

Tobacco Free Hospital Campus Forum
February 28, 2007 - Meeting Minutes
The Children's Hospital, Denver, CO, 12:30 – 1:30pm

Attendance list: *National Jewish Medical and Research Center* - Fred Wamboldt; *Denver Health Medical Center* - Lynn Ercolani, Chris Urbina, & Tricia Price, *Exempla Good Samaritan Medical Center (Lafayette)* - Mary Jackson; *The Children's Hospital (TCH)* – Diane Herrick, Sue Jordan, and Mark Foster; *Porter Adventist Hospital* – Mary Bearman; *Longmont United Hospital* - Laura Wesenberg;

Conference call: *Exempla Saint Joseph's Hospital* – Barb Hester; *Estes Park Medical Center* - Kerri Hill; *P.V. Medical Center* - Mary Ann; *Boulder Community Hospital* - Janice Blankenship; *Yampa Valley Medical Center* - Lisa Bankard; *St. Anthony Medical Center, Summit County* – Don Parsons, M.D.

Health Departments/Visiting Nurse Associations: *Colorado Department of Public Health and Environment* – Deb Montgomery; *Northwest Colorado Visiting Nurse Association* – Theresa Wright; *Pueblo City and County Health Department* – Renee Beauvais; *Denver Public Health* - Tracey Richers Maruyama.

Agenda Item	Discussion	Follow-up
Introductions	All attendees gave their name and position, health agency or institution.	
Hospital policy announcements/updates	<p>Thank you to Children's Hospital (Diane Herrick and Sue Jordan) for hosting the February Forum and providing participants with lunch.</p> <p>A number of people could not attend the Forum as planned due to adverse weather conditions. Folks from Colorado Springs and Ft. Collins started out but had to turn around and go back due to blowing snow.</p> <p>Tracey Richers Maruyama opened the discussion by asking participants if there was an easy way to set-up an email list-serve. Hospital systems have their own internal email list-serves so it may not be so easy. Tracey mentioned that one could be set-up through Yahoo Groups. Several participants will look into it and report back. In the meantime, we can just respond through the main email list.</p> <p>Tracey gave an update on hospitals recently in the media who have either gone tobacco free or announced that they plan on doing so.</p>	<p>Contact Tracey at 303-436-7949 or tracey.richersmaruyama@dhha.org</p> <p>For an updated Headlines document, please visit http://www.dath.org/hospitals.html and scroll down to "Headlines."</p>

	<p>Tracey distributed three handouts with some quotes regarding a 100% tobacco free hospital policy. One document was a list of quotes from hospital executives, another document was a list of quotes from employees, and the other document was a list of quotes from hospital associations.</p> <p>Tracey asked participants their thoughts on bringing out Melva Fager Okun, Ph.D., to give a training with hospital executives, department directors, staff, etc, involved with working on and implementing a 100% tobacco free policy. Dr. Fager Okun is with the Healthy Hospital Initiative in North Carolina. The <i>Healthy Hospital Initiative</i> helps hospitals establish 100% tobacco-free campuses, provide comprehensive cessation support, and build tobacco-free communities. The <i>Initiative</i> is funded by The Duke Endowment. Dr. Fager Okun has given 100% tobacco free hospital presentations to several states usually sponsored by the state hospital association, for example, the Oregon Hospital Association. Her fees are \$1,000/day plus expenses. Forum participants discussed a possible training. They thought it may be beneficial to some department directors (security, pharmacy, HR, managers, etc.), but perhaps not as beneficial to executives. Participants wondered if the Colorado Hospital Association (CHA) would sponsor her giving a training in Colorado.</p>	<p>Access these documents at http://www.dath.org/hospitals.html and scroll down to "What they are saying..." PDFs.</p> <p>Contact Melva Fager Okun, Ph.D. at melva@ncpreventionpartners.org or at 919.969.7022, ext. 3#. http://www.ncpreventionpartners.org/index.html?ssfoc=2361</p> <p>Tracey will ask the Colorado Hospital Association if they are interested in sponsoring her to come to Colorado. Maybe near the CHA annual meeting?</p>
<p>Discussion – Enforcement of a 100% Tobacco Free Policy and Employee input on the pending policy change</p>	<p>Don Parsons, M.D., Board member at St. Anthony's Medical Center – Summit County, mentioned he could only be on the call for a few minutes. He would like to know how to deal with a campus not exclusively owned by the medical center/hospital. There are neighborhood clinics, government buildings, etc. on campus. Are there any models that embrace overlapping entities? McKee Medical Center was mentioned for Don to contact.</p> <p>Kerry Hill, Director of Marketing at Estes Park Medical Center, described enforcement issues on their campus. They went 100% tobacco free in April of 2006. They had a cold-turkey lunch, sent letters to vendors announcing the upcoming policy change (construction companies had a stricter no smoking policy than the medical center), made and distributed brochures, flyers, cards, etc. When the policy went into effect, there were numerous complaints about the employees smoking. Employees who smoke sometimes take six, seven breaks a day to smoke. Some employees who smoke placed lawn chairs out on the sidewalk and smoked out there. Patients asked, "Is this what you are paying your employees to do?" They started a Healthy Employee Program, signed up walking teams, only 2-3 smokers signed-up. Employees are still smoking. They should clock in and out to smoke but they do not. The policy is not enforced as it</p>	<p>Tracey will search.</p>

<p>continued...</p> <p>Discussion – Enforcement of a 100% Tobacco Free Policy</p> <p>and</p> <p>Employee input on the pending policy change</p>	<p>should be. There is dissension between staff that do smoke and staff that do not smoke. One resident was grandfathered in and is allowed to smoke on property.</p> <p>Fred Wamboldt, M.D. from National Jewish asked Kerry if the employees were violating the policy. Kerry said yes. Discussion then involved talk about administration backing and enforcing the policy.</p> <p>Fred also stated that he is the one responsible at National Jewish to work on implementing a policy and they have been "watching" the employees who smoke out at the "butt hut." Fred said one employee gets a pretty good deal based on how much time they spend out in the butt hut vs. time actually spent working.</p> <p>Tracey mentioned that when she talked to Dr. Fager Okun, that Dr. Fager Okun said it is important to make employees clock in and out on their breaks, especially if they have to leave campus grounds to smoke.</p> <p>Employees who smoke feel they are being picked-on.</p> <p>Diane Herrick, RRT Clinical Coordinator from The Children's Hospital, mentioned that maybe there could be scripting for employees. Something like: we don't expect you to stop smoking, we do expect the campus to be tobacco free. Employees who smoke could use Nicotine Replacement Therapy (NRT) during their shift.</p> <p>Discussion then involved ideas about setting up a hotline for employees to call and remain anonymous to report violators, especially about employees smoking and violating the policy; ideas about wanting only security to enforce the policy; some participants mentioned managers are responsible for employees and their smoking breaks would fall under their supervision; some participants thought all employees have the responsibility to approach violators and others wanted employees to avoid approaching violators.</p> <p>Chris Urbina, M.D., from Denver Public Health, mentioned that acceptance of this type of policy change will not happen overnight. The administrators have to create a culture change. As more and more hospitals change policy, the culture will change.</p> <p>Mary Jackson, Marketing Manager from Exempla Good Samaritan Medical</p>	
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<p>continued...</p> <p>Discussion – Enforcement of a 100% Tobacco Free Policy and</p> <p>Employee input on the pending policy change</p>	<p>Center, mentioned that enforcement is everyone's responsibility – that it takes time, constant education, re-messaging, corrective action and guest services has to be involved.</p> <p>Lisa Bankard, Wellness and Community Education Director from Yampa Valley Medical Center, stated that their CEO mentioned that their tobacco free policy was not any different than any other of their policies and then there was discussion of all YVMC managers to actively stand behind policy.</p> <p>Chris Urbina brought up the issue of dress code and enforcement. What about the smell of tobacco smoke on nurses and hospital staff? Hospitals can set rules and home policy. Fred Wamboldt mentioned that National Jewish has a policy regarding fragrance. Fred also mentioned there was not an individual right to smoke anywhere.</p> <p>Fred asked Kerrie if employees who smoke threatened to quit at Estes Park Medical Center. Kerrie replied, "yes." Fred asked if any actually did quit and Kerrie replied, "no."</p> <p>Discussion turned to the handout Tracey provided: the Sample Employee Enforcement Plan – Corrective Action Matrix from the Columbus Children's Hospital and the Ohio Hospital Association.</p> <p>Fred would like to collaborate with Tracey and interested Forum participants to collect data regarding specific hospital actions/interventions and outcomes; threats and actual actions of employees; etc. More information to follow.</p> <p>Diane mentioned that enclosed butt huts are in violation of the Colorado Clean Indoor Air Act.</p> <p>Diane mentioned Lockheed Martin looked at financial issues – lost productivity and the cost of health care to cover employees who smoke. Hospitals should look into how much employees who smoke during their shift are costing the hospital.</p> <p>It was mentioned that maybe hospital management needs to be punitive and less kind in messaging to employees who smoke.</p> <p>It was asked if hospitals had unions. Kaiser has a union.</p>	<p>In a follow-up call to Lisa, she mentioned that on employee satisfaction surveys conducted each year, employees have stated managers from dept. to dept. are inconsistent with policies.</p> <p>Fred will email a copy of their fragrance policy.</p> <p>The document can be found on the website: http://www.dath.org/hospitals.html</p>
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	<p>Fred mentioned that strong stories carry the day. Develop good stories and have a strong statement. If you get a lot of threats and have a strong statement and good policy you can handle the threats.</p> <p>Discussion then moved to an idea of giving employees a simple survey to fill-out regarding implementing a 100% TF policy. Employees can do an online "Zoomerang" survey – how important is this issue to them?</p> <p>Barb Hester, from Exempla Saint Joseph's Hospital, mentioned that St. Joe's is finalizing a questionnaire to employees and will share it with the Forum participants.</p>	
Topics of discussion for future Forums –	<ul style="list-style-type: none"> * Michigan Blue Cross/Blue Shield - when they went smoke free * legal issues about smoking in cars on hospital property * legality of butt huts * smelling smoke on employees – strong fragrance 	
March Forum –	<p>Wednesday, March 28, 2007 12:30 – 1:30 Porter Adventist Hospital, Denver Lunch will be provided Call-in line for folks in rural parts of the state: 1-866-724-9301 code: 3037785294</p>	<p>Contact Kelli Dahl in Public Relations at 303-765-6147 or kellidahl@centura.org</p>
April Forum –	<p>Wednesday, April 25, 2007 12:30 – 1:30 Saint Joseph's Hospital, Denver Lunch will be provided</p>	<p>Contact Barb Hester at 303-837-6786 or Hesterb@exempla.org.</p>

Minutes taken by: Tracey Richers Maruyama