

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?

Select all that apply:

- ☐ 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:

Screening for tobacco use: Determines a client's use of all tobacco products, used solely or in combination. A tobacco product is any product containing or derived from tobacco or nicotine that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, or ingested by any other means, including but not limited to cigarettes; e-cigarettes; heated tobacco; cigars; little cigars; snuff; and chewing tobacco. A tobacco product excludes any product that has been approved by the United States Food and Drug Administration for sale as a tobacco cessation product.

Screening for secondhand smoke/aerosol exposure: Secondhand smoke is what is emitted into the air from burning tobacco products or exhaled by someone who is smoking a tobacco product. Secondhand aerosol is emitted by electronic cigarettes or vapes when the user exhales after taking a puff. Both pose health risks to clients. It is recommended that providers screen clients, particularly children, pregnant people, and people with underlying health conditions, for exposure to secondhand smoke/aerosol.

Tobacco use treatment counseling: Interventions to help people who use any tobacco or combinations of tobacco products to become completely tobacco-free, this includes behavioral support or counseling in groups or individually.

Nicotine replacement therapy: Administers nicotine to the body by means other than tobacco, without other harmful chemicals found in tobacco. Common forms of nicotine replacement therapy are nicotine patches, nicotine gum or lozenges, nasal spray and inhaler. The goal of nicotine replacement is to prevent cravings in a tobacco user, allowing the person to abstain from tobacco.

-**Monotherapy:** providing patients with just one form of nicotine replacement (for example: the nicotine patch alone) to treat withdrawal

-**Combination therapy:** providing patients with a long acting form of nicotine replacement (ex: the nicotine patch) with a short acting form of nicotine replacement (the nicotine gum, lozenge, inhaler, or nasal spray) to treat urges and withdrawal.

Non-nicotine tobacco use treatment medications (by prescription): Are FDA approved medications that do not contain nicotine but act on the brain to reduce a person's craving for tobacco. Some common medications are varenicline (Chantix), Bupropion (Zyban, Wellbutrin), and Nortriptyline (Pamelor). Medications are often prescribed in conjunction with behavioral counseling or support groups to provide the best chance for achieving long-term tobacco abstinence. (<http://www.mayoclinic.com>)