

## **C. Main Section of Proposal**

### **1. Overall Goal and Purpose**

Smoking and hypertension are the two main causes of death from cardiovascular diseases, while smoking can also lead to hypertension as well. In order to prevent cardiovascular disease, it is very important to conduct both smoking and hypertension countermeasures at the same time, both of which are major risk factors. Health risks from smoking are not severe only to those smoking, but also to those subjected to second-hand smoke. In order to prevent cardiovascular diseases, comprehensive smoking cessation measures are indispensable for populations such as youth and women, where such measures have not yet permeated. Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention and Control not only include healthcare workers, but also administration and public health nurses as well, all striving to create a team to lead in appropriate prevention measures and protecting the health of the population. The goal is to carry out effective and continuous awareness activities for smoking cessation through structuring the system so that there is a framework for smoking cessation in Japan to be carried out as team-medicine with certainty.

To provide sure and effective smoking cessation advising at the time of civil guidance, the goal is to promote smoking cessation as part of team medicine and carrying out smoking cessation advising as part of treatment instructions. This will be done through the development of instructional tools and improving the skills of instruction of the medical staff, while also fostering human resources well-versed in smoking cessation skills.

### **2. Assessment of Current Needs in the Target Area**

Over 100,000 people a year die from cardiovascular diseases thought to be caused by hypertension, and hypertension is the greatest risk factor for cardiovascular disease<sup>1</sup>. Prevalence rates are also high: 60% of men and 45% of women over 30, and it is expected that about 43 million people in Japan suffer from high blood pressure (systolic BP over 140mmHg or diastole BP over 90mmHg, or currently on antihypertensive medication)<sup>2</sup>. Epidemiological studies have shown that heightened systolic or diastolic blood pressure increases the risk of having a stroke or ischemic heart disease on a linear scale, and increases risk of death by cardiovascular disease.<sup>3</sup> Furthermore, many randomized control trials have shown that antihypertensive therapy suppresses the onset of stroke, heart attack, and heart failure and improves patient prognosis. Studies have shown that the nicotine

in tobacco stimulates the sympathetic nervous system and raises blood pressure and heart rate. Even in normotensive subjects, one cigarette increases systolic BP from 110 to 130mmHg, diastolic BP from 55 to 65mmHg, and heart rate from 60 to 80bpm.<sup>4</sup> Smoking is thought to play a large role in vascular remodeling, such as declines in vascular endothelium function and proliferation of vascular smooth muscle, and contribute to chronic hypertension. It is a well-known fact that smoking is a major risk factor for cardiovascular disease. Studies also show that a smoker is two to four times more likely to develop ischemic heart disease than a non-smoker<sup>5</sup>, and not only do they have a heightened risk of stroke<sup>6</sup>, arrhythmia, arteriosclerosis obliterans, and Buerger disease, they also have an increased risk of dying from a cardiovascular condition and sudden death. Reports also show that smoking cessation improves these risks relatively quickly.<sup>8</sup> Studies have also shown that smoking significantly increases the risk of developing diseases that have recently been noted for their being a risk factor in the development of cardiovascular disease, such as COPD and periodontal disease. Even more of a problem is the issue of secondhand smoking and cardiovascular events. Compared to those not in contact with secondhand smoke, persons inhaling secondhand smoke have a 30% increased chance of developing cardiovascular disease<sup>9</sup>, a relative risk of 1.25 of developing coronary artery disease<sup>10</sup>, and 20% of nonsmoker death by heart attack is caused by inhalation of secondhand smoke.<sup>11</sup>

There are still many smokers that are hypertensive, and secondhand smoke inhalation caused by passing smoke has become a major societal problem. Giving 43 million hypertensive patients the knowledge and guidance on the importance of smoking cessation and lowering blood pressure in order to completely eliminate smoking as a habit and become a tobacco-free society is extremely important in the prevention of cardiovascular disease.

### 3. Target Audience

Main Target:       **StOp smoking!** For prevention of hypertension and cardiovascular disease by  
Team medical care Project –**SOFT** Project– Treatment Advisors

Subtarget:           Members of the Japanese Society of Hypertension

In order for certified educators for hypertension and cerebro-cardiovascular disease prevention and control to provide healthcare guidance that improves and prevents lifestyle diseases, such as hypertension, the main cause of cardiovascular disease, and manage other risk factors, we will improve occupational skills, such as expertise and skill proficiency, and by doing so, improve cardiovascular patient conduction and prevent cardiovascular disease. Because of that, we expect that the number of candidates for the program established with the purpose of contributing to the improvement of public health will exceed 200 this year, far more than the 54 subjects in the first

round 2015 and the 115 subjects in the second round in 2016. By training team members to be familiar with smoking cessation advising skills, and teaching skills for the entire medical staff and developing instruction tools for certified educators for hypertension and cerebro-cardiovascular disease prevention and control, which includes not only medical professionals, but also administrative workers and public health nurses, we will ensure efficient and reliable smoking cessation advising as a medical team during lifestyle instruction and healthcare instruction and promote smoking cessation amongst the general public.

Additionally, there are about 4,900 members of the Japanese Society of Hypertension, including associate members (medical staff), and these numbers increase every year. By sharing knowledge and skills on smoking cessation amongst doctors that are members of the Japanese Society of Hypertension, promoting smoking cessation advising as team-based medicine becomes possible, and we expect furthered promotion of smoking cessation amongst the public.

#### 4. Project Design and Methods

To promote smoking cessation as team-based medicine, and provide effective smoking cessation advising during healthcare instruction, we must 1) train team members in smoking cessation advising skills and improve the instructional skills of the medical staff, 2) develop smoking cessation advising tools, and 3) develop and disseminate a reliable method of providing smoking cessation advising.

Medical staff stand at the forefront of providing smoking cessation advice to patients and citizens, and trained medical staff with excellent smoking cessation advising skills are an absolute necessity. The profession of Certified Educator for Hypertension and Cerebro-cardiovascular Disease Prevention and Control was established in 2015. Certification requires applicants to obtain the necessary credits in qualifying seminars instructed with recorded examples and performance reports of provided guidance and proper curriculum (smoking cessation advising is necessary) in addition to other professional qualifications in professions such as public health nurses, nurses, pharmacists, nutritionists, physical therapists, clinical psychologists, medical psychologists, medical laboratory scientists, and health and fitness educators. Once credits are obtained, applicants must pass an exam to earn their certification. As such, certified educators for hypertension and cerebro-cardiovascular disease prevention and control have a wide expertise in lifestyle advising for the prevention of cardiovascular diseases, as well as the motivation and ambition for the field. Furthermore, because of the wide range of targeted professions, they work in a variety of environments, such as hospitals, family doctors, health examination centers, pharmacies, and administrative positions, covering nearly all Japanese citizens, from disease management to prevention. It is extremely important for certified educators for hypertension and cerebro-cardiovascular disease prevention and control to possess deep knowledge of smoking cessation advising and the skills needed to carry out that advising. In addition, from a team-based medical perspective, it is very important for doctors to share information with one another. Furthermore, by educators sharing information and improving their skills, more effective and higher quality smoking cessation advising can be given to patients. By reliably doing all this, educators can carry out advising as a medical team and engage in more effective and continuous awareness activities for smoking cessation.

In order to demonstrate excellent smoking cessation advising skills and promote effective smoking cessation advising methods, we must fully recognize the necessity of smoking cessation and develop a smoking cessation tool that can reasonably and reliably successfully accomplish smoking cessation. At present, many smoking cessation advising tools already exist, but a tool that helps ease the difficulty of smoking cessation advising felt in educator's everyday clinical practices and lifestyle advising clinics is thought to be the most efficient method of assisting with smoking cessation advising. More than anything, developing a smoking cessation advising tool is not only a

good opportunity to examining one's own smoking cessation advising practices, but will also lead to more efficient and reliable smoking cessation advising. By having not only Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention, but also doctors that are members of the Japanese Society of Hypertension and medical staff develop smoking cessation tools, competition and the sharing of information and tools will lead to a higher level of smoking cessation advising.

Most importantly, their excellent skills in smoking cessation advising and their devised smoking cessation advising tools will be widely used by citizens, bringing about further smoking cessation. Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention with a high level of smoking cessation advising skills advising the estimated 43 million people with high blood pressure would be extremely effective in the execution of efficient smoking cessation, and exchanging information with one another at symposiums or workshops will have a synergistic effect. The importance of smoking cessation must be recognized not just by patients and healthcare advisors, but by the general public as well, through public lectures. There are many citizens that have incorrect knowledge of tobacco and smoking cessation. By not only speaking at public lectures about the importance of smoking cessation, but also talking directly to citizens, we can reliably inform them about smoking cessation.

#### **A) Improve Instruction Skills**

##### **i. Prioritizing Smoking Cessation Advising with the StOp smoking! For prevention of hypertension and cardiovascular disease by Team medical care Project –SOFT Project– System**

Presently, smoking cessation advising is a compulsory course in the training curriculum, comprising 2 units of the 42 necessary, but we will further clarify and prioritize the placement of smoking cessation advising in the Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention curriculum.

A guidebook titled “Hypertension and Cerebro-cardiovascular Disease Prevention and Control Handbook” was published in 2016 for the qualification exam for this system. Revisions are expected as the system is expanded. While the current guidebook has topics on smoking cessation advising points, the revised version improves upon the quality and amount of material and also introduces effective real-world advising examples and tools, such as those from the Smoking Cessation Advising Competition, described below, and the Smoking Cessation Tool Competition.

Also, we have held academic association meetings twice a year (The General Assembly of the Japanese Society of Hypertension and the Clinical Hypertension Forum) and unit certification seminars sponsored by the Japanese Society of Hypertension. By adding smoking cessation

advising points as a compulsory part of these meeting seminars, which have an extremely high attendance rate, we will be able to convey the importance of smoking cessation advising to many society members.

## **ii. Smoking Cessation Advising Competition at the Certified Educators Workshop**

We hold workshop-style seminars (certified educator workshops) at these biannual association meetings (the General Assembly of the Japanese Society of Hypertension and the Clinical Hypertension Forum) as part of the curriculum for Certified Educator for Hypertension and Cerebro-cardiovascular Disease Prevention certification. In each 90-minute workshop, two example cases are presented, and participants discuss how to understand the case and plan and implement guidance for each. There are around 8 participants in each group, and each table has two people, one medical doctor and one staff member, assist each discussion as a facilitator. Chosen cases for discussion are ones likely to be encountered in everyday situations, such as the elderly, mature adult businessmen, older housewives, and those needing prevention of second stage aortic dissection. To make smoking cessation advising more concrete, one of the two cases will be chosen for a lifestyle guidance plan that includes smoking cessation advising, and all participants will discuss together how to concretely approach said smoking cessation advising. At the end of this discussion, participants will vote on which methods and positioning for smoking cessation advising were the best, and the method with the most votes will be awarded the grand prize, with participants discussing the points that earned the method that prize. Through this method, we can expect educators to mutually improve their smoking cessation advising skills. The winning advising method and the points that earned said method its prize will be published on the Japanese Society of Hypertension and the Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention websites, thus notifying the certified educators and society members. By thinking seriously about smoking cessation advising and giving opportunities to discuss excellent methods of smoking cessation advising, participants will improve their smoking cessation skills, and by making these methods known to all Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention and members of the Japanese Society of Hypertension, the benefits will spread to all Japanese citizens. Furthermore, by continuing this Competition for several years and selecting grand prizes each year, we can permanently promote smoking cessation activities.

## **iii. Smoking Cessation Advising Instructor**

Educators having completed the educator workshop, including sufficient roleplay activities, will be given short quizzes after the workshop. A passing score will earn them the title of Smoking cessation advising Instructor. In addition to cultivating skilled personnel with higher expertise and practical skills, it will lead to higher motivation for smoking cessation advising at the time of medical advising. Furthermore, Smoking Cessation Advising Instructors will actively back up smoking

cessation advising activities for Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention and, in addition to improving the level of smoking cessation advising activities for said educators, actively participate in the below-detailed public lectures and smoking cessation consulting service and devote themselves to raising public awareness.

## **B) Develop Instruction Tools:**

### **i. Smoking Cessation Advising Tool Competition**

Many smoking cessation advising tools are currently in development, from pamphlets and notebooks to props, but some doubt remains as to whether those tools are being fully utilized at smoking cessation advising sites. Few existing smoking cessation advising tools were developed by medical staff members on-site, with voices of on-site members not adequately reflected in said tools. We will then call for smoking cessation advising tools with a broad target of members of the Japanese Society of Hypertension and Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention. We will search far and wide for smoking cessation tools that are ideas in development, sketches, or pilot programs, through pamphlets and booklets and after the Team Medicine Committee and the Smoking Cessation Promotion Committee judges and selects candidate works, voting will commence in the Society and online to choose the Grand Prize and Runner Up winners. We will make the tools that were awarded the grand prize or second place actual products that can be used in smoking cessation advising within non-project budget. For works that can be published as PDF, we will make it so members of the Japanese Society of Hypertension and Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention can download them, and promote assistance with smoking cessation advising and interest in the development of new smoking cessation advising tools.

### **ii. Smoking cessation advising Pamphlets**

Smoking cessation advising Pamphlets are one of the most versatile smoking cessation advising tools. The Team Medicine Committee and the Smoking Cessation Promotion Committee together will create a smoking cessation advising pamphlet under the supervision of the Japanese Society of Hypertension, using the knowledge and hints obtained by the prize-winning smoking cessation advising tools detailed above. The greatest merit of this committee is that this smoking cessation advising pamphlet can be created not just from the viewpoint of doctors, but also the many members of medical staff on the Team Medicine Committee. There is a high possibility that further knowledge on advisor training and smoking cessation advising will come about in the process of creating these pamphlets, and we expect even further improvements in those areas from now on. Created pamphlets will not only be printed and distributed as smoking cessation advising sites, but

also uploaded to the Japanese Society of Hypertension homepage as a PDF, so that members of the Japanese Society of Hypertension and Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention can download, print, and use the resources, so it can reach even more people.

### **iii. Smoking Cessation Advising Slide Kit**

A collection of smoking cessation advising slides are indispensable for the below-detailed dissemination of smoking cessation advising methods. Taking into account the smoking cessation methods for the cases at the smoking cessation advising competition, the hints gained from the smoking cessation advising tool competition, and the improved skills learned in the creation of the smoking cessation advising pamphlets, the Team Medicine Committee and the Smoking Cessation Promotion Committee will create a smoking cessation advising slide kit under the supervision of the Japanese Society of Hypertension. At least two different kinds of slide kits are needed, one aimed at the general population and one aimed at medical staff, and alongside its use in public lectures to inform the general public, it will be an extremely effective tool for the later-detailed smoking cessation advising instructors to educate medical staff. Created slide kits will be uploaded to the Japanese Society of Hypertension homepage as a PDF, so that members of the Japanese Society of Hypertension and Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention can download, print, and use the resources, so it can reach even more people.

## **C) Practice and Dissemination of Sure Smoking cessation advising**

### **i. Smoking Cessation Advising Symposium**

At the Clinical Hypertension Forum and the Japanese Society of Hypertension General Assembly in 2018, we will first start a project that will assist with the outcomes of 1) the current state of affairs and problems in the area of smoking cessation advising, 2) innovation in staff training for smoking cessation advising, and 3) smoking cessation advising with Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention. From 2019 on, we will plan symposia that uses the outcomes of this project, 4) the introduction of the Smoking Cessation Advising Tool Competition and the Smoking Cessation Advising Competition and guidance case studies, and 5) smoking cessation advising using cessation pamphlets and slide kits. Even further on, we will incorporate the outcomes of this project (Smoking Cessation Advising Competition, Smoking Cessation Advising Tool Competition, Smoking Cessation Advising Pamphlets and Slide Kits, Smoking Cessation Advising Instructors) and also plan and hold symposia that can present the outcomes of successful cases (smoking cessation execution rate) and what sort of instruction was given using the abovementioned tools and skills.

### **ii. Public Lectures and Smoking Cessation Consulting Service**



Furthermore, we will indicate the recognition of improved smoking cessation results through cooperation with the Japanese Association for Hypertension, as well as lectures open to the public, to widely publicize the instruction tools that were developed along with smoking cessation advising. We will also introduce Japanese Society of Hypertension facilities online that support and appropriately provide such advice and instruction in order to improve smoking cessation outpatients. Furthermore, we will focus efforts on disseminating quality instruction tools through the opening of a smoking cessation consulting service, easing anxiety about smoking cessation by the public, and smoking cessation advising roleplay at lectures open to the public or at academic conferences as part of the practical training course.

## 5. Evaluation Design

To evaluate the training of staff skilled in providing smoking cessation advising and the improvement in advising skill of medical staff, we will use the Kirkpatrick Model, which is widely implemented as a model of training evaluation. We will evaluate the smoking cessation advising tool development through questionnaires given to medical staff and Society members using the tools and participants in the lectures given to the general public.

### **(ア) Improve Instruction Skills & Staff Training**

We will evaluate instruction skills based on the four steps of the Kirkpatrick Model of training evaluation.

#### **Level 1 (Reaction):**

To improve smoking cessation advising skills, numerically evaluate, through analysis of surveys given to the attendees, the satisfaction rate of the workshop and the rate of understanding of the lecture concerning smoking cessation.

#### **Level 2 (Learning):**

Accredit “Specialized Smoking Cessation Instructors” or provide certificates of completion for completing the smoking cessation training roll play. Improve instruction skills through small quizzes regarding knowledge of smoking cessation given before and after attending the workshop.

#### **Level 3 (Behavior):**

Evaluate by using the smoking cessation success rate and change seen from survey results given to certified educators using, 1) the number of people attending the workshop, 2) numbers of people applying to the smoking cessation advising competition, 3) numbers of applicants for the smoking cessation advising symposium, and 4) success rates published at symposia regarding smoking cessation as metrics.

#### **Level 4 (Results)**

In order to see the effect on the entire Society of Hypertension, conduct survey research as suggested in this proposal on the change of awareness concerning “total smoking cessation” at instruction facilities for hypertension, or awareness towards smoking cessation and such instruction on the members of the Society of Hypertension. Furthermore, continuously evaluate the success rate of behavioral guidelines of the smoking cessation declaration proposed by the Japanese Society of Hypertension.

## **(1) Develop Instruction Tools for Smoking Cessation Advising**

The smoking cessation advising tool grand prize winner and runner-up and the pamphlets and slide kits developed under the supervision of the Japanese Society of Hypertension will be evaluated by questionnaire on impression and utility given to participants in the aforementioned symposia, and we will actively search for points needing improvement. We will also conduct a survey of members of the general public that used these resources during public lectures, etc., and actively seek out information on points needing improvement. Additionally, we will open a Smoking Cessation Advising Tool Opinion Box on the Japanese Society of Hypertension website, where we can collect opinions on daily usage, etc., and reflect upon them.

## **6. Work Plan and Deliverable Completion Schedule:**

The **StOp smoking! For prevention of hypertension and cardiovascular disease by Team medical care Project –SOFT Project–** is planned to commence in January 2018 and take place over a period of 2 years. This project is divided into three parts: improvement of smoking cessation advising skills, development of smoking cessation advising tools, and dissemination and practice of smoking cessation advising methods.

### **A) Improve Instruction Skills**

- i. Prioritizing Smoking Cessation Advising with the StOp smoking! For prevention of hypertension and cardiovascular disease by Team medical care Project –SOFT Project– System**
  - To discuss the expansion of the number of units and course content of smoking cessation advising content in the training curriculum for Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention, we will hold a meeting on December 23rd, 2017 with the Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention System Committee and obtain the approval of the Board of Directors the very same day.
  - The educator guidebook will be revised alongside the growth of the educator system from 2018 to 2019. During that period, we will enhance the smoking cessation advising content.
  - We will discuss the addition of smoking cessation advising points as a compulsory part of unit certification seminars sponsored by the Japanese Society of Hypertension at a meeting on December 23rd, 2017 with the Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention System Committee during the meeting of the Board of Directors of the Japanese Society of Hypertension, and plan on making this

content compulsory from the 7th Clinical Hypertension Forum held from May 19th–20th, 2018.

**ii. Smoking Cessation Advising Competition at the Certified Educators Workshop**

- We plan to conduct the Smoking Cessation Advising Competition during the 7th Clinical Hypertension Forum held from May 19th–20th, 2018. We will discuss this at the meeting of the Certified Educators for Hypertension and Cerebro–cardiovascular Disease Prevention System Committee on December 23rd, 2017, and obtain the approval of the board of directors. Winners of the smoking cessation advising competition will be awarded a prize within the capabilities of the project and highly honored. We will summarize the opinions exchanged by workshop participants on the points that earned the winning method its prize and determine the details the next day in an email conference, and in August, the winning advising method and the points that earned said method its prize will be published on the Japanese Society of Hypertension and the Certified Educators for Hypertension and Cerebro–cardiovascular Disease Prevention websites.
- During the project period, we will be able to hold the Smoking Cessation Advising Competition four times, once each at the 7th and 8th Clinical Hypertension Forum, and once each at the 41st and 42nd Japanese Society of Hypertension General Assembly. At the 42nd Japanese Society of Hypertension General Assembly planned to be held in Okinawa, we will select the best prize winner of all four competitions and award it the Grand Prize, then share the contents of the prize–winning method on the Japanese Society of Hypertension and Certified Educators for Hypertension and Cerebro–cardiovascular Disease Prevention websites by the end of the year.

**iii. Smoking Cessation Advising Instructor**

To start the certification of Smoking Cessation Advising Instructors at the 2018 41st Japanese Society of Hypertension General Assembly, we will raise the issue at the Certified Educators for Hypertension and Cerebro–cardiovascular Disease Prevention committee meeting on December 23rd, 2017, and discuss the certification in several email conferences. Educators having completed the educator workshop, including sufficient roleplay activities, will be given short quizzes after the workshop. A passing score will earn them the title of Smoking cessation advising Instructor, thus cultivating skilled personnel with higher expertise and practical skills

**B) Develop Instruction Tools:**

**i. Smoking Cessation Advising Tool Competition**

We plan to conduct the Smoking Cessation Advising Competition during the 41st Japanese Society of Hypertension General Assembly held from September 14th–16th, 2018. We will discuss this at the meeting of the Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention System Committee on December 23rd, 2017, and obtain the approval of the board of directors on the same day. After approval, we will discuss application forms (such as whether to separate into categories such as booklets, pamphlets, monuments) with the Team Medicine Committee and the Smoking Cessation Promotion Committee at a joint email meeting, then begin the application period from March 2018 on. After the cutoff date at the end of June, we will conduct a primary review with the Smoking Cessation Promotion Committee and the Team Medicine Committee, then decide on the grand prize winner at the board meeting normally held in August. Afterwards, we will investigate the production of this tool within the boundary of the project subsidy budget and put the tool into practical use at the 8th Clinical Hypertension Forum scheduled to be held in Spring 2019.

**ii. Smoking Cessation Advising Pamphlets and Slide Kits**

Smoking Cessation Advising Pamphlets and Slide Kits will be created by the end of 2018. 11 members of the Smoking Cessation Promotion Committee and 8 members of the Team Medicine Committee (including 3 medical staff members) are onboard. We will take these members and, after adding a small number of Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention, divide them into two groups, one creating the pamphlets and the other creating the slide kits. We will conduct an email conference at the start of the project in January 2018, divide up roles, then enter the creation process separately, with drafts prepared by the end of June. Information from the Smoking Cessation Advising Tool Competition will be in by this time; as such, we can add this information to another draft to be completed by August. Following joint review, we will make efforts such as uploading materials to our website to make the materials available for use at the Japanese Society of Hypertension General Assembly in September 2018.

**A) Practice and Dissemination of Sure Smoking cessation advising**

**i. Smoking cessation advising Symposium**

At the 2018 Clinical Hypertension Forum, we will conduct a symposium on the current state of affairs and problems in the area of smoking cessation advising and promote our project. At the 2018 Japanese Society of Hypertension General Assembly, we will present on innovation in staff training for smoking cessation advising and on smoking cessation advising with Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention, and carry out a project to get assistance on the final checks of the pamphlets and slide kits. At the 2019

Clinical Hypertension Forum, we will present on the introduction of the Smoking Cessation Advising Tool Competition and the Smoking Cessation Advising Competition and guidance case studies. At the 2019 Japanese Society of Hypertension General Assembly, we will hold a symposium on the outcomes of this project, such as success rates of smoking cessation advising methods using our pamphlets and slide kits. Afterwards, we will hold a symposium to show the outcomes of methods using our project.

**ii. Public Lectures and Smoking Cessation Consulting Service**

To inform the public of the SOFT Project, we will hold public lectures by the Japanese Association of Hypertension and offer smoking cessation advising to the public each year on May 17th, High Blood Pressure Day. In 2018, we aim to inform the public that we have started such activities and spread awareness of the importance of smoking cessation. In 2019, we will spread awareness in public lectures using the slide kits and pamphlets created earlier in the project, and open a smoking cessation consulting service, where Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention with a focus on Smoking Cessation Advising Instructors will give smoking cessation advice to members of the general public, and through smoking cessation advising roleplay activities, familiarize the general public with smoking cessation advising.

As appropriate, from Fall 2018, we will introduce online facilities to our website and the mass media that allow Smoking Cessation Advising Instructors and Certified Educators for Hypertension and Cerebro-cardiovascular Disease Prevention with a deep knowledge of smoking cessation advising to provide advice and instruction, to improve access to smoking cessation outpatient clinics.