

# [Organization]

## Personnel Policies and Procedures

### Tobacco Use Policy

Policy Number XX

#### 1. Purpose

The purpose of this policy is to:

- A. Comply with the Pennsylvania Clean Indoor Air Act (SB 246 of session 2007), effective September 11, 2008.
- B. Protect the health and welfare of [Organization] employees and the citizens who visit all [Organization] owned, leased, or otherwise occupied buildings.

#### 2. Objective

[Organization] is dedicated to providing a healthy, comfortable, and productive work environment for its employees.

#### 3. Definitions

A. *[Organization] owned and/or leased properties:*

All facilities owned or leased by [Organization], and used for the purpose of achieving [Organization] goals and objectives. The facility may serve as, but is not limited to, a place of occupation, employment, business, trade, craft, professional activity, volunteer activity, commercial establishment, storage facility, and/or place where the public is invited or permitted.

B. *Tobacco:*

1. The carrying, inhaling, exhaling, or burning by a person of a lighted cigar, cigarette, bidi, pipe, weed, plant, or other lighted smoking/tobacco device, in any manner or in any form.
2. Smokeless tobacco in all forms. This includes, but is not limited to snuff, chew, or spit tobacco; twists, and snus.

C. *Electronic Nicotine Device:*

Sometimes referred to as an electronic cigarette, or e-cigarette. An electrical device, sometimes portable and often reusable, that simulates the act of smoking. The device typically includes an atomizer and gives off an aerosol mist or vapor when used.

D. *Indoor Area:*

An area of a [Organization] owned and/or leased property that consists of three or four walls, a floor, and a ceiling. Doors, windows, and ventilation systems may or may not be present. Examples include offices, sheds, garages, and porch/patio areas.

E. *Outdoor Area:*

An area of a [Organization] owned and/or leased property that is not considered an indoor area.

F. *Break Period:*

The period of respite provided to all employees during the course of the normal workday. See the [Organizational Policy] for information regarding frequency and duration of breaks.

G. *Tobacco Use Cessation:*

The process of quitting tobacco use.

#### 4. **Scope**

This policy applies to the following populations:

- A. All [Organization] full-time, part-time, temporary, per-diem, and other classified employees of [Organization] and/or its affiliates located in [Organization] owned or leased properties.
- B. All members of the general public who are considered non-employees of [Organization].

#### 5. **Policy**

A. Tobacco use

- 1. *Indoors:* The indoor areas of all [Organization] owned and/or leased properties shall be tobacco free at all times, without exception. Tobacco use is not permitted anywhere in the workplace, including all indoor facilities and [Organization] owned and leased vehicles, and when personal vehicles are used for work related purposes. This includes, but is not limited to, lounges, offices, workstations, conference and meeting rooms, cafeterias, lunchrooms, event locations, stairwells, lobbies, elevators, sheds, and garages.
- 2. *Outdoors:* The outdoor areas of all [Organization] owned and/or leased properties shall be tobacco free at all times, without exception. This includes event locations and the use of tobacco in a private vehicle located on [Organization] property.
- 3. *Electronic Nicotine Device:* The use of electronic nicotine delivery system devices is prohibited, indoors and outdoors.
- 4. *Break Periods:* Employees will not be permitted to take additional breaks for tobacco use.

B. Tobacco use cessation

- 1. All employees in violation of the Tobacco Use Policy will be provided information about tobacco use cessation resources.
- 2. All employees and non-employees who express an interest in quitting tobacco use will be provided information about tobacco use cessation resources.

#### 6. **Implementation**

- A. [Organization] Administrative Staff will be responsible for communicating the policy to affected persons as described in *Item 4, Scope* of this Tobacco Use Policy.
- B. [Organization] Management Staff will be responsible for overseeing the enforcement of this policy. All employees are responsible for notifying management when violations occur, and are empowered to communicate this policy to visitors and/or employees in violation of this policy.

- C. Signs designating all [Organization] owned and/or leased properties as tobacco free will be posted at all major entrances. Signs will also be posted at appropriate locations on the perimeter of the property(ies).
- D. All questions or disputes connected with the Tobacco Use Policy should be directed to the [Title] for resolution.

**7. Violations and Penalties**

A. Employees

- 1. [Organization] shall enforce its tobacco use policy as it enforces other policies. If an employee has violated this policy, the facts that gave rise to the violation will be reviewed to determine what action is warranted. He/she may be subject to disciplinary action in accordance with [Organization] personnel policies. This may include, but is not limited to, warnings, suspensions, and discharge.

B. Non-Employees

- 1. If a non-employee has violated this policy, the facts that gave rise to the violation will be reviewed to determine what action is warranted. He/she may be subject to punishment in accordance with applicable laws, and may also be removed and/or banned from [Organization] owned and/or leased properties.

C. Fines

- 1. The [Organization], employees, non-employees violating this policy may be subject to fines as dictated by the PA Clean Indoor Air Act and/or other applicable existing tobacco, littering, or other local, state, or national policies/ordinances.

**8. Associated Documents**

- A. Pennsylvania Clean Indoor Air Act (SB 246 of session 2007), effective September 11, 2008.

**9. Effective Date and Review**

- A. This policy shall become effective on mm/dd/yyyy.
- B. This policy shall replace previous versions of the [Organization Policy].
- C. This policy shall be reviewed in accordance with [Organization] policy review processes.

Authorized by:

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Name Title

Document Owner: [name, or position and location]

Original Issue Date: [XX/XX/XXXX]  
 Current Version Date: [XX/XX/XXXX]  
 Next Review Date: [XX/XX/XXXX]

**End of Policy**