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**General questions:** Jim Sellers, 503-945-5738

**Technical questions:** Cathryn Cushing, 971-673-1013

## **Two-thirds of Oregon hospitals enforce smokefree tobacco policies**

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A new survey of Oregon's 58 hospitals shows that two-thirds enforce comprehensive smokefree policies and also offer a variety of supportive services for patients, visitors and employees.

The survey, released jointly by the Oregon Department of Human Services and the Oregon Association of Hospitals and Health Systems, found that 39 hospitals – 67 percent – are making a clear statement about reducing secondhand smoke, helping people quit and preventing people from starting.

An online map showing which hospitals are smokefree can be found at [www.oregon.gov/DHS/ph/tobacco/](http://www.oregon.gov/DHS/ph/tobacco/).

"In providing health services to the community, hospitals have a duty to promote positive health and wellness," says Katrina Hedberg, M.D., acting state epidemiologist at DHS. "As Oregon has strengthened its smokefree workplace laws, we have put a priority on hospitals.

"Not only are hospitals the largest employers in many communities, but they also have a tremendous opportunity to help patients, visitors and employees quit tobacco – the leading cause of preventable death, disease and disability."

Hedberg says 21 percent of hospitals allow smoking or other tobacco use outdoors on their campuses and 12 percent did not respond to the survey. She says DHS surveyed Oregon's general community hospitals and medical centers.

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“We strongly encourage all hospitals to adopt 100 percent smokefree policies,” says Andy Davidson, president and chief executive officer of the Oregon Association of Hospitals and Health Systems (OAHHS), which represents 57 member hospitals. “Hospitals with 100 percent smokefree policies demonstrate their dedication to patient care and position themselves as leaders in the community. It also is a smart business decision – smokefree workplaces help employees quit, reduce time lost for sick days and cut down on hospital maintenance and repair costs.”

The first Oregon hospital to adopt a comprehensive tobacco-free policy was Astoria’s Columbia Memorial Hospital, in 1998. Among those that have followed, these are examples of best practices:

- Oregon Health & Science University in Portland, which developed a tobacco-free policy in September 2007, tells visitors who smoke where they can find free nicotine-replacement therapy, provides the number of the tobacco quit line (1-800-QUIT-NOW) and distributes “relief packets” of two four-milligram nicotine-replacement lozenges.
- Providence hospitals in Portland, Milwaukie, Hood River, Newberg, Seaside, and Medford prohibit all tobacco products on their campuses and give employees education and cessation-treatment resources.
- St. Charles Medical Center in Bend provides nicotine-replacement therapy and “quit kits” of sugarfree gum, mints, stir sticks, an herbal tea bag and smoking-cessation literature.

Surprising, sometimes contradictory details emerged when tobacco policies were examined. For example, some hospitals provide smoking shelters and others allow what they call “physician-directed smoking,” in which doctors in rare instances write orders permitting hospitalized patients to smoke outdoors. In some cases, hospitals may be in violation of the state’s Smokefree Workplace Law.

“Outdated tobacco policies, secondhand smoke and tobacco use at these hospitals pose health risks for employees, patients and visitors,” Hedberg says.

Advancing smokefree hospitals is the goal of Oregon’s StepUp Campaign, a consortium of DHS, OAHHS, medical centers, professional associations and others. They say smoking retards healing of trauma, burn and surgical wounds; smokers’ broken bones take twice as long to heal; and recovery room stays are 20 percent longer for smokers.

Hedberg says 83 percent of Oregonians don’t smoke, 80 percent of those who do smoke want to quit, and that smokefree workplaces have become the norm since January’s start of the new law.