SBIRT Implementation in Medical Settings

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Closer Look at Screens and Brief Interventions

Week #2











Welcome

 Review Learning Activity-Discuss Video and review patient scenarios

Presentation

- Overview of Screens
- Motivating People to Change
- Using Brief Intervention Skills
- Brief Negotiated Interview

Summary

- Preview of next week
- Assign Learning Activity- Videos and Special populations
- Questions



Let's Talk about your Learning Activity!

You Watched the Video... What did you think?

What about the patient scenarios?







Screening

- <u>Standardized</u> tools to quickly assess risk level
- Pre-screen universal
- Full Screen targeted

Brief Intervention

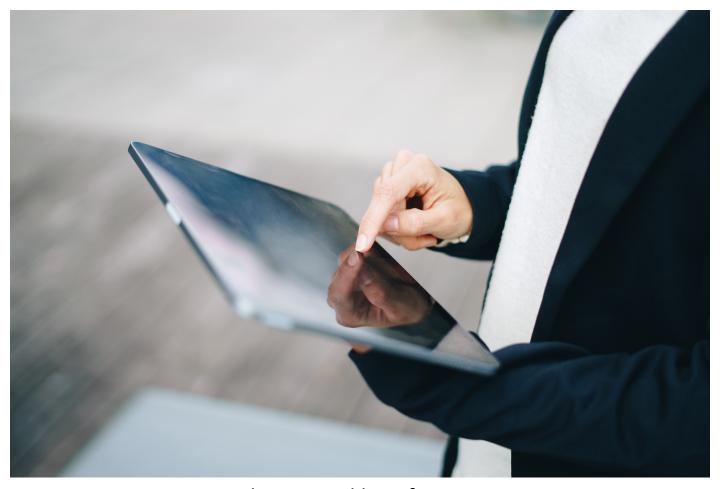
 Help patients understand their substance use and health impact; motivate behavior change.

Referral to Treatment

 Help patients showing signs of a substance use disorder to access specialty care.



Screening



SBIRT Oregon has a good list of screens: https://www.sbirtoregon.org/screening-forms/



What screening DOES provide

- <u>Identify</u> level of risk
- Provide context for discussing substance use or mental health
- Suggest areas where substance use or psychiatric symptoms may be <u>problematic</u>
- Identify patients most likely to benefit from brief intervention
- Identify patients most likely in need of <u>referral</u>





Considerations for screening

Protocols

Scheduling

Staffing

Training

Implementation Support

Policies

Reporting with Special Populations (pregnant/adolescent)

Legal Implications

SAMHSA 2013



Pre-Screening: Universal/Everyone gets screened



Alcohol - NIAAA

https://pubs.niaaa.nih.gov/publications/aa65/aa65.htm

Drugs - NIDA

How many times in the past year have you used a recreational drug or used a prescription medication for nonmedical reasons?



Full Screening Tools-**Targeted for** those positive on **Brief Screen**

AUDIT: Alcohol Use Disorder Identification Test

DAST: Drug Abuse Screening Test

ASSIST: Alcohol, Smoking, and Substance Abuse Involvement Screening Test

<u>GAIN</u> or <u>GAIN-SS</u>: Global Appraisal of Individual Needs

<u>5Ps Plus</u>: For pregnant and post-partum women

<u>CRAFFT</u>: Car, Relax, Alone, Forget, Family or Friends, Trouble (adolescents)





Patient name:	
Date of birth:	

last year

Yes, but

not in the

last year

Yes, in the

last year

Alcohol screening questionnaire (AUDIT)

Drinking alcohol can affect your health and some medications you may take. Please help us provide you with the best medical care by answering the questions below.

One drink equals:	l oz. eer	5 oz. wine	1	1.5 oz. liquor (one sh	ot)
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times a month	2 - 3 times a week	4 or more times a week
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	0-2	3 or 4	5 or 6	7-9	10 or more
How often do you have five or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
Have you or someone else been injured because of your drinking?	No		Yes, but not in the		Yes, in the

Have you ever been in treatment for an alcohol problem? Never Currently In the past

I II III IV 0-3 4-9 10-13 14+

or suggested you cut down?

10. Has a relative, friend, doctor, or other health

care worker been concerned about your drinking



AUDIT Scores and Zones

This is different as of new CDC recommendations
This is more indicative of binge drinking

Score	Risk Level	Intervention
0-7	Zone 1: Low Risk Use	Alcohol education to support low-risk use – provide brief advice
8-15	Zone 2: At Risk Use	Brief Intervention (BI), provide advice focused on reducing hazardous drinking
16-19	Zone 3: High Risk Use	BI/EBI – Brief Intervention and/or Extended Brief Intervention with possible referral to treatment
20-40	Zone 4: Very High Risk, Probable Substance Use Disorder	Refer to specialist for diagnostic evaluation and treatment





Drug Screening Questionnaire (DAST)

Patient name:	
D	
Date of birth:	

Using drugs can arrect your nearm and some medications			
you may take. Please help us provide you with the best medical care by answering the questions below.	Date of birth		
Which recreational drugs have you used in the past year? (Check	all that apply)		
□ methamphetamines (speed, crystal) □ cocaine			
□ cannabis (marijuana, pot) □ narcotics (her	roin, oxycodon	e, methadone	, etc.)
☐ inhalants (paint thinner, aerosol, glue) ☐ hallucinogens	(LSD, mushro	ooms)	
□ tranquilizers (valium) □ other			_
How often have you used these drugs?	Weekly	Daily or a	lmost daily
1. Have you used drugs other than those required for medical re	asons?	No	Yes
2. Do you abuse (use) more than one drug at a time?		No	Yes
3. Are you unable to stop using drugs when you want to?			Yes
Have you ever had blackouts or flashbacks as a result of drug use?			Yes
5. Do you ever feel bad or guilty about your drug use? No Yes			
6. Does your spouse (or parents) ever complain about your involvement with drugs? Yes			
7. Have you neglected your family because of your use of drugs	?	No	Yes
Have you engaged in illegal activities in order to obtain drugs?			Yes
Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs? No Yes			Yes
10. Have you had medical problems as a result of your drug use memory loss, hepatitis, convulsions, bleeding)?	(e.g.	No	Yes
		0	1
Do you inject drugs? No Yes			
Have you ever been in treatment for a drug problem? No	☐ Yes [
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ver been in treatment for a drug problem?	No 🗆	Yes 🗌				
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CRAFFT 2.1: Adolescents 12-18







SBIRT in Schools: An Example in Massachusetts



POLLING QUESTION 1. Are you screening for substance use?

2. Of those that are using screens, how many are using validated screens?







Screening

Brief **Intervention**

Referral to Treatment

- <u>Standardized</u> tools to quickly assess risk level
- Pre-screen universal
- Full Screen targeted

• Help patients understand their substance use and health impact; motivate behavior change.

 Help patients showing signs of a substance use disorder to access specialty care.



Break Out Room

- What things will need to be addressed at your agency before you start initiating universal screening?
- What types of training or resources do you need to ensure that staff are ready to have these conversations?









What Makes Brief Intervention Different?

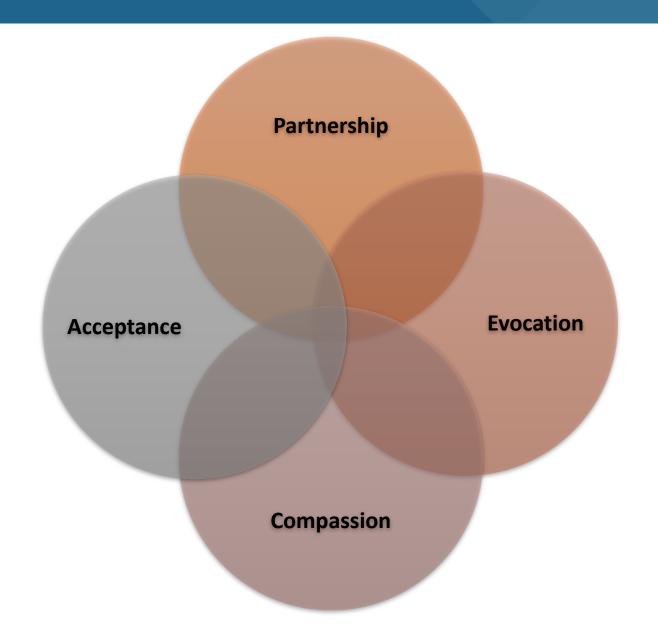
Communication Styles

Directive Communication	Guiding Communication
Explain why	Respect for autonomy, goals, values
• Tell how	Readiness to change
Emphasize importance	Ambivalence
• Persuading	Empathy, non-judgment, respect
Clinician is the expert	Patient is the expert

Oregon SBIRT Primary Care – Curriculum Module II



MI Spirit = Essential for effective BI





TIP #35 SAMHSA

Motivational interviewing is a counseling style based on the following assumptions:

- Ambivalence about continued substance use and change is normal.
- Ambivalence can be resolved by working with your patient's intrinsic motivations and values.
- The alliance between you and your patient is a collaborative partnership to which you each bring important expertise.





Exploring Ambivalence:What is it?

Ambivalence

Change '



Sustain Talk



Think about a change you are trying to make...





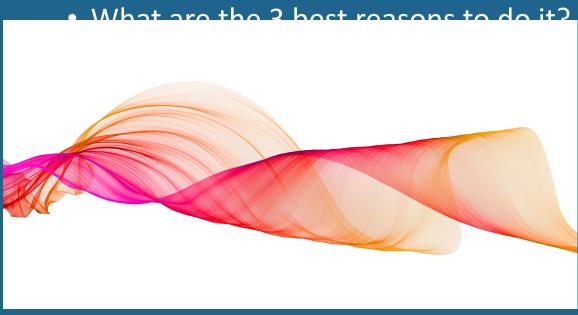
Dyad Practice





Dyad Practice

- Without Twist this change?



... and just listen.







Open-Ended Questions

- What are open-ended questions?
 - Gather broad descriptive information
 - Require more of a response than a simple yes/no or fill in the blank
 - Often start with words such as—
 - "How..."
 - "What..."
 - "Tell me about..."
 - Usually go from general to specific

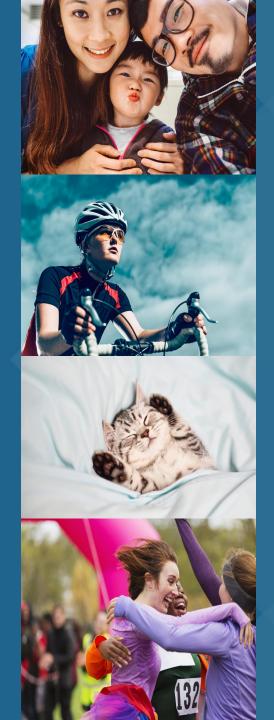






- Affirming the Client's Strengths
 - Can Include anything that is going right or any strengths that the patient has
 - Supports-Family, Friends, Co-workers
 - Employment
 - Attributes
 - Relationships
 - Hobbies
 - Pets
 - The fact that the person is there, receiving services is a strength
 - The fact that the person is being honest about the change that you are discussing is a strength

2. Affirmations





Reflections

- Statements. Not questions
- What you hear, what you observe
- Not problem solving or advice
- Selective & intentional
- Simple to complex

Demonstrates you have heard and understood the patient

Strengthens the empathic relationship





Summarizing

- Collect, link, transition
- Validating
- Helps if conversation is stuck or unproductive
- Examples
 - "So, let me see if I've got this right..."
 - "So, let me summarize what we've talked about"
 - "Make sure I'm understanding exactly what you've been trying to tell me..."





Why Summarize?

When people feel understood they are more likely to strengthen self-esteem, become intrinsically motivated, be more willing to trust and talk about making changes.

SAMHSA Tip #35, 2019





2 Things to keep in mind:

- 1. You may not always know the exact right thing to say, that is OK!
- 2. The spirit of MI is the most important part



What to do if someone is not at the stage of change



https://www.youtube.com/watch?v=g2v2sfwfQ84



Cultural Implications...

It is important to remember that a significant component of entrenched beliefs comes from cultural experience. Specific racial and ethnic groups hold beliefs that are rooted in their cultural experience and are completely valid in that context, although they may appear "dysfunctional" if one doesn't understand the cultural context –(SAMSHSA-TIP 48)



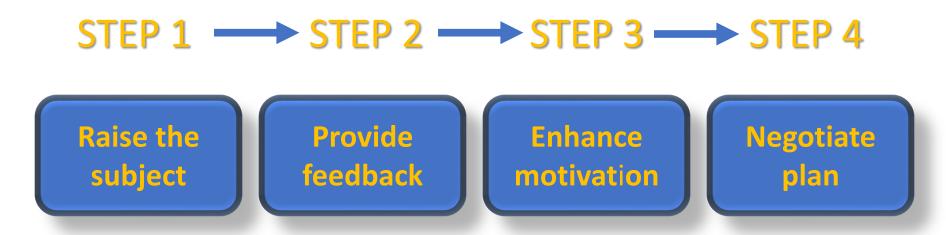


"People are generally better persuaded by the reasons which they have themselves discovered than by those which have come into the mind of others."



—Blaise Pascal





The Yale Brief Negotiated Interview Manual, D'Onofrio, et al. 2005

Brief Negotiated Interview Steps



Resources



- SAMHA SBIRT
- IRETA Online Training and Toolkit and Webinars
 - https://ireta.org/resources/sbi rt-101/
 - https://ireta.org/resources/sbi rt-toolkit/
 - https://ireta.org/?sfid=243& s
 ft resource type=webinar
- On-line Training and other Resources-UMKC SBIRT
 - http://www.sbirt.care/



Getting CandidToolkit

National Council for Mental Wellbeing













Resources that can be displayed to help staff!



Sneak Peek at next week Making a
Referral to
Treatment and
Warm
Handoffs





Watch Videos and Consider Questions



Review Proficiency Checklist located in the Toolbox

Learning Activity for Week #2
Will be reviewed in Week #3 Session



QUESTIONS?



ENHANCED PROFESSIONAL LEARNING SERIES



Addiction Technology Transfer Center Network