

Smoking Cessation for Healthcare Professionals Training Survey

Role (optional):

Organisation (optional):

Training date:

1. To what extent do you agree or disagree with the following statements which relate to your knowledge of smoking cessation brief interventions for cancer patients?

	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
I understand how to ask a patient about their smoking behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I understand how to provide adequate advice about the benefits of smoking cessation to cancer patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to make a referral to Quitline for a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to use a carbon monoxide monitor and how to frame it with cancer patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to talk about Nicotine Replacement Therapy with patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How would you rate your confidence in providing smoking cessation brief interventions to cancer patients after the training? (Not confident at all=1, Very confident =5)

Not confident at all	Not Confident	Neutral	Confident	Very confident
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. How likely is that you will provide smoking cessation brief interventions to cancer patients?

Not at all likely	Not so likely	Somewhat likely	Very likely	Extremely likely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. To what extent do you agree or disagree with the following statements in relation to the smoking cessation brief intervention training?

	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
The training content was relevant to my role and organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The length of the training was appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The training was well structured and engaging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The resources provided were helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. What could we do to improve this training session in the future?

6. Please tell us if you have any other comments about the smoking cessation brief intervention training course?

Thank you for completing this survey!