

Case Study #1: Local Health Department Healthy Foods Policy

The Happy County Health Department Chronic Disease Prevention staff have been advocating for the adoption of a healthy meeting foods policy since 2009. Staff began their policy work by assessing the employee awareness with respect to worksite health promotion issues including tobacco use, stress, healthy eating and physical activity. Survey results indicated a high level of support for the adoption of a tobacco-free campus policy, but only moderate support for healthy foods policy relating to the contents of on-site vending machines and foods purchased for meetings utilizing program funds.

After sharing the survey results with his supervisor, the HC coordinator presented the results to the newly formed Happy County Worksite Wellness Committee. The Committee, made up of individuals representing each of the County departments, expressed reservations about supporting any kind of healthy foods policy, even for the health dept., because it could negatively impact sales at the on-site cafeteria and in the vending machines supporting the Commission for the Blind. Soon after the presentation to the wellness committee, the HC coordinator noticed candy/snack dishes popping up on employees' desks and in public waiting areas of the health dept.

The Public Health Administrator encouraged the HC coordinator to continue to participate in awareness building activities around the need for a healthy meeting foods policy while focusing most of his energy on assisting with the adoption of a tobacco-free campus policy supported by health dept. personnel. In 2012 the PHA retired and in a stroke of good luck, was replaced by the former head of the NYC Health Department who wanted to relocate to the Pacific Northwest because she was sick of living in an area hit by the Polar Vortex every year. The new PHA was shocked to learn that the Happy County Health Dept. did not have a healthy meeting foods or healthy vending machine policy on the books. She quickly instructed the HC coordinator to draft a policy based on the gold standard healthy meeting foods and healthy vending policies promoted by HPCDP and to also consider looking to the NYC Health Dept. for other policy references.

Within a few short months the PHA signed off on a comprehensive healthy meeting foods policy and a healthy vending machine foods policy for the Health & Human Services Dept. The PHA told the County Administrator that she hoped to set an example of healthy living within her department and that she would like to see other dept./division within Happy County government follow her lead in the adoption of similar healthy worksite policies.

Soon after the ink was dry on the policy, the PHA and HC coordinator briefed health dept. employees on the new policies at a required all staff meeting. Employees received a copy of the policies at which time the compliance procedures were reviewed and the PHA took questions from the staff.

Procedures:

The success of this policy is the shared responsibility of all Happy County Health & Human Services Dept. personnel. Employees are provided with materials and resources to help comply with this policy. This policy is operationalized through a focus on education and support. If issues arise with successfully implementing this policy, an employee should notify a supervisor or other manager/administrator.

Case Study #2: Tobacco-free College Campuses

In 2008, after years of broad-based smokefree policy advocacy work lead by the We Love Our Huskies University Student Health Center, the WLOHU president and her executive team passed a comprehensive Tobacco-free campus policy with an implementation date of Fall 2010. The President tapped the Student Health Center staff to organize and lead the policy Implementation Task Force.

Health Center staff made a concerted effort to build an implementation team made up of mid/high level management representatives from key departments in the university (housing, public safety, human resources, facilities management,



athletics, student affairs, government relations and several others). The local county TPEP coordinator was also invited to serve on the Implementation Task Force.

The Task Force established three subcommittees: 1) Policy Education, Marketing and Communications 2) Policy Enforcement 3) Promotion of Cessation/Benefits to Staff & Students. Sixteen months after devising and putting the implementation plan into action, the Tobacco-free campus policy took effect on September 15, 2010.

Awareness of and compliance with the new policy was strong during the 2010-2011 academic year. A small group of Task Force members including the TPEP coordinator continued to meet periodically, that first year to discuss and resolve any compliance issues that came up. In the spring of 2011, A graduate student in the School of Public Health conducted a survey of "Smoking Hotspots" that continued to persist on campus. Task Force members quickly addressed those hotspots by posting additional tobacco-free campus signage in appropriate locations.

Two years later the local health dept. experienced a significant turnover in staff, losing both their Healthy Communities and TPEP coordinators when the Board of County Commissioners announced they were considering giving their local health authority back to the state.

In 2013, when the new TPEP Coordinator contacted staff at the We Love Our Huskies University Student Health Center to inquire about their Tobacco-free campus policy success, he was informed that although the policy remained on the books, awareness and compliance with the policy had waned, over the years.

The Student Health Center representative reported that "community enforcement" of the policy had decreased because there were so many city-owned streets running through campus, where people could smoke without violating the policy. She also added that the new Student Health Center Director, her boss, thinks it might be better to set up some safe, discrete smoking shelters, rather than have the smoking on campus so visible and out near the flow of traffic. She has been directed to add questions about designated smoking areas/ shelters to the next National College Health Assessment survey to be fielded in the spring.

Case Study #3: Tobacco Retail Licensure

At the urging of the local county health department and the coordinated care organization Community Health Advisory Committee, the City of Clatskanie, Oregon adopted a tobacco retail licensing ordinance out of the desire to promote a wholesome environment where children are encouraged to make healthful choices that allow them to grow up to lead healthy, productive, prosperous lives.

Among other things, the comprehensive ordinance:

- Bans the sale of electronic smoking devices to minors
- Bans electronic smoking device self-service displays
- Requires tobacco retailers to obtain a license to sell tobacco products and electronic smoking devices
- Requires tobacco sales clerks to be at least 18 years of age
- Prohibits tobacco retailers from accepting coupons, multi-pack price discounts and other tobacco industry sponsored price reduction instruments
- Requires retailers to comply with all local state and federal laws applicable to tobacco products, tobacco paraphernalia or tobacco retailing



The original draft ordinance articulated the licensing process, fees and compliance/ monitoring procedures. The annual licensing fee was set at \$400 with a \$100 discount to be given to tobacco retailers who passed inspections two years in a row. Inspections of all tobacco retail establishments was to occur on an annual basis.

However, the Oregon Small Grocers Association lobbyist was able to convince a majority of the Could be Anywhere city councilors that the licensing fee was set too high and would actually be seen as anti-business in a community that was especially hard hit during the economic recession. According to the Grocers Assoc., there are approximately 250 tobacco retail outlets in COCBA, Oregon and these businesses provide over 2,000 living wage jobs in the community.

During the final public hearing of the ordinance the language was amended to reduce the annual license fee down to \$100. The procedure to conduct annual inspections remained in the ordinance, although the ordinance was silent with regard to who/what city department would conduct the inspections.