



Figure 1 Care-home worker's personal exposure.

time-concentration plot for a typical non-smoking care-home worker over a work shift. Overall, the workers' personal $PM_{2.5}$ exposure levels were much lower than those recorded in the smoking rooms with the geometric mean of the eight work-shift measurements being $24 \mu\text{g}/\text{m}^3$ (range $9\text{--}110 \mu\text{g}/\text{m}^3$). On average, care-home worker exposures to SHS were nearly 10 times lower than those recorded in the hospitality sector in Scotland (before the introduction of smoke-free legislation) where full shift $PM_{2.5}$ levels were recorded between 27 and 1070 with a geometric mean value of $202 \mu\text{g}/\text{m}^3$.²

Salivary cotinine data from non-smoking workers ($n=36$) within these eight care-homes confirmed that exposure to SHS at work is low. The geometric mean salivary cotinine level in these care-home workers was $0.37 \text{ ng}/\text{ml}$ prior to the introduction of the smoke-free legislation in March 2006 compared with $2.94 \text{ ng}/\text{ml}$ in bar workers.² Non-smoking care-home workers' levels reduced to $0.17 \text{ ng}/\text{ml}$ in the months after implementation of the legislation. It seems likely that this fall in cotinine levels arose from reduced exposure in social settings outside of work and is reflected in data from a population survey showing levels in non-smoking adults reducing by 39% from $0.43 \text{ ng}/\text{ml}$ to $0.26 \text{ ng}/\text{ml}$ after introduction of the restrictions on smoking in enclosed public places in Scotland.⁴

This is a small study and further work is needed to confirm that exposures of staff in care-homes and other situations where there are exemptions are adequately controlled.

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CORRECTION

doi:10.1136/oem.2008.039362corr1

A Nyberg, L Alfredsson, T Theorell, *et al*. Managerial leadership and ischaemic heart disease among employees: the Swedish WOLF study (*Occup Environ Med* 2009;**66**:51–5). The age-adjusted hazard ratio is missing for item 9 in table 4. The correct table is printed below.

Table 4 Association of standardised leadership scale items with incident IHD among employees with a minimum 4-year exposure

Items	Participants, n (events, n)	Age-adjusted hazard ratio for IHD per 1 SD increase in leadership score (95% CI)
1. My boss gives me the information I need	1463 (44)	0.65 (0.50 to 0.83)
2. My boss is good at pushing through and carrying out changes	1441 (44)	0.61 (0.45 to 0.81)
3. My boss explains goals and sub-goals for our work so that I understand what they mean for my particular part of the work	1453 (44)	0.61 (0.46 to 0.79)
4. I have a clear picture of what my boss expects of me	1454 (44)	0.77 (0.59 to 1.01)
5. My boss shows that he/she cares how things are for me and how I feel	1455 (44)	0.71 (0.54 to 0.93)
6. I have sufficient power in relation to my responsibilities	1442 (44)	0.64 (0.48 to 0.84)
7. My boss takes the time to become involved in his/her employees' professional development	1447 (44)	0.69 (0.51 to 0.92)
8. My boss encourages my participation in the scheduling of my work	1446 (44)	0.84 (0.63 to 1.12)
9. I am praised by my boss if I have done something good	1452 (44)	0.73 (0.55 to 0.97)
10. I am criticised by my boss if I have done something that is not good	1452 (44)	1.03 (0.77 to 1.38)

Response format: 1: "No, never"; 2: "No, seldom"; 3: "Yes, sometimes"; 4: "Yes, often". Internal consistency (Cronbach α) = 0.86.
IHD, ischaemic heart disease.



CORRECTION

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