

Core Competency	Skill set	References
<p>1. Tobacco dependence knowledge and education: <i>Provide clear and accurate information about tobacco use, strategies for quitting, the scope of the health impact on the population, the causes and consequences of tobacco use</i></p>	<p>a. Describe the prevalence and patterns of tobacco use, dependence and cessation in the country and region in which the treatment is provided, and how rates vary across demographic, economic and cultural subgroups.</p>	<p>https://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/exec-summary.pdf</p> <p>U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: 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, 2012.</p> <p>The Tobacco Atlas. Fifth edition.</p> <p>Eriksen, M., Mackay, J., Schluger, N., Islami, F., & Drope, J. (2015). The Tobacco Atlas: Fifth Edition. American Cancer Society.</p> <p>Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2017.</p> <p>https://www.cdc.gov/tobacco/disparities/mental-illness-substance-use/index.htm</p>
	<p>b. Explain the role of treatment for tobacco use and dependence within a comprehensive tobacco control program.</p>	<p>http://tobaccocontrol.bmj.com/content/8/2/196</p> <p>Curbing the epidemic: governments and the economics of tobacco control Tobacco Control 1999;8:196-201.</p> <p>WHO report on the global tobacco epidemic, 2017: monitoring tobacco use and prevention policies.</p> <p>Geneva: World Health Organization; 2017. License: CC BY-NC-SA 3.0 IGO.</p> <p>Centers for Disease Control and Prevention. (2014).</p> <p>Best Practices for Comprehensive Tobacco Control Programs. 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, Atlanta, GA.</p> <p>Burns, D. (2000). <i>Smoking Cessation: Recent Indicators of What's Working at a Population Level</i>. (Monograph 12). Retrieved July 19, 2018, from https://cancercontrol.cancer.gov/brp/tcrb/monographs/12/Chapter_1.pdf</p>

Core Competency	Skill set	References
	<p>c. Utilize the findings of national reports, research studies, and guidelines on tobacco treatment</p>	<p>https://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/exec-summary.pdf</p> <p>U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: 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, 2012.</p> <p>https://www.ncbi.nlm.nih.gov/books/NBK44324/</p> <p>Office on Smoking and Health (US). The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. Atlanta (GA): Centers for Disease Control and Prevention (US); 2006</p> <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.</p>
	<p>d. Explain the societal and environmental factors that promote and inhibit the spread of tobacco use and dependence.</p>	<p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2928221</p> <p>https://www.theexprogram.com/resources/blog/engaging-the-disengaged-with-quit-smoking-incentives/</p> <p>Hughes, J., & D, H. (1986). Signs and symptoms of tobacco withdrawal. Arch Gen Psychiatry, 43, 289-94.</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3767415/</p> <p>Rose, J., Behm, F., & Levin, E. (1993). Role of nicotine dose and sensory cues in the regulation of smoke intake. Pharmacol Biochem Behav, 44, 891-900. doi:https://doi.org/10.1016/0091-3057(93)90021-K</p> <p>Cummings, K., Fong, G., & Borland, R. (2009). Evidence from Societal and Community Influences on Tobacco Use and Dependence. Annual Review of Clinical Psychology, 5, 433-458. Retrieved , from https://www.annualreviews.org/doi/full/10.1146/annurev.clinpsy.032408.153607</p> <p>https://www.surgeongeneral.gov/library/reports/50-years-of-progress/exec-summary.pdf</p>
	<p>e. Explain the health consequences of tobacco use and benefits of quitting, and the basic mechanisms of the more common</p>	<p>https://www.surgeongeneral.gov/library/reports/50-years-of-progress/#execsumm</p> <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</p>

Core Competency	Skill set	References
	tobacco induced disorders.	Smoking and Health, 2014. Hughes, J., & Hatsukami, D. (1986). Signs and Symptoms of Tobacco Withdrawal. <i>Arch Gen Psychiatry</i> , 43(3), 289–294. doi:10.1001/archpsyc.1986.01800030107013
	f. Describe how tobacco dependence develops and be able to explain the biological, psychological, and social causes of tobacco dependence.	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.
	g. Summarise and be able to apply valid and reliable diagnostic criteria for tobacco dependence.	Diagnostic and statistical manual of mental disorders (5th ed.). (2013). Arlington: American Psychiatric Association. Heatherton, T.F., Kolowski, L.T., Frecker R.C., Fagerstrom, K.O. (1991). The Fagerstrom test for nicotine dependence; a revision of the Fagerstrom tolerance questionnaire. <i>British Journal of Addiction</i> , 86, 1119-27. Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.
	h. Describe the chronic-relapsing nature of tobacco dependence, including typical relapse patterns, and predisposing factors.	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.
	i. Provide information that is gender, age, and culturally sensitive and appropriate to learning style and abilities.	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services. Miller WR, Rollnick S (2002). <i>Motivational Interviewing</i> . NY: Guilford
	j. Identify evidence-based treatment strategies and the pros and cons for each strategy.	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services. Hughes JR (2008). An algorithm for choosing among smoking cessation treatments. <i>Journal of Substance Abuse Treatment</i> , 34, 426-432.
	k. Be able to discuss alternative therapies such as harm reduction, hypnosis	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.

Core Competency	Skill set	References
	and acupuncture.	
	1. Demonstrate ability to access information on the above topics.	Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2017
2. Counselling skills <i>Demonstrate effective application of counselling theories and strategies to establish a collaborative relationship, and to facilitate client involvement in treatment and commitment to change</i>	a. Demonstrate effective counselling skills such as active listening and empathy that facilitate the treatment process.	<p>Rogers, C. R. (1959). A Theory of Therapy, Personality, and Interpersonal Relationships: As Developed in the Client-Centered Framework. In S. Koch (Ed.), Psychology: A Study of a Science. Formulations of the Person and the Social Context (Vol. 3, pp. 184-256). New York: McGraw Hill.</p> <p>Boudreaux, E. D., Sullivan, A., Abar, B., Bernstein, S. L., Ginde, A. A., & Camargo, C. A. (2012). Motivation rulers for smoking cessation: a prospective observational examination of construct and predictive validity. <i>Addiction Science & Clinical Practice</i>, 7(1), 8. http://doi.org/10.1186/1940-0640-7-8</p> <p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: U.S. Department of Health and Human Services.</p>
	b. Demonstrate establishing a warm, confidential, and non-judgmental counselling environment.	<p>Rollnick, S., Miller, W., Butler, C., & Aloia, M. (2007). Motivational Interviewing in Health Care: Helping Patients Change Behavior. New York: Guilford Press.</p> <p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Summary of the HIPAA Privacy Rule. (2013). Retrieved January 25, 2018 from https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html</p>
	c. Describe and demonstrate use of an evidence-based method for brief interventions for treating tobacco use and dependence, as identified in current guidelines.	<p>Capuzzi, D., & Stauffer, M. (Eds.). (2016). Counseling and Psychotherapy (6th ed.). Alexandria, VA: American Counseling Association.</p> <p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: U.S. Department of Health and Human Services.</p>
	d. Describe the use of models of behaviour change including motivational interviewing, cognitive therapy, and supportive	<p>Toseland, R., & Rivas, R. (2005). Introduction to Group Work Practice. Needham Heights, MA, USA: Allyn & Bacon, Inc.</p> <p>Aveyard, P., & West, R. (2007). Managing smoking cessation. <i>BMJ : British Medical Journal</i>, 335(7609), 37–41. http://doi.org/10.1136/bmj.39252.591806.47</p> <p>Jacobs, N., & Reupert, A. (2014). The effectiveness of Supportive Counseling, based on Rogerian principles: A systematic review of</p>

Core Competency	Skill set	References
	counselling.	<p>recent international and Australian research. Melbourne: PACFA.</p> <p>Naar, S., & Safren S.A. (2017) Motivational Interviewing and CBT. New York, NY: The Guilford Press</p> <p>Marlatt, G., & George, W. (1984). Relapse Prevention: Introduction and Overview of the Model. <i>Addiction</i>, 79(4), 261-273. Retrieved , from https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1360-0443.1984.tb03867.x</p> <p>Miller, W.R. & Rollnick, S. (2013). <i>Motivational Interviewing. Helping People Change</i> (3rd ed.). New York, NY: The Guildford Press.</p>
	e. Demonstrate the effective use of clinically sound strategies to enhance motivation and encourage commitment to change.	<p>Hendershot, C., Witkiewitz, K., George, W., & Marlatt, G. (2011). Relapse prevention for addictive behaviors. <i>Substance Abuse Treatment, Prevention, and Policy</i>, Retrieved March 3, 2018, from https://doi.org/10.1186/1747-597X-6-17</p> <p>Miller, W.R. & Rollnick, S. (2013). <i>Motivational Interviewing. Helping People Change</i> (3rd ed.). New York, NY: The Guildford Press.</p> <p>Capuzzi, D., & Stauffer, M. (Eds.). (2016). <i>Counseling and Psychotherapy</i> (6th ed.). Alexandria, VA: American Counseling Association.</p> <p>Miller, W. R., & Rollnick, S. (2004). Talking Oneself Into Change: Motivational Interviewing, Stages of Change, and Therapeutic Process. <i>Journal of Cognitive Psychotherapy</i>, 18(4), 299-308. http://dx.doi.org/10.1891/jcop.18.4.299.64003</p>
	f. Demonstrate competence in at least one of the empirically supported counselling modalities such as individual, group and telephone counseling.	<p>Yalom, I., & Leszcz, M. (2005). <i>The Theory and Practice of Group Psychotherapy</i>. New York: Basic Books.</p> <p>https://bphc.hrsa.gov/</p>
<p>3. Assessment interview <i>Conduct an assessment interview to obtain comprehensive and accurate data needed for</i></p>	<p>a. Demonstrate the ability to conduct an intake assessment interview including:</p> <ul style="list-style-type: none"> i. tobacco use history ii. validated measures of motivation 	<p>Medline Plus – Nicotine Gum https://medlineplus.gov/druginfo/meds/a684056.html</p> <p>Caonnetto, P., & Polosa, R. (2008). Common predictors of smoking cessation in clinical practice. <i>Respiratory Medicine</i>, 102.</p> <p>Boudreaux, E., Sullivan, A., Abar, B., Bernstein, S., Ginde, A., & Camargo, C. (2012). Motivation rulers for smoking cessation: a prospective observational examination of construct and predictive</p>

Core Competency	Skill set	References
treatment planning	<p>iii. to quit validated measures for assessing tobacco use and dependence</p> <p>iv. current challenges and barriers to attaining permanent abstinence</p> <p>v. current strengths to support abstinence.</p> <p>vi. prior quit attempts including treatment experiences, successes and barriers</p> <p>vii. availability of social support systems</p> <p>viii. preferences for treatment.</p> <p>ix. cultural factors influencing making a quit attempt assessments.</p>	<p>validity. <i>Addict Sci Clin Pract</i>, 7(1). doi: 10.1186/1940-0640-7-8</p> <p>Boudreaux,ED., Sullivan, A. , Abar, B., Bernstein, S., Ginde, A., Camargo, C. (2012) Motivation rulers for smoking cessation: a prospective observational examination of construct and predictive validity. <i>Addict Sci Clin Pract</i>, 7(1). doi: 10.1186/1940-0640-7-8</p> <p>Bandura, A. (1994). Self-efficacy. In V. S. Ramachaudran (Ed.), <i>Encyclopedia of human behavior</i> (Vol. 4, pp. 71-81). New York: Academic Press. (Reprinted in H. Friedman [Ed.], <i>Encyclopedia of mental health</i>. San Diego: Academic Press, 1998).</p> <p>Bandura, A. (1977). <i>Social learning theory</i>. Englewood Cliffs, N.J.: Prentice Hall.</p> <p>Miller WR, Rollnick S. (2012). <i>Motivational interviewing</i>. Guilford Press, New York.</p> <p>Thomas, D., Mackinnon, A. J., Bonevski, B., Abramson, M. J., Taylor, S., Poole, S. G., . . . George, J. (2016). Development and validation of a 21-item challenges to stopping smoking (CSS-21) scale. <i>BMJ Open</i>, 6(3), e011265. doi:10.1136/bmjopen-2016-011265</p> <p>Abrams, D.B., Niaura, R.S., Brown, R.A., Emmons, K.M., Goldstein, M.G., & Monti, P.M. (2003). <i>The tobacco dependence treatment handbook: A guide to best practices</i>. New York: Guilford Press.</p> <p>Yerger, V. B., & McCandless, P. M. (2011). Menthol sensory qualities and smoking topography: a review of tobacco industry documents. <i>Tob Control</i>, 20 Suppl 2, ii37-43.</p> <p>Millqvist, E., Ternesten-Hasseus, E., & Bende, M. (2013). Inhalation of menthol reduces capsaicin cough sensitivity and influences inspiratory flows in chronic cough. <i>Respir Med</i>, 107(3), 433-438.</p> <p>Kozlowski, L., Porter, C., Orleans, C., Pope, M., & Heatherton, T. (1994). Predicting smoking cessation with self-reported measures of nicotine dependence: FTQ, FTND, and HSI. <i>Drug Alcohol Depend</i>, 34, 211 - 216.</p> <p>http://www.uky.edu/~eushe2/Bandura/Bandura1994EHB.pdf</p> <p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Twyman, L., Bonevski, B., Paul, C., & Bryant, J. (2014). Perceived barriers to smoking cessation in selected vulnerable groups: a systematic review of the qualitative and quantitative literature. <i>BMJ Open</i>, 4(12), e006414. doi:10.1136/bmjopen-2014-006414</p> <p>Pérez-Ríos, M., Santiago-Pérez, M., Alonso, B., Malvar, A., Hervada, X., & de Leon, J. (2009). Fagerstrom test for nicotine dependence vs heavy smoking index in a general population survey. <i>BMC Public Health</i>, 9, 493. http://doi.org/10.1186/1471-2458-9-493</p> <p>Dodgen, C.E. (2005) <i>Nicotine Dependence: Understanding and</i></p>

Core Competency	Skill set	References
		<p>applying the most effective treatment interventions. American Psychological Association. p.175-180.</p> <p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Ryan, H., Wortley, P., Easton, A., Pederson, L., & Greenwood, G. (2001). Smoking among lesbians, gays, and bisexuals: a review of the literature. <i>American Journal of Preventive Medicine</i>, 21, 142-149.</p> <p>Heatherton TF, Kozlowski LT, Frecker RC, & Fagerström KO (1991).The Fagerström Test for Nicotine Dependence: A revision of the Fagerström Tolerance Questionnaire. <i>Br J Addict</i> 86, 1119–1127.</p>
	<p>b. Demonstrate the ability to gather basic medical history information and conduct a brief screening for psychiatric and substance abuse issues.</p>	<p>Richter, K. P., & Arnsten, J. H. (2006). A rationale and model for addressing tobacco dependence in substance abuse treatment. <i>Substance Abuse Treatment, Prevention, and Policy</i>, 1, 23. http://doi.org/10.1186/1747-597X-1-23</p> <p>Baca, CT, Yahne, CE., Smoking Cessation during substance abuse treatment: What you need to know. <i>Journal of Substance Abuse Treatment</i> 36 (2009), pp. 205-219.</p> <p>Prochaska JJ, Delucchi K, Hall SM (2004). A meta-analysis of smoking cessation interventions with individuals in substance abuse treatment or recovery. <i>Journal of Consulting and Clinical Psychology</i>, 72, 1144–1156.</p>
	<p>c. Describe when to consult with primary medical care providers and make appropriate referrals before treatment planning is implemented.</p>	<p>Bodenheimer, T., Wagner, E. H., & Grumbach, K. (2002). Improving primary care for patients with chronic illness. <i>JAMA</i>, 288, 1774-1779. doi:10.1001/jama.288.14.1775</p> <p>https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/</p>
	<p>d. Describe the existing objective measures of tobacco use such as CO monitoring, and cotinine level</p>	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Begh, R., Lindson-Hawley, N., & Aveyard, P. (2015). Does reduced smoking if you can't stop make any difference? <i>BMC Medicine</i>, 13, 257. http://doi.org/10.1186/s12916-015-0505-2</p> <p>Thomas, J., Ebbert, J., Patten, C., Dale, L., Bronars, C., & Schroeder, D. (2006). Measuring nicotine dependence among smokeless tobacco users. <i>Addictive Behaviors</i>, 31(9), 1511-1521.</p> <p>Heatherton TF, Kozlowski LT, Frecker RC, & Fagerström KO (1991).The Fagerström Test for nicotine dependence: A revision of the Fagerström Tolerance Questionnaire. <i>Br J Addict</i> 86, 1119–1127.</p>

Core Competency	Skill set	References
<p>4. Treatment planning <i>Demonstrate the ability to develop an individualized treatment plan using evidence-based treatment strategies</i></p>	<p>a. In collaboration with the client, identify specific and measurable treatment objectives.</p>	<p>Butterworth, S. (2010). Health-coaching strategies to improve patient-centered outcomes. <i>The Journal of the American Osteopathic Association</i>, 110 (No.4 suppl 5), eS12-eS14. Retrieved July 18, 2018 from http://jaoa.org/article.aspx?articleid=2093913</p> <p>Cinciripini PM, Wetter DW, & McClure JB (1997). Scheduled reduced smoking: effects on smoking abstinence. <i>Addictive Behaviors</i>, 22, 759-67.</p> <p>Miller, W. R. and Rollnick, S. (1991) <i>Motivational interviewing: Preparing people to change addictive behavior</i>. New York: Guilford Press.</p> <p>Cropsey, K. L., Trent, L. R., Clark, C. B., Stevens, E. N., Lahti, A. C., & Hendricks, P. S. (2014). How low should you go? Determining the optimal cutoff for exhaled carbon monoxide to confirm smoking abstinence when using cotinine as reference. <i>Nicotine Tob Res</i>, 16(10), 1348-1355.</p> <p>Lindson-Hawley, N., Banting, M., West, R., et al. (2016). Gradual Versus Abrupt Smoking Cessation: A Randomized, Controlled Noninferiority Trial. <i>Ann Intern Med</i>, 164, 585-592. doi: 10.7326/M14-2805</p> <p>Hughes, J. R., & Callas, P. W. (2011). Is Delaying a Quit Attempt Associated With Less Success? <i>Nicotine & Tobacco Research</i>, 13(12), 1228–1232. http://doi.org/10.1093/ntr/ntr207</p> <p>Aveyard, P., & West, R. (2007). Managing smoking cessation. <i>BMJ : British Medical Journal</i>, 335(7609), 37–41. http://doi.org/10.1136/bmj.39252.591806.47</p>

Core Competency	Skill set	References
	<p>b. Plan-individualised treatments that account for patient assessment factors identified during the intake assessment and history gathering.</p>	<p>http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/prescrib.html</p> <p>Kozlowski, L., Porter, C., Orleans, C., Pope, M., & Heatherton, T. (1994). Predicting smoking cessation with self-reported measures of nicotine dependence: FTQ, FTND, and HSI. <i>Drug Alcohol Depend</i>, 34, 211 - 216.</p> <p>Clinical Guidelines for Prescribing Pharmacotherapy for Smoking Cessation. Content last reviewed December 2012. Agency for Healthcare Research and Quality, Rockville, MD.</p> <p>Elfeddali, I., Bolman, C., Candel, M. J. J. M., Wiers, R. W. and De Vries, H. (2012), The role of self-efficacy, recovery self-efficacy, and preparatory planning in predicting short-term smoking relapse. <i>British Journal of Health Psychology</i>, 17: 185–201. doi:10.1111/j.2044-8287.2011.02032.x</p> <p>Therapists’ Manual and Intervention Materials. The University of Texas M.D. Anderson Cancer Center, Division of Cancer Prevention, Department of Behavioral Science. Sections adapted for use Nov. 2016., https://doi.org/10.1016/0376-8716(94)90158-9.</p> <p>Bandura A (1977). Toward a unifying theory of behavior change. <i>Psych Review</i>, 84, 191-215.</p> <p>Mahaffey, B. L., Gonzalez, A., Farris, S. G., Zvolensky, M. J., Bromet, E. J., Luft, B. J., & Kotov, R. (2016). Smoking to Regulate Negative Affect: Disentangling the Relationship Between Posttraumatic Stress and Emotional Disorder Symptoms, Nicotine Dependence, and Cessation-Related Problems. <i>Nicotine Tob Res</i>, 18(6), 1471-1478</p> <p>Koegelenberg, C. F., Noor, F., Bateman, E. D., van Zyl-Smit, R. N., Bruning, A., O'Brien, J. A., . . . Irusen, E. M. (2014). Efficacy of varenicline combined with nicotine replacement therapy vs varenicline alone for smoking cessation: a randomized clinical trial. <i>JAMA</i>, 312(2), 155-161.</p> <p>Glover, E. D., Glover, P. N., & Payne, T. J. (2003). Treating nicotine dependence. <i>Am J Med Sci</i>, 326(4), 183-186.</p> <p>Hughes JR (2008). An algorithm for choosing among smoking cessation treatments. <i>Journal of Substance Abuse Treatment</i>, 34, 426-432.</p> <p>Vickerman, K. A., Schauer, G. L., Malarcher, A. M., Zhang, L., Mowery, P., & Nash, C. M. (2015). Quitline Use and Outcomes among Callers with and without Mental Health Conditions: A 7-Month Follow-Up Evaluation in Three States. <i>Biomed Res Int</i>, 2015, 817298. doi:10.1155/2015/817298</p>

Core Competency	Skill set	References
	<p>c. Collaboratively develop a treatment plan that uses evidence-based strategies to assist the client in moving toward a quit attempt, and/or continued abstinence from tobacco.</p>	<p>Fiore, M., Jaen, C., & Baker, T. (2008,). Surgeon General SurgeonGeneral.gov. Clinical Guidelines and Recommendations Agency for Healthcare Research & Quality. Retrieved March 13, 2018, from http://www.surgeongeneral.gov/tobacco/treating_tobacco_use08.pdf</p> <p>Heckman, C. J., Egleston, B. L., & Hofmann, M. T. (2010). Efficacy of motivational interviewing for smoking cessation: a systematic review and meta-analysis. <i>Tob Control</i>, 19(5), 410-416</p> <p>U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults. 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, 2016.</p> <p>White, A. R., Rampes, H., Liu, J. P., Stead, L. F., & Campbell, J. (2014). Acupuncture and related interventions for smoking cessation. <i>Cochrane Database Syst Rev</i>(1), CD000009. doi:10.1002/14651858.CD000009.pub4</p> <p>May, S., West, R., Hajek, P., McEwen, A., & McRobbie, H. (2006). Randomized controlled trial of a social support ('buddy') intervention for smoking cessation. <i>Patient Educ Couns</i>, 64(1-3), 235-241.</p>
	<p>d. Describe a plan for follow up to address potential issues including negative outcomes.</p>	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Swanson, J. A., Lee, J. W., & Hopp, J. W. (1994). Caffeine and nicotine: A review of their joint use and possible interactive effects in tobacco withdrawal. <i>Addictive Behaviors</i>, 19(3), 229-256. http://dx.doi.org/10.1016/0306-4603(94)90027-2</p> <p>Marlatt, G. A. & Gordon, J.R. (Ed.). (1985). <i>Relapse Prevention: Maintenance strategies in the treatment of addictive behaviors</i>. New York: Guilford Press.</p> <p>Marlatt, G. A. & Gordon, J.R. (Ed.). (1985). <i>Relapse Prevention: Maintenance strategies in the treatment of addictive behaviors</i>. New York: Guilford Press.</p>
	<p>e. Demonstrate the process to make referrals to other practitioners or to</p>	<p>Kroon, L. (2007). Drug Interactions with Smoking. <i>Am J Health Syst Pharm</i>, 64(18), 1917-1921</p> <p>Centers for Disease Control and Prevention. <i>Best Practices for</i></p>

Core Competency	Skill set	References
	recommend additional care.	<p><i>Comprehensive Tobacco Control Programs 2014</i>. Atlanta: 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, 49-51</p> <p>Baer J, Lichtenstein E (1988). Classification and prediction of smoking relapse episodes: An exploration of individual differences. <i>J Consulting and Clin Psychology</i>, 56, 104-110.</p> <p>Cosci, F., Corlando, A., Fornai, E., Pistelli, F., Paoletti, P., & Carrozzi, L. (2009). Nicotine dependence, psychological distress and personality traits as possible predictors of smoking cessation. Results of a double-blind study with nicotine patch. <i>Addict Behav</i>, 34(1), 28-35.</p> <p>USPHS Clinical Practice Guideline Treating Tobacco Use and Dependence 2008</p>
<p>5. Pharmacotherapy Provide clear and accurate information about pharmacotherapy options available and their therapeutic use</p>	a. Describe the benefits of combining pharmacotherapy and counselling.	<p>Patnode, C. D., Henderson, J. T., Thompson, J. H., Senger, C. A., Fortmann, S. P., & Whitlock, E. P. (2015). Behavioral Counseling and Pharmacotherapy Interventions for Tobacco Cessation in Adults, Including Pregnant Women: A Review of Reviews for the U.S. Preventive Services Task Force. <i>Ann Intern Med</i>, 163(8), 608-621.</p> <p>U.S. Preventive Services Task Force Evidence Syntheses, formerly Systematic Evidence Reviews.</p> <p>Also available online at https://www.aafp.org/afp/2016/0515/od1.html</p>
	b. Provide information on correct use, efficacy, adverse events, contraindications, known side effects and exclusions for all tobacco dependence medications approved by national regulatory agencies.	<p>LeHouezec, J. (2003). Role of Nicotine Pharmacokinetics in nicotine addiction and nicotine replacement therapy: A review. <i>International journal of tuberc Lung Dis</i>, 7(9), 811-819.</p> <p>Stead, L. F., Perera, R., Bullen, C., Mant, D., Hartmann-Boyce, J., Cahill, K., & Lancaster, T. (2012). Nicotine replacement therapy for smoking cessation. <i>Cochrane Database Syst Rev</i>, 11, CD000146.</p>
	c. Identify information relevant to a client's current and past medical, psychiatric, and smoking history,(including past treatments) that may impact pharmacotherapy	<p>Faessel, H., Obach, R., Rollema, H., Ravva, P., Williams, K., & Burstein, A. (2010). Review of the Clinical Pharmacokinetics and Pharmacodynamics of Varenicline for Smoking Cessation. <i>Clin Pharmacokinet</i>, 49(12), 799-816.</p> <p>Swanson, J. A., Lee, J. W., Hopp, J. W., & Berk, L. S. (1997). The impact of caffeine use on tobacco cessation and withdrawal. <i>Addict Behav</i>, 22(1), 55-68.</p> <p>Chiolero, A., Faeh, D., Paccaud, F., Cornuz, J. (2008). Consequences of smoking for body weight, body fat distribution, and insulin</p>

Core Competency	Skill set	References
	decisions.	<p>resistance. <i>Am J Clin Nutr</i>, 87(4): 801-9.</p> <p>Farley, A. C., Hajek, P., Lycett, D., & Aveyard, P. (2012). Interventions for preventing weight gain after smoking cessation. <i>Cochrane Database Syst Rev</i>, 1, CD006219.</p> <p>Anthenelli, R., Benowitz, N., West, R., et. Al. (2016). Neuropsychiatric safety and efficacy of varenicline, bupropion, and nicotine patch in smokers with and without psychiatric disorders (EAGLES): a double-blind, randomised, placebo-controlled clinical trial. <i>The Lancet</i>, 387(10037), 2507-2520.</p>
	d. Provide appropriate patient education for therapeutic choices and dosing for a wide range of patient situations.	<p>Abrams, D.B., Niaura, R.S., Brown, R.A., Emmons, K.M., Goldstein, M.G., & Monti, P.M. (2003). <i>The tobacco dependence treatment handbook: A guide to best practices</i>. New York: Guilford Press.</p> <p>Stead, L. F., Perera, R., Bullen, C., Mant, D., Hartmann-Boyce, J., Cahill, K., & Lancaster, T. (2012). Nicotine replacement therapy for smoking cessation. <i>Cochrane Database Syst Rev</i>, 11, CD000146.</p> <p>Chantix product label, accessed on 1/29/18 at: http://labeling.pfizer.com/ShowLabeling.aspx?id=557</p>
	e. Communicate the symptoms, duration, incidence and magnitude of nicotine withdrawal.	<p>https://www.cdc.gov/tobacco/data_statistics/fact_sheets/cessation/quitting/index.htm</p> <p>Cosci, F., Pistelli, F., Lazzarini, N., & Carrozzi, L. (2011). Nicotine dependence and psychological distress: outcomes and clinical implications in smoking cessation. <i>Psychology Research and Behavior Management</i>, 4, 119–128. http://doi.org/10.2147/PRBM.S14243</p> <p>Shiffman, S., West, R., Gilbert, D., Craving, S. W. G. o. t. A. o., & Withdrawal in Clinical, T. (2004). Recommendation for the assessment of tobacco craving and withdrawal in smoking cessation trials. <i>Nicotine Tob Res</i>, 6(4), 599-614.</p>
	f. Describe the use of combinations of medications and higher dose medications to enhance the probability of abstinence.	<p>Modifications To Labeling of Nicotine Replacement Therapy Products for Over-the-Counter Human Use: https://www.federalregister.gov/documents/2013/04/02/2013-07528/modifications-to-labeling-of-nicotine-replacement-therapy-products-for-over-the-counter-human-use accessed on 1/30/18</p>
	g. Identify second-line medications and be able to find information about them as needed.	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p>
	h. Identify possible adverse reactions and complications related to the use of	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p>

Core Competency	Skill set	References
	<p>pharmacotherapy for tobacco dependence, making timely referrals to medical professionals/services. Demonstrate ability to address concerns about minor and/or temporary side effects of these pharmacotherapies.</p>	<p>Fagerstrom, K., & Hughes, J. (2008). Varenicline in the treatment of tobacco dependence. <i>Neuropsychiatr Dis Treat</i>, 4(2), 353-363.</p> <p>Nicotine Nasal Spray: https://medlineplus.gov/druginfo/meds/a606020.html https://www.fda.gov/ohrms/dockets/ac/04/briefing/2004-4065b1-20-tab11A-Wellbutrin-Tabs-SLR028.pdf</p> <p>Anthenelli, R. M., Benowitz, N. L., West, R., St Aubin, L., McRae, T., Lawrence, D., . . . Evins, A. E. (2016). Neuropsychiatric safety and efficacy of varenicline, bupropion, and nicotine patch in smokers with and without psychiatric disorders (EAGLES): a double-blind, randomised, placebo-controlled clinical trial. <i>Lancet</i>, 387(10037), 2507-2520.</p> <p>Benowitz, N. L., Hukkanen, J., & Jacob, P., 3rd. (2009). Nicotine chemistry, metabolism, kinetics and biomarkers. <i>Handb Exp Pharmacol</i>(192), 29-60.</p>
	<p>i. Demonstrate ability to collaborate with other healthcare providers to coordinate the appropriate use of medications, especially in the presence of medical or psychiatric co-morbidities.</p>	<p>Hughes JR. (2007). Tobacco Treatment Specialists: A New Profession. <i>Journal of smoking cessation</i>, 2(S1):2-7.</p> <p>Sheffer C, Payne T, Ostroff J, et al. (2016). Increasing the Quality and Availability of Evidence-based Treatment for Tobacco Dependence through Unified Certification of Tobacco Treatment Specialists. <i>Journal of smoking cessation</i>, 11(4):229-235.</p> <p>van der Meer, R. M., Willemsen, M. C., Smit, F., & Cuijpers, P. (2013). Smoking cessation interventions for smokers with current or past depression. <i>Cochrane Database Syst Rev</i>(8), CD006102.</p> <p>Loestrin Fe. Norethindrone acetate and ethinyl estradiol tablets. Ethinyl Estradiol and ferrous fumarate tablets [product information]. Rockaway, NJ. Warner Chilcott Company, LLC. 2010.</p> <p>Zyprexa. Olanzapine [product information]. Lilly USA, LLC, Indianapolis, IN. 2017.</p> <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.</p> <p>Anthenelli, R. M., Benowitz, N. L., West, R., St Aubin, L., McRae, T., Lawrence, D., . . . Evins, A. E. (2016). Neuropsychiatric safety and efficacy of varenicline, bupropion, and nicotine patch in smokers with and without psychiatric disorders (EAGLES): a double-blind, randomised, placebo-controlled clinical trial. <i>Lancet</i>, 387(10037), 2507-2520.</p> <p>Zyban. Bupropion SR [product information]. Research Triangle Park, NC. GlaxoSmithKline. 2017.</p>

Core Competency	Skill set	References
		<p>Whelton, P. K., Carey, R. M., Aronow, W. S., Casey, D. E., Jr., Collins, K. J., Dennison Himmelfarb, C., . . . Wright, J. T., Jr. (2018). 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. <i>J Am Coll Cardiol</i>, 71(19), e127-e248.</p>
	<p>j. Provide information about alternative therapies based upon recognized reviews of effectiveness such as the Cochrane reviews and the USPHS Guidelines.</p>	<p>White, A. R., Rampes, H., Liu, J. P., Stead, L. F., & Campbell, J. (2014). Acupuncture and related interventions for smoking cessation. <i>Cochrane Database Syst Rev</i>(1), CD000009.</p> <p>Lindson-Hawley, N., Hartmann-Boyce, J., Fanshawe, T. R., Begh, R., Farley, A., & Lancaster, T. (2016). Interventions to reduce harm from continued tobacco use. <i>Cochrane Database Syst Rev</i>, 10, CD005231.</p> <p>National Academies of Sciences, Engineering, and Medicine. 2018. Public Health Consequences of E-Cigarettes. Washington, DC: The National Academies Press. https://doi.org/10.17226/24952.</p> <p>Barnes J., Dong C.Y., McRobbie H., Walker N., Mehta M., Stead L.F. (2010). Hypnotherapy for smoking cessation. <i>Cochrane Database Syst Rev</i>. 6(10):CD001008.</p> <p>Lindson-Hawley N., Aveyard P., Hughes J.R. (2012). Reduction versus abrupt cessation in smokers who want to quit. <i>Cochrane Database Syst Rev</i>. 14(11):CD008033</p> <p>Hughes, J.R., Stead L.F., Lancaster T. (2007). Antidepressants for smoking cessation. <i>Cochrane Database Syst Rev</i>. 24(1):CD000031.</p> <p>Cahill K., Lindson-Hawley N., Thomas K.H., Fanshawe T.R., Lancaster T. (2016). Nicotine receptor partial agonists for smoking cessation. <i>Cochrane Database Syst Rev</i>, 12,: CD006103.</p>
<p>6. Relapse prevention <i>Offer methods to reduce relapse and provide ongoing support for tobacco-dependent persons</i></p>	<p>a. Identify personal risk factors and incorporate into the treatment plan.</p>	<p>Hughes, J. R., Keely, J., & Naud, S. (2004). Shape of the relapse curve and long-term abstinence among untreated smokers. <i>Addiction</i>, 99(1), 29-38.</p> <p>Zhou, X., Nonnemaker, J., Sherrill, B., Gilseman, A. W., Coste, F., & West, R. (2009). Attempts to quit smoking and relapse: factors associated with success or failure from the ATTEMPT cohort study. <i>Addict Behav</i>, 34(4), 365-373.</p> <p>Tsoi D.T., Porwal, M., Webster, A.C. (2010). Interventions for smoking cessation and reduction in individuals with schizophrenia. <i>Cochrane Database Syst Rev</i>, 16(6).</p> <p>Joseph AM, Fu SS, Lindgren B, Rothman AJ, Kodl M, Lando H, Doyle B, Hatsukami D (2011). Chronic disease management for tobacco dependence: A randomized, controlled trial. <i>Arch Intern Med</i>. 171, 1894-1900. doi:10.1001/archinternmed.2011.500.</p>

Core Competency	Skill set	References
		Larimer ME, Palmer, RS, & Marlatt, GA (1999). <i>Relapse Prevention: An Overview of Marlatt's Cognitive-Behavioral Model</i> . https://pubs.niaaa.nih.gov/publications/arh23-2/151-160.pdf
	b. Describe strategies and coping skills that can reduce relapse risk.	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Evins, A. E., Cather, C., Pratt, S. A., Pachas, G. N., Hoepfner, S. S., Goff, D. C., . . . Schoenfeld, D. A. (2014). Maintenance treatment with varenicline for smoking cessation in patients with schizophrenia and bipolar disorder: a randomized clinical trial. <i>JAMA</i>, 311(2), 145-154.</p> <p>Hajek, P., Stead, L. F., West, R., Jarvis, M., Hartmann-Boyce, J., & Lancaster, T. (2013). Relapse prevention interventions for smoking cessation. <i>Cochrane Database Syst Rev</i>(8), CD003999.</p>
	c. Provide guidance in modifying the treatment plan to reduce the risk of relapse throughout the course of treatment.	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Lester, R. A. (2011). Cognitive mechanisms underlying relapse to nicotine. <i>Rev Neurosci</i>, 22(4), 467-470.</p> <p>Agboola, S., McNeill, A., Coleman, T., & Leonardi Bee, J. (2010). A systematic review of the effectiveness of smoking relapse prevention interventions for abstinent smokers. <i>Addiction</i>, 105(8), 1362-1380.</p>
	d. Describe a plan for continued aftercare following initial treatment.	Joseph AM, Fu SS, Lindgren B, Rothman AJ, Kodl M, Lando H, Doyle B, Hatsukami D (2011). Chronic disease management for tobacco dependence: A randomized, controlled trial. <i>Arch Intern Med</i> . 171, 1894-1900. doi:10.1001/archinternmed.2011.500.
	e. Describe how to make referrals to additional resources to reduce risk of relapse.	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.
	f. Implement treatment strategies for someone who has lapsed or relapsed.	Larimer ME, Palmer, RS, & Marlatt, GA (1999). <i>Relapse Prevention: An Overview of Marlatt's Cognitive-Behavioral Model</i> . https://pubs.niaaa.nih.gov/publications/arh23-2/151-160.pdf
7. Diversity and specific health issues <i>Demonstrate competence in working with population subgroups and</i>	a. Provide culturally competent counselling	Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i> . Rockville, MD: U.S. Department of Health and Human Services.
	b. Describe specific treatment indications for special population groups (i.e. pregnant	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>Substance Abuse and Mental Health Services Administration, Results</p>

Core Competency	Skill set	References
<p><i>those who have specific health issues</i></p>	<p>women, adolescents, young adults, elderly, hospitalized patients, those with co-morbid psychiatric conditions).</p>	<p>from the 2013 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.</p> <p>Centers for Disease Control and Prevention. Tobacco use among adults with mental illness and substance use disorders. Retrieved from https://www.cdc.gov/tobacco/disparities/mental-illness-substance-use/index.htm</p> <p>Williams, J. M., & Foulds, J. (2007). Successful tobacco dependence treatment in schizophrenia. <i>Am J Psychiatry</i>, 164(2), 222-227; quiz 373.</p> <p>Williams, J. M., & Ziedonis, D. (2004). Addressing tobacco among individuals with a mental illness or an addiction. <i>Addict Behav</i>, 29(6), 1067-1083</p> <p>U.S. Department of Health and Human Services. (2010). <i>How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General</i>. 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, 2010.</p> <p>International Agency for Research on Cancer. (2007). <i>IARC Handbooks of Cancer Prevention, Tobacco Control Vol. 11: Reversal of Risk after Quitting Smoking</i>. Lyon, France: IARC.</p>
	<p>c. Demonstrate an ability to respond to high-risk client situations.</p>	<p>Miller, W.R., Rollnick, S. (2013). <i>Motivational Interviewing: Helping People Change</i>. New York: Guilford Press.</p>
	<p>d. Make effective treatment recommendations for non-cigarette tobacco users.</p>	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p> <p>I. W. G. o. t. E. o. C. R. t. h. (2007). Smokeless tobacco and some tobacco-specific N-nitrosamines. <i>IARC Monogr Eval Carcinog Risks Hum</i>, 89, 1-592.</p>
	<p>e. Describe recommendations for those exposed to environmental tobacco smoke pollution.</p>	<p>U.S. Department of Health and Human Services. (2006). <i>The health consequences of involuntary exposure to tobacco smoke. A report of the surgeon general</i>. 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.</p>

Core Competency	Skill set	References
<p>8. Documentation and evaluation <i>Describe and use methods for tracking individual progress, record keeping, program documentation, outcome measurement and reporting</i></p>	<p>a. Maintain accurate records utilising accepted coding practices that are appropriate to the setting where services are provided.</p>	<p>U.S. Department of Health and Human Services. (2010). <i>How tobacco smoke causes disease. A report of the surgeon general</i>. 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.</p>
	<p>b. Develop and implement a protocol for tracking client follow up and progress.</p>	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p>
	<p>c. Describe standardised methods of measuring recognised outcomes of tobacco dependence treatment for individuals and programs.</p>	<p>Fiore, M. C., Jaen, C. R., Baker, T. B., & et al. (2008). <i>Treating Tobacco Use and Dependence: 2008 Update</i>. Rockville, MD: U.S. Department of Health and Human Services.</p>
<p>9. Professional resources <i>Utilise resources available for client support and for professional education or consultation</i></p>	<p>a. Describe resources (web based, community, quitlines) available for continued support for tobacco abstinence for clients.</p>	<p>1-800-QUIT NOW www.becomeanex.org www.mylastdip.com https://www.cdc.gov/tobacco/campaign/tips/quit-smoking/index.html</p>
	<p>b. Identify community resources for referral for medical, psychiatric or psychosocial problems.</p>	<p>US Department of Health and Human Services. (2014). <i>The Health Consequences of Smoking-50 Years of Progress: A Report of the Surgeon General</i>. Atlanta (GA) www.nicotineanonymous.com www.globalbridges.org www.drugabuse.gov/publications/principles-drug...based.../bhavioral-4</p>
	<p>c. Name and use peer-reviewed journals, professional societies, websites, and newsletters, related to tobacco dependence</p>	<p>www.cdc.gov SRNT Public Health Service, US Dept of Health and Human Services CMS.gov American Society of Addiction Medicine, Inc. NCI.gov</p>

Core Competency	Skill set	References
	treatment and/or research.	American Psychiatric Association American Society of Addiction Medicine, Inc.
	d. Describe how patients can explore reimbursement for treatments.	https://www.healthcare.gov/ https://www.aafp.org/patient-care/public-health/tobacco-nicotine/coding-reference.html#self-pay https://www.cms.gov/Medicare/Coverage/CoverageGenInfo/ http://www.lung.org/assets/documents/tobacco/tobacco-cessation-coverage-in.pdf https://www.medicaid.gov/medicaid/quality-of-care/improvement-initiatives/tobacco/index.html http://www.lung.org/our-initiatives/tobacco/cessation-and-prevention/tobacco-cessation-and-affordable-care-act.html
10. Law and ethics <i>Consistently use a code of ethics and adhere to government regulations specific to the health care or work site setting</i>	a. Describe and use a code of ethics established by your professional discipline for tobacco dependence treatment specialists if available.	Sackett, D. L., Rosenberg, W. M., Gray, J. A., Haynes, R. B., & Richardson, W. S. (1996). Evidence based medicine: what it is and what it isn't. <i>BMJ : British Medical Journal</i> , 312(7023), 71–72. Fox, B.J. (2005). Framing tobacco control efforts within an ethical context. <i>Tobacco Control</i> 14:ii38-ii44. http://tobaccocontrol.bmj.com/content/14/suppl_2/ii38 Fisher, C.B. (2017). <i>Decoding the Ethics Code: A Practical Guide for Psychologists (4th edition)</i> . Thousand Oaks, CA: Sage. ISBN-13: 978-1483369297. Association for the Treatment of Tobacco Use and Dependence & NAADAC, the Association for Addiction Professionals (n.d). Tobacco Treatment Provider Code of Ethics [White paper]. Retrieved from https://www.attud.org/pdf/tobacco_treatment_provider_code_of_ethics_10152017.pdf https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2597880/ https://www.simplypsychology.org/case-study.html http://www.students4bestevidence.net/start-
	b. Describe the implications and utilise the regulations that apply to the tobacco treatment setting (confidentiality, HIPAA, work site specific	https://www.aafp.org/dam/AAFP/documents/patient_care/tobacco/group-visit-guide.pdf http://www.publichealthlawcenter.org/sites/default/files/resources/tclcf-tobacco-cessation-program-workplace-2011.pdf Freeburg, M.N., & McCaughan, A.M. (2008). HIPAA for dummies: A practitioner's guide. In G.R. Walz, J.C. Bleuer, & R. K. Yep (Eds.), <i>Compelling counseling interventions</i> (pp. 305-312). Ann Arbor, MI:

Core Competency	Skill set	References
	regulations).	Counseling Outfitters. Health Information Privacy. U.S. Department of Health & Human Services. Available at: https://www.hhs.gov/hipaa/for-professionals/index.html
	c. Maintain professional standards as required by professional license or certification.	Review requirements from specific state license boards for various professions
11. Professional development <i>Assume responsibility for continued professional development and contributing to the development of others</i>	a. Utilize the literature and other formal sources of inquiry to remain current in tobacco dependence Treatment.	Sheffer, C., Payne, T., Ostroff, J., Jolicoeur, D., Steinberg, M., Czabafy, S., . . . Perry, B. (2016). Increasing the Quality and Availability of Evidence-based Treatment for Tobacco Dependence through Unified Certification of Tobacco Treatment Specialists. <i>Journal of Smoking Cessation, 11</i> (4), 229-235. Hughes, J. (2007). Tobacco Treatment Specialists: A New Profession. <i>Journal of Smoking Cessation, 2</i> (S1), 2-7. doi:10.1375/jsc.2.suppl.2 McDermott, M. S., Beard, E., Brose, L. S., West, R., & McEwen, A. (2013). Factors associated with differences in quit rates between "specialist" and "community" stop-smoking practitioners in the English stop-smoking services. <i>Nicotine Tob Res, 15</i> (7), 1239-1247.
	b. Describe the implications of current research to the practice of tobacco dependence treatment.	Sheffer, C., Payne, T., Ostroff, J., Jolicoeur, D., Steinberg, M., Czabafy, S., . . . Perry, B. (2016). Increasing the Quality and Availability of Evidence-based Treatment for Tobacco Dependence through Unified Certification of Tobacco Treatment Specialists. <i>Journal of Smoking Cessation, 11</i> (4), 229-235. McDermott, M. S., Beard, E., Brose, L. S., West, R., & McEwen, A. (2013). Factors associated with differences in quit rates between "specialist" and "community" stop-smoking practitioners in the English stop-smoking services. <i>Nicotine Tob Res, 15</i> (7), 1239-1247.
	c. Disseminate knowledge and findings about tobacco treatment with others through formal and informal channels.	Sheffer, C., Payne, T., Ostroff, J., Jolicoeur, D., Steinberg, M., Czabafy, S., . . . Perry, B. (2016). Increasing the Quality and Availability of Evidence-based Treatment for Tobacco Dependence through Unified Certification of Tobacco Treatment Specialists. <i>Journal of Smoking Cessation, 11</i> (4), 229-235. Hughes JR. (2007). Tobacco Treatment Specialists: A New Profession. <i>Journal of smoking cessation, 2</i> (S1):2-7. McDermott, M. S., Beard, E., Brose, L. S., West, R., & McEwen, A. (2013). Factors associated with differences in quit rates between "specialist" and "community" stop-smoking practitioners in the English stop-smoking services. <i>Nicotine Tob Res, 15</i> (7), 1239-1247.

