



GOOD BUSINESS

...better health

A comprehensive guide for smoke-free workplaces



From a business perspective it costs employers \$3,396 per year more to employ someone who smokes – Conference Board of Canada (2006)

Paying for tobacco use cessation treatments is the single most cost-effective health insurance benefit for adults that can be provided to employees – Department of Health and Human Services, Centers for Disease Control and Prevention (2005)

The biggest thing we can do to help people stop smoking is to make it less convenient for them, and one of the ways to do this is to make workplaces 100 per cent smoke-free – Neil MacKenzie, Manager, Chronic Disease & Injury Prevention, Windsor-Essex County Health Unit

Acknowledgements:

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Adapted from the following:

Smoking Cessation in the Workplace: A Guide to helping your employees quit smoking.
Health Canada, 2005

Towards a Healthier Workplace A Guide Book on Tobacco Control Policies. Health Canada, 2003

Employers' smoking cessation guide: Practical approaches to a costly workplace problem.
Second Edition, Date unknown

To receive an electronic copy of the guide, contact York Region Community and Health Services, Health Connection at 1-800-361-5653 or visit [HYPERLINK "http://www.york.ca" www.york.ca.](http://www.york.ca)



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Section I

Introduction

What is this guide about?

This guide provides relevant, practical information and materials to help workplaces advance their smoke-free efforts. The information and tools provided will assist in implementing the three part approach to a smoke-free workplace; support for smoking cessation, protection for all employees in every work setting and a tobacco control policy.

Who is this guide for?

This guide is for employers, union representatives, workplace health promotion or occupational health representatives, human resource managers and employee assistance program representatives who want to create a smoke-free environment and help employees quit smoking.

Why should workplaces be concerned about smoking?

Cigarette smoking takes an enormous toll on business and industry in terms of health care and opportunity costs associated with absenteeism, disability, lost time, fires, insurance and liability ¹ (Appendix 1). A smoke-free enclosed workplace is legislated in Ontario by the *Smoke-Free Ontario Act*. Employers can go beyond existing legislation by creating a smoke-free workplace policy that includes smoke-free grounds and cessation tools and supports for employees who want to quit smoking.

The majority of smokers would like to quit smoking. About half of all Canadian smokers try to quit annually ². People try to quit smoking when they are presented with opportunities and options. The highest proportion of smokers is found among 20-44 year olds, who constitute a large portion of the workforce. Employers can provide a smoke-free work environment and offer programs and services to help employees quit smoking.

Smoking is the primary cause of premature, avoidable death and disease in Ontario killing approximately 16,000 people yearly ³. Scientific evidence has established an indisputable link between exposure to second-hand smoke (SHS), the smoke from the burning end of a cigarette and serious health consequences ⁴. Annually 1,100 to 7,800 non smokers lose their lives because of SHS ⁵. Furthermore SHS contains more than 4,000 chemicals and 67 identified cancer-causing compounds. There is no safe level of exposure to SHS; all involuntary exposure to tobacco smoke should be considered harmful and therefore eliminated.

Workplaces that promote cessation and protect non-smoking employees from involuntary exposure to SHS, can have a huge impact on employee health and associated business costs.

Why should employers get involved?

Seven main reasons employers should create a total smoke-free environment and provide support to smokers who want to quit are:

1) Improved employee health

Employees who do not smoke:

- Take fewer sick days
- Go on disability less often
- Are less likely to retire early because of poor health

2) Increased productivity

- Life insurance premiums are lower
- Non-smokers are more productive because they do not take unscheduled smoking breaks

3) Reduced costs

- Supporting employees to quit smoking is an investment worth its return; if employees who smoke are helped to quit, employers will see a reduction in loss of skills, knowledge and corporate memory due to premature death and early retirement
- According to the Canadian Lung Association, smoking cessation support is a sound economic investment and is especially profitable when offered over the long term (five or more years)
- The Conference Board of Canada estimates it cost employers \$3,396 per year more to employ someone who smokes (these costs are calculated in terms of increased absenteeism, decreased productivity and higher insurance premiums among other costs ⁶⁾)
- Reduce maintenance and clean up costs related to littering of and damage caused by discarded cigarettes

4) Enhanced job satisfaction

- The majority of people who smoke want to quit
- A recent study from Health Canada's Tobacco Demand Reduction Strategy shows many smokers would welcome smoking cessation programs offered by their employers
- Several studies show a large majority of both smokers and non-smokers prefer to work in a smoke-free environment
- In smoke-free environments, improvement in morale, overall quality of the work environment, employee productivity and sense of loyalty have been shown

5) Effective setting

Workplaces are an ideal setting to help people quit smoking for several reasons:

- Many people spend a good part of their time at work
- Workplaces are convenient places for people to get information and support
- Workplaces can provide the supportive social environment necessary for quitting smoking.
- Smokers can get support from employees and others who promote health in the workplace
- Smoke-free workplaces encourage employees who smoke to cut down or quit, and help those who are already smoke-free to stay that way

6) Better corporate image

Workplaces that are committed to the health of their employees portray a positive image and are respected within the workplace and the larger community (a better image may help to attract and retain talented workers)

7) Complying with legislation

- The Smoke-Free Ontario Act came into effect on May 31, 2006, making all enclosed public places and enclosed workplaces 100 per cent smoke-free
- This provincial legislation protects employers and employees from SHS exposure inside their workplaces and workplace vehicles
- By providing a smoke-free environment, employers protect themselves from liability related to the exposure of employees to an identified workplace hazard
- Creating smoke-free outdoor policy, including an appropriate disciplinary policy can ensure a smoke-free environment for all.

Section II

Smoking cessation in the workplace

Understanding the process of quitting smoking

Quitting smoking is a difficult process. Cigarettes have a higher dependence potential than heroin, cocaine, alcohol and marijuana. This means it is more difficult to stop using cigarettes than any of the other substances. Most people make five to seven quit attempts and may use a variety of methods before they quit for good. Smoking relapses should not be seen as failures, but rather another step in the process of becoming smoke-free. Each attempt increases the chances of eventually quitting for good.

Workplaces who wish to support staff quitting should consider:

- **Smokers who wish to stop smoking** will be most successful with access to high quality treatment (education, counselling, and drug therapies), assistance in paying for treatment, a supportive work environment and workplace policies
- **Smokers who are not ready to stop smoking** can be motivated by providing information, incentives and workplace policies
- **Recent ex-smokers** often require support to prevent relapse
- **Non-smokers** do not wish to be subjected to SHS
- **Supervisors and managers** may need practical guidelines for implementing smoking policies, resources to which they can refer employees who wish to quit smoking and addressing conflicts between smokers and non-smokers

Smoking cessation approaches and options

Workplaces have a variety of approaches and options to help employees quit smoking. Smoking cessation supports can be offered as part of a workplace wellness program or on their own (Appendix 2).

Basic approaches

Comprehensive: This approach involves a variety of programs and activities at the workplace. Employees can access cessation supports on-site and often during work hours. It includes incorporating tobacco prevention messaging into all wellness programs and activities.

Facilitated: This approach involves working with outside agencies to deliver programs and activities off-site, providing self-help materials, links to appropriate websites and on line support (Appendix 3).

Education and Information: This approach involves providing employees with information including self-help materials.

Options

Self-help: Workplaces can provide a variety of self-help material which many people will use. Most people who quit smoking get information from self-help materials, pamphlets or web sites. Success rates are enhanced when they choose a “buddy” to help them quit.

Brief contact intervention (BCI) training: BCI training is available to workplace employees who would like to provide BCI to smokers who want to quit. It consists of a three or four minute discussion that includes asking smokers about their smoking, advising them to quit, assessing their smoking and assisting them to obtain appropriate help.

Individual counselling: Provided by a physician, nurse, addictions specialist, employee assistance program provider or quit-line counsellor. Individual counselling can help people who smoke adapt to life without cigarettes. Services can be offered at the workplace or employees may be referred to services off-site. Smokers Helpline (1-877-513-5333) provides one-on-one telephone counselling, support and information to smokers who want to quit.

Group programs: The workplace, EAP program, or community group can provide group programs. Group programs include a number of weekly sessions and can take place during work or after hours. Workplaces can subsidize these programs and/ or allow employees to attend during work hours. Many smokers benefit from inviting spouses and other family members to participate.

Nicotine replacement therapy (NRT): This can be purchased over-the-counter and comes in various forms: patch, gum and inhaler. It replaces some of the nicotine in the bloodstream, reduces withdrawal symptoms and cravings and helps one function while breaking the habit. Using NRT can double the chances of quitting.

Prescription medications: These can be used in combination with NRT and can more than double the quit rate. These medications assist with withdrawal symptoms and cravings. Workplace benefit plans can cover the cost of these medications for employees and family members.

Tips for success

Develop a plan

- Identify the organizers and who you want to reach
- Establish goals and objectives
- Compile an inventory of available resources
- Determine budget and staff availability
- Conduct a needs assessment survey to ask employees what they want (Appendix 4)
- Decide on activities – what you are going to do and when
- Develop a communication strategy – including to whom and how often
- Obtain approval
- Implement
- Evaluate

When deciding on your organization's approach:

- **Recruit leaders and champions.** Include union, the health and safety committee, the EAP program and human resources. Build commitment by including staff and management, union representatives and both smokers, ex-smokers and non-smokers.
- **Use an integrated approach; policies, health plans and workplace programs, for maximum impact.** Comprehensive programs are those that combine coverage for medication and counselling, as well as inclusion of workplace policies.
- **Interweave smoking cessation initiatives with other on-site or off-site employee health programs.** Investigate other programs that will support a non-smoking lifestyle (e.g., stress management, weight management and exercise activities). Involve and educate on-site nursing staff in assessing and referring smokers, consider training them in BCI.
- **Develop a strategy based on an understanding of smoking as an addiction.** Avoid an approach that stigmatizes smokers.
- **Determine the level of support to provide.** Smoking cessation support ranges from comprehensive (e.g., on-site, extensive communication) to facilitative (e.g., health plans provide counselling and some medication, the employer provides self-help materials, available web sites, and extensive communication) to referral-based programs (e.g., referrals to community providers, self-help materials). Smaller organizations with limited resources and staffing may want to focus on referral-based programs or work with community-based organizations.

- **Use a systematic long term approach.** Assess the cost impact of smoking on your organization (Appendix 1). Identify and speak with everyone in the workplace via surveys and/or focus groups. Research available resources and decide on a philosophy and general approach.
- **York Region Community and Health Services staff are available to assist workplaces to develop a comprehensive smoke-free workplace strategy.** Consultation and support is currently offered to develop and implement a needs assessment for staff, develop key messages for a communications plan regarding the implementation of tobacco control policies and availability of tobacco cessation tools. BCI training is offered to interested workplace staff and support is available to any workplace interested in developing a group cessation program.

For more information or to obtain a consultation contact *Health Connection* at 1-800-361-5653 or visit [HYPERLINK "http://www.york.ca" www.york.ca](http://www.york.ca).

Activities

Activities employers may include as a part of the plan will depend on how motivated employees are to quit smoking. This information can be gathered from the needs assessment and be incorporated with the available resources (Appendix 4).

Activities to consider

Health plan (reimbursement and plan design)

- Coverage of drug therapies
- Counselling by healthcare providers
- Risk rating of health insurance
- Health-plan sponsored counselling in the community or via internet or telephone
- Flexible benefit credits to finance cessation interventions
- Subsidize quit-smoking medications if not covered in your benefit plan
- Extend cessation benefits and activities to partners and family members

Smoking policies

Smoking is prohibited in the enclosed workplace — as legislated by the Smoke-Free Ontario Act . Workplaces can also develop a smoke-free outdoor policy to prohibit smoking at entrances or on the entire property (see Section III)

Workplace-based smoking cessation initiatives

- Self-help materials such as educational pamphlets, cessation guides or web sites
- Newsletter articles on the benefits of quitting
- Health risk appraisals and other workplace health promotion/wellness activities
- Special events (e.g., Quit contests that include buddies to help smokers quit, health fairs, and other events)
- On-site or community, intranet or telephone-based counselling services (Appendices 3 & 5)
- Allow employees to participate in activities and access quit-smoking medications
- Tailor the program to your workplace, accommodate shift workers and make sure written materials are language-appropriate

Addressing barriers

- Some employees won't have any intention of quitting smoking. They can still be supported to start thinking about quitting
- Non-smoking policies in the workplace help people cut down by providing fewer opportunities to smoke
- Cessation information, self-help material that is readily available can encourage people to start thinking about quitting smoking
- Peer support can be encouraging to smokers
- Consider offering the same cessation supports and benefits to other household family members
- Ensure management support

Communication is the key

Open communication is a key component. Keep employees informed at all times of any policies or activities that are being introduced or changed. Explain why and how policies are changing. Encourage employees to get involved and participate in discussions and listen to their opinions. Provide a forum or venue to receive feedback (Appendix 4). A well formulated communication plan is extremely important for generating interest and encouraging employee participation.

Use a variety of channels including:

- Word-of mouth
- Managers
- Staff meetings
- Posters
- Written materials in staff and lunch rooms
- Email
- Employee newsletters
- Workplace intranets

Evaluate

An evaluation plan is important to assess the effectiveness of programs and activities, identify ways to improve and to help guide future plans. Employers should evaluate both short-term impact (policy awareness, morale, conflict reductions, quality of work, job satisfaction) and long-term outcomes (number of employees who smoke, reduction in absenteeism, reduction of healthcare and maintenance costs).

The evaluation should measure whether initial goals have been met and need not be costly or complex. At a minimum, employers can survey employees to determine the perception and impact of the smoking cessation strategy.

Section III

Tobacco control policies

The *Smoke-Free Ontario Act* and your workplace

Smoke-free workplaces benefit employee health in many ways. By banning smoking in all enclosed workplaces the *Smoke Free Ontario Act* (SFOA) protects all employers, employees and visitors from second-hand smoke (SHS) exposure in all workplaces, including inside workplace vehicles. A smoke-free workplace also benefits staff by encouraging smokers to quit. One study found that smoking rates dropped by five per cent and daily consumption among smokers who continued to smoke dropped by 10 per cent when employers restricted or provided a smoke-free environment.⁵

The *Smoke-Free Ontario Act* came into effect May, 31, 2006 making all enclosed public places and enclosed workplaces in Ontario 100 per cent smoke-free. The *Act* prohibits smoking or holding lighted tobacco in enclosed workplaces. It also prohibits enclosed workplaces from having ashtrays and similar equipment on the premises.

An enclosed workplace is defined as the inside of a building, structure or vehicle an employee works in or frequents during the course of their employment (whether or not they are acting in the course of their employment at the time). It includes common areas such as washrooms, lobbies and parking garages. Examples of an enclosed workplace include the inside of a trailer office on a construction site, the inside of a loading dock or the inside of a delivery truck. The ban on smoking in an enclosed workplace is in effect at all times, even during off-hours when people are not working.

As an employer you must:

- Ensure employees are aware smoking is prohibited in enclosed workplaces
- Remove ashtrays and any similar equipment
- Ensure **no one** smokes in the workplace
- Ensure a person who does not comply does not remain in the enclosed workplace
- Post No Smoking signs at all entrances, exits, washrooms and other appropriate locations to ensure everyone knows smoking is prohibited

An employer may not dismiss; threaten to dismiss, discipline, suspend, penalize, intimidate or coerce an employee who obeys or seeks compliance with the *Act*. If an employee experiences any of the above noted actions by his or her employer, the employee may direct complaints to the Ontario Labour Relations Board.

To report a smoking violation in a workplace contact, York Region Community and Health Services, *Health Connection* at 1-800-361-5653.

Beyond the *Smoke-Free Ontario Act* – Developing and implementing a smoke-free outdoor policy

While indoor smoking bans are important first steps, more can be done to protect employees at the workplace. Second-hand smoke exposure is still a health threat where smoking is permitted outside, close to entrances and exits and where ventilation systems expose workers to hazardous chemicals.

Workplaces are encouraged to develop smoke-free policies that extend beyond current SFOA legislation to make outdoor grounds smoke-free. For example, your workplace may choose to develop a policy prohibiting smoking anywhere on workplace property, or within X feet from doors and windows. Workplaces that implement such policies demonstrate leadership and commitment to protecting the health of its staff and community.

Developing and implementing a smoke-free policy

The process for developing and implementing a workplace tobacco control policy involves a series of steps; these can be divided into three phases.

Phase 1: Preparation

- Build commitment with management, labour groups and other influential individuals and groups.
- Recruit leaders and champions in unions, the health and safety committee, the employee assistance program and the human resources department.
- Strive to involve all employees. Contact York Region Community and Health Services for consultation and support to develop an effective comprehensive strategy.
- Establish a working group with representatives from all parts of the workplace.
- Make use of existing committees for support.
- Decide on how you will develop a plan including goals and objectives.
- Provide employees with information on SHS and smoke-free policies (Appendix 6).
- Build a case for implementing the smoke-free policy; calculate costs and potential savings (Appendix 1).
- Gather information on employee attitudes, beliefs and preferences related to a smoke-free workplace. Analyze and share the results and incorporate them into your plan (Appendix 4).
- Develop the plan and the policy; include timelines and procedures for implementation enforcement and evaluation.
- Present your plan to management and employee representatives.

Phase 2: Implementation

- Give employees adequate advance notice before launching the policy so they can plan accordingly.
- Keep employees informed every step of the way.
- Ensure the smoke-free boundaries are clearly marked with signage.
- Ensure enforcement procedures are clear and the policy is enforced consistently and fairly.
- Select a person staff can go to for clarification and questions.
- Support employees with smoking cessation resources (see Section II).
- Train all staff involved in the implementation and enforcement of the policy, include: managers, health and safety staff, human resources staff and employee assistance program staff.
- Establish protocols on how to advise visitors of the policy and what to do with non-compliance and complaints.
- Present and explain the policy, provide information to all employees (i.e. a letter including rationale for the policy from the CEO of the workplace).
- Launch the policy (link with a special event i.e., a BBQ, breakfast or contest).

Phase 3: Follow-up and maintenance

- Monitor the policy implementation and evaluate compliance, employee satisfaction, complaints and praise.
- Evaluate long-term outcomes such as changes in absenteeism, cost reductions, employee and customer satisfaction.
- Revise your policy as needed.
- Celebrate your successes.

Sample smoke-free outdoor policy template

(To be used as a guideline only)

Provided by York Region Community and Health Services

Policy Statement

As of X date, smoking will be prohibited 1) inside X owned, funded or operated premises and facilities as per the *Smoke-Free Ontario Act* and on associated outside property or 2) within X feet of any door or window opening with no exceptions.

Purpose

Research shows second-hand smoke (SHS) contains many carcinogens and is a preventable cause of many major diseases in smokers and non-smokers alike. X is committed to ensuring a safe and healthy environment for staff and visitors to X by implementing a smoke-free outdoor policy. The purpose of this policy is to protect those who work and visit X from the harmful effects of SHS while inside X owned, funded or operated premises and facilities and on associated outside property, with no exceptions.

Application

This policy applies to all persons working at or visiting X owned, funded or operated premises and facilities located at (address) with no exceptions.

Description

X *workplace name* is required to be smoke-free effective (insert date).

Smoking is not permitted:

Inside X owned funded or operated premises or facilities and on associated outside property.

Within X vehicles that are owned or leased for X business.

Responsibilities

X *workplace name*:

X is responsible for clearly posting non-smoking signs, prohibiting ashtrays and like paraphernalia.

X will prohibit smoking on all X owned, funded or operated premises and facilities and on associated outside property.

Responsibilities continued...

Department Heads/ Directors/ Managers/ Supervisors:

Department Heads/ Directors/ Managers/ Supervisors are responsible for enforcing this policy without exception.

X Employees:

X Employees are expected to know and comply with this policy and to report any infractions of this policy.

Non Compliance with Policy

Non-compliance with this policy could lead to disciplinary action up to and including dismissal. X will be the lead enforcers of the X smoke-free policy. The enforcement protocols are as follows:

Staff

Non-staff

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Section IV

Appendices

- Smoking and the bottom line: Updating the costs of smoking in the workplace
- Smoking cessation in the workplace: Comparing the different approaches
- Websites: Tobacco information and cessation support
- Employee needs assessment: Smoking cessation in the workplace survey
- Checklist for assessing smoking cessation programs
- Information on tobacco control and workplace related issues
- Evaluation form

Smoking and the bottom line: Updating the costs of smoking in the workplace

The Conference Board updated its 1997 study on the costs to employers who employ smokers, and it found that the total costs have increased from \$2,565 per smoking employee in 1997 to \$3,396 in 2006. The cost of smoker absenteeism has increased from \$230 to \$323, and the cost of decreased productivity due to smoke breaks has gone from \$2,175 to \$3,053.

Table 1

The Annual Costs of Employing Smokers, as Calculated in 1997
(1995 \$ per employee)

Cost Factor	Cost in 1997	Cost in 2006
Increased absenteeism	230	323
Decreased productivity	2,175	3,053
Increased life insurance costs	75	0
Smoking facilities costs	85	20

Employee Absenteeism

Table 2

Calculating Additional Absenteeism Cost of Smoking Employees to Employers

$\text{COST Absent} = \text{DAYS LOST Smoker} \times \text{DAILY WAGE} \times (1 + \text{BENEFITS and TAXES}) = \mathbf{323}$	
COST Absent	Annual per-employee cost due to increased absenteeism (in dollars per employee)
DAYS Lost	Smoker Number of additional days in absenteeism taken by a smoking employee compared with a non-smoker
DAILY WAGE	Average daily wage (weekly wage of \$717.50, divided by five working days)
BENEFITS and TAXES	Payroll taxes and benefits paid by employer (supplementary labour income) expressed as a percentage of payroll

Employee Productivity

Table 3

Calculating Lost Productivity Cost of Smoking Employees to Employers

$\text{COST Prod} = \frac{\text{CIGS} \times \text{TIME}}{\text{Minutes}} \times \text{WAGE Average} \times (1 + \text{BENEFITS and TAXES}) \times \text{DAYS WORKED} = \mathbf{\$3,053}$	
COST Prod	Annual loss of productivity (in dollars per employee)
CIGS	Average number of cigarettes smoked per day at work during non-sanctioned break periods (assumption: two)
TIME	Time taken to travel to smoking area and consume cigarette (assumption: 20 minutes per break)
MINUTES	Number of minutes in an hour (60)
WAGE Average	Average hourly wage (weekly wage of \$717.50, divided by 40 hours)
BENEFITS and TAXES	Payroll taxes and benefits paid by employer (supplementary labour income) expressed as a percentage of payroll
DAYS WORKED	Number of days worked per year

Cleaning Time

Formula 2 (Cleaning Time)

$\text{ASHCLEAN} = \frac{(\text{CLEANTIME}/\text{MINUTES}) \times \text{WAGECLEAN} \times (1 + \text{BENEFITS and TAXES}) \times \text{WORKYEAR}}{\text{SMOKE-EMP}} = \mathbf{\$11.34}$	
ASHCLEAN	Cost of cleaning ashtrays in the workplace (dollars per employee)
CLEANTIME	Average amount of time taken to clean ashtrays (assumption: 20 minutes)
MINUTES	Number of minutes in an hour (60)
WAGECLEAN	Average hourly earnings for "administration and support, waste management and remediation services" (\$581.30 divided by 40 hours)
WORKYEAR	Number of weeks in a year (52)
BENEFITS and TAXES	Payroll taxes and benefits paid by employer (supplementary labour income) expressed as a percentage of payroll
SMOKE-EMP	Number of employees served by one ashtray (assumption: 25)
Total smoking facilities costs	ASHTRAY + ASHCLEAN = \$20

CONCLUSION

It is clear from this study that smoking does have an impact on the bottom line. Organizations seeking to remain competitive in today's global economy can see how addressing a key employee health issue can boost their organization's productivity. What is also apparent is that smoking is only one of a number of employee health issues that can increase employer absenteeism and productivity costs.

Smoking cessation in the workplace: Comparing the different approaches

As outlined in Section II: Smoking cessation in the workplace, there are three basic approaches for smoking cessation supports in the workplace and a variety of options. The chart below compares the various approaches by detailing the pros and cons associated with each approach. The gold standard for supporting smoking cessation in the workplace is to offer all three approaches and incorporate activities into a broader wellness initiative.

Approach	Pro	Con
Comprehensive	<ul style="list-style-type: none">• Offering programs and activities at the workplace• More accessible• More flexible (e.g., can be offered at various times to accommodate shift and other workers)• Sends a strong message of commitment and support from employer• Demonstrates employer's leadership• May provide additional motivation• Can be offered to spouses and family members• Easy to target hard-to-reach groups• Supports ex-smokers• Can provide follow-up and support• Can integrate cessation supports into existing workplace wellness initiatives• Can build on existing tobacco control policies• High costs, in terms of financial and human resources• Group programs may not suit all employees• Extensive training may be required• Does not allow for anonymity• May not accommodate different levels of addiction and readiness to quit• There may be more and broader expertise and resources in the community• Focussing on smokers in the workplace may stigmatize them and decrease success rates	
Facilitated	<ul style="list-style-type: none">• Working with outside agencies to deliver programs and activities off-site and providing self-help materials• Offers anonymity• Makes use of external expertise, which means not "re-inventing the wheel" and ensures a level of expertise that may not exist within a workplace• Employees can select the options that work best for them• Some communities have a variety of options to choose from and many resources (especially larger centres)• Sends a message of commitment and support from employer• Less accessible• May be high cost in terms of human resources at the outset• Less flexible	

- Less easy to tailor to specific workplaces
- There may be fees
- Finding acceptable options may be difficult

Education and Information

- Providing employees with information including self-help materials
- Low cost
- Better than no support at all if this is all that can be done
- All workplaces can take this approach
- Offers anonymity
- Good option for highly motivated smokers
- The quit rates are lower for self-help
- Education and information is not enough to change behaviour
- Lacks ongoing support
- Shows a lower level of support from employer
- Employees may not feel they are able to quit successfully on their own and this can be a barrier to action
- Follow-up is not possible

*Adapted from: Health Canada, Smoking Cessation in the Workplace:
A guide to helping your employees quit smoking*

Websites: Tobacco information and cessation support

Ministry of Health Promotion

Smoke-Free Ontario Strategy

HYPERLINK "www.mhp.gov.on.ca/english/default.asp" www.mhp.gov.on.ca/english/default.asp

Canadian Cancer Society of Ontario

One Step at a Time: Self-help booklets are available in various languages

416-488-5400 or 1-800-268-8874

HYPERLINK "<http://www.cancer.ca>" www.cancer.ca

Centre for Addiction and Mental Health

Information on effects of tobacco smoking and cessation clinics

HYPERLINK

"www.camh.net/About_Addiction_Mental_Health/Drug_and_Addiction_Information/tobacco_dy.html"

www.camh.net/About_Addiction_Mental_Health/Drug_and_Addiction_Information/tobacco_dy.html

Health Canada

Information on; smoking, effects on the body and quitting

(Includes "e-Quit" free supportive e-mails while you are quitting)

HYPERLINK "www.gosmokefree.ca" www.gosmokefree.ca

Smoking Cessation in the Workplace: A guide to helping your employees quit smoking

HYPERLINK "www.hc-sc.gc.ca/hl-vs/pubs/tobac-tabac/cessation-renoncement/index_e.html"

www.hc-sc.gc.ca/hl-vs/pubs/tobac-tabac/cessation-renoncement/index_e.html

Heart and Stroke Foundation of Ontario

Resources available in print and online on topics including: healthy living, quitting smoking and talking with your kids

1-888-473-4636 HYPERLINK "<http://www.heartandstroke.ca>" www.heartandstroke.ca

Lung Association

Quit strategies, facts about smoking, second-hand smoke, print resources, self help guide:

Get on Track 1-800-972-2636

HYPERLINK "lung.ca/protect-protegez/tobacco-tabagisme_e.php" lung.ca/protect-protegez/tobacco-tabagisme_e.php

Smoker's Helpline

Telephone and online counselling is available; cessation support and online discussion forums are also available

1-877-513-5333

HYPERLINK "www.smokershelpline.ca/" www.smokershelpline.ca/

Smoking and Pregnancy

Hospital for Sick Children- Mother Risk

For health care providers

Research- based information on smoking during pregnancy, breastfeeding and postnatal information

HYPERLINK "www.motherisk.org/prof/index.jsp" www.motherisk.org/prof/index.jsp

For consumers

Information on smoking during pregnancy, while breastfeeding and postnatal information for parents, community members

HYPERLINK "www.motherisk.org/women/index.jsp" www.motherisk.org/women/index.jsp

Centre for Addiction and Mental Health

Smoking and Pregnancy: sites for health care providers and parents, online support group Links to print resources

HYPERLINK "www.pregnets.org/" www.pregnets.org/

Lesbian, Gay, Bi-sexual, Transgender, Transvestite and Queer (LGBTQ) Communities

Bent on Quitting- a Toronto quit smoking program- 3 groups per year each running for 8 weeks; free self-help quit kits available

416 338-7600

HYPERLINK "www.toronto.ca/health/smokefree/bentonquitting.htm"

www.toronto.ca/health/smokefree/bentonquitting.htm

Appendix 4

Employee needs assessment: Smoking cessation in the workplace survey

Part A: About you

1. I am Male _____ Female _____
2. My age is _____
3. My hours of work are: _____
4. Which of the following best describes you? (Please check one)
 I am a non-smoker I am an ex-smoker
 I am a light smoker I am a heavy smoker

Part B: Non-smoking policies and supports in the workplace

5. Are you aware of the smoking policy in our workplace?
Yes _____ No _____
6. Do you know what quit smoking supports are available to employees at your workplace?
Yes _____ No _____

If yes, please list supports you are aware of:

7. Do you support a smoke-free environment including smoke-free grounds?
Yes _____ No _____

*If you are a non-smoker, please stop the survey here
Thank-you for completing this survey*

If you are a current smoker please go to question #8

Part C: About supporting people who want to stop smoking and who want to stay quit

8. Would you like to quit smoking?

Yes _____ No _____ Uncertain _____

If yes- how soon?

9. How many times in the past year have you quit smoking for at least 24 hours?

None _____ One _____ More than once _____

10. Have you used any quit smoking supports such as counselling, nicotine gum, other when you've tried to quit smoking in the past?

Yes _____ No _____

If yes, please describe the types of supports you have used such as; self-help materials, group cessation programs, quit-lines, doctor's advice, counselling from a pharmacist, use of nicotine gum, patch, prescription for Zyban, other.

9. Would you participate in smoking cessation assistance if it was offered through your workplace?

Yes _____ No _____ Not sure (please explain)

10. What types of support and activities would you use to help you stop smoking or to help you stay smoke-free? (Check all that apply)

- Group quit smoking program offered at work
- Group quit smoking program offered off site
- Brief, professional advice
- One-on-one counselling with a health professional
- Quit medications (nicotine patch, nicotine gum, Zyban, Champix)

- Self-help information (brochures, websites, etc)
- Telephone quit line
- Quit smoking contests and challenges
- Health fairs
- Quit smoking workshops with a health professional over the lunch break.
- 100 per cent smoke-free policy in the workplace including smoke-free grounds
- Peer support
- Other (please explain)

11. What times of the day would you be able to attend quit smoking supports and/or activities?
(Check all that apply)

- Lunch break
- Before work hours
- After work hours

12. What specific information on tobacco/ quitting smoking would you like to have?

13. What would stop you from participating in smoking cessation activities offered through the workplace? Please explain:

*Thank you for taking the time to complete this survey.
This information will assist us in planning cessation activities and supports.*

Appendix 5

Check list for assessing smoking cessation programs

If you are going to establish an in-house program or partner with an outside agency, there are some factors you may want to consider:

- Can the program be offered at times and in locations that are convenient for your employees?
- Will the program suit your employees' personalities and styles of learning?
- Do the program leaders recognize that not all smokers are at the same stage in the quitting process? Can they modify their approach accordingly?
- Has the program been evaluated and does it have a proven success rate based on a thorough three-and six-month follow-up?
- Is the program offered by or associated with a credible organization?
- Is there sufficient follow-up and support?

Consider asking the following questions about the program content and its leaders (the more "yes" answers the better). Does the program:

- Help the smoker deal with the physical addiction of smoking?
- Incorporate the use of quit medications?
- Help the smoker deal with the psychological addition of smoking?
- Help the smoker deal with the social nature of smoking?
- Prepare the smoker for a future without cigarettes?
- Reinforce the smoker's motivation to quit?
- Provide tips to control urges to smoke?
- Make use of the special support systems and other wellness activities in the workplace?
- Provide information about stress management, physical activity and nutrition?

Are the program leaders:

- Knowledgeable about behaviour change in general and smoking cessation in particular?
- Supportive and genuinely interested in helping people quit smoking?
- Check references. Call other organizations, ask about the program and speak with people who have participated in the program.

Source: Smoking Cessation in the Workplace: A guide to helping your employees quit smoking, Health Canada

Information on tobacco control and workplace issues

Canadian Center for Occupational Health and Safety

Tel.: 1-800-663-4284

Email: [HYPERLINK "mailto:clientservices@ccohs.ca" clientservices@ccohs.ca](mailto:clientservices@ccohs.ca)

Website: [HYPERLINK "http://www.ccohs.ca" www.ccohs.ca](http://www.ccohs.ca)

Canadian Labour Congress

Tel.: 613 521-3400

Email: [HYPERLINK "mailto:health&safety@clc.ctc.ca" health&safety@clc.ctc.ca](mailto:health&safety@clc.ctc.ca)

Website: [HYPERLINK "http://www.clc-ctc.ca" www.clc-ctc.ca](http://www.clc-ctc.ca)

Conference Board of Canada

Smoking and the Bottom Line: Updating the Costs of Smoking in the Workplace

Tel. 1-866-711-2262

Website: www.conferenceboard.ca

Health Canada Tobacco Control Program

Tel.: 613 957-8333

Website: www.gosmokefree.ca

National Clearinghouse on Tobacco and Health

Tel.: 613 567-3050 or 1-800-267-5234

Email: [HYPERLINK "mailto:info-services@cctc.ca" info-services@cctc.ca](mailto:info-services@cctc.ca)

Website: [HYPERLINK "http://www.ncth.ca/NCTHweb.nsf" www.ncth.ca/NCTHweb.nsf](http://www.ncth.ca/NCTHweb.nsf)

Non-Smokers Rights Association

Tel: 613 230-4211

Website: [HYPERLINK "http://www.sra-adnf.ca" www.sra-adnf.ca](http://www.sra-adnf.ca)

Ontario Tobacco Research Unit

Tel.: 416 595-6888

Email: [HYPERLINK "mailto:otru@camh.net" otru@camh.net](mailto:otru@camh.net)

Website: [HYPERLINK "http://www.camh.net/otru" www.camh.net/otru](http://www.camh.net/otru)

Physicians for a Smoke Free Canada

Tel: 613 233-4878

Website: [HYPERLINK "http://www.smoke-free.ca" www.smoke-free.ca](http://www.smoke-free.ca)

Program Training and Consultation Centre

Clearing the Air in Workplaces

Website: HYPERLINK "www.ptcc-cfc.on.ca/rds/rds-search-results.cfm?ResourceID=25" www.ptcc-cfc.on.ca/rds/rds-search-results.cfm?ResourceID=25

Registered Nurses' Association of Ontario (RNAO)

Tel: 416 599-1925

Website: HYPERLINK "<http://www.rnao.org>" www.rnao.org

A comprehensive guide to a smoke-free workplace evaluation form

Good business...better health: A comprehensive guide to a smoke-free workplace has been designed to provide workplaces with easy to use strategies to develop a comprehensive approach to cessation supports for staff and smoke-free grounds policies. The purpose of this evaluation is to obtain feedback concerning this guide. Your feedback is important to us and will help to ensure that future resources will meet your needs.

Please rate the following individual sections of the guide (1=not useful 5=very useful)

Section:	RATING				
	Not Useful				Very Useful
Section I: Introduction	1	2	3	4	5
Section II:					
A guide to smoking cessation in the workplace	1	2	3	4	5
Section III: Tobacco control policies	1	2	3	4	5
Section IV: Appendices	1	2	3	4	5

Please indicate your agreement with the following statements by circling your response (1=strongly Disagree, 5=strongly Agree)

STATEMENT	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The information is presented in an appealing format	1	2	3	4	5
The information provided is clear and easy to understand.	1	2	3	4	5
The smoking cessation approaches and options are easy to implement.	1	2	3	4	5
The steps to develop and implement smoke-free grounds policies are realistic for your workplace.	1	2	3	4	5

Did you use any section(s) of this guide? Yes No Plan to
 If yes please indicate which section(s) you used or plan to use and by when?

What would you like to see added to this guide?

Which group do you represent at your workplace?

- Management
- Occupational Health
- Health Promotion
- Health & Safety
- Human Resources
- Union Representative
- Employee Assistance Program

Do you have any other comments you wish to add?

Thank you for your feedback!

Please fax this evaluation form to:
York Region Health Services Department at 905 954-4002
Attention: Smoke-Free Ontario Team

