

# Are you ready for the smoking police?

(NC)—Ontario's pioneer attempt to restrict all smoking at work is headed for trouble, according to smoking-control experts.

Under a new law, effective January 1, 1990, all employers will be ordered to prohibit smoking in their buildings, except in "designated smoking areas, public areas and areas used for lodging and private dwellings".

Anti-smoking groups have greeted this as a big step forward. Several major Canadian cities have already banned smoking in public places and federal and provincial governments have imposed total restrictions on their own employees. Through Bill 194, Ontario will become the first province to extend this to all employees in the private sector—not just those who meet the public and might breathe smoke on them, but everyone who sits at a desk or stands at a machine.

Health and Safety inspectors become "smoking police", entitled to enter any plant or office without warrant or notice. Employees smoking illegally face fines of \$500 while employers permitting it can be fined \$25,000.

### PROBLEMS AHEAD

So far, there has been no organized protest, either from the smokers or the employers who will bear the heavier burden of ordering them to butt out. But few companies have prepared for the shock of sudden transition to a smoke-free workplace. Those who have already tried it on their own realize that it can cause severe management problems.

Surveys by Addiction Management Systems Inc. of Toronto, a pioneer in the new field of smoking control in the workplace show that the tensions created between smokers and non-smokers through poor implementation of the new rules may outweigh the benefits of a healthier work environment.

### NECESSARY GUIDELINES

To prepare for the flood of problems likely to be caused by the new law, A.M.S. has drawn up guidelines for employers in interpreting Bill 194.

"Employers are sure going to need them," says A.M.S. president Frederick Weston. "If the government had simply banned smoking everyone would know where they stood. The employers would be off the hook and the smokers would be better off. By allowing designated smoking areas they are asking for trouble."

Under the new law, up to 25 per cent of floor space can be used for smoking areas. It is up to the employer to decide whether to install separate ventilation for these areas. This is expensive but without it, smoke drifts into the "smoke-free" areas. Weston points out that the new law gives all workers the right to a smoke-free workplace, so they can file grievances over this second-hand smoke.

Employers may ban all smoking in work areas, but they must first consult with a health and safety representative or committee, representing the employees.

Weston says this consultation should be expanded to include other management and union representatives. Firms may also call in outside experts to point out pitfalls and assist in the implementation of the policy. "Everyone has to be involved in setting a new smoking policy, and, as sound management policy, restrictions should apply equally to all smokers—that means the boss sitting in his private office as well as the worker on the shop floor."

"You must decide at the start whether designated smoking areas are to be a temporary provision, to ease smokers over the transition, or permanent. Set rules for smoke-breaks and remember that non-smokers are going to demand similar breaks. Spell out the method of enforcing the non-smoking regulations."

### SMOKE-BREAKS SPELL TROUBLE

Addiction Management Systems has spent five years studying ways to establish a smoke-free workplace and advising corporations who have introduced voluntary restrictions. Its studies show that designated smoking areas and smoke-breaks cause more trouble than they are worth. Ill feeling mounts between smokers and non-smokers; employees sneak illegal breaks, costing the employer loss of production and the second-hand smoke problem produces as many complaints as before the restrictions.

"The only answer," Weston declares, "is to go completely smoke-free—but in a carefully-planned manner, agreed to by everybody, in which the employer assists smokers to control their habit during work hours. The

company manager is only concerned with what they do in working hours. The decision to quit completely is up to the smoker."

A.M.S. figures show that 20 per cent of smokers are mentally ready to quit at any one time, and will seize upon a smoking ban as an opportunity to go ahead and do it. The other 80 per cent have no real intention of quitting, so they will not benefit from any stop-smoking program introduced by their employer or a voluntary or compulsory basis. But they will welcome help in cutting down by not smoking at work and may, in fact, welcome the new restrictions.

Because, as Weston says, all smokers want to cut down, so will go along with a smoking management program. He believes that smoking can be "managed" like anything else. Firms have to obey fire, health and safety regulations. Ontario's smoking regulations present a new problem to management, but also an opportunity to create a better workplace, with cleaner air, a better spirit of cooperation among employees who have feuded over smoking in the past and, as a result: lower

costs and increased productivity.

### A SMOOTH TRANSITION

A number of large Ontario corporations have chosen, with the consent of the majority of their employees, to go completely or partly smoke-free. The rest are now ordered to do so, but the problems, and potential benefits are the same. Says Weston, "They're lucky in a way, because they can learn from the experience of those who did it first."

He claims that the A.M.S. formula smooths the difficult transition to a successful, problem-free, smokeless workplace in three months.

"Why does it work, when smoking cessation programs have failed to help the company?" he asks. "Because it,

helps even the smoker who doesn't want to quit to adjust to the smoke-free workplace."

The Addiction Management Systems approach was used by more than 150 Canadian corporations last year and helped over 15,000 smokers control their habit. It was rated first among nearly 200 anti-smoking programs by the U.S. publication Health Action Managers Report.

For information on the new smoking restrictions contact:  
Addiction Management Systems Inc.; 1235 Bay Street, Suite 605; Toronto, Ont. M5R 3K4 Tel: (416) 927 0370

10 Leading Causes of Death Deaths and percent of total deaths for 1987		
Cause of death	Number	Percent of total deaths
Heart diseases (Coronary heart disease) (Other heart disease)	759,000 (511,700) (247,700)	35.7% (24.1%) (11.6%)
Cancers	476,700	22.4%
Strokes	148,700	7.0%
Unintentional injuries (Motor vehicles) (All others)	92,500 (46,800) (45,700)	4.4% (2.2%) (2.2%)
Chronic obstructive lung diseases	78,000	3.7%
Pneumonia and influenza	68,600	3.2%
Diabetes Mellitus	37,800	1.8%
Sulicide	29,600	1.2%
Chronic liver disease and cirrhosis	26,000	1.2%
Atherosclerosis	23,100	1.1%
ALL CAUSES	2,125,100	100.0%

Source: National Center for Health Statistics 1989

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