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## **Comments Received:**

The North Carolina Division of Public Health, along with our sister agencies NC Division of Health Benefits and NC Division of Mental Health/Intellectual and Development Disabilities/Substance Abuse Services, reviewed the current N-SSATS and N-MHSS surveys. To increase the utility of the tobacco use treatment and policy information collected by N-SUMHS, we recommend the following:

1.) Create a survey section where organizations are asked about all tobacco use treatment services:

Do you provide any of the following tobacco use treatment services?

Screening clients for tobacco use

Screening clients for secondhand smoke/aerosol exposure	
Advising clients to quit all forms of tobacco	
Educating clients about the harms of all forms of tobacco use	
Adding tobacco use treatment goals to treatment plan	
Individual tobacco use treatment counseling	
Group tobacco use treatment counseling	
Referring to quit lines or other community resources for tobacco use treatment	
Nicotine replacement as a monotherapy (giving clients the nicotine patch on its own, or the gum or lozenge	on its own)
Nicotine replacement in combination (giving clients the nicotine patch in combination with the nicotine gum	or lozenge)
Non-nicotine smoking/tobacco cessation medications (for example, varenicline, bupropion)	

2.) Ask about 100% tobacco free campus policies:

Is your organization's campus 100% tobacco-free? (all tobacco use, including e-cigarettes and oral tobacco such as chew or dip, is prohibited indoors and outdoors, no smoking/tobacco use areas are provided outdoors on campus.)

Yes No

3.) Use tobacco use treatment terminology and update the definitions accordingly. (See attached document for the suggested terms and definitions).