

Going Smokefree

A GUIDE FOR WORKPLACES











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Congratulations on taking the first step towards creating a smokefree workplace for your staff.

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In this resource you will find all the information you need to plan, discuss and implement the change to make your workplace a smokefree environment.

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WHY GO SMOKEFREE?

> Leading by example People take social cues from what they see. Smoking around workplaces sends the message that smoking is okay

WHY GO SMOKEFREE?

Smoking is the single leading cause of preventable death and disease in Australia.¹ Smoking kills two in three of all lifetime smokers²⁻⁵ and accounts for around 4,400 deaths in Victoria annually.⁶ Smoking costs the Victorian economy approximately \$3.7 billion each year in tangible costs and \$5.8 billion each year in intangible costs.⁷ Intangible costs include reduced workplace productivity due to absenteeism and "smoking breaks".

Vaping (the use of e-cigarettes) is considered – legally – to be the same as smoking in Victoria. This means that smokefree legislation includes vaping. Vaping involves the inhalation and exhalation of an aerosol, usually containing nicotine, in a manner that is similar to smoking. It is likely the measures that help people quit smoking, including the introduction of smokefree areas, will also help people quit vaping. Short-term health effects of vaping may include mouth and airway irritation, nausea, and chest pain and palpitations.⁸ There is also evidence that people who vape are more likely to start (or re-start) smoking.⁹

There are a number of good reasons for your workplace to go smokefree. Smokefree environments help people quit and stay quit, reduce the risk of harmful health effects from exposure, improve local amenity, and protect the environment.

HEALTH REASONS

Secondhand smoke exposure (or 'passive smoking') occurs when others breathe in the smoke from a cigarette or from other tobacco products, such as cigars, or the smoke breathed out by a person using a tobacco product. There is no safe level of exposure to secondhand smoke, which contains fine particles and chemicals.¹⁰ Scientific and medical evidence shows that long-term exposure to secondhand smoke causes diseases such as heart disease, stroke and lung cancer.¹⁰⁻¹³ Short-term exposure can trigger coughing and asthma attacks and feelings of nausea, and can create breathing difficulties for people with lung conditions.^{10,11}

The aerosol breathed out by someone vaping also includes fine particles and chemicals.¹⁴ Short-term exposure to secondhand aerosol can exacerbate asthma.^{15,16}

SMOKING, VAPING AND THE LAW

The *Tobacco Act 1987* (Vic) prohibits smoking and vaping in all enclosed workplaces. 'Workplace' means any premises or area where one or more employees or selfemployed persons (or both) work, whether or not they receive payment for that work.¹⁷

Victoria's current laws

Victoria has extensive smokefree laws that prohibit smoking and vaping in the following settings:

- in an enclosed workplace (with limited exceptions)
- at patrolled beaches
- at outdoor areas of public swimming pools
- at and within 10 metres of outdoor children's playground equipment and outdoor skate-parks
- at outdoor sporting venues during organised underage sporting events and training sessions
- in cars carrying children
- at underage functions



WHY GO SMOKEFREE?

> Smoking and the law Smoking bans will help workplaces comply with their obligations under OH&S and common law

- at train stations (including platforms)
- on raised tram stops and under tram and bus stop shelters
- on public transport
- on school grounds
- within prisons and anywhere on prison grounds
- on the grounds of, and at and within four metres of an entrance to, all Victorian childcare centres, kindergartens or preschools, and primary and secondary schools (including public and private schools) at and within four metres of children's indoor play centres and 'Victorian Public Premises' (which includes buildings such as Parliament, courts, public service bodies and (as noted above) various hospitals and health services)
- all outdoor dining areas where food (other than pre-packaged food or uncut fruit) is provided on a commercial basis
- at certain food fairs and organised events.

Workplace exemptions to the Tobacco Act 1987

In Victoria, smoking and vaping is still permitted in the following areas:

- residential premises (except parts of residential premises used for business while non-residents are present)
- outdoor drinking areas (unless the outdoor drinking area has a roof and walls in place, and the total area of the wall surfaces exceeds 75% of the total notional wall area)
- a vehicle (other than when a person under 18 is present or in taxi cabs)
- a place of business occupied by a sole operator that is not for the use of members of the public

- personal sleeping or living areas in hotels/motels/ hostels and residential care facilities
- declared areas in approved mental health services (none declared at present)
- detention centres established for the purposes of the *Migration Act 1958* (Commonwealth).

Other legal obligations

As discussed above, exposure to secondhand smoke is a known health hazard and there is no safe level of exposure. Because of this, general legal duties around health and safety may in practice call for smokefree workplaces. For example:

- Under the Occupational Health and Safety Act 2004 (Victoria)¹⁸ employers have a duty to provide a safe and non-hazardous working environment for employees.
- Employers owe employees a duty of care under the common law: they must take reasonable care to protect employees' health and safety in the workplace.
- Employees are entitled to no-fault workers' compensation if they suffer injury arising out of or in the course of employment.
- The *Disability Discrimination Act 1992*¹⁹ and other legislation protect the rights of people with disabilities and susceptibilities (including, for example, people with asthma).

For more information on these laws, see the Victorian Department of Health website on Tobacco Reforms at www2.health.vic.gov.au/public-health/tobacco-reform



WHY GO SMOKEFREE?

 > Community support
 72% of Victorians disapprove of smoking outside the entrances to buildings²⁰

BUSINESS BENEFITS

There are potential business benefits in going smokefree. In 2015-16, the workforce costs of smoking to the Victorian economy were estimated to be approximately \$1.68 billion per year, including costs associated with reduction in workforce (\$693.4 million), absenteeism (\$355.1 million) and smoking during work breaks (\$632 million).⁷ Other benefits might include reduced risk of litigation over exposure to secondhand smoke.

Staff amenity might also be a benefit for recruitment and retention, as nine in ten Victorians do not smoke or vape²¹ and will therefore appreciate a smokefree environment at work.

Finally, discarded cigarette butts and e-cigarettes constitute fire risks. E-cigarettes have been banned from some workplaces after devices have caught fire, or even exploded, whilst being charged or stored inappropriately.

COMMUNITY SUPPORT

With nine in ten Victorian adults not smoking or vaping²¹ even very brief exposure to secondhand smoke or aerosol is not culturally accepted or tolerated in Victoria.

Providing totally smokefree environments is considered to increase the 'amenity', that is the pleasantness or attractiveness, of a place.

National surveys show the majority of the public strongly support measures that protect people in enclosed workplaces from smoking²²⁻²⁴ or vaping.²⁵ Community support for smokefree measures is also high for outdoor areas where crowds gather, like patrolled beaches or pedestrian malls.

ENVIRONMENTAL REASONS

Cigarette butts negatively impact outdoor areas. Outdoor smoking bans may help to reduce cigarette butt litter and provide cost savings through reduced clean up and refurbishment costs.

IMPACT ON PEOPLE WHO SMOKE OR VAPE

Having a smokefree policy does not mean that people who smoke or vape cannot do so. A smokefree policy does not ban the use of cigarettes or e-cigarettes. It does, however, limit their use in certain areas to protect the rights of others to not be forced to inhale cigarette smoke or e-cigarette aerosol while at work.

When smokefree policies are introduced into workplaces, people who smoke generally reduce how many cigarettes they smoke each day and some will quit altogether. Smokefree workplaces help those who are trying to quit smoking or trying to stay quit.^{26,27} Smokefree areas remove smoking cues (the sight of someone smoking and the smell of tobacco smoke), which trigger nicotine cravings.²⁸

The available evidence suggests that vapefree areas will similarly help people who are trying to quit vaping by removing the cues (the sight and, possibly, smells) that trigger nicotine cravings.

If someone is using an e-cigarette that has been prescribed by a medical professional to help them quit smoking, it might be necessary to consider – if there are instructions from the medical professional on the required frequency of use – how the staff member can be supported to use their e-cigarette within the bounds of the policy.

Why go smokefree - fast facts

- Smoking is the single leading cause of preventable disease and death, killing around 4,400 Victorians every year.
- Smokefree areas support people who are trying to quit smoking or vaping and those who are trying to stay quit.
- Smokefree environments reduce any health harms resulting from exposure to secondhand smoke and e-cigarette aerosol, and increase amenity for all staff and visitors.



Take your time and do it right
 Get support of staff and management.
 It is important to consider the views of those
 who smoke and/or vape and those who do not

HOW TO GO SMOKEFREE

To successfully implement a totally smokefree policy, it is important that your workplace:

- plans and consults widely (include management, stakeholders and staff)
- develops the smokefree policy
- prepares the environment
- offers quitting information (for both smoking and vaping) to employees
- enforces the policy
- reviews the policy.

The following are some recommendations to assist you with the introduction of the smokefree policy.

1. ASSESS THE CURRENT SITUATION

First, conduct a staff survey to help assess the number of people who smoke and/or vape, general support for going smokefree and any possible resistance to this change.

If a smokefree policy already exists, a staff survey can assist in reviewing how effective the policy has been, whether it has been enforced and what improvements can be made.

You may find that mostly people who smoke and/ or vape complete the survey and express opposition. This should not act as a deterrent to implementing a smokefree policy; rather it can be used to guide how to communicate the reasons for going smokefree and how to best implement the policy.

Refer to Appendix A: Sample employee survey

2. ORGANISATIONAL COMMITMENT

Thorough consultation with management, stakeholders and staff will maximise support for the policy.

Take advantage of staff representative groups, staff meetings, occupational health and safety committees and any other workplace forums for this consultation.

Involve relevant groups in the development and implementation of the policy such as human resource departments, health promotion officers, consumer representatives, occupational health and safety committees and unions. If your workplace has security staff that will be expected to help enforce this policy, make sure they also have representation in the development of the policy.

A working group should be developed with representatives from all staff levels across the organisation to encourage participation in the development and roll-out of the smokefree policy. Many workplaces also ensure there are smokers represented as part of the development. This helps smokers feel that the policy is not designed to attack them as smokers, but rather, to support a smokefree environment.

Consult with external agencies and individuals

Consider other organisations that may be impacted by your workplace's decision to go smokefree. If there are other workplaces in the region, you may wish to consult with them, so that you can support and work collaboratively.

You may also wish to consult and meet with neighbours and/or local council staff so that they are aware of your plans.

Consider registering with Victoria's health and wellbeing initiative, the <u>Achievement Program</u>, which is a free program that supports Victorian workplaces, schools and early childhood services to create healthy places for working, learning and living.



> Spread the word!

Tell your staff about the smokefree policy well in advance to allow them time to accept the idea

3. DEVELOP THE SMOKEFREE POLICY

Your smokefree policy should communicate:

- the purpose of the policy
- the terms of the policy
- when the policy is to be introduced
- the location of smoking and non-smoking areas
- who the policy affects (all workplace staff, general public, visitors and contractors)
- the workplace's position on smoking/vaping breaks (noting that a medical practitioner may have prescribed an e-cigarette as a support for quitting smoking)
- the availability of quitting information for employees who smoke or vape
- who is responsible for enforcing the policy
- enforcement and disciplinary procedures for breaches of the policy.

The purpose of the policy

Clearly state the rationale for the smokefree policy. The emphasis should be on protecting people from harm rather than restricting behaviour.

4. COMMUNICATE THE POLICY

Communicate the reasons for, and the terms of, the smokefree policy. Ensure that staff and other relevant groups are aware of the new policy or changes to the existing policy. This will give people time to get used to the change and will help to avoid possible resistance.

Staff need to understand why the new/revised policy is being implemented and should be informed in advance of the details of the policy.

Many workplaces choose to create an official 'launch date' for the policy. To promote awareness of the policy and launch date you could:

- promote it through internal staff meetings, newsletters, posters, brochures, staff pay slips and intranet postings
- hold a series of countdown events to the launch this might be in the form of a celebratory morning/ afternoon tea, information sessions for staff, or designating an area of your organisation on the launch day which is dedicated to providing information for people who smoke or vape
- promote it through local community newspapers and media releases
- distribute a 'frequently asked questions' guide
- display smokefree signs
- include a copy of the policy in employee orientation handbooks
- promote the services that are available to support people who smoke or vape to quit
- develop a separate smokefree page on your workplace website – this could contain the smokefree policy, frequently asked questions, information for quitting smoking and vaping and promotion of the policy launch
- display promotional material in your workplace reception area (may include using TV screens, posters, display of resources, etc.)
- state in job advertisements for new staff that the workplace has a smokefree policy
- indicate on visitor badges that the workplace is smokefree.



> Get organised and be prepared Educate your staff on what it means to be smokefree

5. INTRODUCE THE POLICY

Develop a timeline. An implementation plan should be in place six to 12 months before the start of a smokefree policy. Announce the date of implementation as soon as possible. This generates ongoing interest, as well as prepares staff for the changes that will take place.

6. LOCATION OF SMOKING AND NON-SMOKING AREAS

There is no legal obligation to provide designated smoking areas. However, if it is decided that there will be designated smoking areas, they need to be:

- outdoors
- well sign-posted
- positioned so that smoke or aerosol will not drift into smokefree areas or into building air conditioning intakes
- located away from through traffic and where people are required to work (e.g. entrances)
- provided with butt bins to reduce litter and damage to property by discarded cigarette butts.

Update any existing smokefree policy to ensure the boundary of the smokefree area is clear. Many workplaces are now becoming totally smokefree with the boundary of the workplace site being the smokefree boundary with *no* designated smoking areas on site.

7. WHO WILL BE AFFECTED BY THE SMOKEFREE POLICY

Ensure that the policy clearly states that the smokefree bans apply to all staff (including agency and contracted), visitors and the general public. Clear and direct signage will help promote your smokefree message to everyone who enters your workplace.

8. SMOKING BREAKS

Some smokefree workplace policies stipulate that staff members are allowed to smoke or vape only during their usual designated breaks, off the workplace grounds. If this is the case, consider that people who have been prescribed an e-cigarette to quit smoking might have instructions from a medical professional on the required frequency of use.

9. PREPARE THE ENVIRONMENT

Modify the physical environment to support the smokefree policy.

Signage

To ensure that people are aware of the smokefree policy, place plenty of clear signs in strategic positions. Ensure signage is clear and prominent in areas that were once popular smoking areas before the policy. This will help enforce the smokefree policy.

The internationally recognised symbol 'No Smoking' has been updated to include a 'No Vaping' symbol. These signs can be obtained from the Victorian Department of Health see: <u>www2.health.vic.gov.au/</u> <u>public-health/tobacco-reform/resources-and-fact-sheets-</u> tobacco-reform

Signs or posters in any designated smoking areas will also be required.



> Offer support to those in need
 Some staff may need extra support.
 Quit offers services and resources
 that can help

Redevelopment of outdoor areas

Outdoor spaces which may have been smoking gathering areas can be redeveloped to make them more appealing for all staff and visitors. Remove all butt bins from the site. People who smoke will be less likely to continue to smoke in these areas if it looks different from how it was as a smoking gathering space.

All butt bins should be moved away from smokefree areas. If your service is going totally smokefree, ensure that butt bins are only installed beyond the smokefree boundary, and are away from pedestrian traffic. Any existing butt bins within the boundary should be removed.

Butt bins and other equipment can be purchased from several retailers – see <u>Appendix D: Useful links/</u><u>References</u>

10. SUPPORT EMPLOYEES TO QUIT SMOKING AND VAPING

Implementation of a totally smokefree policy may be just the motivation that staff need to quit. Therefore it is important that staff are informed of the availability of support to quit smoking or vaping. (Also make sure that tobacco products, including e-cigarettes, are not sold or available within the organisation.)

You can support staff who want to quit smoking or vaping by:

- signing up your workplace to the Achievement Program
- providing a Quit because you can booklet (a free booklet containing information on how to quit - go to the resource order form on the Quit website to obtain these)
- displaying posters about the benefits of quitting smoking (go to the resource order form on the Quit website to obtain these)
- encouraging them to visit their GP or pharmacist for advice around stop smoking medications.

You can encourage staff who want to quit smoking or vaping to call the Quitline on 137848.

You can also encourage staff who want to quit smoking to:

- visit the Quit website <u>www.quit.org.au</u>
- get support from QuitTxt or QuitCoach.

Further information can be found at the Quit Victoria website: <u>www.quit.org.au</u>



> Enforcement should be supportive Make enforcement the responsibility of all staff so the policy becomes part of the organisational culture

11. ENFORCE THE POLICY

Compliance is a critical component of a smokefree policy. Compliance needs to be established and consistently maintained from the first day the policy is implemented.

The move to a smokefree workplace should be regarded as a positive one based on its health promoting benefits. Enforcement should be supportive rather than punitive.

Your policy should detail who is responsible for making sure the smokefree policy is enforced and include clear statements of the consequences if a staff member, visitor, or the general public do not comply with the policy.

Many workplaces have found that making enforcement the responsibility of all staff, rather than just a select few, means that the policy becomes part of the organisational culture quickly. If security is involved on site, provide training and support to these staff so that they are well briefed on the new policy and understand their responsibility in relation to enforcement of the policy.

12. ADDRESSING NON-COMPLIANCE WITH VISITORS

Sometimes people will feel uncomfortable approaching others who are smoking or vaping in an area where it is not permitted. One way to assist staff and security to feel comfortable about approaching people who breach the smokefree policy on site is to think beforehand about what language to use and to develop a basic 'script'. For example, encourage staff and security to refer to the smokefree signage when they approach the person smoking or vaping with a positive statement like: "Did you know we [workplace] are now smokefree?". It may be useful for staff to practice this in a role play to help them become more comfortable and confident in approaching people who are breaching the policy.

It should also be noted in the policy how the staff member should respond (e.g. remove themselves from the situation and report the incident to security) if a person becomes verbally or physically aggressive after being asked to smoke or vape off-site or in the designated smoking area.



> Continually review the policy Regularly check in with staff about how the smokefree policy is going and address any issues as they arise

13. ADDRESSING POLICY NON-COMPLIANCE WITH STAFF MEMBERS

It's important to understand that employees who are repeatedly breaching the workplace's smokefree policy may be dealing with a powerful addiction. Other staff members who smoke or vape and are complying may have used strategies to manage their smoking or vaping while at work.

The first response to non-compliance among staff should be counselling and support. The following tips may help:

- Ensure the staff member is aware of the smokefree policy and reiterate the reasons for its existence.
- Emphasise that you do not expect the employee to quit, only that they need to comply with the policy by not smoking or vaping on site.
- If an employee indicates that they need help to manage their smoking or vaping at work, encourage them to use any services that are available at the workplace to support them to quit. The employee can also contact the Quitline on 13 7848.
- Reinforce that all employees are required to follow the smokefree policy.

If the employee continues to breach the smokefree policy, consider drawing upon disciplinary procedures that exist for other non-compliance situations.

Other considerations

If employees, visitors or the general public are repeatedly smoking or vaping in specific areas on site, target these areas with extra smokefree signage, clean up, and regularly check these areas.

14. REVIEW THE POLICY

Set dates to review your smokefree policy. This is very important when the policy is first introduced. It is a good idea to review the policy six months after it has been introduced and then on an annual basis. Seek feedback from management, staff and visitors on how the policy can be changed to make it more effective. Ask the following questions:

- Are people following the new policy?
- Are the no-smoking signs effective?
- Is the non-compliance response strategy working?
- How can the policy be changed to make it more effective?



APPENDIX A: SAMPLE EMPLOYEE SURVEY

[insert workplace name] is considering the best way to introduce a totally smokefree policy that is mindful of the needs of both smokers and non-smokers. To help us to develop a fair policy, please take a few minutes to complete this survey and return it to *[contact person or location]*. Your response is completely confidential and you do not need to give your name or any other details on this form.

4. If you smoke or vape, would a smokefree workplace policy:

Please comment:

be introduced?

1 month

6 months

Other:

 Help you cut
 Create difficulties

 down?
 for you?

 Encourage you to quit?
 Not affect you at all?

3 months

more time

- please specify:

1. Do you smoke or vape?

Yes No
Yes No

2. Are you bothered or affected by colleagues or visitors smoking or vaping at your workplace?

Yes No

aerosol?

If 'Yes', please tell us how you are bothered or affected by secondhand smoke or aerosol.

Where at work are you troubled by secondhand smoke/

6. Please make any further comments

5. When should a smokefree policy

3. Which places do you think should be made smokefree? Please tick as many as you like.

 Car parks
 Company vehicles

 Outdoor covered areas
 Within 4 metres of building entrances

 Outdoor dining areas
 Entire site
 O

APPENDIX A: SAMPLE EMPLOYEE SURVEY



APPENDIX B: SAMPLE SMOKEFREE POLICY

Rationale

[Name of workplace] recognises that exposure to secondhand tobacco smoke and aerosol from e-cigarettes can be irritating and harmful to health, and that people who do not smoke or vape have the right to a workplace that is free from secondhand smoke and aerosol. Even in outdoor areas where people tend to gather, secondhand smoke or aerosol might present a health risk to some people.

There is also evidence to suggest that smokefree areas – areas in which people are not permitted to use any tobacco product, including e-cigarettes – support people to quit smoking and/or vaping.

Legislation and the legal duty of care also provide clear reasons to have a smokefree workplace. Under common law, *[name of workplace]* has a legal duty to ensure that employees and visitors are not exposed to potentially harmful situations. *[If your organisation employs one or more persons:]* Occupational health and safety legislation requires employers in charge of workplaces to keep them safe and without risk to the health of any person.

[Name of workplace] also recognises that outdoor smokefree areas help to reduce cigarette butt litter and provide a substantial cost saving through reduced cleanup costs and reduced fire risk.

Accordingly, the following policy has been developed by *[name of workplace]* to [make the workplace smokefree / introduce smokefree areas].

Timing

This policy is effective from [start date for the policy].

Who is affected by the policy

This policy applies to all employees, visitors and contracted services of *[name of workplace]* while on company premises.

Smokefree areas

[for workplaces going totally smokefree]

[Name of workplace] requires the entire area of the [facility] to be smokefree. This includes:

- all indoor areas (Victorian legislation states that enclosed workplaces must be smokefree)
- all outdoor areas (both uncovered and covered)
- car parks
- in company vehicles
- in vehicles that are within the boundary of the workplace.

[where the workplace has authority to put up signs]

The totally smokefree status of our workplace will be clearly signed at the entrance to, and within the workplace.

[for workplaces going partially smokefree]

[Name of workplace] requires the following areas of the [facility] to be smokefree:

- all indoor areas (Victorian legislation states that enclosed workplaces must be smokefree)
- all covered areas
- outdoor dining areas (both uncovered and covered)
- within 4 metres of building entrances.

Optional: Outdoor areas of this site will be smokefree except for the following designated area: *[name and location of area]*

Smokefree areas will be clearly signed and promoted in *[name of workplace]* materials.

Position on smoking breaks

[suggested position]

Smoking and vaping are only allowed during designated breaks and in areas in which smoking and vaping are permitted. Refer to 'compliance with the policy' for managing breaches of this policy.



APPENDIX B: SAMPLE SMOKEFREE POLICY

Supporting staff members who smoke or vape

To help people who smoke or vape who wish to quit or reduce their smoking, *[name of workplace]* will provide support to help them adjust to the changes. This includes: *[list supports provided. For example:]*

- promoting the Quitline
- making health information available.

Compliance with the policy (for staff)

A clear statement is required on what the consequences are if a staff member is non-compliant with the policy. For example:

This smokefree policy is an integral part of our existing workplace health and safety policies. Complying with this policy is a condition of employment at [workplace].

Employees are reminded that they are obliged, under the Occupational Health and Safety Act 2004 (Vic), to protect the health of their fellow workers. The responsibility for enforcing the policy rests with all managers, supervisors and staff.

Any breach of this policy will lead to the normal disciplinary procedures being applied [describe company's disciplinary procedures].

Any worker who has a grievance relating to this policy should speak to the Health and Safety Officer or appropriate Representative.

Employees cannot be disciplined for smoking away from the workplace, in their own time.

Compliance with the policy (for visitors and others)

[To be amended as required to follow usual practices for policy breachers]

The following five-step non-compliance strategy will be followed if anyone breaches *[name of workplace]*'s smokefree policy:

- 1. Assume that the person is unaware of the smokefree policy.
- 2. A staff member or security staff will approach the person breaching the policy and politely ask them to refrain from smoking or vaping [and direct them to a designated smoking area if one has been established] and remind them about the smokefree policy.
- 3. If the offence continues, the offending person must be made aware that if they do not stop smoking or vaping to comply with the policy, they will be required to leave the facility. The most senior staff member, occupational health and safety officer or security staff member should verbally warn them, and if possible, hand over a formally written letter. The pre-written letter will be pre-signed by the management committee and kept on the premises so that copies are readily available. It will outline *[name of workplace]*'s smokefree policy and state that if the person continues to breach the policy then s/he will be asked to leave.
- 4. If the offending continues, then the person will be escorted off the premises by staff and/or a security officer.
- 5. Under no circumstance should [name of workplace]'s smokefree policy be breached.

Policy review

This policy will be reviewed six months after its introduction and then on an annual basis thereafter. This will ensure that the policy remains current and practical.



APPENDIX C: QUIT SMOKING SUPPORT AVAILABLE

Call the Quitline on 13 7848

What is the Quitline?

For more than 30 years Quitline has been providing a best practice telephone multi-session behavioural counselling service to help people stop smoking. More recently, Quitline has also been providing counselling to help people stop vaping.

Multi-session behavioural counselling through the Quitline, either alone or in combination with pharmacotherapy, increases the likelihood of a quit attempt being successful.²⁹ The Victorian Quitline has been evaluated for its efficacy on several occasions, with consistent results. In the most recent evaluation, of the total sample of Quitline clients recruited to the evaluation, 36.9% reported being quit when interviewed six months after their initial counselling call.³⁰

Quitline can also be used by friends and family who want to encourage and support someone trying to quit.

Quitline is available from 8:00 am to 8:00 pm Monday to Friday for the cost of the call. A call-back can be requested by texting 13 7848 or via the online form at www.quit.org.au.

What does Quitline do?

Quitline counsellors have received intensive training in smoking and vaping cessation theory and practice and have comprehensive telephone counselling training and experience. They will help build motivation to make and sustain a quit attempt, help workshop simple and effective strategies to avoid cues to smoke or vape and to beat cravings.

Quitline counsellors understand that quitting is a process and that many people will have several goes at quitting before they quit for good. Quitline counsellors are trained to listen carefully to help meet the individual needs of each caller. Quitline is an inclusive, non-judgmental service that aims to empower people to achieve their goals. Calls to the Quitline are confidential. Callers do not have to give their name if they don't want to.

What about staff with special needs?

Quitline services cater for:

- people with mental illness
- pregnant women
- young people
- cardiac patients
- people with intellectual disabilities
- people from multicultural backgrounds.

Callers can also ask to speak to an Aboriginal Quitline counsellor.

For callers who would prefer Quitline support in a language other than English, Quitline uses the Translation Information Service. Ask about this at the first call.

What do people say about using Quitline?

In the latest evaluation, 92% of callers said they were satisfied with the service and that they would recommend Quitline to friends and family members.³⁰ Most callers felt that Quitline counsellors:

- listened and understood them
- supported and encouraged them, and
- had provided relevant strategies and information to help them quit.



APPENDIX D: USEFUL LINKS/ REFERENCES

USEFULLINKS

Quit Victoria

www.quit.org.au

Quit Victoria resource order form

www.quit.org.au/resource-centre/resources/

Quit Victoria resources for communities and places

https://www.quit.org.au/resources/resourcescommunities-and-places/

Victorian Department of Health

https://www2.health.vic.gov.au/

https://www2.health.vic.gov.au/public-health/tobaccoreform/smoke-free-areas/workplaces-smoke-free

https://www2.health.vic.gov.au/public-health/tobaccoreform/resources-and-fact-sheets-tobacco-reform

https://www2.health.vic.gov.au/public-health

Butt bin suppliers

https://www.melbourne.vic.gov.au/business/wasterecycling/pages/cigarette-butt-disposal.aspx

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www.tobaccoinaustralia.org.au

REFERENCES

- Australian Institute of Health and Welfare. Australia's health 2016. Canberra: AIHW; 2016. Report No.: Australia's health series no. 15. Cat. no. AUS 199. Available from: <u>http://www.aihw.gov.au/ publication-detail/?id=60129555544</u>
- Banks E, Joshy G, Weber MF, Liu B, Grenfell R, Egger S, et al. Tobacco smoking and all-cause mortality in a large Australian cohort study: findings from a mature epidemic with current low smoking prevalence. BMC Medicine 2015;13:38. Available from: <u>http://www.biomedcentral.com/content/pdf/ s12916-015-0281-z.pdf</u>
- 3. Pirie K, Peto R, Reeves GK, Green J, Beral V. The 21st century hazards of smoking and benefits of stopping: a prospective study of one million women in the UK. *Lancet* 2013;381(9861):133–41. Available from: <u>http://www.thelancet.com/journals/lancet/article/</u><u>PIIS0140-6736(12)61720-6/abstract</u>
- Doll R, Peto R, Boreham J, and Sutherland I. Mortality in relation to smoking: 50 years' observations on male British doctors. BMJ. 2004;328(7455):1519. Available from: <u>http://bmj.bmjjournals.com/ cgi/reprint/328/7455/1519</u>
- Jha P, Ramasundarahettige C, Landsman V, Rostron B, Thun M, Anderson RN, et al. 21st-century hazards of smoking and benefits of cessation in the United States. *New England Journal of Medicine* 2013;368(4):341–50. Available from: <u>http://www.nejm.org/doi/</u> <u>full/10.1056/NEJMsa1211128</u>
- Department of Health and Human Services. The contribution of risk factors to disease burden in Victoria, 2011: findings from the 2011 Australian Burden of Disease Study. Melbourne: State Government of Victoria, 2018.
- Creating Preferred Futures. An analysis of the social costs of smoking in Victoria 2015–16. Hobart, Tasmania, 2018.
- Cantrell FL. Adverse effects of e-cigarette exposures. Journal of Community Health, 2014; 39(3):614–6. Available from: <u>http://www.ncbi.nlm.nih.gov/pubmed/24338077</u>
- Baenziger ON, Ford L, Yazidjoglou A, Joshy G, and Banks E. E-cigarette use and combustible tobacco cigarette smoking uptake among non-smokers, including relapse in former smokers: umbrella review, systematic review and meta-analysis. BMJ Open, 2021; 11(3):e045603. Available from: <u>https://www.ncbi.nlm.nih.gov/ pubmed/33785493</u>
- 10. U.S. Department of Health and Human Services. The health consequences of involuntary exposure to tobacco smoke: a report of the Surgeon General. [Atlanta, Ga.]: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2006 [cited. Available from: <u>http://www.surgeongeneral.gov/library/secondhandsmoke/ report/</u>



APPENDIX D: USEFUL LINKS/REFERENCES

- 11. U.S. Dept. of Health and Human Services. The health consequences of smoking – 50 years of progress: a report of the Surgeon General. Rockville, MD: U.S. Dept. of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2014. Available at: <u>http://www.</u> surgeongeneral.gov/library/reports/50-years-of-progress/index.html
- 12. IARC Working Group on the Evaluation of Carcinogenic Risks to Humans. A review of human carcinogens. Part E: Personal habits and indoor combustions. IARC monographs on the evaluation of carcinogenic risks to humans. Vol. 100 E. Lyons, France: International Agency for Research on Cancer; 2012. Available at: http://monographs.iarc.fr/ENG/Monographs/vol100E/index.php
- Office of Environmental Health Hazard Assessment and California Air Resources Board. Health effects of exposure to environmental tobacco smoke: Final Report, approved at the Panel's June 24, 2005 meeting. Sacramento: Office of Environmental Health Hazard Assessment, 2005. September 01, 2005. Available from: <u>https:// oehha.ca.gov/air/report/health-effects-exposure-environmentaltobacco-smoke-final-report</u>
- Melstrom P, Koszowski B, Thanner MH, Hoh E, King B, Bunnell R, McAfee T. Measuring PM2.5, Ultrafine Particles, Nicotine Air and Wipe Samples Following the Use of Electronic Cigarettes. Nicotine & Tobacco Research 2017; 19(9):1055–1061. Available at <u>https:// doi.org/10.1093/ntr/ntx058D</u>
- Bayly JE, Bernat D, Porter L, Choi K. Secondhand Exposure to Aerosols From Electronic Nicotine Delivery Systems and Asthma Exacerbations Among Youth With Asthma. Chest 2019 Jan;155(1):88-93. doi: 10.1016/j.chest.2018.10.005.
- Alnajem A, Redha A, Alroumi D, Alshammasi A, Ali M, Alhussaini M, et al. Use of electronic cigarettes and secondhand exposure to their aerosols are associated with asthma symptoms among adolescents: a cross-sectional study. Respiratory Research 2000; 21(300). Available at <u>https://doi.org/10.1186/s12931-020-01569-9</u>
- 17. Tobacco Act 1987 (Vic).s. 5A. Available from: <u>http://www.austlii.</u> <u>edu.au/au/legis/vic/consol_act/ta198773/s5a.html</u>
- 18. Occupational Healthy and Safety Act, (2004). Available from: http://www.legislation.vic.gov.au/Domino/Web_Notes/LDMS/ PubStatbook.nsf/f932b66241ecf1b7ca256e92000e23be/750E0D9 E0B2B387FCA256F71001FA7BE/\$FILE/04-107A.pdf
- 19. Disability Discrimination Act, (1992). Available from: <u>http://www.</u> comlaw.gov.au/Search/DISABILITY%20DISCRIMINATION%20 ACT%201992
- Baker J, and Hayes L. Attitudes towards smoking at outdoor areas: findings from the Victorian Smoking and Health Surveys (unpublished research report). Melbourne, Australia: Centre for Behavioural Research in Cancer, Cancer Council Victoria, 2012.
- Australian Institute of Health and Welfare. Data tables: National Drug Strategy Household Survey 2019 - s. State fact sheet supplementary tables. Cat. no. PHE 270 Canberra: AIHW, 2020.

Available from: <u>https://www.aihw.gov.au/reports/illicit-use-of-drugs/</u> national-drug-strategy-household-survey-2019/data

- Australian Institute of Health and Welfare. 2007 National Drug Strategy Household Survey: detailed findings. Canberra: AIHW, 2008. Available from: <u>http://www.aihw.gov.au/publicationdetail/?id=6442468195</u>
- 23. Australian Institute of Health and Welfare. 2004 National Drug Strategy Household Survey: detailed findings. Drug statistics series no 16, AIHW cat. no. PHE 66. Canberra: AIHW, 2005. Available from: <u>http://www.aihw.gov.au/publications/phe/ndshsdf04/</u> <u>ndshsdf04.pdf</u>
- Australian Institute of Health and Welfare. 2001 National Drug Strategy Household Survey: detailed findings. Drug statistics series no 11, AIHW cat. no. PHE 41. Canberra: AIHW, 2002. Available from: <u>http://www.aihw.gov.au/publications/index.cfm/title/8227</u>
- 25. Ilchenko E, Tabbakh T, Mitsopoulos E, Durkin S, Wakefield M. Perceptions of and support for policies to regulate e-cigarettes among Australian adults. Centre for Behavioural Research in Cancer, Cancer Council Victoria: Melbourne, Australia, August 2022. Available from: <u>https://www.cancervic.org.au/downloads/ cbrc/R22_EI_Perceptions of and support for policies to regulate e-cigarettes among Australian adults.pdf</u>
- 26. IARC Working Group on the Evaluation of the Effectiveness of Smoke-free Policies. Evaluating the effectiveness of smoke-free policies. Lyon, France: International Agency for Research on Cancer; 2009. Available from: <u>http://www.iarc.fr/en/publications/ pdfs-online/prev/handbook13/index.php</u>
- Frazer K, McHugh J, Callinan JE, Kelleher C. Impact of institutional smoking bans on reducing harms and secondhand smoke exposure. The Cochrane Database of Systematic Reviews 2016(5):CD011856. Available at: <u>http://onlinelibrary.wiley.com/ doi/10.1002/14651858.CD011856.pub2/full</u>
- O'Connell KA, Shiffman S, Decarlo LT. Does extinction of responses to cigarette cues occur during smoking cessation? *Addiction* 2011;106(2):410–7.
- U.S. Department of Health and Human Services, (2020). Smoking cessation. A report of the Surgeon General – Executive Summary. Atlanta, GA: Author. Available at https://www.cdc.gov/tobacco/ data_statistics/sgr/2020-smoking-cessation/index.html
- 30. Railton R. (2014). 2013-2014 Evaluation of the Victorian Quitline. Prepared for Quit Victoria, Cancer Council Victoria.