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COMPLIANCE TO GSA SMOKING REGULATIONS (41 CFR PART 101-20) BY A SAMPLE OF UNITED STATES GOVERNMENT AGENCIES

In 1986, the General Services Administration (GSA) required all federal agencies to implement smoking control policies in their worksites. At the request of the United States Office on Smoking and Health, the Smoking Policy Institute (a nonprofit organization) reviewed the agencies' policies for compliance with GSA regulations and for overall effectiveness. The following report contains the results of that review.

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The report will be presented by Robert Rosner, the Executive Director of the Smoking Policy Institute, before the Federal Interagency Committee on Smoking and Health on October 15, 1987.

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Executive Summary

Smoking control policies are a controversial and challenging issue. Agencies should be commended for attempting to address a complicated change in working conditions with a minimum of assistance or professional guidance.

However, government agencies are responding to the "letter" of the GSA smoking regulations but not their spirit. The essential premise that Environmental Tobacco Smoke (ETS) is a health hazard has not been addressed.

GSA regulations require that "smoking is to be held to an absolute minimum in areas where there are non-smokers." This is not the case in the policies of the majority of agencies studied. At most agencies it will be hard for an employee to go through an entire work day without being routinely exposed to ETS.

The latest report of the Surgeon General documented the role of ETS in causing lung cancer and other diseases in nonsmokers. The report concluded, "the simple separation of smokers and nonsmokers within the same air space may reduce, but does not eliminate, the exposure of nonsmokers to environmental tobacco smoke." Even though the GSA regulations do not adequately address the danger documented in the Surgeon Generals report, the vast majority of the agencies do not even meet the weaker GSA standard.

The report has provided more evidence supporting the rights of nonsmokers against their employers for failure to provide a safe and healthy workplace. By failing to comply fully with GSA regulations, the majority of federal agencies are open to lawsuits from their nonsmoking employees. By acknowledging the problem, but not resolving it, the government is potentially negligent and has made itself a target for lawsuits by its employees.

The agencies surveyed are tending to treat sidestream smoke as more of a social problem than a health and safety issue. This inconsistency with the government's treatment of other health and safety issues also increases potential liability.

ETS in the workplace has been successfully eliminated in several major U.S. corporations through the implementation of well-designed smoking policies. Effective smoking control policies are an achievable goal of the government, but this requires a commitment to address the issue.

Close examination shows that this issue needs more careful consideration. The GSA regulations do not adequately protect nonsmoking employees and the agencies are not fully in compliance with even this minimum standard.

Action Steps Recommended for U.S. Government Agencies

1. Conduct a thorough review of the impact of Environmental Tobacco Smoke. The Health Consequences of Involuntary Smoking, a report of the Surgeon General, 1986.
 2. Conduct a thorough review of the case law concerning smoking in the workplace. "The Legal Rights of Nonsmokers in the Workplace," University of Puget Sound Law Review, Spring 1987, pp., 591-632.
 3. Review the steps of smoking policy development listed in this report.
 4. Conduct an in depth review of the issue within the agencies. This includes; conducting employee surveys, facility surveys and a more comprehensive review of how other organizations are addressing the issue.
 5. Develop a strategic plan for policy implementation which reviews all possible policy alternatives.
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6. Initiate the implementation of smoking policies which minimize smoke exposure by nonsmoking employees and which will provide a long-term solution to the problems presented by smoking in the workplace.
 7. Concurrent with policy implementation, initiate an aggressive smoking cessation program for employees.

Smoking Policy Institute

A Seattle-based nonprofit organization (501 C-3 status as recognized by the Internal Revenue Service), the Institute is recognized internationally for its leadership in helping organizations address and resolve the problems created by smoking in the workplace. The Institute has developed a variety of resources to assist in the development and implementation of smoking control policies.

Analysis

The Government has acknowledged that "involuntary smoking is a cause of disease, including lung cancer, in healthy nonsmokers" (The Health Consequences of Involuntary Smoking, a report of the Surgeon General, 1986). The report concluded that "the simple separation of smokers and nonsmokers within the same air space may reduce, but does not eliminate, the exposure of nonsmokers to environmental tobacco smoke" ("The small particle size of environmental tobacco smoke places it in the diffusion-controlled regime of movement in air for deposition and removal mechanisms. Because these submicron particles will follow air streams, convective currents will dominate and the distribution of ETS will occur rapidly through the volume of a room").

As the GSA smoking regulation states, "smoking is to be held to an absolute minimum in areas where there are non-smokers." The absolute minimum as defined by various agencies includes: all enclosed offices, multiple-person worksites where no one is actively complaining, corridors, lobbies, restrooms, stairways, space in every governmental cafeteria and snack bar.

Even though the GSA regulations do not adequately address the danger documented in the Surgeon General's report, the vast majority of the agencies do not even meet this GSA standard.

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Given the acknowledgement of the significant health hazard of environmental tobacco smoke (ETS) it is surprising to read statements such as the following in the official smoking policies of agencies:

*"There must be a smoking area in all cafeterias."

--Smoking policies are intended to protect nonsmokers. Without a budget for single-pass ventilation equipment this ensures a significant exposure for nonsmokers within government facilities.

*"We support an approach under which nonsmokers can enjoy a reasonably smoke-free environment."

--With clear documentation of the carcinogens located in ETS there is no acceptable level of exposure that could be considered either safe or reasonable.

*"Smokers have a right to smoke."

--This is something that even the Tobacco Institute disputes. A Tobacco Institute attorney quoted in Fortune concluded, "Smokers would be hard pressed to find a legal theory which gives them a right to smoke."

The latest review of the case law concerning smoking in the workplace concluded, "Nationally a comprehensive survey of the case law and legal principles indicates that nonsmokers wishing to clear the air have some effective legal remedies at their disposal. In contrast, there is no recognized basis in law for the assertion that one has a right to smoke in the workplace. This has serious ramifications for employers that fail to protect their employees from involuntary smoking in the workplace" (The Legal Rights of Nonsmokers in the Workplace," University of Puget Sound Law Review, Spring 1987, pp., 591-632).

The statements listed above, all taken directly from the smoking policies of government agencies, document a dramatic lack of understanding about the issue of smoke in the workplace. One result will undoubtedly be much higher exposure to a toxic substance than is necessary given reasonable protection for nonsmokers. Another result is the increased liability of lawsuits from nonsmoking employees.

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The government does have the ability to eliminate the problem of Environmental Tobacco Smoke from its facilities. However, this requires a commitment that appears to exist only in isolated parts of the federal system (for example, the Army and Indian Health Service's stringent smoking control policies).

There are a number of difficult issues that need to be addressed: where and when employees may smoke, how the policy will be enforced and how to deal with labor unions on this sensitive subject. These issues have been addressed successfully by other organizations and should not be viewed as obstacles that are impossible to overcome.

In conclusion, it is important to remember the positive aspects of this issue. Organizations that have implemented smoking control policies document a healthier and more productive work environment that includes both improved employee morale and cost containment savings.

COMPLIANCE TO GSA SMOKING REGULATIONS (41 CFR PART 101-20)
BY A SAMPLE OF UNITED STATES GOVERNMENT AGENCIES

Department of Energy, Housing and Urban Development, Department of Commerce, Federal Trade Commission, Department of Labor, Department of the Treasury and Health and Human Services

KEY COMPONENTS OF
GSA REGULATIONS:

GOVERNMENTAL AGENCIES SURVEYED:

DOE **HUD** **DOC** **ETC** **LAB** **TRE** **HHS**

Policy acknowledges the health hazard
of environmental tobacco smoke 2(a)(1) No No No No ? No Yes

Policy states that smoking will be
held to a minimum in areas where
there are nonsmokers 2(a)(1) No No Yes Yes ? No Yes

Smoking prohibited in auditoriums,
classrooms, conference rooms,
elevators, medical facilities, libraries,
hazardous areas 2(b)(2-7) ? Yes Yes Yes ? Yes Yes

Office space may be designated
smoking area if it is configured
with sufficient ventilation to
protect nonsmokers 2(c)(2)(iii) No Yes Yes Yes ? No N/A
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Corridors, lobbies, rest rooms
may be designated when it is not
possible to designate a sufficient
number of other smoking areas
2(c)(2)(iv) ? No Yes ? ? ? N/A

Agency heads responsible for
monitoring and controlling
smoking areas 2(c)(2)(i)(a) ? Yes Yes No ? Yes Yes

Uniform signs posted which state
no smoking except in designated
areas 2(c)(2)(iv)(e) Yes Yes Yes No ? No No

Prior to implementation agency
shall meet with bargaining
agent or consult directly with
employees 2(c)(2)(iv)(g) Yes ? ? ? Yes Yes Yes

Steps in Policy Development

Following research at a hundreds of organizations the Smoking Policy Institute has identified a process that organizations who successfully implement smoking policies have been seen to follow. The process is called "90 Days to a Smoke Free Workplace".

1. MANAGEMENT REVIEW: Organizations review the health, safety, legal, financial and management issues involved in developing a policy. Management needs to develop consensus on organizational needs and establish a policy direction. Decisions need to be made concerning the policy development team and whether it will be made up of management staff or an employee management committee.
2. SITUATION ANALYSIS: Organizations must do an internal review and inventory of the impact of smoking in the workplace. This evaluation should review employee attitudes through an employee survey. Additionally, a review of the facilities is required to document the space and ventilation options along with the financial impact of each alternative. The review also needs to include existing policies that will be impacted by the smoking policy labor contracts, cost containment areas and potential trouble spots for policy implementation.
3. STRATEGIC PLANNING: The most successful way to incorporate the data from the Management Review and Situation Analysis and turn it into a policy is to have a "structured brainstorming" session where all policy alternatives are listed and critiqued. Areas that need to be reviewed include: where and when employees may smoke, if exceptions will be considered, how the policy will be enforced, how smoking cessation programs will be offered, smoking in vehicles, tobacco vending machines, the timeframe of the policy implementation. These are just a sample of the areas that need to be reviewed.
4. IMPLEMENTATION: This is stage when the policy is actually implemented. Keys to success include a comprehensive education program for employees, both smokers and nonsmokers. Smoking cessation programs must also be offered to employees at this time. A range of program alternatives that are both effective and cost-efficient shall be developed.
- 5) EVALUATION: Organizations evaluate the policy, survey employee reactions, monitor violations and measure cost containment savings following policy implementation.



Robert Alan Rosner

Personal:

Born: November 2, 1956; Lincoln Park, New Jersey.
Education: Occupational Therapy, University of Puget Sound,
1980.

Professional Experience:

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Executive Director:
Robert A. Rosner

Smoking Policy Institute Executive Director	1985-present
Rosner, Weis and Lowenberg, Inc. President	1984-1985
Rosner Marketing and Public Relations Consultant	1983-1984
Safety Assistance From the Elderly Executive Director	1981-1982
KNBQ, KTNT Radio Public Affairs Director	ti239207560001 1980

Publications:

New England Journal of Medicine, April, 1986

"90 Days to a Smoke Free Workplace", Prentice-Hall, 1986

"Let's Clear the Air", Prentice-Hall, 1986

"Benefits of Smoking Cessation" Teleconference, Medicine in
Print, 1986

Journal of Applied Business Research, Spring, 1986

Washington Post, April, 1985

Representative Clients:

Ralston-Purina; Pacific Northwest Bell; CIBA-GEIGY; U.S. Public Health Service, Indian Health Service; CIGNA Healthplan of Arizona; McDonnell Douglas; Shenandoah Publishing; Southwestern Bell Telephone; Rainier National Bank; Kaiser Permanente; Fellowes Manufacturing; Lexington Clinic; Alexion Brothers Hospital; Comprehensive Care Corporation; Lee Rowen Manufacturing; Lucks; Nestle; Planned Parenthood of King County; Sperry Corporation; Travelmakers; U.S. Department of Energy; Ford Motor Company, Canada; City of Seattle; City of Bellevue; British Columbia Telephone; Group Health Cooperative; Merrill Lynch; Group Health of Spokane; Veterans Administration; Fairview Hospital; Nestle; National Cancer Institute; Canadian Cancer Society; City of Anchorage; Community Hospital; Bureau of Business Practice; Fairview Hospital; Utah Department of Public Health; and Western Cabinet.

Conferences and Meetings:

American College of Military Surgeons, Las Vegas, California, 11/87

Federal Interagency Committee on Smoking and Health, 10/87

Canadian Cancer Society, Toronto, Ontario, 10/87
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Equal Employment Advisory Council, San Francisco, California, 6/87

Symposium on Environmental Psychology, Irvine, California, 5/87

National Institute of Health, Washington, D.C., 11/85

National Cancer Institute, Washington, D.C. 11/85

First World Conference on Non-Smokers Rights, Washington, D.C., 11/85

Arizona Public Health Association Annual Meeting, Phoenix, Az., 9/85

American Institute of Decision Sciences, Toronto, Canada, 11/84

Fifth World Conference on Smoking and Health, Winnipeg, Canada, 7/83

Media Appearances and Interviews:

Readers Digest; New York Times; USA Today; Wall Street Journal; Fortune; Business Week; Time; American Way; Financial Planning; CBS Evening News; Cable News Network (CNN); Time Magazine; Thames Television (U.K.); ZDF (West German Television); BBC (England); CBC (Canada); International Herald Tribune; Toronto Star; Vancouver Sun; Larry King Show; National Public Radio; Public Broadcasting System; Associated Press; United Press International; Los Angeles Times; Miami Herald; Cleveland Plain-Dealer; Washington Post; Seattle Times; Louisville Courier; Seattle Post-Intelligencer; San Francisco Examiner; Cincinnati Post; Oregonian; and the Los Angeles Daily News.

Presentations on Smoking in the Workplace:

London, England; Manchester, England; Edinburgh, Scotland; Vancouver, Canada; Toronto, Canada; New York, New York; Los Angeles, California; Chicago, Illinois; Salt Lake City, Utah; Anchorage, Alaska; Miami, Florida; Cincinnati, Ohio; Dallas, Texas; Seattle, Washington; Erie County, New York; San Diego, California; Rockford, Illinois; Philadelphia, Pennsylvania; Houston, Texas; Portland, Oregon; Hasbrouck Heights, New Jersey; Washington, D.C.; Princeton, New Jersey; Cherry Hill, New Jersey; Saddle Brook, New Jersey; Phoenix, Arizona; San Francisco, California; Salem, Oregon; St. Louis, Missouri; Dallas, Texas; Orange County, California.

HERE'S HOW TO GET STARTED

Call or write the Smoking Policy Institute,
P. O. Box 20271, Seattle, Washington
98102. (206) 324-4444.

Tell us about your situation. We'll tell you
what the Institute can do to help.

"With 15,000 employees, we were the first major
organization in the world to ban smoking in the
workplace. Your guidance and assistance were
invaluable to our success."

Len Bell
Pacific Northwest Bell

"Your problem-solving approach to policy
implementation helped to keep our nonsmoking
policy and program on track."

Dr. Edwin Magee
Ralston Purina

"We appreciated your sensitive approach to a
potentially controversial topic. Thanks to you,
we are now moving toward a solution to this
problem for our company."

Dee Goodall
Fellowes Manufacturing

"Your presentation was concise and on-target.
Our management group was impressed with
your expertise and professionalism."

Dr. David Carswell
Ford Canada

"On behalf of CIGNA in Phoenix, accept again
our gratitude for your very proficient consulting
service that got us off to such a good start and
has smoothed the way to a relatively trouble-
free implementation."

Michel Larson, RN, NP
CIGNA Healthplan of Arizona

"You answered several key questions on
implementation of smoking control policies within
large organizations with the kind of helpful insight
that only one experienced in such matters could
provide."

Dr. Leland Fairbanks
U.S. Public Health Service

"The most successful
antismoking programs
seem to have taken hold
in the West. Seattle in
particular is a hospitable
city for nonsmokers, due
to the influence of the
**SMOKING POLICY
INSTITUTE.** It was the
first organization in the
U.S. to offer guidance to
companies on how to
rid the workplace of
tobacco smoke."

FORTUNE Magazine
September 15, 1986



SMOKING POLICY INSTITUTE

THE ISSUE

Try this test. Ask a number of informed
business managers what their smoking
policies are likely to be five or six years
from now. Chances are most will say they
expect ash trays eventually to be as rare
in the workplace as spittoons are today.
And they will give you many reasons.

HEALTH: The health risks of smoking are
not limited to smokers. The U. S. Surgeon
General has identified sidestream smoke as
a major health hazard.

SAFETY: Research shows that on-the-job
smoking increases accident rates, increases
the chance of fire and increases property
damage.

LEGAL: Two-thirds of the people in a
typical workforce don't smoke--and each is
a potential litigant.

LEGISLATION: Many communities are
enacting laws requiring organizations to
protect employees from worksite exposure
to sidestream smoke.

FINANCIAL: Smoking increases costs to
employers. Insurance premiums,
absenteeism, property damage,
productivity and employee morale are all
affected.

CORPORATE HARMONY: Many major
employers have already successfully
removed the problems created by smoking
in the workplace through an effective
smoking control policy.

RULES OF THUMB

There are important questions about what a smoking control policy should be, and about the way to develop and implement a policy that works for everyone involved. But the questions tend to be "how" these days, not "whether."

Some of the rules of thumb we have found to be useful include the following:

- A smoking policy is a "people" policy and deserves the same care and sensitivity in its development as any other people-oriented policy.
- The worst policy of all is no policy. It's the most expensive and the most divisive option.
- Smoking policies create corporate satisfaction. No company we know of has ever rescinded a thoughtfully-developed clean air policy.
- Every company policy has a price tag. And that applies to smoking policies as well, where the costs are in planning, communications and in providing smoking cessation programs for employees, but --
- No successful smoking policy we know of -- even the most elaborate -- has cost as much as the estimated cost of a single month of supporting smokers on the job.

THE INSTITUTE

The Smoking Policy Institute is a nonprofit foundation internationally recognized for its dedication to helping organizations create healthy, smoke-free environments for their employees.

Over the years, we have worked with some of America's largest corporations and with some of its smallest. In the process, we've gained a national reputation with those who support our work and with those who don't.

As an example of the former, C. Everett Koop, Surgeon General of the United States Public Health Service, has this to say:

"The Institute is a credible, visible and centralized information resource, committed to protecting people from involuntary exposure to tobacco smoke in the workplace and to helping business develop healthy options to smoking in the workplace."

On the other hand, J. Paul Sticht, Chairman of the Board, R.J. Reynolds, states:

"The current controversy [concerning smoking in the workplace] seems to be the creation of one individual, William Weis [co-founder of the Smoking Policy Institute]."

We consider both observations to be compliments.

PROGRAMS

The Smoking Policy Institute offers managers help in avoiding the pitfalls that result from poor planning, worker resentment or misdirected zeal. The work of the Institute is divided into four operating divisions.

RESOURCE CENTER: Information on all aspects of smoking in the workplace available to the media, organizations and individuals.

PRESENTATIONS: Smoking in the workplace seminars which review the health, legal, financial and implementation issues.

PRODUCTS: A variety of implementation aids including videotapes, employee surveys, case studies and other materials.

TRAINING: On-site training programs to assist organizations interested in developing and implementing smoking control policies.

THE PEOPLE

Robert Rosner, Executive Director, has been retained to develop and implement clean indoor air policies by organizations throughout the United States. He has been a featured speaker on smoking policy development throughout the U. S., Canada and England and has been interviewed by the *Wall Street Journal*, *New York Times*, *International Herald Tribune* and CBS News.

Timothy Lowenberg, J. D., is a member of the Board of Directors of the Institute and its General Counsel. He is an Adjunct Professor of Law at the University of Puget Sound School of Law and is also in private practice, specializing in labor law representation for both management and union clients. He is a former Assistant Attorney General for the state of Washington.

William L. Weis, Ph. D., CPA, is a member of the Board of Directors of the Institute. He is the Chair of the Accounting Department in the Albers School of Business at Seattle University. His research has resulted in a book and more than 30 articles covering all aspects of smoking in the workplace. His research has been quoted in the *Wall Street Journal*, *Forbes*, *Business Month*, the *International Herald Tribune* and most national and international commentaries on the subject.



Second Opinion

Ban Smoking at Work And Save Money, Too

By Robert A. Rosner, Dr. William Weis
and Timothy Lowenberg

When it comes to convincing people to stop smoking, the health argument has just about had its day. After more than 20 years of surgeon general's reports on smoking, almost everyone knows about the health effects of lighting up. Once you understand that cigarette smoking can lead to heart disease, lung disease and cancer, it's hard to imagine any new health evidence that could convince a smoker to stop.

It's time to leave smokers alone with all that evidence and talk to other groups: nonsmokers and employers. It's time to control smoking in the workplace.

One company that already has taken steps in this direction is Boeing, the 83,000-employee aerospace company. Last spring company president Malcolm Stamper announced a policy of work-site restrictions that will eventually lead to a total ban on smoking at all Boeing facilities.

Stamper cited concern for employee health as a major reason for the move, but there are economic and legal costs of smoking in the workplace as well.

Weyerhaeuser, a major forest products company, recently estimated "smoking costs" at corporate headquarters to be \$4.9 million a year. By applying published research on work-site smoking costs, Weyerhaeuser presented the following additional cost of smoking at work:

- **Insurance premiums.** Male heavy smokers use the health care system, particularly hospitals, at a rate 50 percent higher than non-smokers. Smoking-related costs could add 10 percent to the cost of health insurance for smokers.
- **Absenteeism.** Smokers average 50 percent more absences than nonsmokers.
- **Productivity.** Smokers work at 30 percent less in the second half of the day than nonsmokers.
- **Mortality.** Smoking causes 40 percent of all deaths in the United States.

Weyerhaeuser, which is now developing a corporate smoking policy, also concluded that restricted smoking could lower maintenance costs and reduce deterioration of furniture and equipment.

Are I don't think that large corporations are the only ones that can reap an economic benefit by controlling smoking at work.

Radar Electric, a small Seattle electric supply company, instituted a smoking ban and was able to save on maintenance costs. "In today's dollars, that decision [to eliminate smoking] is saving me \$30,000 per year in cleaning costs alone," said Warren McPherson, president of the company.

At the Austed Co. in Sioux Falls, S.D., which has never allowed smoking at its facilities, the company's health coverage is only one third that of comparable organizations.

Of course, some employers may still not be convinced of the need to control smoking. The fact is, they may not have to be convinced. They may be required by law—or litigation—to restrict smoking in the workplace.

Nine states (Hawaii, Maine, New Jersey, Colorado, Connecticut, Minnesota, Montana, Nebraska and Utah) specifically regulate smoking in the private sector workplace, and at least 14 states have restrictions on smoking in public places.

In addition, local jurisdictions such as Los Angeles and Suffolk County, New York, have adopted ordinances requiring employers to develop policies that protect employees from the hazards of sidestream smoke.

Companies with more than one workplace should be especially concerned with this threat to local and state legislation. The only way to avoid this is by voluntarily adopting a policy of no smoking in the workplace.

Some companies are already taking control of the issue. They have lawsuits brought by employees who smoke. In some cases, smokers have been asked to quit or to move to another location. In some cases, smokers have been asked to quit or to move to another location.

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Courts have upheld the right of smoke-sensitive workers to a smoke-free environment and in at least one case have awarded back pay and disability benefits to an employee whose health was affected by workplace smoke. There has been no successful litigation from smokers against companies that have properly implemented smoke control policies.

So what's an employer to do?

There's no absolute formula for setting up a successful smoking control policy. But in places where a smoke-free environment has been established, there seems to be a common approach.

Companies like Kaiser-Permanente, the world's largest health maintenance organization; CIGNA Health Plan of Arizona Inc. in Phoenix; and the Seattle-based Group Health Cooperative (GHC) are instituting smoking control policies that emphasize cooperation, education and employee involvement.

Employees at these companies—both smokers and nonsmokers—have helped to develop a smoking control policy and to set up strategies for putting it into effect.

Those affected do not just receive a memo announcing the policy. Their questions are answered; the hows and whys of the program are addressed in detail. This method works. Today, for example, more than a year after the smoking ban took effect at GHC, 85 percent of the employees support the policy. 1239807560001

Support like that comes through cooperation and communication. Different people respond to different arguments. That's why, when you want to convince people to stop smoking and companies to clear the air, it's important to do more than talk about their health. ■

Robert A. Rosier, Dr. William Wess and attorney Timothy Lowenberg, all of Seattle, assist companies in the development of corporate indoor air policies.

Second Opinion is a forum for those who wish to express a point of view on a health-related topic. Send articles to Second Opinion, Health Section, The Washington Post, 1150 15th St. NW, Washington, D.C. 20071.

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4. Covey LS, Mushinski MH, Wynder EL. Smoking habits in a hospitalized population: 1970-1980. *Am J Public Health* 1983; 73:1293-7.
5. National Center for Health Statistics, National Center for Health Services Research, Office of Health Research, Statistics, and Technology, Health, United States, 1981. Hyattsville, Md.: Department of Health and Human Services, 1981. (DHHS publication no. (PHS) 82-1232.)

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3. Hoffmann D, Hecht SS. Nicotine-derived N-nitrosamines and tobacco-related cancer: current status and future directions. *Cancer Rev* 1985; 45:935-44.
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RIISING MORTALITY FROM CANCER OF THE TONGUE IN YOUNG WHITE MALES

To the Editor: Recently, concern has been raised over the health implications of the increasing use of snuff, especially by children and adolescents.¹ Snuff contains amounts of carcinogenic nitrosamines that exceed by orders of magnitude the nitrosamine content of other consumer products.^{2,3}

I examined mortality statistics in the United States to determine whether there has been any rise in the rate of cancers of the mouth. The deaths from tongue cancer in white males from 1950 through 1982 were tabulated from the death-certificate tapes of the National Center for Health Statistics. Deaths from tongue cancer for three decades and for 1980 through 1982 are presented in Table 1, according to the ages of the decedents. Mean annual mortality (\pm SE) was calculated with use of data on the number of white males of the corresponding ages in the United States in the median year of each period, as obtained from Census estimates.

The mortality from tongue cancer for the 10-to-29 age group rose more than twofold during the period examined. This rise was statistically significant by a test for trend on a log-linear model ($P = 0.004$). Because of the low number of deaths from tongue cancer in that age group, it is difficult to estimate when the increase began, but graphic analysis⁴ indicated that it may have begun in about 1974. No increases were seen among older men; a change in the 30-to-34 age group in 1980 to 1982 was not statistically significant. The observed increase in mortality from tongue cancer is consistent with an increased use of snuff by children and adolescents. The latency period observed for the development of cancer will be shortest among the youngest group of patients.

The rates for cancer at other sites in the mouth were also examined, but no upward trend in mortality was observed in the same age groups. The other sites in the mouth that would be expected to be affected by snuff are the lips, cheeks, and gums. The gums and cheeks are often listed separately on death certificates and probably are often classified as "mouth, not otherwise specified." Lip cancer predominantly affects the vermilion border, and most cases are associated with exposure to sunlight. Therefore, the fact that no increased rate was found in mouth subsites other than the tongue is not surprising. Cancer of the tongue has long been treated as a distinct entity in medical literature, and it is more likely to be correctly specified on death records.

These preliminary data emphasize the importance of close medical observation of young users of snuff. The use of this product by children and adolescents should be strongly discouraged. Cancer registries in areas in which there is a great deal of snuff use should observe the incidence of all forms of mouth cancer.

ROBERT H. DEPUCE, PH.D.
8612 Bunnell Dr.

Rockville, MD 20854

Table 1. Mortality Rates from Tongue Cancer among White Males in the United States.

AGE GROUP	YEARS			
	1950-1959	1960-1969	1970-1979	1980-1982
<i>n</i>	mean (\pm SE) mortality $\times 10^4$ (no. of deaths)			
10-29	7.7 \pm 1.9 (16)	9.6 \pm 1.9 (26)	12.6 \pm 4.2 (43)	18.4 \pm 4.2 (19)
30-34	4.8 \pm 0.9 (26)	5.1 \pm 1.0 (25)	4.7 \pm 0.9 (29)	5.8 \pm 1.6 (14)
35-39	11.9 \pm 1.5 (62)	11.2 \pm 1.5 (59)	12.5 \pm 1.6 (63)	13.4 \pm 2.7 (25)

BAN ON SMOKING IN INDUSTRY

To the Editor: Pacific Northwest Bell is a Seattle-based telephone company with over 15,000 employees. On July 15, 1985, its management announced that a new smoking policy would go into effect on October 15 of that year. The new policy was so straightforward that its essence was contained in one terse sentence: "To protect the health of Pacific Northwest Bell employees there will be no smoking in company facilities."

The ban on smoking has now been in effect for six months, and the results are impressive. Although the company initially received some complaints about the new policy, not a single employee has left because of it. Enforcement of the ban has not been a problem even though the company has over 800 offices in three states. There have been no lawsuits against the company, and the two unions that represent the workers have supported the measure. There are currently no plans to modify the ban in any way.

The results at this company will almost certainly encourage other large companies to consider such a ban. If widely adopted, these policies might have a dramatic effect on the nation's smoking habits. Theoretically, they would encourage people to quit smoking by increasing the social pressure against it and by restricting the time available for it. Although such an outcome has not yet been documented, the results at Pacific Northwest Bell have been encouraging. At the same time that it announced the smoking ban, the company also announced a program for reimbursing employees for participating in smoking-cessation programs. In the first six months of this program, 1044 employees requested reimbursement for the cost of cessation programs. On the basis of previous company surveys, this represents 25 percent of all company smokers. This contrasts sharply with the results of the company's previous efforts to encourage employees to participate in smoking-cessation programs. During the 26 months before the smoking ban was announced, employees had the opportunity to participate in cessation programs sponsored by the American Cancer Society. These programs, which were free and conducted during work hours, were poorly attended. During the entire 26-month period that they were offered, only 331 employees signed up for them.

If policies that ban smoking encourage employees to quit, they promise handsome dividends to managers who are concerned with "the bottom line." Studies have consistently shown that employing smokers costs a company substantially more than employing non-smokers. Kristein¹ found that it costs an additional \$3.36 to \$6.01 per year to employ a smoker. Weis² reported that the cost can be as high as \$4,700.

Physicians should be particularly interested in the smoking policies of hospitals. Although the smoking restrictions in most hospitals involve only segregation of smokers or prohibition of the sale of cigarettes,³ two hospitals — the Public Health Service Indian Hospital on the Hopi Reservation⁴ and the Group Health Cooperative Hospital of Puget Sound⁵ — have shown that banning smoking in hospitals is possible. It is now time for all hospitals to consider such a ban. Smoking is the greatest cause of premature death and disability in the United States,⁶ and it would be ironic if health care institutions let the general business community take the lead in banning smoking in the work place.

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Economy & Business

Thou Shalt Not Smoke

Companies restrict the use of tobacco in the workplace

In the newsroom of the *Denver Post*, reporters and editors cope with a company ban on smoking by gnawing on licorice roots and chewing on unlit cigars. Broward Davis & Associates, a surveying and consulting firm in Tallahassee, refuses to hire anyone who smokes. New England Telephone employees can take a puff in only half the company's rest rooms, and workers at United Technologies' Hartford headquarters must refrain from lighting up in any public work area.

As corporate America comes to terms with the antismoking fervor that has gripped much of the public, more and more firms are regulating the use of tobacco in the workplace. According to a study by the Bureau of National Affairs, about 35% of all U.S. companies restrict smoking (only 2% ban it outright), and an additional 20% are studying the issue. In many cases, companies have no choice: 17 states and hundreds of localities outlaw smoking in offices and other workplaces. The Surgeon General's report last year asserting that smokers create health risks for nearby nonsmokers has encouraged

companies to promote smoke-free work environments. Finally, firms are increasingly aware of the cost of having smokers on staff: higher insurance expenses and increased absenteeism.

Most companies try to accommodate their nonsmoking workers without alienating their tobacco-dependent colleagues. Many firms begin to formulate a policy by polling their staffs. When New England Telephone discovered that 70% of its 27,000 employees did not smoke, it decided to take a strong stand against tobacco. Smoking is now permitted only in certain hallways and rest rooms and in a small section of the cafeteria. Eastman Kodak has democratized the decision-making process. Employees vote on whether common work areas should be smoke-free. While smoking is generally banned in conference rooms, exceptions can be made if there are no objections from anyone present.

A company's policy often reflects its top executive's personal attitude toward smoking. Says Cynthia Ferguson, acting executive director of the American Lung Association: "We see this very clearly.

Management support means everything." Ted Phillips, chairman of the New England, a Boston-based insurance company, is an ex-smoker who strongly believes smoking on the job should be limited to private offices in order to safeguard the health of all workers. That is precisely the policy of his firm. At Frosty Acres Brands, a Georgia canned-goods packager, a smoking ban is unlikely because President Louis Dell smokes almost two packs a day. But Dell acknowledges that the rights of nonsmokers should be protected. As a result, smoking is not allowed in the firm's executive conference room, and employees are free to ban smoking in their private offices.

No matter how well intentioned their bosses may be, many smokers feel persecuted by their firms' antismoking policies. "Just call me Sneaky Pete," says a salesman of novelty items who would face being fired if his smoking habit was discovered. Says he, "It's incredibly unfair. I was a smoker when they hired me, and then, out of the blue, I'm supposed to stop just because the boss says so." Some employees fear their chances for advancement may be choked off by their smoking habit, though favoritism toward nonsmokers is rarely explicit. Len Bell, director of human resources at Pacific Northwest Bell, says a bias against smoking "could be in the back of a manager's mind."

MAY 18, 1987

Vol. 129 No. 20

TIME

THE WEEKLY NEWSMAGAZINE

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when making a decision on a promotion."

Job seekers are discovering that smoking can endanger their careers. Newspaper classified advertisements frequently specify that employers are looking for "nonsmokers only." One of the first questions asked of job applicants at Vanguard Electronic Tool in Redmond, Wash. "Do you smoke?" If

the answer is yes, the interview is over. That is perfectly legal. On the other hand, federal laws forbid an employer to discriminate on the basis of race, sex, religion or marital status.

Many smokers may secretly welcome the corporate crusade against smoking. Says Robert Rosner, executive director of the Seattle-based Smoking Policy Institute, a consulting firm that advises companies on how to formulate smoking policies: "The fact is, most smokers want to quit." Many of them embrace the new corporate activism as an incentive to give up tobacco once and for all. At Rhode Island's *Newport Daily News*, it was the smokers who unanimously voted to ban

smoking from the premises, although taking a drag is not a cause for dismissal.

More and more companies that have imposed restrictions on smoking are attempting to help their employees kick the habit. BMC Software, a Texas company that prohibits smoking on the job, has sent employees to antismoking hypnosis sessions. Abbott Laboratories

hires smokers but strongly urges them to sign a pledge to take a company-sponsored workshop that teaches people how to stop smoking. The five sessions cost employees \$30, but if they stay off cigarettes for four months, Abbott refunds the money.

Despite the changes taking place, antismoking lobbyists continue to press for stricter limitations on smoking in the workplace. Last week the American Public Health Association and Ralph Nader's Public Citizen Health Research Group petitioned the Occupational Safety and Health Administration to impose an emergency rule that would eliminate or restrict smoking in virtually all indoor work sites. While the Government is not expected to take any immediate action, the pressure is sure to grow. Smokers, after all, make up a shrinking minority. Nonsmokers, like any other large majority, know the numbers—and the clout—are increasingly on their side. —By Barbara Rudolph.

Reported by Robert Altmann/
Boston and Nancy Sauter/
Los Angeles



A new employee at Abbott Laboratories pledges to try to give up cigarettes. Some smokers fear their chances for advancement may be choked.



Smoking Policy Institute

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FINANCIAL PLANNING

THE MAGAZINE FOR FINANCIAL SERVICE PROFESSIONALS

Volume 15/No. 12 December 1986

R E S O U R C E S / P U B L I C A T I O N S

Let's Clear The Air, 16-minute videotape produced by The Smoking Policy Institute, Albers School of Business, Seattle University, P.O. Box 20271, Seattle, Washington 98102, 206-626-6391, \$495.

For those of you who are targeting a corporate market, if you need to explore health-care and cost-containment issues, you might want to pay heed to the work that's coming out of The Smoking Policy Institute based at the Albers School of Business of Seattle University.

The Institute estimates that each smoker on a corporate payroll generates \$4,600 in added costs a year from such factors as absenteeism, property damage, productivity loss and employee morale problems. With a growing number of municipalities passing regulations restricting smoking areas in the workplace, the issue of a "smoke-free" environment is bound to be a growing concern.

Let's Clear The Air is a well-packaged videotape that is broken into two sections. The first six minutes are an overview of the general move toward a smoke-free environment. Testimonials from employees and managers at companies that have instituted smoking policies are complemented by warnings from C. Everett Koop, the Surgeon General of the United States Public Health Service.

The second part of the tape provides guidelines on setting up a smoking policy within a corporation. The directors of The Smoking Policy Institute, Robert Rosner, Timothy Lowenberg and William Weis, elaborate on issues of critical importance in setting up such policies.

The 16-minute videotape costs \$495. If Rosner, Lowenberg and Weis are correct in their assessment of how much each smoker can cost your corporate clients, it's money well-spent.



THE WALL STREET JOURNAL.

VOL. CXVI NO. 57

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TUESDAY, MARCH 24, 1987

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Labor Letter

A Special News Report on People And Their Jobs in Offices, Fields and Factories

A NONSMOKER'S BEEF may open the way for employee lawsuits.

The Washington state Court of Appeals sends back to a lower court for trial an employee's negligence suit against the state Department of Social and Health Services. The nonsmoking employee alleged that workplace exposure to tobacco smoke caused her to develop a lung disease. Because she was denied worker compensation, the court ruled her case would have "fallen into a crack" between the worker compensation and tort systems.

This "opens the door" for nonsmoking employees alleging injuries to directly sue employers for negligence, says Robert Rosner, head of the Seattle-based Smoking Policy Institute, which advises businesses on smoking policy. He foresees "a potential asbestos-type wave of legislation."

Department officials have asked the state Supreme Court to hear the case; no decision has been made yet.

Cigarette suit may get court review

'Second-hand smoking' case may spawn new wave of litigation

by Don Duncan
Times staff reporter

The state Supreme Court is expected to decide by Monday whether to review the case of an Olympia woman who sued the Department of Social and Health Services over a severe asthmatic condition which she said was caused by breathing second-hand smoke in the workplace.

If the high court sends Helen McCarthy vs. DSHS back to Superior Court and McCarthy wins in a jury trial, some think it could lead to a wave of lawsuits similar to those triggered by asbestos-related health complaints.

"I get calls from Washington, D.C., several times a week," says Stephen Way, the Olympia attorney representing McCarthy. "A lot of people are interested in the outcome. I think the Supreme Court will send it back to Superior

Court and we'll win."

Greg Brunson, representing the DSHS for the attorney general's office, says only, "We've been told the Supreme Court will decide on or before March 31 whether to review the case; I can't say anything beyond that."

McCarthy, 67, worked for the DSHS for 10 years before quitting in 1981 when her employer refused to provide her with a smoke-free environment. A nonsmoker, she had developed a severe smoker's hack which she blamed on working in a room surrounded by those who puffed on cigarettes, cigars and pipes.

When McCarthy applied for workers' compensation disability benefits, her claim was rejected by the Department of Labor and Industries and the Board of Industrial Insurance Appeals.

McCarthy sued, asking for \$300,000 to \$350,000. She said that as



Helen McCarthy
Sued DSHS

a result of being forced to retire she now was a self-employed counselor at a much lower salary than she earned while working for the state.

A Thurston County Superior Court judge rejected her lawsuit, saying that workers' compensation laws preclude private lawsuits.

McCarthy appealed. In December, the state Court of Appeals ruled the trial court had erred.

The Appeals Court said McCarthy "had fallen into a 'crack' between the state industrial insurance system and the state's tort system" and that if she can prove her allegations "she has a common-law action for negligence."

Among those watching the case is Robert Rosner, head of the Seattle-based Smoking Policy Institute, which advises business and government agencies on smoking policies.

Rosner, who several times has appeared on nonsmoking panels with Surgeon General E. Everett Koop, says a decision in McCarthy's favor could lead to a potential wave of asbestos-type litigation.

"Until now," says Rosner, "there have been three types of lawsuits dealing with smoking:

■ "The civil court injunction, demanding a smoke-free environ-

ment.

■ "Basic disability retirement ('I'm disabled when I'm around smoke,' so provide me with a smoke-free job or retire me').

■ "Unemployment compensation ('In California, if you are allergic to smoke and there is smoking on the job, you automatically qualify for unemployment compensation')."

The McCarthy case, Rosner says, would add a fourth type of lawsuit: "negligence — permitting those whose health has been damaged by 'second-hand smoke' to sue for damages. And if that happens, there will be a rush to eliminate smoking wherever a nonsmoker might be affected."

McCarthy, who begins coughing "when I'm within a block of anyone smoking," says she is glad her day in court finally may become a reality.

"It's been a long, hard struggle," says McCarthy. "I get calls from all over the country from people who say, 'Go for it.' They have had similar problems and they are watching what happens to me."

Smoking Policy Institute

The Smoking Policy Institute is a nonprofit organization that assists companies in the creation of healthy options to smoking in the workplace. The Institute was founded in 1985 and is based in Seattle, Washington.

The leadership role played by the Institute has been acknowledged by such diverse sources as Fortune Magazine, the U.S. Surgeon General and the Chairman of the Board of R.J. Reynolds.

The Smoking Policy Institute offers managers help in avoiding the pitfalls that result from poor planning, worker resentment and misdirected zeal. The work of the Institute is divided into four operating divisions.

Products: A variety of implementation aids including videotapes, employee surveys, no-smoking signs and other materials

Training: On-site training and consulting programs to assist organizations interested in developing and implementing smoking control policies

Resource Center: Information on all aspects of smoking in the workplace, available to the media, organizations and individuals

Presentations: Smoking in the workplace seminars which review the health, legal, financial and implementation issues

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Smoking Policy Institute
P.O. Box 20271 Seattle, WA 98102
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Contribute To The Environment.

Join the Smoking Policy Institute.

We're asking you to join our efforts to eliminate workplace smoke. Together we can continue changing this nation's corporate smoking policies. Your charter membership in the Smoking Policy Institute keeps us healthy, so we really can achieve a smokefree environment.

The Smoking Policy Institute is a nonprofit organization that has no government funding. Operation and salary expenses are met through corporate and foundation contributions, conference fees and from development contracts with industry for effective workplace smoking policies. All together they make a shoestring.

While the Institute has successfully placed the issue of workplace smoke on the international agenda, it has been done with little funding. We're proud our shoestring budget rattles tobacco industry giants like the R.J. Reynolds Company and the Tobacco Institute. We've helped corporations like Pacific Northwest Bell, CIGNA HealthPlan of Arizona, Ralston Purina and the City of Seattle implement appropriate and effective policies.

We've placed the issue of workplace smoke on the pages of the *New York Times*, the *Wall Street Journal*, *Fortune*, the *New England Journal of Medicine*, the *International Herald Tribune*, and on TV's *60 Minutes*, the *Cable News Network*, other networks and numerous other television and radio programs throughout the world.

Professionally, our efforts are supported by C. Everett Koop, M.D., Surgeon General of the United States Public Health Service, the National Cancer Institute, the Canadian Cancer Society, England's Royal College of Physicians and lung associations and cancer societies around the world.

All to the good, and probably even to our credit. But we can't operate on success and enthusiasm alone. The expense of increased staff, literature, research, mailings and operations mount. Our fight for clean air and a healthy workplace needs your immediate financial support. Please Help.

Join the Smoking Policy Institute. Annual charter memberships are \$250.00 for a corporation and \$20.00 for individuals.

We're Ready For A Smoke Free Environment.

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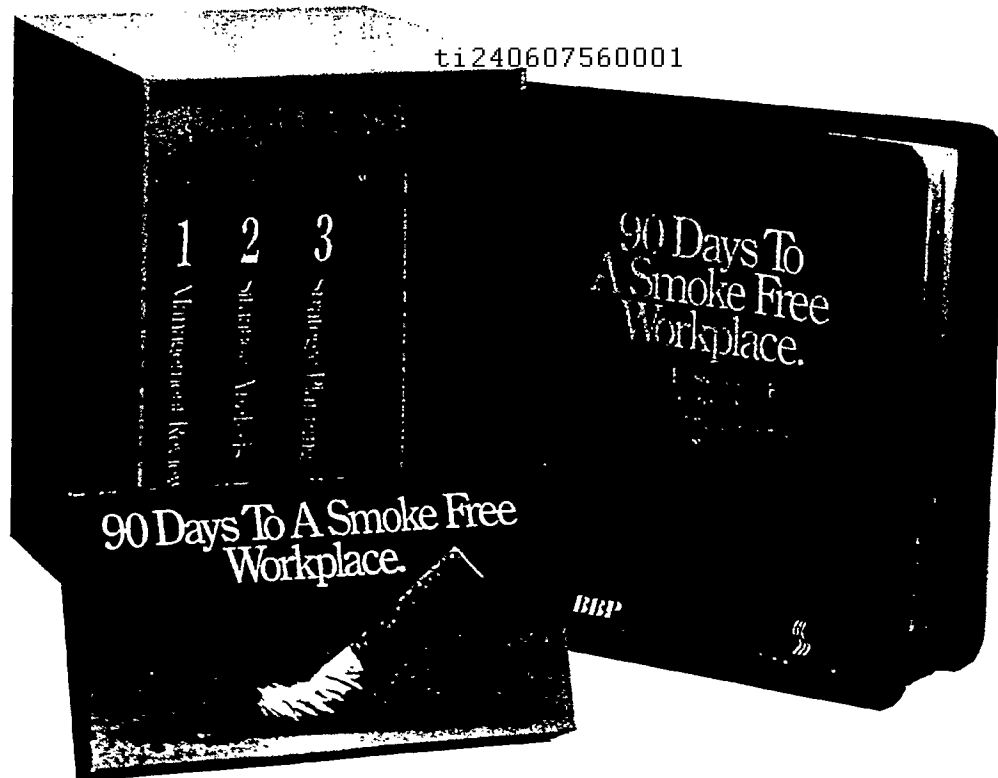
Thinking Smoke Free?

There's no need to feel like a pioneer in the wilderness.

The Smoking Policy Institute, a leader in the national movement to restore clean and healthy air to the workplace, has streamlined the process of smoking policy implementation. It has identified and isolated the trouble spots and pointed out ways to avoid controversy and contention.

This brochure describes the tools developed by the Institute to make your policy implementation a smooth one: videotapes, workbooks, cessation programs, surveys, signs—all the products and services, expertise and experience, you will need to implement your smoking control policy with efficiency and ease.

The following products have been developed in conjunction with the Bureau of Business Practice, a Division of Prentice-Hall, a Simon and Schuster Company.



Smoking
Policy
Institute

PRODUCTS

"Let's Clear The Air"—Succinct and professional, "Let's Clear The Air" provides a straightforward introduction to issues surrounding smoking in the workplace.

Created specifically to increase corporate awareness about the bottom-line reasons for implementing smoking controls, "Let's Clear The Air" reviews the impact of smoking on company costs, employee health and health care, corporate liability and overall image and morale. In making its case, this award-winning videotape taps the resources of the United States Surgeon General, corporate decision makers and national experts. It is replete with facts and experiences from the people who have already implemented policies and reactions from the employees who have been affected.

The comprehensive overview of how and why to implement smoking control policies in the workplace makes this 16-minute videotape an indispensable resource for any manager, medical director or CEO wanting to make a convincing argument for a comprehensive policy plan. For those who can only schedule five minutes for an introduction to the issue, the opening five-minute segment presents a compelling and hard-hitting introduction.

"90 Days To A Smoke Free Workplace"—This unique four-tape package details policy implementation from the initial decision to act on the issue through post-policy evaluations. Every aspect of developing an effective smoking policy is covered, every strategy and option reviewed, in both theory and by practical example.

The videotape features the U.S. Surgeon General, nationally-recognized experts and corporate decision makers.

Produced in a video/workbook format, "90 Days To A Smoke-Free Workplace" consists of five modules.

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Module One/Management Review provides the basis for your company's presentation to executive management with a review and analysis of major smoking control issues: health hazards, legalities, financial considerations, personnel needs, etc. Once a firm grasp of the situation has been achieved, this module helps you develop a positive sense of direction and guides you through selection of a policy development committee.

Module Two/Situation Analysis shows you how to measure and assess your corporate environment as it relates to and will be affected by a smoking control policy. This section suggests methods of data collection on employee attitudes and knowledge; facilities; currently in-place personnel policies and labor contracts; cost containment areas and potential trouble spots.

Module Three/Strategic Planning puts the information gathered in the preceding modules to work. Consisting primarily of guided "brainstorming," the Strategic Planning section works through all the possible strategies and options that a smoking control policy might address and then assists in preparing the actual written policy and its accompanying rationale for presentation to executive management.

Module Four/Implementation takes you through the concrete enactment of the policy and points out how to maximize its success.

Module Five/Evaluation suggests means of ongoing evaluations and monitoring of the policy: how to survey employee reactions; how to measure corporate savings; and how to handle violations.

A more comprehensive guide through implementation is not available anywhere.



No Smoking

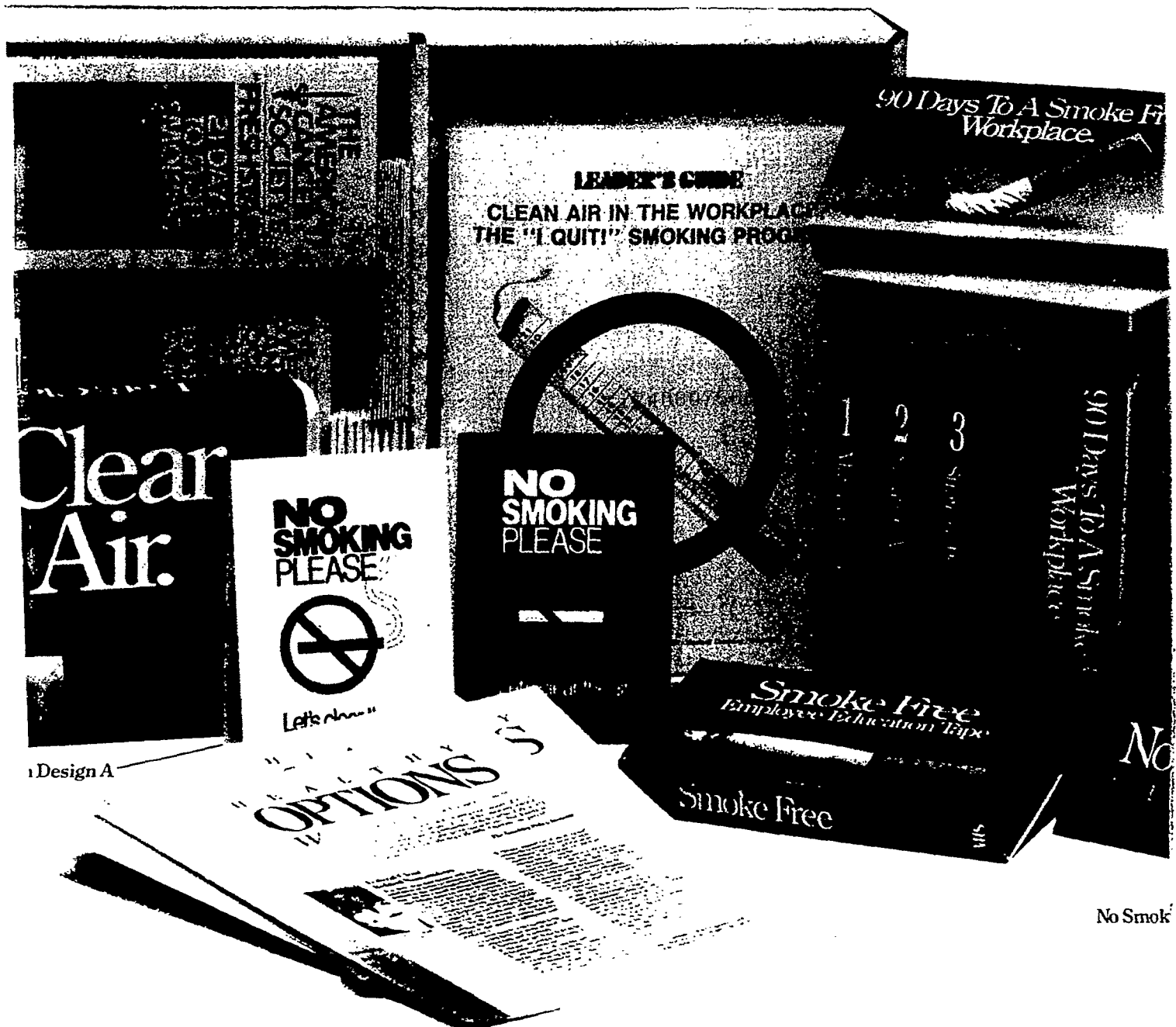
"90 Days To A Smoke-Free Workplace" Workbook—A necessary companion to the four-tape library described above, the *Workbook* is also available on a stand-alone basis. Following the step-by-step format of the "90 Days" videotape library, the workbook also includes an extensive annotated bibliography, citations of pivotal litigation, examples of clean-indoor-air legislation, case studies describing three very different implementation procedures and samples of actual written policies.

The Smoking Policy Institute strongly recommends supplying all policy-committee members with their own copy of the workbook when employing the "90 Days" videotape/workbook package.

Employee Survey—The success of any policy will ultimately depend upon understanding and responding to the needs and situation of the company's employees.

Designed and tested by the Smoking Policy Institute and marketing experts, the Corporate Assessment Survey specifically addresses smoking control issues and attitudes. Because this survey has been used by corporations nationwide, your results can be compared with and analyzed against national norms. And, most importantly, the information distilled from the survey will be instrumental in forming critical policy decisions.

The package contains instructions on how to conduct the survey, the actual survey instrument and an analysis of your tabulated results.



No Smok

No Smoking Signs—Clean, professional-looking signs can reflect the new, clean and professional look of your smoke-free environment.

The Smoking Policy Institute has had two distinct designs created to fit a variety of corporate settings and needs: wall signs, table tents, door decals and announcement signs. These signs are distinctive, sophisticated and durable.

"Smoke Free"—One of the most important keys to successful policy implementation is the involvement and support of employees, which is why the Smoking Policy Institute has produced "Smoke Free."

This eight-minute videotape provides a forthright presentation of why a policy is necessary and how employees will ultimately benefit from it. The benefits to management are obvious: a consistent, clear presentation of facts to your employees by objective, concise experts and the experiences (by smokers and nonsmokers alike) recounted by employees who are now working in smoke-free offices.

The tape answers questions before they arise and garners early support from corporate personnel. "Smoke Free" is a fact-filled presentation of health and implementation information and a valuable investment for policy success.

"Clean Air in the Workplace: The 'I Quit' Smoking Program"—Management support of employee cessation programs is essential for an enduring and rewarding smoking control policy. The "I Quit" program, a cessation package developed by the Bureau of Business Practice, contains all the materials necessary to train a group leader and put ten smokers through a cessation program.

The program has been successfully used by a number of major organizations.

SERVICES

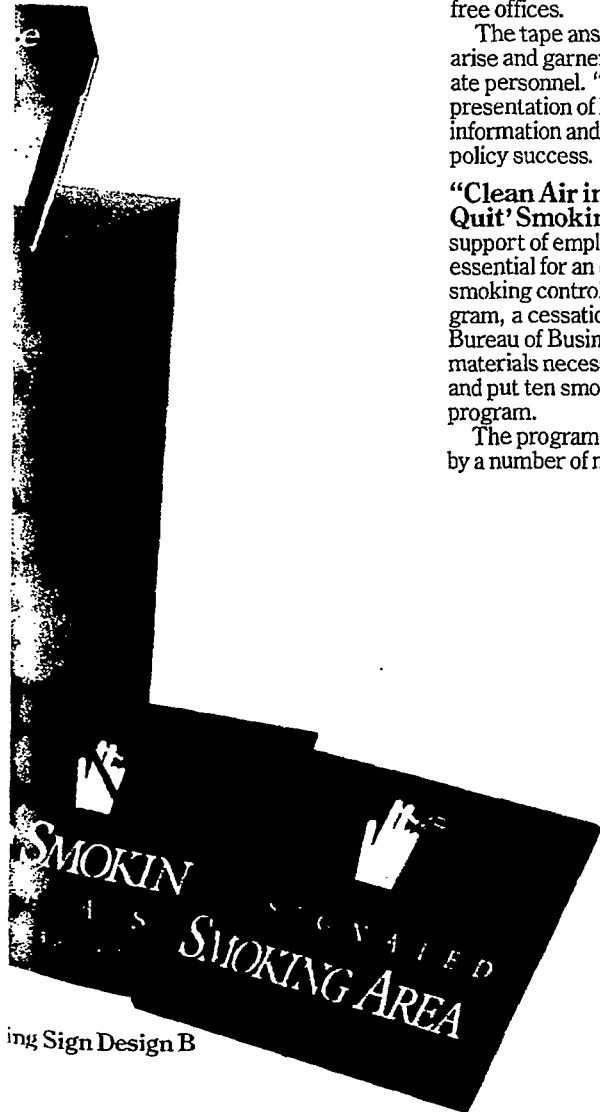
On-Site Training and Consultation Program—It is not unusual—and is frequently advisable—for management to hire a consultant to develop and implement the smoking control policy. This is often the most cost-efficient choice: programs can be implemented sooner; the company saves on valuable internal personnel resources; and consultants have the experience and neutrality to avoid problems which might otherwise arise during implementation.

The Smoking Policy Institute offers a practical and proven program. Following the format of "90 Days To A Smoke-Free Workplace," the program is the national prototype for establishing corporate smoking policies.

"Smoking in the Workplace" Presentations—The Institute's popular half-day seminar provides local business and health leaders with a brass-tacks review of health, legal, cost and implementation issues.

Presented in over 30 cities across the United States, England, Scotland and Canada, "Smoking in the Workplace" features a videotape of the Surgeon General and an in-depth and informative slide presentation, along with appropriate handouts.

Healthy Options—*Healthy Options*, a quarterly newsletter published by the Institute, provides current information on all aspects of the smoking control issue as well as a forum for those many corporations enacting their own policies. With a corporate membership, *Healthy Options* will become a valuable part of your smoking policy.



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90 Days	\$69	\$125	\$695	\$150 ea.
Let's Clear The Air/ 90 Days Package	\$98	\$190	\$895	\$225 ea.

Purchase Only

Employee Survey	\$300		
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Smoke Free	\$125 ea.	\$50	
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Plexi-glass Wall & Door Signs* (No Smoking, Designated)	\$4.95 ea.	\$4.50 ea.	\$4.25 ea.
Mylar Door Decals,* Announcement Sign & Table Tents*	\$1.50 ea.	\$1.35 ea.	\$1.30 ea.

*When ordering signs, indicate your preference for Design A or B.

Quantity Discounts

	<u>1-10 set(s)</u>	<u>11-24 sets</u>
Clean Air In The Workplace: The 'I Quit' Smoking Program	\$695 ea.	\$675 ea.
Add'l Sets for 10 Participants	\$295 ea.	\$270 ea.
90 Days Add'l Workbooks	\$75 ea.	\$55 ea.

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For additional information on quantity discounts, call the Smoking Policy Institute.
One set has materials for 10 participants.

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