many employees are there?** 3500 employees (20 campuses)
5. **Were there any repercussions? Leaving company?** No.
6. **Problems with enforcement?** It’s difficult – employees will stand across the street in peoples’ driveways. For the most part, everyone has been supportive.
7. **Enforcement?** Aligned with regular discipline related to clocking out

8. **Do you anticipate a change in health insurance costs?** Self-insured – hope to see translation to more affordable health-care premiums/costs
9. **What is the role of the National Jewish Medical Research?** National Jewish Medical Research organization deals with information on a confidential basis. Only the speaker has access to the data, so she can accept/reject and follow through with mailing out patches.

3) Hocking College Summary

Current policy

BE IT RESOLVED, by the Hocking College Board of Trustees, that effective December 7, 2006, Hocking College will become a tobacco free environment.

The use of any tobacco product including cigarettes, cigars, pipe tobacco, smokeless tobacco/snuff and chewing tobacco is hereby banned from Hocking College owned and managed properties, except in private vehicles or any other designated areas, strictly following the guidelines established by the State of Ohio Smoke Free Workplace Act.

Approved by the Hocking College Board of Trustees, December 7, 2006

Purpose of change

- Attempt to answer complaints about those who have to walk through areas of congestion with smokers in the middle of it, those who live among it, and to improve the health and safety of those on campus
- Working towards compliance with the recommendations posed by the American College Health Association Position Statement on Tobacco on College and University Campuses

Resolutions

1. Replacing a 1991 Resolution:

BE IT RESOLVED: By the Hocking College Board of Trustees that as of August 23, 2005, the use of any tobacco product including cigarettes, cigars, pipe tobacco, smokeless tobacco/snuff and chewing tobacco is hereby banned from Hocking College with the following exceptions:

- Designated College residence hall areas
- Designated areas in the Inn at Hocking College
- Designated areas on the Hocking College grounds
- Hocking College faculty/staff smoking building

Building entrances and walkways are not to be used as smoking areas. Designated smoking areas will be clearly marked. Smokers are required to use appropriate

receptacles to discard cigarette butts and other tobacco waste. Those who smoke in non-designated areas or who do not dispose of their tobacco waste appropriately may be subject to appropriate sanctions by the College.

1. Later Version (Proposed resolution 2007-2008):

BE IT RESOLVED, by the Hocking College Board of Trustees, that effective December 7, 2006, Hocking College will become a tobacco free environment.

The use of any tobacco product including cigarettes, cigars, pipe tobacco, smokeless tobacco/snuff and chewing tobacco is hereby banned from Hocking College owned and managed properties, except in private vehicles or any other designated areas, strictly following the guidelines established by the State of Ohio Smoke Free Workplace Act.

Approved by the Hocking College Board of Trustees, December 7, 2006

Communications

- Letter to Employees
 - Introduction that included the problem, the committee members, why they wanted to change the policy, and how the new policy respects both parties (smokers and nonsmokers) desires
 - Stated resolution for Tobacco Use on Campus
 - Advice on how one can help, which included:
 - Be a model for the students; smoke only in designated areas
 - If you see someone smoking in an undesignated area, politely tell them here the correct spots are
 - Faculty: let students know in each of your classes about the designated areas and to be respectful
 - Supervisors: talk to your staff
 - Remind people that there will be smoking cessation classes soon
- Letter to Health and Nursing Students:
 - Introduction that addressed the complaints and what the committee is working to fix
 - Stated resolution for Tobacco Use on Campus and Advice

Issues and Concerns

- Though there had been very few violations, issues about smoking on campus still existed
- Issue arose about creating locations where those that smoke would be allowed to do so
- Students have no where but their personal vehicles to smoke in, and many do not even have their own personal vehicle on campus
- The current policy does not adhere to any smoke-free laws; it is simply to promote the health and safety of the students, staff and visitors

- The final recommendation concluded that if you don't allow tobacco on campus, it will deter students from smoking; therefore, the Smoking Committee suggested that Hocking College remain smoke-free, with no designated areas except personal vehicles
- Another issue that is being discussed is to get people to put out their cigarettes before leaving their car and entering campus

Actions taken

- Signage needs to be placed and convey the correct message
- Removing all cigarette butt receptacles from entrances
- Communication to students
- Verify that insurance company covers nicotine replacement therapy and will provide free patches for those employees that enroll in the smoking cessation program
- Possibility of offering a free non-credit bearing course for students on tobacco cessation for those who would like to quit
- Working with the R.A.'s to help manage facilities

4) Taking the initiative summary

A Step-by-Step guide to a Smoke-Free Workplace

- Why Implement a Smoke-Free Workplace?
 - Tobacco use is the #1 cause of preventable death and disease.
 - Smoke-free policies clear the air of secondhand smoke, reduce daily cigarette consumption, and shows increased tobacco cessation.
 - Tobacco use costs employers over \$196 billion per year in excess medical costs and lost productivity.
 - Smoke-free policies lower the risk of fires, accidental injuries, and cleaning and maintenance costs.
 - Nonsmokers who have been harmed by secondhand smoke have increasingly won lawsuits and disability claims against their employers over the past 20 years.
 - Current disability laws protect individuals who may have respiratory disabilities that are affected by secondhand smoke.
- Choosing the Right Smoke-Free Initiative.
 - Smoke-Free Workplace: 100% smoke-free environment in enclosed spaces.
 - Smoke-Free Campus: 100% smoke-free environment in both indoor and outdoor spaces.
 - Tobacco-Free Campus: 100% tobacco-free environment; no form of tobacco is accepted in both indoor and outdoor spaces.
 - When determining which policy to implement, businesses should look at state laws that are already implemented; demographics of the company;

ownership of the building(s) should be checked into to see if the company can declare the entire “campus” or just parts smoke-free.

- Implementing the Smoke-Free Initiative: find the best way to communicate and educate employees and give them time to prepare for the change.
 - Assess:
 - Once the initiative has been decided, take the time to understand the organization’s needs, interests and limitations.
 - Determine level of management interest and ability to enforce policies. Having top management support is important.
 - Determine level of employee interest. Find out the number of those who do smoke and assess how much support they will give in taking action and helping themselves.
 - Determine the ownership rights of buildings and see if there are any limitations on what policies you can implement.
 - Determine if your employees are represented by a union.
 - Client Profile: Oregon Department of Human Services:
 - 9,800 employees
 - Multiple locations
 - Began planning in January 2007
 - Launched the initiative on January 8, 2008
 - Developed three tobacco-free work groups
 - Sent regular communications starting 6 months prior to going tobacco-free
 - Used multiple channels of communication
 - Plan: organize a wellness committee with the following responsibilities:
 - Develop a Smoke-free policy that clearly lays out expectations and consequences.
 - Create a calendar that allows enough room for education and preparation of management and employees.
 - Offer a comprehensive tobacco cessation program to employees before the policy goes into effect.
 - Prepare to enforce the new policy.
 - Develop a strategy for communication.
 - Develop clear messaging depending on the work environment and employee demographics.
 - Client Profile: Provider of information management and electronic commerce
 - 20,000+ employees
 - Began tobacco free incentive 2 years prior to announcing tobacco free policy change
 - Implemented tobacco cessation program 6 months prior to announcing new policy
 - Communicated policy to all business units
 - Held HR webinars to communicate policy
 - Used multiple communication vehicles

- Promote: communication is key to getting employees involved as you promote and distribute materials.
 - Determine the people in your organization who will be the key communicators.
 - Enlist the support of your tobacco cessation provider for recruitment materials.
 - Prepare advance communications to vendors and visitors.
 - Sponsor a Smoke-Free Countdown.
 - Encourage an active wellness committee.
 - Client Profile:
 - 240,000+ employees
 - Tobacco cessation services since 2002
 - Decision to implement a Tobacco-Free Campus in Dec. 2007
 - Work group met weekly to brainstorm and discuss ways to promote the new policy
 - Sent communications 6 months prior to going tobacco-free
 - Every channel of communication available is used
 - Host onsite presentations to employees about the benefits

- Implement: make sure to focus on correcting the behavior, not punishing or judging the smokers or tobacco users.
 - Create a supportive environment with treatment options.
 - Offer premium differentials or other financial incentives.
 - Enforce the policy.
 - Client Profile: Carilion Health System
 - 9,000 employees
 - Multiple locations in Virginia
 - Tobacco cessation services since 2006
 - Decision to implement Tobacco-Free Campus in June 2006
 - Now a total of 4,500 employees are in the smoke-free zone
 - Sent communications in 2006
 - Used every channel of communications available
 - Used a doctoral candidate, who has done research, to make a sizeable impact during vendor fairs

- Evaluate: begin planning early so that you can effectively evaluate the success of the policy by gathering enough data.
 - Determine early how management defines success.
 - Monitor employees' reactions to the policy.
 - Set goals for future improvements to implementation.
 - Client Profile: provider of diagnostic testing, information, and services
 - 42,000 employees
 - Multiple locations nationwide
 - Tobacco cessation services since 2005
 - Decision to implement tobacco free policy August 2007

- Defined and provided required tobacco free policy and options to each business unit
 - Implemented tobacco cessation program 18 months prior to announcing the change
 - Engaged wellness team to communicate information
 - Used multiple channels of communication
- **Lessons Learned:**
- Think about all parties involved, including part-time workers who may not be eligible for the cessation program. Give them the option so they can feel encouraged as well.
 - Recognize that many people will do whatever they can to smoke.
 - Focus on encouraging a healthful environment rather than singling out smokers and tobacco users.
 - Enforce your policy at all times.
 - Overall, smoke-free environments are healthier, more productive, and more cost effective.
 - According to the National Business Group on Health, 74% of large employers intend to add smoking cessation programs within the next 12 months.

5) Data Collected summary

1) **Data**

a) Smoking

- i) Smoker inhales 15% of smoke
- ii) Secondhand smoke is remaining 85%

b) **National and state data regarding smoking within groups – high school students, college students, faculty, staff**

Ohio Department of Health, 2006 Ohio Youth Tobacco Survey

- Increase in # students that use tobacco in each grade:
 - 9th: 22.7%
 - 10th: 26.8%
 - 11th: 30.7%
 - 12th: 38.4%
- HS smokers who say they want to quit smoking: 47.9%
- Over 80% tobacco use begins before age 18

Center for Disease Control 2004 National Youth Tobacco Survey

- Smokeless tobacco use: 5.9% HS students; 2.9% middle school students

Center for Disease Control 2004 Youth Risk Behavior Survey summaries

- Cigar use: 14.8% HS students; 6.0% middle school students

Center for Disease Control

- Bidi use: 3% HS students; 2% middle school students
- Kretek use: 3% HS students; 2% middle school students

Tobacco's Toll in Ohio according to <http://tobaccofreekids.org>

- High School students: 25% smoke
- Adults in Ohio: 22.5% smoke

Dr. Roizen, the Cleveland Clinic:

- 10-15% of college freshman smoke
- 30-40% of college seniors smoke

c) Cessation

University of Akron Providers

Medical

- Medical Mutual:
 - Free: Smoking cessation / quit line, 8 boxes of Nicoderm patches (\$200 value), plus support
 - Personalized online program on being Smoke Free, used in coordination with Health Risk Assessment, UA Cost: approx \$1.50 per member per month - negotiable
- Kaiser Permanente
 - Prescribed medication: copay
 - Proud to be Tobacco-Free, 8-session class: \$20 for members; \$40 for non-members (330.873.4880 for more info)
 - HealthMedia Breathe, personalized quitting plan for members – customized online program w/questionnaire, customized guide and 3 personalized email newsletters
- Hometown Health Plan
 - American Lung Association's "Freedom From Smoking" for adults, 8 weekly sessions at 1 hour/session: \$50/hour with a minimum \$100 charge + \$35/attendee for ALA packet
 - American Lung Association's "Not on Tobacco" tobacco cessation program for youth, 10 weekly classes at 45 minutes/session: \$50/hour with a minimum \$100 charge
 - No coverage for smoking cessation products/medication
- Summa Healthcare
 - 8-week program includes NRT patches

Dental

- Anthem
 - Smoking cessation: cost varies per member

Summit County Tobacco Prevention Coalition

- Offer free stop smoking classes that are grant funded to people who live and work in Summit County. Offer classes at different dates, days and times in hospitals, worksites and community settings.
- Provide vouchers for reduced cost medications, including patches, gum and lozenges; for use at ACME (6 locations in Summit County):
 - Chantix (Varenicline): \$50/4-week supply w/8 weeks total, need prescription and to remain actively enrolled in program for refill
 - Nicotine Replacement Therapy (patch, gum, lozenge): \$15/2-week supply (6 weeks total): need to remain actively enrolled in program for refill
- May be eligible for nicotine patches when enroll in Ohio Quit Line program, depending on employer or insurance provider. Uninsured are eligible for reduced cost nicotine patches.

Ohio Tobacco Quit Line (Availability limited due to new use of Ohio Tobacco Settlement Funds)

- Free quit line and telephonic professional counseling service, think you must be referred by healthcare provider via a faxed signed form

Freedom From Smoking (not sure of availability)

- 24-hour free online quit smoking program sponsored by American Lung Association
- 7 educational modules that provide tools and techniques essential to quitting smoking successfully
- You must first have an account with the site; it's free

Nicotine Anonymous

- All meetings are free; you don't have to quit to attend

TabaccoCME.com

- A free source for tobacco treatment education
- All that is required to complete the course is a first and last name, user name, and password
- Obtaining CE credit requires viewing the course contents and completing a pre- and post-test and satisfaction survey online at the end of the course

According to Tobacco Public Policy Center:

- Ohio Medicaid covers a substantial number of smoking cessation treatments. Ohio's annual health care expenditures directly caused by tobacco use amount to \$3.41 billion and \$1.11 billion of this amount is utilized in the Ohio Medicaid program alone.

According to the Health Care Provider Quit Kit; Ohio Tobacco Quit Line:

- 5% Successful “cold turkey” quit attempts
- 22% Successful quit attempts w/ the Ohio Tobacco Quit Line Counseling alone 6 months after initial call
- 39% Successful quit attempts with the Ohio Tobacco Quit Line counseling and Nicotine patches 6 months after initial call
- 12-month data indicate that quit line callers are remaining tobacco-free at similarly high rates at the one-year mark as well

According to Wikipedia.com (not a great source, but information nonetheless):

- 7% of over-the-counter nicotine patch and gum quitters quit for at least six months
- A physician's advice to quit can increase quitting odds by 30% to 10% at 6 months
- High intensity counseling of greater than 10 minutes can increase 6 month quitting rates to 22% when added to any quitting method
- Quitting programs involving 91 to 300 minutes of contact time can increase six month quitting rates to 28%, regardless of quitting method.
- Quitting programs involving 8 or more treatment sessions can increase 6 month quitting rates to 24.7%
- Bupropion (Zyban/Wellbutrin) use can generate quitting rates 13 percentage points above placebo rates at 6 months. This fact is stated as such in that all bupropion studies to date have included counseling or support elements (having their own proven efficacy) and bupropion has not been tested in an over-the-counter type setting, as have nicotine replacement therapy (NRT).

d) Healthcare costs related to smokers versus non-smokers

- National Center for Chronic Disease Prevention and Health Promotion: Studies suggest that for every \$1 spent on smoking cessation for pregnant women, could save about \$3 in reduced neonatal intensive care costs
- Medical Mutual: Healthcare costs are 21% more for smokers; Estimated that \$625/year is saved per employee that quits smoking
- According to the most recent survey done by the Society for Human Resource Management, 5% of companies charge smokers more for health care premiums.
- From Money Central on msn.com:
 - The Bureau of National Affairs says 95% of companies banning smoking report no financial savings, and the U.S. Chamber of Commerce finds no connection between smoking and absenteeism.

- 20-year term life insurance (a \$500,000 policy) for a healthy 44-year-old male (through BudgetLife.com). For a nonsmoker: \$570 to \$1,035 in premiums per year; For smoker using a pack a day: up to \$4,250 per year.
- According to eHealthInsurance.com, the monthly premium for a policy from Regence Blue Shield with a \$1,500 deductible for a 44-year-old male nonsmoker is \$239. The same policy for a smoker is \$276 per month. He will pay \$444 more per year.
- A few state governments also charge their employees extra for health insurance if they smoke, and others are gradually joining the trend. West Virginia, Georgia, Kentucky and Alabama charge state employees who smoke a surcharge; in Georgia, for example, that surcharge is an additional \$40 per month.

e) Smoke-free versus non-smoke-free workplaces

Benefits of a Smoke-Free Workplace

For the Employees

- A smoke-free environment helps create a safe, healthful workplace.
- Workers who are bothered by smoke will not be exposed to it at the worksite.
- Smokers who want to quit may have more of an incentive to do so.
- Smokers may appreciate a clear company policy about smoking at work.
- Managers are relieved when a process for dealing with smoking in the workplace is clearly defined.
- Increase values of smokers' cars, homes, social security income, etc.

For the Employer

- A smoke-free environment helps create a safe, healthful workplace.
- Direct health care costs to the company may be reduced.
- A well-planned and carefully implemented effort by the employer to address the effect of smoking on employees' health and the health of their families shows the company cares.
- Employees may be less likely to miss work because of smoking related illnesses.
- Maintenance costs go down when smoke, matches, and cigarette butts are eliminated in facilities.
- Office equipment, carpets, and furniture last longer.
- The risk of fires is lower.
- It may be possible to negotiate lower health, life, and disability insurance coverage as employee smoking is reduced.

- **Data on productivity of smokers (i.e., if they have to go off site to smoke as opposed to just outside)**

- According to the Campaign for Tobacco free kids, smokers cost the economy \$97.6 billion a year in lost productivity.

(iii) Experiences of organizations that have gone smoke-free: Employment / Customer impact (i.e., did smokers leave the institution, did non-smoking applicants increase at the institution); implementation issues; results; impact on visitors / attendance at any related events / activities

Case Western Reserve University

- Smoking is not permitted in any of its buildings including residence halls and university vehicles. Smoking is banned on all outside walkways; smoking is only permitted in (about 15) designated areas except the dental, nursing, and medical school where smoking is not permitted.
- All faculty, staff, and student employees are responsible for reporting any violations. Employees are subject to corrective action by the Positive Corrective Action Policy if the rule is violated.
- Formed in April 2007, the Smoking Issues Task Force - consists of representatives from the General Counsel, Human Resources, Student Affairs, Facilities, Campus Services and University Police and Security Services offices and the Faculty Senate, Staff Advisory Council, Graduate Student Senate and Undergraduate Student Government -- will continue to review various university smoking-related policies.

Ozarks Technical Community College (Springfield, Missouri)

- How they did it:
 - Took 1.5 years to present the policy; Board established the policy
 - Adopted policy in 1999 to implement in 2003 “Smoke-free in 2003”
 - Provided smoking cessation training to counselors to provide to individuals, but nobody took advantage of it
 - Need clear mission/reason for establishing policy; this helps generate buy-in
 - Do not use the mission of getting people to quit smoking
 - Do want clean environment/clean air; want respect with regard to 2nd hand smoke; focus on education, communication, compliance – they actually had little signage around campus
 - Always listen and respect; do not act punitively. Work with safety and security on approach; be disarming. Cultivate culture of mutual respect for all. Responsible smokers do not smoke in public. Take a leadership role in your community.

- Set expectations: likely not going to be 100% compliant and how are you going to deal with this; want practical application of policy, not research-oriented
- The 2003 mark began with little fanfare. For the first 14 months, the policy was not enforced. Enforcement began October 2004. There have been 50 violations since then. The penalty is \$15 fine or 2 hours of work. Process is 1) provide a warning, 2) see it again, 3) issue citation.
- Potential cons: Politically correct defense; People will quit/leave – only 2 long-time smoking employees left the institution
- Policy implementation options: Distribute 4” x 4” cards outlining policy; Thank you signage inside buildings; Community advisory committee: choose members for influence, support, etc., in the community
- Other relevant information: Saint Charles Community College implemented policy in one year; Ty Patterson, VP for Student Services, has little experience with unions
- Resources: American Lung Association, the American Heart Association, the American Cancer Society, etc.
- Have list of organizations/companies that have corporate smoking policies. Some examples that include smoke-free outdoor property are:
 - Calgon, Eli Lilly, Johnson & Johnson, Regence Group, Union Pacific
- Darren Nealy J.D. is the Assistant Director of The Tobacco Public Policy Center at Capital University Law School. He works with school Boards across the state to implement a 100% tobacco-free schools policy. In Ohio, only students are prohibited from using or possessing tobacco products on school grounds. It is up to individual school districts to regulate tobacco use on school grounds by staff and visitors.
 - Overall statement: There is no *right* to smoke
 - Statistics: 128 school districts in Ohio have gone tobacco free; Entire states have gone tobacco free for schools, including Arkansas and North Carolina
 - Requirements of a TRUE tobacco free policy:
 - States who it applies to: everyone
 - Specifies what it applies to: smoke free and tobacco free are not the same
 - States where the policy applies: everywhere – buildings, school grounds, vehicles, etc.
 - Allows for NO exceptions – no designated buildings; no designated times

- Resources: The Tobacco Public Policy Center is happy to supply schools with cessation information, signage/announcements and enforcement tips

Weyco Inc. a health benefits administrator based in Michigan

- As stated by the Associated Press at MSNBC.msn.com, Weyco Inc. a health benefits administrator had put into affect a smoking ban that wouldn't allow smokers to work for the company at all.
 - 4 employees, who were presumed to be smokers, were fired for not submitting to a smoke test
 - 1 employee quit work
 - 14 others quit smoking before the rule went into affect.
 - It began testing the spouses of its employees, too, levying an \$80-per-month surcharge on those who don't test clean.

Kalamazoo Valley Community College in Michigan

- Kalamazoo Valley Community College in Michigan quit hiring smokers for full time positions at both of their Michigan campuses.

North Miami, Florida: Police Department

- The city of North Miami, Fla., used to require that all its new police officers be non-smokers. But two years ago, the city quietly dropped the smoking ban. "We realized that at best, we may save five percent on our insurance premium. But now we are having a problem with trying to recruit and hire highly qualified candidates. And we're competing against agencies that did not have that policy," says Chief of Police Gwendolyn Boyd. Boyd says dropping the ban helped her recruiting efforts.
 - According to the Kalamazoo Valley Community College 2006-2007 student handbook, Use of tobacco is prohibited inside all college facilities including inner courtyards. Smoking is permitted only in designated outside areas. Under Michigan law, violators of the No Smoking Policy are subject to both college sanctions and public civil enforcement.
 - People who were fired due to the smoking ban tried to seek legal action but couldn't hold a case against the ban, deeming the company's ban as constitutional.
 - As a result of smoking bans, there is now a United Pro-Choice Smokers Club website, including newsletters.

(iv)What is The University of Akron's current approach to smoking at campus events (i.e., do we allow people to go outside to smoke at breaks, do they have to remain inside for the duration of the event, etc.)

- EJ Thomas Performing Arts Hall: Patrons and employees are allowed to go outside to smoke.

- UAkron Athletics home games: Patrons and employees are allowed to go outside to smoke as long as they are 20feet from the entrances.

**(v) What happened to the funds from the state's tobacco settlement?
(This requires updating)**

- According to the Tobacco Free Kids website, Ohio's tobacco settlement funds are governed by a 2000 law approved by the Legislature and signed by Governor Robert Taft that created several endowment funds, including a tobacco prevention and control fund that is administered by the Ohio Tobacco Prevention Foundation (OTPF). Once fully funded the OTPF was designed to reach a balance of \$1.26 billion and yield \$60 million annually in investment income for a comprehensive, CDC-based tobacco prevention and cessation program. Therefore the actual spending on tobacco prevention for Fiscal Year 2008 is at \$44.7 million; for FY 2007 it was \$45.0 Million.
- Spoke with Isalda Dickerson, Asst. Director at OTPF. Direct line to Isalda: 614.466.1699
 1. The correct amount spent on prevention programs is \$40 million on marketing, cessation, and prevention.
 2. Funding is available and goes toward hospitals for awareness/ education, campaigns and some non-profit organizations.
 3. There is an application process as well as a competitive bidding process. Colleges and universities are eligible for tobacco prevention programs. OTPF has worked with Case Western Reserve University, Ohio State University, Ohio University, University of Toledo and Kent State University.