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ATTUD is an organization of providers dedicated to the promotion of and increased access to evidence-based tobacco treatment for the tobacco user.

*Core Competencies  
For Evidence-based  
Treatment of Tobacco Dependence*

April, 2005

## *ATTUD Core Competencies for Tobacco Treatment Specialists*

### Goals of the Organization:

1. Build and maintain an organization representing providers dedicated to the treatment of tobacco use and dependence.
2. Establish standards for core competencies, for training, and for credentialing of tobacco treatment providers.
3. Establish multiple forums (e.g., annual meeting, listserv, and journal) for information exchange on best practices, innovations in treatment, and gaps in the empirical base of tobacco treatment.
4. Serve as an advocate and voice for tobacco users to promote the awareness and availability of effective tobacco treatments.
5. Serve as a reliable and respected resource of evidence-based tobacco use and dependence treatment for the health care community, regulatory agencies, private foundations, and especially tobacco users.
6. Promote the implementation of and increased access to evidence-based practice across the spectrum of treatment modalities via policy, funding, and system changes.

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## *ATTUD Core Competencies for Tobacco Treatment Specialists*

### Introduction

The Association for Treatment of Tobacco Use and Dependence (ATTUD) has an organizational goal to: “Establish standards for core competencies, for training and for credentialing of tobacco treatment providers.” These core competencies identify best-practice standards and are intended to provide guidance to purchasers of treatment services, educators, third party payers, certification and licensing boards, health-care organizations, government agencies, and consumers seeking treatment to become tobacco free.

The ATTUD standards identify the wide range of competencies important for providing comprehensive tobacco treatment across different provider systems. ATTUD recognizes that different specialist treatment providers may require different levels of proficiency depending upon worksites and roles. For example, a telephone counselor would not need to be proficient in group skills to provide competent telephone counseling. Or, an organization might provide resources or supervision to supplement treatment skills so that a specialist might need to be aware rather than proficient with a skill such as ‘explain the role of treatment in a comprehensive tobacco control program’

Three levels of provider proficiency, 1) aware 2) knowledgeable 3) proficient have been included with the competencies and skill sets. These standards can thereby be adapted to different provider or organizational needs while maintaining the full range of competencies important for comprehensive treatment. ATTUD encourages tobacco control program managers, treatment supervisors, accreditation bodies, and others to use the proficient, knowledgeable, and aware levels to adapt the skill sets to best fit the needs of their own programs, organizations, and communities.

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### Development Process

During the first nine months of 2004, ATTUD task force and committee members identified a set of 11 competencies with associated skill sets to describe the broad sets of knowledge, skills, and abilities needed by a professional to competently provide highly Intensive Tobacco Treatment in a variety of treatment settings. These skills and competencies and definitions were revised and approved by the ATTUD Board of Directors in September 2004. ATTUD then invited a wide range of tobacco treatment professionals and tobacco control experts to provide review and comment on the Tobacco Treatment Specialist definition and each of the core competencies and associated skill sets.

Fifty professionals provided input through an on-line survey. These professionals were from 20 different states in the US and from three other countries. The worksites of the respondents included quitlines, hospitals, academic institutions, outpatient health care sites, community health and education programs, and governmental settings. Work roles included researcher, policy maker, educator, clinician, and managers/administrators for tobacco control. One third of the respondents work full-time providing tobacco dependence treatment and more than ½ spend less than half-time providing treatment.

There was generally strong agreement with all of the competencies and skill sets

- Competency is an important and necessary standard
  - between 80% and 95% of respondents expressed strong agreement
- The skill set accurately describes the competency
- Between 72% and 90% strong agreement.
  - 1 person strongly disagreed with 1 skill set
  - fewer than 3 people disagreed somewhat with any of the 11 skill sets except for diversity and specific health issues for which 5 people somewhat disagreed.’

Many useful comments provided are included into the revised version of the TTS competencies that follow. This version of the Tobacco Treatment Competencies was approved by the ATTUD Board in April, 2005.

## *ATTUD Core Competencies for Tobacco Treatment Specialists*

ATTUD considers these standards the beginning of an ongoing process to define best practice for different providers within different settings. ATTUD encourages collaboration and input to enhance the utility of these competencies so that professionals and organizations can identify, implement, and evaluate evidence-based treatment to address tobacco dependence.

### **Standard for Tobacco Treatment Specialists**

#### **Definition:**

A Tobacco Treatment Specialist is a professional who possesses the skills, knowledge and training to provide effective, evidence-based interventions for tobacco dependence across a range of intensities. The TTS may have various professional affiliations and may work in a variety of settings including but not limited to hospitals, community health centers, HMOs, medical and dental practices, educational settings, social service agencies, public health organizations, tobacco treatment centers, telephone quitlines, drug abuse treatment programs and mental health centers. The TTS may engage not only in providing treatment but also in educating others (health care professionals, administrators, scientists, smokers, nonsmokers) about tobacco dependence treatments.

**A. Aware:** Basic level of mastery of the competency. Individuals may be able to identify the concept or skill but have limited ability to perform the skill.

**K. Knowledgeable:** Intermediate level of mastery of the competency. Individuals are able to apply and describe the skill.

**P. Proficient:** Advanced level of mastery of the competency. Individuals are able to synthesize critique or teach the skill.

## *ATTUD Core Competencies for Tobacco Treatment Specialists*

<b>Provider Competencies</b>	<b>Proficiency recommended according to treatment level</b>		
	<i>Minimal</i>	<i>Moderate</i>	<i>Intensive</i>
<p><b>1. Tobacco Dependence Knowledge and Education</b>  <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>	A ⇔ K	K ⇔ P	K ⇔ P
<p>Skill Set:</p> <ol style="list-style-type: none"> <li>1. 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.</li> <li>2. Explain the role of treatment for tobacco use and dependence within a comprehensive tobacco control program.</li> <li>3. Utilize the findings of national reports, research studies and guidelines on tobacco treatment.</li> <li>4. Explain the societal and environmental factors that promote and inhibit the spread of tobacco use and dependence.</li> <li>5. Explain the health consequences of tobacco use and benefits of quitting, and the basic mechanisms of the more common tobacco induced disorders.</li> <li>6. Describe how tobacco dependence develops and be able to explain the biological, psychological, and social causes of tobacco dependence.</li> <li>7. Summarize and be able to apply valid and reliable diagnostic criteria for tobacco dependence.</li> <li>8. Describe the chronic relapsing nature of tobacco dependence, including typical relapse patterns, and predisposing factors.</li> <li>9. Provide information that is gender, age, and culturally sensitive and appropriate to learning style and abilities.</li> <li>10. Identify evidence-based treatment strategies and the pros and cons for each strategy.</li> <li>11. Be able to discuss alternative therapies such as harm reduction, hypnosis, acupuncture, cigarette tapering.</li> <li>12. Demonstrate ability to access information on the above topics.</li> </ol>			

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	<u>Minimal</u>	<i>Moderate</i>	<i>Intensive</i>
<p><b>2. Counseling Skills</b>  <i>Demonstrate effective application of counseling theories and strategies to establish a collaborative relationship, and to facilitate client involvement in treatment and commitment to change</i></p>	A ⇔ K	P	P
<p>Skill Set:</p> <ol style="list-style-type: none"> <li>1. Demonstrate effective counseling skills such as active listening and empathy that facilitate the treatment process.</li> <li>2. Demonstrate establishing a warm, confidential and nonjudgmental counseling environment.</li> <li>3. Describe and demonstrate use of an evidence-based method for brief interventions for treating tobacco use and dependence, as identified in current guidelines.</li> <li>4. Describe the use of models of behavior change including motivational interviewing, cognitive therapy, and supportive counseling.</li> <li>5. Demonstrate the effective use of clinically sound strategies to enhance motivation and encourage commitment to change.</li> <li>6. Demonstrate competence in at least one of the empirically supported counseling modalities such as individual, group and telephone counseling.</li> </ol>			
<p><b>3. Assessment Interview</b>  <i>Conduct an assessment interview to obtain comprehensive and accurate data needed for treatment planning</i></p>	A ⇔ K	P	P
<p>Skill Set:</p> <ol style="list-style-type: none"> <li>1. Demonstrate the ability to conduct an intake assessment interview including:               <ol style="list-style-type: none"> <li>a. tobacco use history</li> <li>b. validated measures of motivation to quit</li> <li>c. validated measures for assessing tobacco use and dependence</li> <li>d. current challenges and barriers to attaining permanent abstinence</li> <li>e. current strengths to support abstinence.</li> <li>f. prior quit attempts including treatment experiences, successes and barriers</li> <li>g. availability of social support systems</li> <li>h. preferences for treatment.</li> <li>i. cultural factors influencing making a quit attempt</li> </ol> </li> <li>2. Demonstrate the ability to gather basic medical history information and conduct a brief screening for psychiatric and substance abuse issues.</li> <li>3. Describe when to consult with primary medical care providers and make appropriate referrals before treatment planning is implemented.</li> <li>4. Describe the existing objective measures of tobacco use such as CO monitoring, and cotinine level assessments.</li> </ol>			

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	<i>Minimal</i>	<i>Moderate</i>	<i>Intensive</i>
<b>4. Treatment Planning</b> <i>Demonstrate the ability to develop an individualized treatment plan using evidence-based treatment strategies</i>	A ⇔ K	K ⇔ P	P
Skill Set: 1. In collaboration with the client, identify specific and measurable treatment objectives. 2. Plan individualized treatments that account for patient assessment factors identified during the intake assessment and history gathering. 3. 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. 4. Describe a plan for follow up to address potential issues including negative outcomes. 5. Demonstrate the process to make referrals to other health care providers or to recommend additional care.			
<b>5. Pharmacotherapy</b> <i>Provide clear and accurate information about pharmacotherapy options available and their therapeutic use.</i>	K	K ⇔ P	P
Skill Set: 1. Describe the benefits of combining pharmacotherapy and counseling. 2. Provide information on correct use, efficacy, adverse events, contraindications, known side effects and exclusions for all tobacco dependence medications approved by national regulatory agencies. 3. Identify information relevant to a client’s current and past medical, psychiatric, and smoking history,(including past treatments) that may impact pharmacotherapy decisions. 4. Provide appropriate patient education for therapeutic choices and dosing for a wide range of patient situations. 5. Communicate the symptoms, duration, incidence and magnitude of nicotine withdrawal. 6. Describe the use of combinations of medications and higher dose medications to enhance the probability of abstinence. 7. Identify second-line medications and be able to find information about them as needed. 8. Identify possible adverse reactions and complications related to the use of 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. 9. 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. 10. Provide information about alternative therapies based upon recognized reviews of effectiveness such as the Cochrane reviews and the USPHS Guidelines.			

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	<i>Minimal</i>	<i>Moderate</i>	<i>Intensive</i>
<b>6. Relapse Prevention</b> <i>Offer methods to reduce relapse and provide ongoing support for tobacco-dependent persons</i>	A	P	P
Skill Set: 1. Identify personal risk factors and incorporate into the treatment plan. 2. Describe strategies and coping skills that can reduce relapse risk. 3. Provide guidance in modifying the treatment plan to reduce the risk of relapse throughout the course of treatment. 4. Describe a plan for continued aftercare following initial treatment. 5. Describe how to make referrals to additional resources to reduce risk of relapse. 6. Implement treatment strategies for someone who has lapsed or relapsed.			
<b>7. Diversity and Specific Health Issues</b> <i>Demonstrate competence in working with population subgroups and those who have specific health issues</i>	A	K ⇔ P	P
Skill Set: 1. Provide culturally competent counseling 2. Describe specific treatment indications for special population groups (i.e. pregnant women, adolescents, young adults, elderly, hospitalized patients, those with co-morbid psychiatric conditions). 3. Demonstrate an ability to respond to high-risk client situations. 4. Make effective treatment recommendations for non-cigarette tobacco users. 5. Describe recommendations for those exposed to environmental tobacco smoke pollution.			
<b>8. Documentation and Evaluation</b> <i>Describe and use methods for tracking individual progress, record keeping, program documentation, outcome measurement and reporting</i>	A	K ⇔ P	P
Skill Set: 1. Maintain accurate records utilizing accepted coding practices that are appropriate to the setting in which services are provided. 2. Develop and implement a protocol for tracking client follow-up and progress. 3. Describe standardized methods of measuring recognized outcomes of tobacco dependence treatment for individuals and programs.			

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	<i>Minimal</i>	<i>Moderate</i>	<i>Intensive</i>
<b>9. Professional Resources</b> <i>Utilize resources available for client support and for professional education or consultation</i>	A ⇔ K	K ⇔ P	P
Skill Set: 1. Describe resources (web based, community, quitlines) available for continued support for tobacco abstinence for clients. 2. Identify community resources for referral for medical, psychiatric or psychosocial problems. 3. Name and use peer-reviewed journals, professional societies, websites, and newsletters, related to tobacco dependence treatment and/or research. 4. Describe how patients can explore reimbursement for treatments.			
<b>10. Law and Ethics</b> <i>Consistently use a code of ethics and adhere to government regulations specific to the health care or work site setting</i>	K	K ⇔ P	P
Skill Set: 1. Describe and use a code of ethics established by your professional discipline for tobacco dependence treatment specialists if available. 2. Describe the implications and utilize the regulations that apply to the tobacco treatment setting (confidentiality, HIPAA, work site specific regulations).			
<b>11. Professional Development</b> <i>Assume responsibility for continued professional development and contributing to the development of others</i>	A	K ⇔ P	P
1. Maintain professional standards as required by professional license or certification. 2. Utilize the literature and other formal sources of inquiry to remain current in tobacco dependence treatment. 3. Describe the implications of current research to the practice of tobacco dependence treatment. 4. Disseminate knowledge and findings about tobacco treatment with others through formal and informal channels.			

### **Counseling Intensity and Intervention mode**

Minimal	Moderate	Intensive
Healthcare/Community Interventions		
	Telephone Counseling	
		On-site Individual and Group Counseling