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## Three Steps to Making Your Workplace Tobacco-Free

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*Use your company's health plan to help employees and their families quit using tobacco*

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*Promote the Wisconsin Tobacco Quit Line (800-QUIT-NOW)*

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*Implement and maintain tobacco-free workplace policies and initiatives*

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**1** Use your company's health plan to help employees and their families quit using tobacco.

**2** Promote the Wisconsin Tobacco Quit Line, 800-QUIT-NOW.

**3** Implement and maintain tobacco-free workplace policies and initiatives.



Develop a strategy based on an understanding of tobacco use as an addiction. Avoid an approach that stigmatizes tobacco users. Many tobacco users make seven to eight attempts before they are successful in overcoming their addiction. The workplace should be a place that supports this challenging process.

Measures of success? Over time, employers should experience the long-term outcomes of:

- Reduced number of employees who use tobacco
- Reduced absenteeism
- Reduced healthcare costs
- Reduced maintenance costs

## **A WORKPLACE CASE STUDY**

*University of Wisconsin Hospital and Clinics (UWHC)  
Tobacco Treatment Program for Employees*

In late 2005, the University of Wisconsin Hospitals and Clinics (UWHC) wanted a barrier-free tobacco cessation program for its employees and asked the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) to provide this service. This request was partially in response to employee desires for such a program and partially to promote health among employees as well as patients.

A steering committee was formed with key individuals from the hospital and UW-CTRI. Committee members included hospital representatives from pharmacy, public affairs, human resources, nursing and senior administration. Members from UW-CTRI included a physician, as well as communication, administration and outreach staff. Each of these team members was critical to the big-picture planning and coordination of this program.

The objective of the program was to increase the number of UWHC employees who made a quit attempt over a three-year period. Barriers were eliminated or significantly minimized by offering free medications and counseling, and by making the enrollment process easy and convenient to access.

The strategies included best-practice quitting methods (medications and counseling) and strategic use of employee communication tools. A tobacco use assessment tool was used with each UWHC employee interested in making a quit attempt. Prior to the formal “start” of the program, communication focused on informational articles in newsletters, posters, fliers, fact sheets for managers, an employee letter from senior administrators, table tents, announcements and a program overview at manager meetings. This promotion was followed by announcements on the hospital Intranet site and payroll stuffers. (Ongoing communication will continue via these same vehicles and future communication will include features on successful quitters.)

“Thinking of Quitting” preparatory sessions by UW-CTRI outreach staff were held at several UWHC locations. These sessions were informational; designed to be no-pressure and required no commitment. They provided hospital employees a program overview, as well as the best ways to successfully make a quit attempt.



Convenient, barrier-free employee access was a priority and was addressed in the following ways:

- Medications, including nicotine patches, gum, lozenges, inhalers and bupropion SR, were available free to all enrolled UWHC employees.
- On-site sessions were conducted at multiple UWHC locations, including, on-the-spot counseling, enrollment and distribution of the first month's supply of patches, gum and/or lozenges. Prescriptions were written for inhalers and bupropion SR.
- Four UWHC pharmacies participated as distribution centers for prescription medications and refills.
- A cell phone number and email address were dedicated for counseling and enrollment purposes.
- Enrolling through UWHC Employee Health staff was an additional option.
- The Wisconsin Tobacco Quit Line was used for ongoing counseling.
- Enrollees were contacted by UW-CTRI staff prior to their quit date as well as six months after their quit date.
- Information was provided for spouses and significant others wanting to quit.

#### **Evaluation:**

Three months into the program 233 individuals were enrolled and making a quit attempt. This was 71% of the first year's goal of 325 quit attempts. Enrollees will be contacted six months after their quit attempt to track program satisfaction and quit rates.

#### **Lessons learned thus far:**

- There was pent-up demand for convenient, free tobacco cessation treatment in this healthcare setting.
- Saturation communication was vitally important to reach every employee ready to make a quit attempt.
- Despite being the age of electronic communication, there remains a small, but relevant, population that does not have computer access. These groups are often low-education, low-income employees: a target population for tobacco cessation efforts. Special efforts were made to reach these individuals, including on-site enrollment opportunities during evening and weekend hours, and translation of materials and counseling information.
- Confidentiality was critical to employees.
- Telephone counseling and enrollment was convenient and offered privacy.