

# SBIRT Implementation in Medical Settings

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**ENHANCED PROFESSIONAL  
LEARNING SERIES**



**ATTC**

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

# Referral to Treatment and Warm Handoffs

Week #3

## Welcome

- Check in
- Review Learning Activity-Videos and Checklist

## Presentation

- Brief Negotiated Intervention
- Making a good Referral
- Warm Handoff

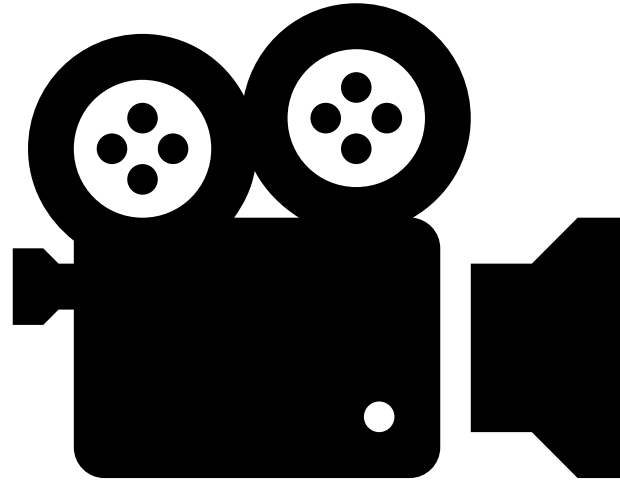
## Summary

- Preview of next week
- Review Next Week's Learning Activity-Review and Reflect on your own workflow
- Questions



**Think about it!**

What is One thing that you did this week to improve or develop SBIRT in your setting?



*Let's Talk about your Learning Activity!*  
*Video Scenarios-Special Populations*

**Support for Parents:**  
**When utilizing SBIRT with adolescents, it is good to involved the parents when appropriate.**

<https://www.samhsa.gov/underage-drinking/parent-resources>



**Substance Use  
Prevention**

# SBIIRT

## S

creening

- Pre-screen/  
Annual Screen -  
universal
- Full Screen -  
targeted

## B


rief

## I

ntervention

**Next:**  
**Referral to  
Treatment**

- Help patient  
their substance  
health impact,  
motivate  
behavior  
change.



## R

eferral to

## T

reatment

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



Approximately 5%  
will require a  
referral to specialty  
treatment.

**Of those patients screened  
in primary care . . .**



Be easy to make. We have good relationships already established with providers.

Need to be developed. We have some providers, but we could work with them to improve the referral system.

Need to be addressed. We have limited resources or I am not aware of community partners we can work with on this.

## Polling Question? BH Referrals in my community will...



## When Referring to Treatment ...



**A Strong Referral to an  
Appropriate Treatment  
Provider Is Key**

**So, what strategies can you use to make  
a strong referral?**

**Let's  
Remember the  
Spirit of  
Motivational  
Interviewing**

<https://www.youtube.com/watch?v=APPoKvTPhog>



# Three Key Strategies to Make a Strong Referral

1

Use the brief intervention to **build the patient's confidence and willingness** to go to a specialty provider before making the referral

2

**Be prepared to make referrals** – know the specialty treatment providers in your area

3

Conduct a **“warm handoff”** when possible



## Prepare the Patient for Specialty Care

- Ask the patient to share his/her worries or what they imagine treatment will be like
- Provide correct information

Making Successful Referrals for Substance Use Disorders UCSF SoM Collaborative Education Project Elinore McCance-Katz, MD, PhD <http://dgim.ucsf.edu/SBIRT/>



1. Use a brief intervention to prepare the patient for specialty care

- Use motivational techniques to build the patient's confidence and willingness to go to a specialty provider before making the referral.

# 1. Prepare the Patient for Specialty Care

- Ask the patient to “look ahead” and identify any potential obstacles or roadblocks
- Discuss ways to address these issues

Making Successful Referrals for Substance Use Disorders UCSF  
SoM Collaborative Education Project Elinore McCance-Katz,  
MD, PhD <http://dgim.ucsf.edu/SBIRT/>



- Remind the patient that he/she has choice. If one program doesn't fit, try another.
- There are many options just as there are many paths to recovery.
- If appropriate, and with releases in place, enlist the support of family members or friends the patient identifies as important in his/her life.





## Referral to Treatment: What you can say during the BNI

- Have you ever tried to quit before?
- What worked for you in the past when you tried to quit or cut down?
- Based on your scores, I'm concerned about your level of substance use, and would recommend that we find a specialist to help you.
- Based on your scores, I'm concerned about your level of substance use. I work with someone who specializes in helping with these issues. I would like you to speak with them today to better help me help you. Is it alright with you if I introduce you to her/him?
- I have a member of our team who helps me assess these types of problems so that I can provide you with the best care. Together we can develop a plan to deal with this. May I introduce you?"



Statements adapted from CalMHSa Website's Warm Handoff Scripts: <http://ibhp.org/index.php?section=pages&cid=123>

## 2. Be prepared to make referrals

- Who do you call (#'s and names)?
- What form do you fill out?
- Who on your team can help you set up an appointment?
- Maintain an up-to-date roster of public and private treatment and peer support resources in your community.

**NEW PATIENT INFORMATION FORM**

What is the reason for your visit today? \_\_\_\_\_

Where have you been receiving your medical care?  
 Name of Physician \_\_\_\_\_  
 Address \_\_\_\_\_

**PAST MEDICAL HISTORY:** Please circle Yes or No for any illness that you have had:

Anemia	Yes	No	Blood Pressure	Yes	No
Arthritis	Yes	No	Immune Disorders	Yes	No
Asthma / Bronchitis / Emphysema	Yes	No	Intestinal Problems	Yes	No
Bleeding / Bruising	Yes	No	Kidney Disease	Yes	No
Blood Disorder	Yes	No	Liver Disease	Yes	No
Cancer (type)	Yes	No	Lung Disease	Yes	No
Depression / Emotional Problems	Yes	No	Skin Disease	Yes	No
Diabetes	Yes	No	Stroke	Yes	No
Drug / Alcohol Dependency	Yes	No	Stomach Ulcers	Yes	No
Epilepsy / Seizures	Yes	No	Thyroid Disease	Yes	No
Hay Fever / Sinus Problems	Yes	No	Other (describe)	Yes	No
Heart Problems	Yes	No			

Have you ever been hospitalized?  Yes  No If yes, please list the date(s) and reason(s):  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you had any surgeries?  Yes  No If yes, please list the date(s) and type(s) of surgery:  
 \_\_\_\_\_  
 \_\_\_\_\_

**NEW PATIENT INFORMATION FORM**  
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# Know your referral resources

SAMHSA's National Treatment Facility Locator  
<http://findtreatment.samhsa.gov>



# Break Out Room

- What do you need to do to improve the relationships with community partners needed to implement SBIRT well in your agency?
- Are there GAPS? How could these be opportunities for advocacy or collaboration?
- How could Technology Play a role in any of this?





# Warm Hand Off



Clinician directly introduces the patient to the SUD treatment provider at the time of the patient's visit.

Establish an initial direct contact between the patient and the treatment provider  
Convey your trust and rapport with treatment provider.



**Evidence strongly indicates that warm handoffs are dramatically more successful than passive referrals.**

(SAMHSA SBIRT, 2013)

# When conducting a warm handoff . .

## Remove referral barriers

- Discuss a range of treatment options
- Identify programs and providers by name and have contact info available
- Assist the patient in making the first appointment; help them make the call
- Call or help the patient call the insurance company or local authority who oversees access

A close-up photograph of a hand watering a small green seedling. The hand is positioned above the plant, and a stream of water is falling from the fingers onto the soil. The seedling has two small green leaves and a thin stem. The background is a soft, out-of-focus green.

You never know when you  
might plant a seed



# Using Technology in the Delivery of SBIRT



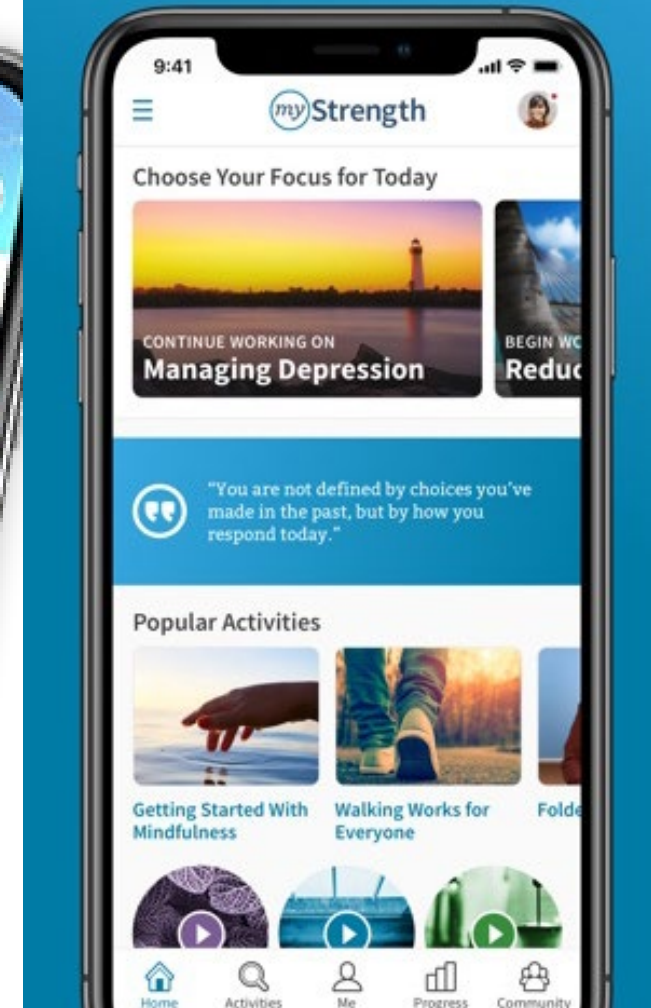
# Examples of Apps to Support People

## Chess Health

<https://www.chess.health>



Finding ways to focus on your emotional health is important. myStrength provides tools to help you get better and stay strong.



## My Strengths

<https://mystrength.com/mobile>

## FEATURES INCLUDE:



**MME Calculator**

Patients prescribed higher opioid dosages are at higher risk of overdose death. Use the app to quickly calculate the total daily opioid dose (MME) to identify patients who may need closer monitoring, tapering, or other measures to reduce risk.



**Prescribing Guidance**

Access summaries of key recommendations or link to the full Guideline to make informed clinical decisions and protect your patients.



**Motivational Interviewing (MI)**

To provide safer, more effective pain management, talk to your patients about the risks and benefits of opioids and work together towards treatment goals. Use the interactive MI feature to practice effective communication skills and prescribe with confidence.

## MANAGING CHRONIC PAIN IS COMPLEX, BUT ACCESSING PRESCRIBING GUIDANCE HAS NEVER BEEN EASIER.

Download the free Opioid Guide App today!

[www.cdc.gov/drugoverdose/prescribing/app.html](http://www.cdc.gov/drugoverdose/prescribing/app.html)

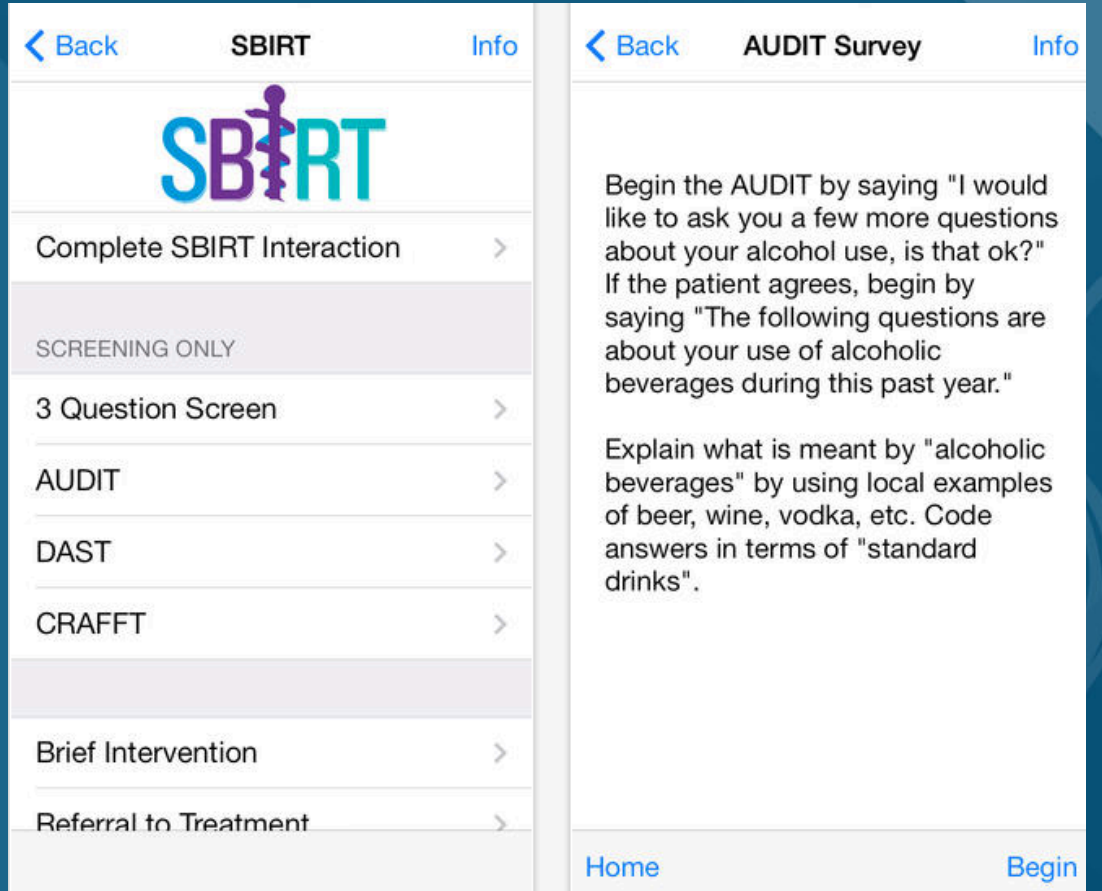


*This App, including the calculator, is not intended to replace clinical judgment. Always consider the individual clinical circumstances of each patient.*



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

LEARN MORE | [www.cdc.gov/drugoverdose/prescribing/guideline.html](http://www.cdc.gov/drugoverdose/prescribing/guideline.html)



## Other Examples of Utilizing Technology

- -On-line screening
- -Kiosk/tablet screening
- -On-line support/12 step groups
- -Virtual visits for
  - -Brief Intervention
  - -Follow up
  - -Referral purposes
  - -Assessments for treatment





**What is one  
thing that  
stands out from  
this series so  
far?**

**Please type in  
chat!**



# Implementation of SBIRT into Workflow

***Sneak Peek at next  
week ....***

## Let's Make Strong Referrals!

### Week #3- Learning Activity

- **Start to look for Substance Use Disorder or Behavioral Health treatment options in your community, region, or on-line.**
- **View the Video:** Johann Hari-NATCOM 2019-Understanding the Opioid Crisis  
<https://www.youtube.com/watch?v=CwU98tMMqrc>

**Consider Questions for NEXT week's discussion!**

# QUESTIONS?

