

## Smoke-Free Campus Policy Implementation Committee Minutes from June 27th, 2012

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**Present:** Jenny Kate Luster, Missy Downey, Bob Brown, Maurice Eftink, Michael Harmon, Ray Hawkins, T. Davis, Ryan Whittington, Amanda Walker, Erin Garrett, Jennifer Farish, Camp Best, Amy Fisher, Kate Moody, Scott Wallace, Nels Strickland, Travis Yates, Leslie Banahan, Shannon Richardson, and three students from the Daily Mississippian

**Absent:** Sandra Bentley, Michael Thompson, Tiffany Edwards, Michael Barnett, Tim Walsh, Ginger Patterson, Hilarie Bain, Donna Gurley, Quadray Kohliem, Dan Roberts, and Jessica Brouckaert

**Proceedings:** The meeting was called to order at 3:02 p.m., and the committee reviewed and unanimously approved the minutes from June 6. The committee then discussed the latest version (v.4) of the smoke-free campus policy.

1) The first item of discussion came from Dr. Eftink who wrote and presented a section to be considered for inclusion in the policy, relating to respect and responsibility of policy enforcement for both smokers and non-smokers. The section is written below:

**RESPECT AND RESPONSIBILITY:** The success of this policy depends on the thoughtfulness, consideration, and cooperation of smokers and non-smokers. All members of the University community share in the responsibility for adhering to and enforcing this policy. Any complaints should be brought to the attention of the appropriate University authorities, and anyone who complains shall be protected against retaliation.

After the committee reviewed the section, Dr. Wallace asked if other UM policies contained similar language about respect; that question could not be answered but Ms. Banahan suggested looking at the existing Title IX policy language.

2) The second item of discussion was presented by Ms. Banahan, who informed the committee that the student committee members wanted the words "University Police Department" added to the end of the first sentence in the "Enforcement" section of the policy. The new sentence reads:

**ENFORCEMENT:** The responsibility for the enforcement and communication of this policy rests with all members of the University community and the University Police Department.

3) The third item of discussion was presented by Dr. Brown, who asked why the Greek houses were not specifically named in the section relating to prohibited University locations. Ms. Banahan answered that by stating "University-owned facilities, properties, and grounds," the policy is covering all University locations, and that UPD would have the authority to determine the depth of enforcement if the language is intentionally broad.

4) The fourth item of discussion was presented by Mr. Whittington, who asked if this policy extended to UM satellite campuses such as DeSoto, Southaven, etc. Ms. Banahan stated that several satellite campuses were already smoke-free, including DeSoto and Medical Center, but that each campus would be responsible for setting their own policy regarding smoking.

After all items were discussed by the committee, Dr. Richardson asked for a motion to approve the policy, including the additional language presented in discussion items 1 & 2. Mr. Best made the motion to approve the policy, Mr. Strickland seconded the motion, and all attending committee members voted in favor to approve the policy. None were opposed. Therefore, Policy Version 4 with additional items 1 & 2 was unanimously approved.

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After the policy was approved by the committee, each sub-committee gave an oral report, and several sub-committees additionally submitted written reports. Listed below is a summary of the combination of written and oral reports.

### Marketing & Communications - presented by Jennifer Farish

Objectives:

- 1) Increase campus-wide understanding and acceptance of the new smoke free policy.
- 2) Mitigate as much as possible any the negative affects of the policy.

Strategies:

- 1) Since the policy does not ban all tobacco, communication about the policy will focus on protecting non-smokers from second-hand smoke in addition to the health benefits of quitting tobacco use.
- 2) Include anecdotes. Stories such as the prospective students who had asthma attacks during their campus visits (brought on by second-hand smoke) can be powerful motivators for people who are proud of Ole Miss and do not want it to be perceived negatively. (This could tie into the idea of hospitality and warmth for which the University is known).
- 3) Create channels through which people can discuss problems, offer solutions and receive information. An online form that offers a place for people to vent and find resources would increase the important aspect of transparency in the process and would give people a formal outlet to express their concerns (as opposed to the concerns being addressed solely in the DM or other medium).
- 3) Create a system of rewards for buildings or departments that are “smoke free” (no one in the building smokes) in order to foster teamwork and to create buy-in from non-smokers.
- 4) Empower non-smokers to point out the policy to anyone smoking on campus and to help with enforcement through encouraging everyone to follow the policy.

Audiences:

- 1) Faculty and staff who work on campus
- 2) Students who live and/or take classes on campus
- 3) Alumni who visit the campus
- 4) Visitors (fans from other schools, guests for conferences and lectures, etc.)
- 5) Oxford and Lafayette residents

Tactics:

- 1) UM Today – Announce the finalized policy through UM Today, linking back to the website **[olemiss.edu/smokefree](http://olemiss.edu/smokefree)**
- 2) Signage on campus – Place signs on every building and outside every classroom (using static cling decals). Signs should contain a logo and a statement such as “Supporter of ...” or “Yes to a smoke free campus, etc.” Types of signs include: static cling for doors, walls, desks, elevators, etc.; yard signs outside buildings, in areas formerly designated as smoking areas and in heavy traffic areas; banner if possible signifying smoke free campus; signs available for Grove tents with same language of support for policy; static cling stickers for University golf carts and vehicles (also make available to faculty, staff and students) (Deadline: August 15)
- 3) T-shirts – T-shirts with the smoke free logo can be created to use as incentives and giveaways at various

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events, including Welcome Week activities outside the Union.

4) Media Support – Meet with DM staff and Oxford Eagle staff to explain policy and enlist support (UM Communications can set up meeting as soon as policy is finalized).

5) Social Media Accounts – Use Ole Miss Facebook, Twitter and other accounts to give facts about the smoke free policy and link back to the web site containing the policy.

6) Web site – A simple web site containing the policy as well as any multimedia components of the campaign, links to resources and support for people who want to quit smoking, and quotes from various campus leaders and students who endorse the policy (anecdotes would work well). Deadline: August 1

7) Powerpoint slide – A slide to be shown on various television screens across campus with information about the policy and the URL for the web site. (Deadline: August 1).

8) Home page and Ole Miss News – Logo on Ole Miss News and home page linking to the policy web site.

9) Gameday stickers – Design should be consistent with the other signs signifying support for the policy.

10) Explore other incentives with Aramark and others to show appreciation for faculty, staff and students who demonstrate support of the policy in some way.

### **Policy Research - presented by Maurice Eftink & Amanda Walker**

The University of Kentucky was identified as one of the leading institutions that provided research on this topic and will be used as a resource for further policy implementation development. The sub-committee also recommended that an assessment piece be conducted on the UM smoke-free campus policy, including a pre- and post-test. The sub-committee will develop the parameters of the study, measures of success, and other assessment language. Baptist Hospital was also contacted during the research gathering, but no one from Baptist has responded. Below are the summaries of the research currently available:

Summaries for Research on Smoking Behaviors after No Smoking Policies/Bans:

1. Fichtenberg, Caroline & Glantz, Stanton (2002) Effect of smoke-free workplaces on smoking behavior: Systematic Review. *British Medical Journal (BMJ)*. 325, (1-7).

The study measured the number of cigarettes per day, per employee and smoking prevalence. The study found that smoke-free workplaces saw the number of cigarettes per day decrease for continuing smokers (avg. 3.1-3.8). The study did also infer that smokers who had support at home were more likely to succeed in cessation programs. In summary, smoke free workplaces encourage a reduction of cigarette consumption.

2. Bauer, JE., Hyland A., Li, Q., Steger C., & Cummings, KM., (2005). A longitudinal assessment of the impact of smoke-free worksite policies on tobacco use. *American Journal of Public Health* 95(6), 1024-9.

The study questioned whether employees who worked in smoke free environments were likely to reduce or stop smoking. The research suggested that employees who worked in places that had smoking policies were nearly twice more likely to stop smoking than employees did that worked in places where there were no smoking policies.

3. Frieden, T.R., Mostashari, F., Kerker, B.D., Miller, N. Hajat, & A. Frankel, M. (2005). Adult tobacco use levels after intensive tobacco control measures: New York City, 2002-2003. *American Journal of Public Health*. 95(6), 1016-23.

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The study analyzed the impact of New York City's (NYC's) comprehensive tobacco control measures in 2002-2003. The city took several approaches to implement smoke free policies. First, NYC increased cigarette taxes. Next, NYC created legal action that made all workplaces, bars, restaurants smoke-free. In addition to new laws, NYC increased large-scale cessation programs, which included free nicotine-patch program. Furthermore, NYC provided education on smoking and affects. Lastly, NYC then evaluated the program's effectiveness. In the one year, smoking prevalence among adults decreased from 21.6 to 19.2 percent (approximately 140,000 fewer smokers).

4. Wheeler, Gary J., Pulley, LeaVonne., Felix, Holly C., Bursac, Zoran., Siddiqui, Nadia J., Stewart, Kathryn M., Mays, Glen P., & Gauss, Heath C. (2007). Impact of a smoke free hospital campus policy on employee and consumer behavior. *Public Health Reports*. 122 (11), 744-752.

The study evaluated the effects of implementing a clean air policy on employee attitudes, recruitment, and retention; hospital utilization; and consumer satisfaction in 2003 through 2005. Employee surveys were collected from a large university hospital, group discussions with supervisors and security personnel, as well as interviews with administrators were used to collect data. Secondary analysis included employment records and exit interviews, and patient satisfaction surveys. Overall, employee attitudes toward the smoking policy were positive (83.3%). There was no evidence of an increase or decrease in hiring or separations due to the policy. Study suggested that a campus wide hospital smoke-free policy had no effect on measures of employee or consumer attitudes or behaviors.

5. Edwards, R., Thomson, G., Wilson, N., Waa, A. Bullen, C., O'Dea, D., Gifford, H., Glover, M., Laugesen, M., & Woodward, A. (2008). After the smoke has cleared: Evaluation of the Impact *Tob Control*. 17(1).

The study evaluated the implementation and outcomes of aspects of the New Zealand 2003 Smoke-free Environments Amendment Act (SEAA) relating to smoke-free indoor workplaces and public places. Surveys suggested growing majority support for the SEAA and its underlying principles among the public and bar managers. There was evidence of high compliance in bars and pubs, where most enforcement problems were expected. Self-reported data suggested that SHS exposure in the workplace, the primary objective of the SEAA, decreased significantly from around 20% in 2003, to 8% in 2006. Air quality improved greatly in hospitality venues. Reported SHS exposure in homes also reduced significantly.

6. Uslan, K., Forster, J. L., & Chen, V. (2007). Smoking policies in small worksites in Minnesota. *American Journal Of Health Promotion*, 21(5), 416-421.

Uslan, Forster, & Chen (2007) studied the correlations of behaviors, attitudes, and implantation of policies for workers and managers in regards to the passage of the Minnesota on the Minnesota Clean Indoor Air Act (MMCIA). The study sample included Minnesota workplaces with 5 to 50 employees. A response rate of 66 percent offered 233 response for the cross sectional surveys. The results revealed most worksites had policies but only a small portion, 26 percent, were written policies. Health Insurance appeared to correlate to whether a company had a written policy or not. If the company offered health insurance, they were more likely to have a documented policy. The research suggested that offices had stronger policies than factories and worksites. Research also suggested that a small percentage of small business owners had even heard of the MMCIA. Based on the research, Uslan, Forster, & Chen (2007) concluded that the lack of knowledge of the law has placed workers at risk of increased second hand smoke in the work place due to the lack of policy in place in the small businesses.

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7. Evans, W., Farrelly, C., & Montgomery, E. (1999). Do workplace-smoking bans reduce smoking? *The American Economic Review*. 89 (4), 728-747.

According to Evans, Farrelly, & Montgomery (1999) workplace smoking bans surveys suggested positive decline in smoking by employees after bans/ restrictions were implemented. Data from The National Health Interview Survey (NHIS) was gathered in 1991 and 1993. Over 18090 workers were used in the sample for the two large-scale surveys. The surveys were used to analyze effectiveness of the bans/ restrictions. The results suggested there was a significant reduction of five percent on the average daily consumption and a ten percent decrease in the overall consumption of cigarettes.

8. Gabor, Carmen L. (2006). Analysis of the effects of a workplace-smoking ban on smoking behavior of employees. *Electronic Theses, Treaties and Dissertations*. Paper 4452  
Retrieved from <http://diginole.lib.fsu.edu/4452>.

In 1993, the Joint Commission on Accreditation of Health Care Organizations (JCAHCO) implemented smoking bans for all hospitals. Gabor (2006) explored whether the smoking ban had an impact on cigarette consumption by employees. The study looked at the effectiveness of the ban on employee health promotion and the aid in cessation programs. The sample consisted of employees of a north Florida hospital. The employees were given a survey eighteen months after the smoking ban was implemented. Interestingly, the survey indicated that the reduction of consumption was not due to cessation programs, since only 5 percent enrolled in the programs. Gabor (2006) suggested the positive decline in the consumption of cigarettes was because smoking was no longer accessible at work. Results suggested that 34 percent of smokers were able to quit after the ban. Sixty-six percent of smokers, however, noted no change in total consumption.

9. Kim, B. (2009). Workplace smoking ban policy and behavior. *Journal of Preventive Medicine & Public Health*. 42 (5), 293-297.

The study looks at the effectiveness of workplace bans in Seoul, Korea. Legislation passed in 2003 to ban smoking in offices, meeting rooms, and lobbies of buildings that were larger than 3000 square feet. Kim (2009) used data from the National Health Nutrition Survey of South Korea in 2005 to analyze the effectiveness of the ban and employee behavior. The sample consisted of 3,122 workers. Workers were between the ages 20 and 65 years -old. Kim (2009) suggested that the ban reduced the smoking rate by 6.4 percent among total smokers and it reduced the total number of cigarettes consumed per day by 3.9 cigarettes.

10. Shields, M. (2007). Smoking bans: Influence on smoking prevalence. *Health Report*. 18(3), 9-24.

Article from the Health and Research Division, in Canada reported on smoking prevalence since smoking bans were implemented. Longitudinal data was collected from the Canadian Tobacco Use Monitoring Survey and National Population Health Survey. The data suggested that those who had bans in the workplace and homes were more likely to stop smoking over a two-year period than those that were not restricted.

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### Legal & Enforcement - presented by Ray Hawkins

1. Starting January 1, 2013, the fine for smoking on campus will be \$25.00. (This is the same fine that is being assessed now for individuals smoking outside designated areas.) This fine applies to students and employees. Visitors will be asked to comply with the policy, but will not be fined. Visitors who refuse to comply will be asked to leave the campus.
2. Although no tickets will be issued from August – December, 2012, the University will be a smoke-free campus during that time. Therefore, all designated smoking areas will be removed from the campus.
3. During the period of August – December, 2012, the Enforcement Subcommittee has suggested having UPD officers pass out “warning cards” to violators that will have information about available cessation programs. The Enforcement Subcommittee would like input from the larger group as to whether this is a good idea or not. The cards could also explain that, starting January 1, 2013, individuals may be fined for smoking on campus. While UPD would have primary responsibility for passing out these cards, they could be made available to anyone who would like to use them.
4. At athletic events, smokers will be asked to put out their cigarettes. Repeat offenders at the same event will be asked to leave.
5. The University is smoke free 365 days a year; however, at certain times (i.e., game days), enforcement of the smoke free policy may not be the highest and best use of University personnel.
6. Our current citation process runs through the parking ticket process, with student citations then forwarded to the Student Conduct Office. Since parking is no longer a part of UPD, we will need to figure out how to process citations for both employees and students.
7. The Enforcement Subcommittee suggests that we figure out a process that can be used to determine whether we have a large number of repeat offenders. If this is the case, we may need to put escalating fines in place. (Our current system does not have escalating fines.)

### Cessation Programming- Presented by Amy Fisher

- ❖ Previous smoke cessation efforts—ACT Now (previous state funded program)
    - At its peak, ACT Now had a good deal of advertising and served 650 people per year on our campus, employed a FT coordinator, and had 5 GAs
      - Now, approximately 30 students and employees per year seek counseling and products from the pharmacy
  - ❖ Services currently in place
    - Medications
      - Student Health
      - Employee Health
    - Brief Counseling
      - Pharmacy
      - Health Promotion
        - Might use MSW Interns from Counseling Center if needed
          - MSW Interns-
            - Make appointments
            - Send reminders about appointments
    - Can T or the Interns see Employees?
  - Counseling Center
    - Overflow/hard cases
- ❖ Concerns
  - Don't know how to predict need
  - Funding

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- Printing
- Putting brochures together
- Additional counseling if needed

### TASKS IDENTIFIED

- ❖ Find out if T can see employees for brief counseling, or if not, if UCC can help
- ❖ Need to educate Oxford pharmacists that BCBS pays for non-smoking treatments. Also need to let them know how to fill the prescriptions.
  - Kate- Print from Human Resources what BCBS pays for and get it to Pharmacists
- ❖ National Cancer Institute - Clearing the Air Packet
- ❖ Ask Chancellor if he will ask the supervisors to allow Employees to come to appointments without having to take personal leave or use their break time
- ❖ Webpage
  - Create one webpage
    - Information on services
    - Create links
      - T- Students
      - Pharmacy/Heath Center
      - Counseling Center
      - Text messages services
  - Everyone draft his or her part of the webpage.

### **Implementation Planning- Presented by Camp Best**

Mr. Best reported that the Implementation Planning committee will meet now that all of the other sub-committees have reported; the Implementation Planning sub-committee will draft a master implementation timeline to present to the entire committee at the next meeting.

**The next all-committee meeting will be July 18<sup>th</sup> at 3:00 p.m.; location is TBA.**

The meeting was adjourned at 3:52 p.m.

Minutes submitted by sbr