Table S1: Significant associations observed by gender, smoking status, professional characteristics and location of training in the delivery of tobacco cessation interventions to patients

Tobacco cessation interventions	Significantly associated independent variables	p value	adjusted p value[a]
Ask about patient's smoking/tobacco use.	Place of work	<0.001	<0.001
	Location	<0.001	
	Highest degree	0.001	
	Smoking status	0.009	
	Profession	0.014	0.006
Advise a patient to quit smoking?	Gender	0.011	0.010
	Years of experience	0.022	0.020
	Profession	0.025	0.001
Assess if patients are interested in stopping smoking?	Years of experience	<0.001	<0.001[b]
Assist a patient with smoking cessation?	Years of experience	0.003	0.003[b]
Arrange smoking cessation follow-up?	Years of experience	0.001	0.001[b]
Recommend the use of a telephone quitline for smoking cessation.	Years of experience	<0.001	0.009
	Highest degree	0.009	
Refer a patient to tobacco cessation resources (clinics, counselling, etc.) in the community?	Years of experience	0.001	<0.001
	Place of work	0.029	0.002
Provide recommendations for tobacco cessation medications?	Place of work	0.006	0.002
	Location	0.038	
Review barriers to quitting with patients who are unwilling to make a quit attempt.	Previous tobacco cessation training	0.016	0.016[b]
Recommend to patients and family members the importance of creating a smoke-free home environment after leaving the hospital?	Years of experience	0.008	0.008[b]
How many patients do you estimate to have counselled for smoking cessation over the past week?	Profession	0.007	0.007
	Previous tobacco cessation training	0.015	

a: p value obtained following multivariate analysis.

b: no adjustment required

Table S2: Significant associations observed by gender, smoking status, professional characteristics and location of training in opinions about counselling patients to quit smoking

Opinions about counselling patients to quit smoking	Significantly associated independent variables	*p* value	adjusted *p* value[a]
I have an obligation to advise patients on the health risks associated with tobacco use.	Smoking status	0.024	0.024[b]
As a health professional, I can play an important role in helping patients quit.	Location	0.026	
	Place of work	0.028	0.004
I should take a more active role in helping patients to quit smoking.	Place of work	0.052	0.052[b]
Counselling patients about quitting is not an efficient use of my time.	Place of work	0.001	<0.001
	Location	0.002	
	Highest qualification	0.004	
	Years of experience	0.020	0.018
Asking patients about smoking increases the likelihood that they will quit.	Profession	0.039	0.039[b]
Providing tobacco cessation counselling is important to our hospital even if only a few patients quit.	Smoking status	0.040	0.040[b]
Patients will be offended if I inquire about their smoking status.	Place of work	<0.001	<0.001
	Highest qualification	0.004	
	Location	0.011	
	Smoking status	0.023	
I have insufficient time to counsel patients about quitting smoking.	Gender	0.001	0.003
	Profession	0.008	0.025
	Highest qualification	0.050	
It is difficult for me to get people to quit smoking.	Smoking status	0.003	0.003[b]

a: *p* value obtained following multivariate analysis.

b: no adjustment required

Table S3: Significant associations observed by smoking status and professional characteristics in health care professionals' attitudes and beliefs about health professionals and smoking and their role in tobacco control

Attitudes and beliefs about health professionals and smoking and their role in tobacco control	Significantly associated independent variables	p value	adjusted p value[a]
Health professionals should set a good example by not smoking.	Years of experience	0.019	0.019[b]
How important is it for health professionals to be involved in tobacco control activities?	Smoking status	0.024	
	Place of work	0.011	<0.001

a: p value obtained following multivariate analysis.

b: no adjustment required