

SMOKE-FREE POLICY FOR EMPLOYEES AT VA HEALTH CARE FACILITIES

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive provides a comprehensive smoke-free policy for employees at Department of Veterans Affairs (VA), Veterans Health Administration (VHA) health care facilities.

2. SUMMARY OF MAJOR CHANGES: This updated VHA directive implements a smoke-free policy for employees at VA health care facilities, as defined in this directive, based on the security hazards related to smoking on VHA health care facility grounds, scientific evidence regarding the adverse health effects of secondhand and thirdhand smoke exposures, and their impact to patient safety and direct patient care.

3. RELATED ISSUES: VHA Directive 1057, Smoking Cessation Benefit for VHA Employees: No-cost Provision of Nicotine Replacement Therapy, dated August 10, 2017 and VHA Directive 1085, Smoke-Free Policy for Patients, Visitors, Contractors, Volunteers, and Vendors at VA Health Care Facilities, dated March 5, 2019.

4. RESPONSIBLE OFFICE: The Assistant Deputy Under Secretary for Health for Administrative Operations (10NA) and the Assistant Deputy Under Secretary for Health for Clinical Operations (10NC) are responsible for the contents of this directive. Questions may be referred to VHA Smoke Free: vhasmokefree@va.gov.

5. RESCISSIONS: None.

6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of August 31, 2024. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

**BY THE DIRECTION OF THE UNDER
SECRETARY FOR HEALTH:**

/s/ Renee Oshinski
Deputy Under Secretary for Health
For Operations and Management

NOTE: *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

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SMOKE-FREE POLICY FOR EMPLOYEES AT VA HEALTH CARE FACILITIES

1. PURPOSE

This Veterans Health Administration (VHA) directive provides a comprehensive smoke-free policy for employees on all property assigned to VHA that is under the charge and control of VA (and not under the charge and control of the General Services Administration (GSA)). **AUTHORITY:** Title 5 United States Code (U.S.C.) 7106; 38 U.S.C. 7301(b) and 7421; and 38 Code of Federal Regulations (CFR) 1.218(a)(3), (a)(4), and (b)(6).

2. BACKGROUND

a. **Smoke-Free Policy.** All VA medical facilities have had a smoke-free policy since 1991, with smoking allowed only in designated areas.

(1) On August 9, 1997, President Clinton signed Executive Order (EO) 13058 Protecting Federal Employees and the Public from Exposure to Tobacco Smoke in the Federal Workplace, to establish a smoke-free environment for Federal employees and members of the public visiting or using Federal facilities.

(2) On February 8, 2017, the Department of Veterans Affairs published VHA Directive 1085 Smoke-Free Policy for VA Health Care Facilities. In accordance with the requirements of EO 13058, VHA Directive 1085 prohibited the smoking of tobacco products in all interior space owned, rented or leased by the executive branch of the Federal Government, except in specially-equipped designated smoking areas, outdoor areas in front of air intake ducts and certain other residential and non-Federal occupied space.

b. **Smoking Cessation Policy.** Additionally, in accordance with VHA Directive 1057, Smoking Cessation Benefit for VHA Employees: No-cost Provision of Nicotine Replacement Therapy, dated August 10, 2017, VHA offers smoking cessation programs and clinical resources for employees. The Smoking Cessation Benefit provided to employees demonstrates VHA's commitment to protecting and ensuring the health of employees at VHA health care facilities.

c. **Reports of Fire and Safety Hazards.** There are numerous reports in VA issue briefs and The Joint Commission citations of the fire and safety hazards caused by smoking. VHA seeks to reduce all fire and safety hazards associated with smoking as documented in the issue briefs and citations on fire and safety hazards related to smoking on VA property.

d. **Scientific Evidence.** Surgeon General Reports of 2006, 2010, and 2014 concluded that cigarette smoking is the number one preventable cause of morbidity and premature mortality worldwide. Studies also have shown that the harmful effects of smoking are not confined solely to the smoker, but extend to co-workers and members of the public who are exposed to secondhand smoke as well. There are

also new studies that demonstrate risks to patients and anyone exposed to thirdhand smoke.

(1) As the nation's largest integrated health care system, VHA has a strong commitment to protecting and ensuring the health and safety of patients, visitors, contractors, vendors, volunteers, and employees.

(2) VHA seeks to reduce all hazardous health exposures associated with smoking through the reduction of secondhand and thirdhand smoke exposures.

e. **Occupational Safety.** This policy is consistent with VA's obligation to provide a safe environment and protect the health of Veterans, employees, and the public and the scientific evidence on the adverse effects of tobacco smoke. **NOTE:** *For more information, see VA Handbook 5019 Employee Occupational Health Services, dated March 27, 2015.*

f. As there is currently overwhelming evidence that smoking and exposure to secondhand smoke creates significant medical risks, and a growing body of evidence that exposure to thirdhand smoke creates additional risks to safety and direct patient care VHA must eliminate designated smoking areas for employees at VHA health care facilities in order to be consistent with 38 CFR 1.218(a)(3), which prohibits the creation of any hazard on property to persons or things.

3. DEFINITIONS

a. **Designated Smoking Area.** For the purposes of this directive, a designated smoking area is a smoking area in a VHA health care facility that is accessible to employees. This could be an indoor or outdoor smoking area and includes an area in a detached building that is accessible, heated and air-conditioned as appropriate, and meets The Joint Commission requirements for ventilation. **NOTE:** *Such areas have in the past been referred to as "shelters" or "outdoor" smoking areas.*

b. **Smoking.** For the purposes of this directive, the term smoking includes the smoking of cigarettes, cigars, pipes, and any other combustion of tobacco; and non-Federal Drug Administration (FDA) approved electronic nicotine delivery systems (ENDS), including but not limited to electronic or e-cigarettes, vape pens, or e-cigars.

c. **Smoke-free.** For the purposes of this directive, smoke-free means that smoking is prohibited for employees at all property assigned to VHA that is under the charge and control of VA (and not under the charge and control of the GSA).

d. **Thirdhand Smoke.** For the purposes of this directive, thirdhand smoke is the particulate matter or residue left behind or carried around on materials with which smokers come into contact and can be deposited in areas where there is no smoking activity.

e. **VHA Health Care Facility.** For the purposes of this directive, a VHA health care facility is any property assigned to VHA that is under the charge and control of VA (and

not under the charge and control of the GSA) and includes Veterans Integrated Service Networks (VISNs), VA medical facilities, VHA Health Care Systems, Community-Based Outpatient Clinics (CBOCs), Readjustment Counseling Centers (Vet Centers), and VHA Research Centers of Excellence.

4. POLICY

Consistent with its core health mission, as authorized in 38 U.S.C. 7301(b), it is VHA policy that all VHA health care facilities will be smoke-free for employees effective October 1, 2019. Accordingly, at VHA health care facilities, by that date all designated smoking areas for employees must be eliminated.

5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for:

- (1) Establishing overall strategic priorities for VHA.
- (2) Ensuring a safe and functional environment for employees.

b. **Deputy Under Secretary for Health for Operations and Management.** The Deputy Under Secretary for Health for Operations and Management is responsible for providing oversight of VISNs to assure compliance with this directive, relevant standards, and applicable regulations. **NOTE:** For more information, see *The Joint Commission, Environment of Care Standards EC.02.01.03 and EC.02.03.01.*

c. **Assistant Deputy Under Secretary for Health for Administrative Operations.** The Deputy Under Secretary for Health for Administrative Operations is responsible for providing technical assistance and support on questions related to the implementation of this directive, including the dismantling and phasing out of former designated smoking areas.

d. **Veterans Integrated Service Network Director.** The VISN Director or designee is responsible for providing resources and oversight of VHA health care facilities to ensure compliance with this directive.

e. **VA Medical Facility Director/ Readjustment Counseling Center Director.** The VA medical facility Director/Readjustment Counseling Center Director, or designee(s), are responsible for:

(1) Ensuring that designated smoking areas for employees at VHA health care facilities must be eliminated. Examples include but are not limited to indoor areas with separate ventilation systems on an inpatient unit, lobby, or community living center.

(2) Developing appropriate signage for installation at each VHA health care facility indicating that the facility is smoke-free in accordance with 38 CFR 1.218(a)(4).

(3) Developing, publishing, communicating, and implementing a local smoke-free implementation plan that is consistent with this directive. The plan must be communicated to employees.

(4) Assigning appropriate staff, such as Police Service, supervisors, and managers to monitor employee compliance with the smoke-free policy or signage. VA Police may be assigned to verbally remind individuals who are not complying with the smoke-free policy; however, if verbal communication is ineffective in promoting compliance, a courtesy violation warning can be issued. Failure to comply with the signage can result in the issuance of a Federal citation in accordance with 38 CFR 1.218(b)(6). **NOTE:** *Employees' failure to comply with the smoke-free policy may result in disciplinary action.*

6. TOBACCO USE AND SMOKE-FREE POLICY IMPLEMENTATION

a. VHA will implement this policy with guidance from a National VHA Smoke Free Implementation Plan and Toolkit. For more information, see <https://www.va.gov/health/smokefree>.

b. 38 CFR 1.218(a)(3) prohibits the creation of any hazard to persons or things on property under the charge and control of VA (and not under the charge and control of the GSA). VHA interprets the harmful effects of secondhand and thirdhand smoke, their impact to patient safety and direct patient care, and the fire hazards that smoking has created, constitute a hazard to persons and property. As such, the smoking of cigarettes, cigars, or any combustible tobacco products by employees is prohibited at all VHA health care facilities. This prohibition includes the use of non-FDA approved ENDS, including but not limited to electronic or e-cigarettes, vape pens, or e-cigars, as little is known about their potential safety or risk to others. Further, ENDS use imposes greater enforcement issues as it is difficult to distinguish them from traditional cigarettes. The inclusion of ENDS is consistent with smoke-free policies of many hospital and university campus grounds, other Federal agencies, and U.S. military medical treatment facilities. **NOTE:** *GSA Order ADM 5800.1C prohibits the smoking of tobacco products in all government –owned or -leased vehicles assigned to GSA, as well as GSA-occupied space.*

c. VHA will not participate in the sale of tobacco products because the sale or distribution of tobacco products is inconsistent with VA's mission as a national leader in disease prevention and health promotion. This includes ENDS or any other nicotine delivery device that has not been FDA-approved as a smoking cessation aid or medication. In addition, sales or distribution of free tobacco products, ENDS, or any non-FDA approved nicotine product by any groups will not be permitted on VHA health care facilities.

d. Many Department of Defense (DoD) Medical Treatment Facilities (MTF) have adopted smoke-free campus grounds, prohibiting the use of any tobacco products. In the instances of co-located VA-DoD facilities, the smoke-free policy of VA should be

followed when the facility is on the grounds of a VA medical center. If the co-located facility is on the grounds of a DoD MTF, then DoD policy must be followed.

e. In accordance with VHA Directive 1057, Smoking Cessation Benefit for VHA Employees: No-cost Provision of Nicotine Replacement Therapy, dated August 10, 2017, VHA health care facilities will promote the availability of smoking cessation programs and clinical resources for employees, including access to free over-the-counter Nicotine Replacement Therapy. Therefore, the Smoking Cessation Benefit provided to employee demonstrates VHA's commitment to protecting and ensuring the health of employees at VHA health care facilities.

7. TRAINING

There are no formal training requirements associated with this directive.

8. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive shall be managed per the National Archives and Records Administration (NARA) approved records schedules found in VA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Manager or Records Liaison.

9. REFERENCES

- a. 38 U.S.C. 7301(b) and 7421.
- b. 38 CFR 1.218(a)(3), (a)(4), and (b)(6).
- c. *EO 13058 Protecting Federal Employees and the Public from Exposure to Tobacco Smoke in the Federal Workplace*. 62 FR 43451, published August 13, 1997.
- d. *GSA Order ADM 5800.1C*, dated August 20, 2009.
- e. VA Handbook 5019 Employee Occupational Health Services, dated March 27, 2015.
- f. VHA Directive 1057, Smoking Cessation Benefit for VHA Employees: No-Cost Provision of Nicotine Replacement Therapy, dated August 10, 2017.
- g. VHA Directive 1085, Smoke-Free Policy for Patients, Visitors, Contractors, Volunteers, and Vendors at VA Health Care Facilities, dated March 5, 2019.
- h. VHA Smoke-Free Web site: <https://www.va.gov/health/smokefree>.
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o. U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006: <https://www.hhs.gov/surgeongeneral/reports-and-publications/tobacco/index.html>.

p. U.S. Department of Health and Human Services. *The Health Consequences of Smoking: 50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014: <https://www.hhs.gov/surgeongeneral/reports-and-publications/tobacco/index.html>.

q. U.S. Department of Health and Human Services. *Treating Tobacco Use and Dependence: 2008 Update*. Tobacco Use and Dependence Guidebook Panel. Rockville, MD: U.S. Department of Health and Human Services, Public Health

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