

**Screening, Brief Intervention,
and Referral to Treatment
(SBIRT) In Primary Care:**
Provider Training

Screening, **Brief Intervention** and **Referral to Treatment** **(SBIRT)** In Primary Care: *Provider Training*

PREVENTION Applying
INSIGHTS Addiction
Science
For Healthier
Communities
AT THE INDIANA UNIVERSITY SCHOOL OF PUBLIC HEALTH


SCHOOL OF PUBLIC HEALTH
INDIANA UNIVERSITY
Bloomington

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SBIRT For Healthcare Professionals

Introduction to Screening, Brief Intervention
& Referral to Treatment (SBIRT) within Healthcare

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Introductions and Expectations

Name

Where you work

Your role

Something you hope to learn today



Section 1 Define Risk Range of Risk

Bird's Eye View of SBIRT



Image source: <http://blog.discovermagazine.com/inf/feb/2014/01/30/birding-pigeons-like-to-live-on-the-edge-9-VX5XU2W-Kcy>

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What is a Substance/Alcohol Use Problem?



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Unitary View of Alcohol/Drug Problems

“Either you have it, or you don’t.”

-You’re either an alcoholic or you don’t drink.

-The door is either open or closed.

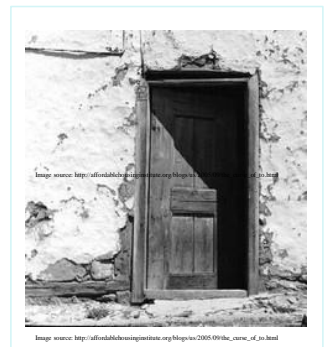
-You’re either tall or short.

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Unitary View of Alcohol/Drug Problems

Attempt to characterize this door using only one of two words, “Open” or “Closed.”

This is difficult without the addition of **new vocabulary to introduce new meaning.**



“Ajar”

“Partially (open)”

“Cracked”

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Unitary View of Alcohol/Drug Problems

Often the terms “risky drinker” and “alcoholic” are thought to mean the same thing:

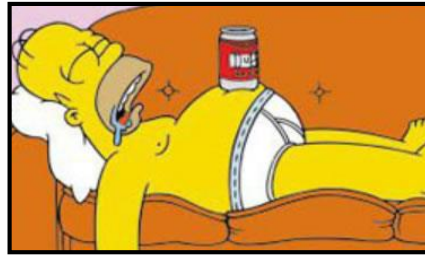


Image source: <http://www.pastelart.net/clipart/clipart-homer-simpson.html>

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A New Perspective

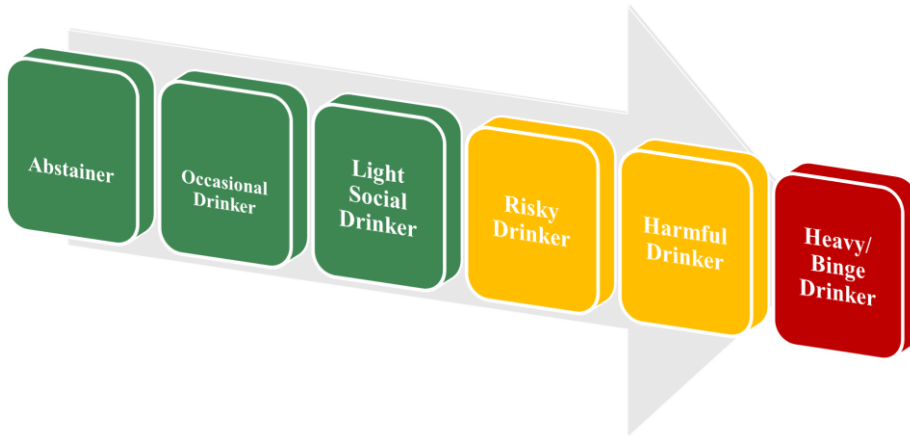
We now know that people can experience **harm** from alcohol use **without**:

- Being unable to limit their drinking (*a qualification of alcoholism*)
- Drinking in dangerous situations (*a qualification of alcohol abuse*)

We use new vocabulary (“**risky**” and “**harmful**”) to address other levels of drinking.

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The Range View of Risk for Alcohol Use



Alcohol use viewed as a continuum based on level/frequency of use.

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Low-Risk Drinking Limits

Women*	Men
1 drink per day	2 drinks per day
< 3 drinks in a single day	< 4 drinks in a single day
< 7 drinks per week	< 14 drinks per week
<i>*Also the low-risk drinking limit for individuals over age 65</i>	

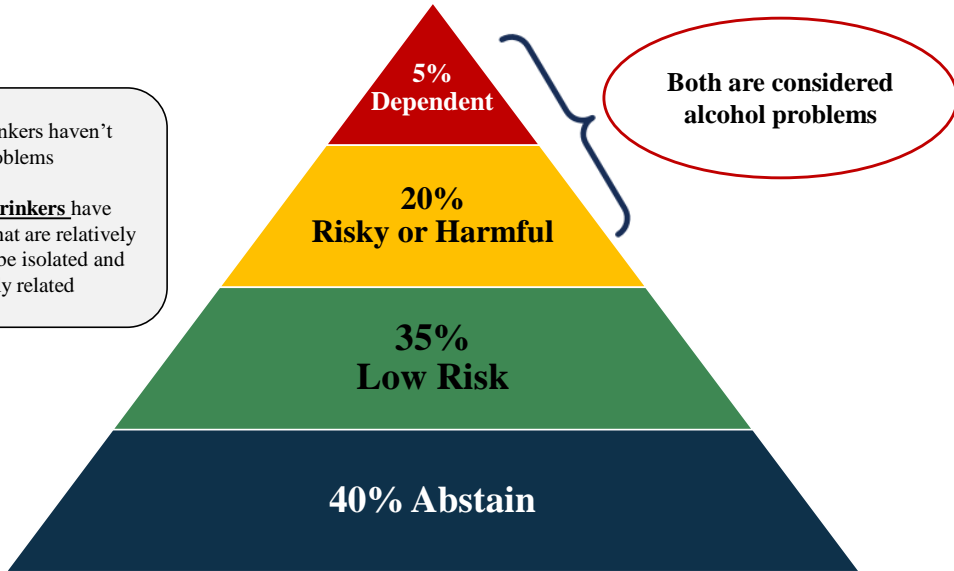
One Standard Drink

 12 fl. oz. regular beer	 8-9 fl. oz. malt liquor (shown in 12 oz. glass)
 5 fl. oz. table wine	 1.5 fl. oz. shot of 80-proof spirits (liquor)

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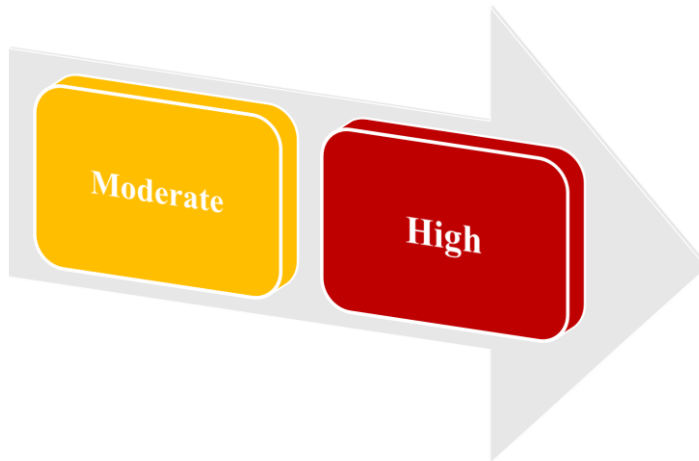
Drinking Levels in US Society

- **At-risk** drinkers haven't had any problems
- **Harmful drinkers** have problems that are relatively small, maybe isolated and questionably related



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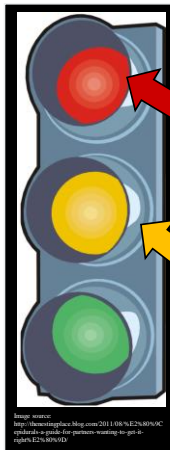
The Range View of Risk for Substance Use



Substance use is defined as: Use of illicit/illegal drug or prescription drug for non-medical purposes.

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The Range View of Risk



Most interventions
focus here.

The range view emphasizes **risky
and harmful** use as well.



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Examples of “Small” Problems

Drug interactions

Sleep disturbance

Headaches

Minor injuries
(bruises, scrapes)

Sexual
dysfunction

Fender benders

Tardiness/
absenteeism

Compromised
performance

Loss of
disposable
finances

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Substance Misuse in Context



There is significant overlap between substance misuse (including risky or harmful drinking) and other problems.

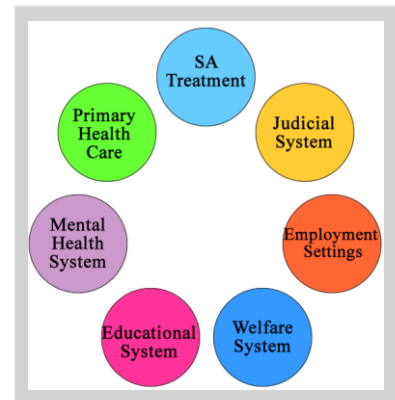


Image source: <http://www.dhammadownload.com/uk/tearson/substance misuse.html>

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Locating Risky and Harmful Drinkers: The Beginning of SBIRT

- SBIRT is **opportunistic**. It can be integrated into existing systems.
- Contact with risky/harmful drinkers might occur in a variety of locations.
- These systems are ideal locations for screening.



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Section 2

Screening

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What is SBIRT?

SBIRT stands for:

- **S**creening
- **B**rief **I**ntervention
- **R**eferral to **T**reatment

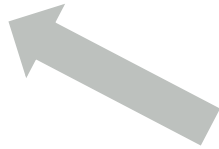


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Locating Risky and Harmful Drinkers: The Beginning of SBIRT

Screening
Brief
Intervention
Referral to
Treatment



It will not always be obvious who is a risky or harmful drinker!

It is important to **begin at the beginning**: locating risky and harmful drinkers.

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Locating Risky and Harmful Drinkers: The Beginning of SBIRT

While screening **can** identify those who are here...



Image source: <http://www.crooksandlawrence.com/personal-injury/>



Image source: <http://www.illustrationart.com/2008/11/24/drink-wine-healthy.html>

It is designed to identify *risky* behavior **before it causes serious harm.**

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Two Levels of Screening

Pre-screen: For Everyone/Universal

One or two questions to help filter the individuals that will be most likely to “screen positive” on a full screening.

Time saving measure for increasing efficiency with time is limited.

A “positive” pre-screen indicates the need to complete the full screening.

Full Screening: After Positive Pre-screen

The full screening tool informs the professional about the client’s level of substance use risk and the appropriate next steps: Brief Intervention or Referral to Treatment.

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Adult Pre-Screening Questions

Alcohol:

- **MEN:** How many times in the PAST 12 MONTHS have you had 5 or more drinks in a day?
- **WOMEN:** How many times in the PAST 12 MONTHS have you had 4 or more drinks in a day?

Drugs:

- How many times in the PAST 12 MONTHS have you used an illegal drug or used a prescription drug for nonmedical reasons?

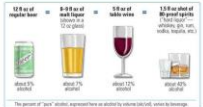
* *Pre-screen is positive if any response is > 0.*

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Adult Alcohol Full Screening

Alcohol Use Screening (AUDIT)

PATIENT: Because alcohol can affect your health and can interfere with certain medications and treatments, it is important that we ask some questions about your use of alcohol. Your answers will remain confidential unless you consent. Please use "N" for "No" or "X" for "not sure" that best describes your answer to each question.



The amount of each alcohol equivalent here is identical to other countries.

QUESTIONS	0	1	2	3	4
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	5-7 times a month	8 or more times a month
2. How many drinks containing alcohol do you have on a typical day you are drinking?	1 or 2	3 or 4	5 or 6	7 or 8	9 or more
3. How many times during the last 12 months have you had six or more drinks on one occasion?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
4. How often do you have five or more drinks on one occasion?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
6. How often during the past year have you failed to do what was expected of you because of drinking?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
7. How often during the past year have you needed a drink first thing in the morning to get yourself going after a heavy drinking session?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
8. How often during the past year have you had a feeling of guilt or remorse after drinking?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
9. How often during the past year have you been unable to remember what happened the night before because of your drinking?	Never	Low then monthly	Monthly	Weekly	Daily or almost daily
10. Have you or someone else been injured because of your drinking?	No	Yes, but not in the past year	Yes, but not in the past year	Yes, during the past year	Yes, during the past year
11. Has a relative, friend, doctor, or other health care worker been concerned about your drinking and suggested you cut down?	No	Yes, but not in the past year	Yes, but not in the past year	Yes, during the past year	Yes, during the past year

FURTHER INFORMATION				
0-7	8-9	10-15	16-20	Total

- Validated for adults 18 and older
- Alcohol only screening
- 1 pre-screen question
- 10 questions on full screening

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Adult Drug Full Screening

Patient's Name: _____ Date: _____

Drug Abuse Screening Test—DAST-10

These Questions Refer to the Past 12 Months

1. Have you used drugs other than those required for medical reasons?	Yes	No
2. Do you abuse more than one drug at a time?	Yes	No
3. Are you unable to stop using drugs when you want to?	Yes	No
4. Have you ever had blackouts or flashbacks as a result of drug use?	Yes	No
5. Do you ever feel bad or guilty about your drug use?	Yes	No
6. Does your spouse (or parents) ever complain about your involvement with drugs?	Yes	No
7. Have you neglected your family because of your use of drugs?	Yes	No
8. Have you engaged in illegal activities in order to obtain drugs?	Yes	No
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?	Yes	No
10. Have you had medical problems as a result of your drug use (eg, memory loss, hepatitis, convulsions, bleeding)?	Yes	No

Guidelines for Interpretation of DAST-10
Interpretation (Each "Yes" response = 1)

Score	Degree of Problems Related to Drug Abuse	Suggested Action
0	No problems reported	Encouragement and education
1-2	Low level	Risky behavior – feedback and advice
3-5	Moderate level	Harmful behavior – feedback and counseling; possible referral for specialized assessment
6-8	Substantial level	Intensive assessment and referral

Skinner HA. The Drug Abuse Screening Test. *Addictive Behavior*. 1982;7(4):383-391.
Vidler E, Lozhkina O, Fouts A. A comprehensive review of the psychometric properties of the Drug Abuse Screening Test. *J Drug Abuse Treatment*. 2007;32:159-168.
Reprinted with permission from Harvey Skinner, PhD.

- Validated for adults 18 and older
- Drug screening
- 1 pre-screen question
- 10 questions on full screening

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AUDIT-10 Score	DAST-10 Score	Modality
0-7	0	Education and Positive Reinforcement
8-15	1-2	Brief Intervention
16-19	3-5	Brief Treatment
20-40	6-10	Referral to Treatment

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Adolescent Screening

CRAFFT

- Validated for adolescents 14-21
- Used for alcohol and other substances
- 3 pre-screen questions
- 6 questions on full screening

AUDIT

- Validated for adolescents 14-18 with adjusted cut-offs
- Alcohol only screening
- 1 pre-screen question
- 10 questions on full screening

NIAAA Practitioner's Guide

- Used for adolescents 9-18
- Alcohol only screening
- 2 question screening process (No pre-screening)
- Suggests use of additional screening tools

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Adolescent Pre-Screening Questions

CRAFFT:

- During the past 12 months, did you:
 - Drink any alcohol (More than a few sips)?
 - Smoke any marijuana or hashish?
 - Use anything else to get high?

*Pre-screen is positive if any response is “Yes”.

AUDIT:

- **Male:** How many times in the PAST 12 MONTHS have you had 5 or more drinks in a day?
- **WOMEN:** How many times in the PAST 12 MONTHS have you had 4 or more drinks in a day?

* Pre-screen is positive if any response is > 0 .

Adolescent Screening

Inconsistent

The CRAFFT Screening Interview

Begin: “I’m going to ask you a few questions that I ask all my patients. Please be honest. I will keep your answers confidential.”

Part A

During the PAST 12 MONTHS, did you:

	No	Yes
1. Drink any alcohol (more than a few sips)? <small>(Do not count sips of alcohol taken during family or religious events.)</small>	<input type="checkbox"/>	<input type="checkbox"/>
2. Smoke any marijuana or hashish ?	<input type="checkbox"/>	<input type="checkbox"/>
3. Use anything else to get high ? <small>(anything else includes illegal drugs, over the counter and prescription drugs, and things that you sniff or “huff”)</small>	<input type="checkbox"/>	<input type="checkbox"/>

For clinic use only: Did the patient answer “yes” to any questions in Part A?

No Yes

↓ ↓

Ask CAR question only, then stop Ask all 6 CRAFFT questions

Part B

	No	Yes
1. Have you ever ridden in a CAR driven by someone (including yourself) who was “high” or had been using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you ever use alcohol or drugs to RELAX feel better about yourself, or fit in?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you ever use alcohol or drugs while you are by yourself, or ALONE ?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you ever FORGET things you did while using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do your FAMILY or RIENDS ever tell you that you should cut down on your drinking or drug use?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever gotten into TROUBLE while you were using alcohol or drugs?	<input type="checkbox"/>	<input type="checkbox"/>

Scoring Adolescent Screening Tools

CRAFFT

Cutoffs		
Negative	I	III
0	1-2	3<
Affirmation & Education	Brief Intervention	Referral to Treatment

AUDIT

Adolescent Cutoffs		
I	II	III
0-1	2	3+
Education	Brief Intervention	Referral to Treatment

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Adolescent Screening Tools

NIAA Practitioner's Guide

Elementary School (ages 9-11)

Ask the *friends* question first

- **Friends:** Do you have any friends who drank beer, wine or any drink containing alcohol in the past year?
- **Adolescent:** How about you—have you ever had more than a few sips of beer, wine or any drink containing alcohol?

Middle School (ages 11-14)

Ask the *friends* question first.

- **Friends:** Do you have any friends who drank beer, wine or any drink containing alcohol in the past year?
- **Adolescent:** How about you—in the past year on how many days have you had more than a few sips of beer, wine or any drink containing alcohol?

High School (ages 14-18)

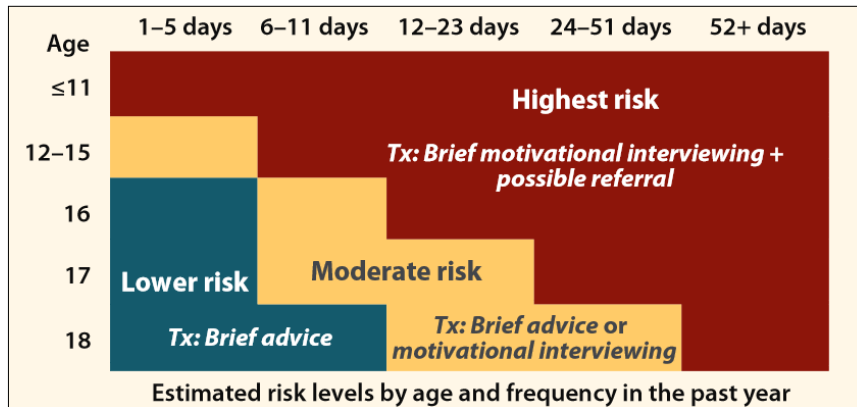
Ask the *adolescent* question first.

- **Adolescent:** How about you—in the past year on how many days have you had more than a few sips of beer, wine or any drink containing alcohol?
- **Friends:** If your friends drink, how many drinks do they usually drink on an occasion?

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NIAAA Practitioner's Guide Scoring

On how many DAYS in the past year did the adolescent drink?



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Screening Practice

- Pair up with a partner.
- Each person select a different screening tool.
- Take turns reading the screening tool while the other person answers questions as a role-play.
- Score each screening tool and determine zone of risk.

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Section 3

Brief Intervention

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Brief Interventions: The Next Step

Screening
Brief
Intervention
Referral to
Treatment

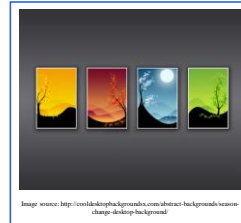


If screening suggests that they are an at-risk alcohol user, they may receive a brief intervention.

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Brief Interventions: The Next Step

- Short conversation or counseling session (5-15 minutes).
- Often focuses on barriers to changing behavior and benefits to changing.
- Assess readiness to change behavior.



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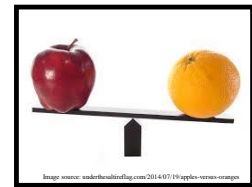
Motivational Interviewing (MI) versus Education only?



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What makes MI Different?

- Engaging in conversation instead of giving a speech.
- Partnership instead of power struggle.
- Exploring ambivalence instead of “fixing.”
- Client-centered instead of expert-driven.
- Guiding instead of directing.



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SBIRT Conversations

1. **Establish Rapport**
 - Elevator Speech
 - Ask permission
2. **Thoughts and Feedback**
 - Discuss results
 - Pros/cons
 - Determine the health education needed
3. **Enhance Motivation**
 - Readiness ruler
 - Ideas for change
 - Build on past successes
 - What are the barriers
 - Validate control over decision
4. **Negotiate a plan**
 - Set goals
 - Discuss follow-up as needed


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Brief Intervention

IndianaSBIRT

WE ASK EVERYONE.




Alcohol

Indiana Prevention Resource Center

What is a considered one drink?

One drink, or a standard drink, is the same as a beer, a shot of liquor, or a glass of wine if the amount poured is 12 ounces of beer, 1.5 ounces of liquor or 5 ounces of wine.



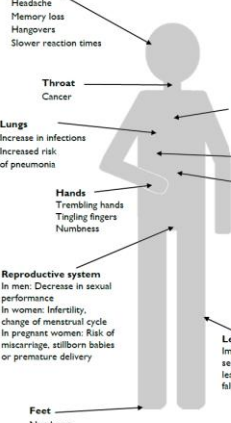
Follow this chart to keep drinking at low risk. If you drink more than these amounts, you are at risk for developing problems due to alcohol use.

Men	Women
No more than 4 drinks on any day	No more than 3 drinks on any day
No more than 14 drinks per week	No more than 7 drinks per week

Who people should not drink at all:

- Women who are pregnant
- People who plan to drive or engage in activities that require alertness and skill
- People taking certain medications
- People with medical conditions involving alcoholics
- People under the age of 21

Effects of Alcohol



Head

- Headache
- Memory loss
- Hangovers
- Slower reaction times

Throat

- Cancer

Lungs

- Increase in infections
- Increased risk of pneumonia

Hands

- Trembling hands
- Tingling fingers
- Numbness

Reproductive system

- In men: Decrease in sexual performance
- In women: Infertility, change of menstrual cycle
- In pregnant women: Risk of miscarriage, stillborn babies or premature delivery

Feet

- Numbness
- Tingling toes
- Painful nerves

Feelings/Consequences

- Nervousness
- Depression
- Arguments with family and friends
- Anxiety
- Cravings for alcohol
- Restlessness

Heart

- Weakness of heart muscle
- Heart failure

Liver

- Cirrhosis
- Scarring

Stomach

- Bleeding
- Burning
- Severe swelling
- Vomiting/Nausea
- Diarrhea
- Malnutrition
- Chance of ulcers

Legs

- Impaired sensation leading to falls

Symptoms you may have because of alcohol use:

- Hangovers
- Slow reaction times
- Poor coordination
- Blurry or double vision
- Upset stomach
- Low blood pressure
- Anxiety/restlessness
- Memory loss
- Overdose, coma or death

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Section 4

Referral to Treatment SBIRT Outcomes

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21

Referral to Treatment

Screening
Brief
Intervention
Referral to
Treatment



There are several times when a patient involved in SBIRT **might** receive a referral to treatment.

This treatment is referring a patient to “traditional” alcohol treatment.

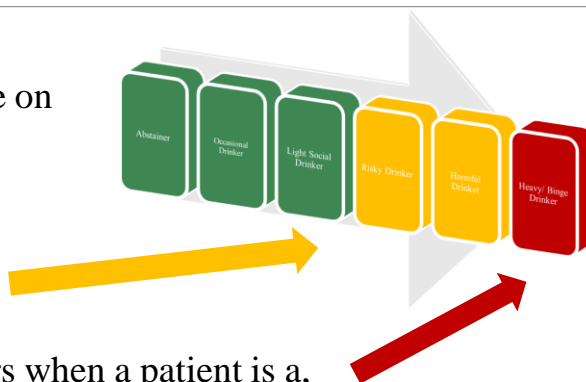
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Referral To Treatment

Screening **locates** someone on the range of alcohol use.

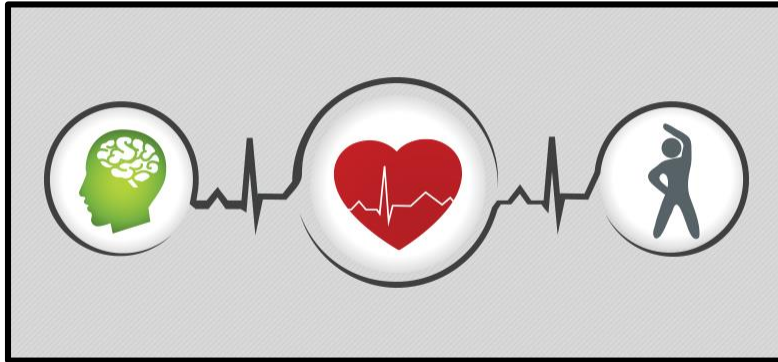
Usually, a BI is used for **risky/harmful** use.

Referral to treatment occurs when a patient is a, or when a BI reveals more serious use **heavy or dependent drinker**.



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SBIRT Outcomes



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Outcomes of Brief Interventions

Screening and Brief Interventions **reduce...**

- Drinking and illicit drug use^{1, 3, 4}
- Emergency room costs^{2, 3}
- Injuries and emergency dept. visits³
- Length of hospital stays, sick days & mortality³
- Unnecessary risks (e.g. driving under the influence, legal consequences, physical injury)³

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SBIRT Works: Primary Care Settings

At the 6-month GPRA[†] follow-up, people who received SBIRT services reported:

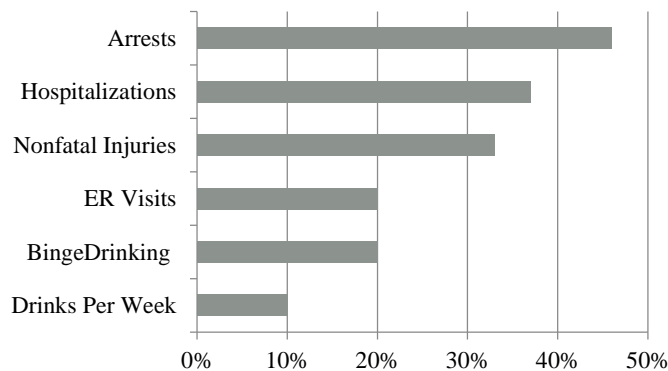
- 41% reduction in alcohol use
- 68% reduction in illicit drug use
- Fewer arrests, more stable housing, improved employment status, fewer emotional problems, and improved overall health

[†] Government Performance Results Act of 1993 (GPRA) findings are based on self reported data and do not include a control group.

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SBIRT Works: Primary Care Settings

Measurable Reductions



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SBIRT Works: Cost Savings

- \$89 cost savings for each patient screened⁵
- \$330 for each patient provided with a BI⁵
- Reduced health expenditures were \$3.81 for every \$1.00 spent on SBI⁵
- If SBI was routinely offered to eligible injured adult patients the potential net savings would be \$1.5 billion annually⁵

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1. Bernstein J, Bernstein E, Tassiopoulos K, Heeren T, Levenson S, & Hingson R. (2005). Brief motivational intervention at a clinic visit reduces cocaine and heroin use. *Drug and Alcohol Dependence*, 77(1), 49-59.
2. Estee, S., Wickizer, T., He, L., Shah, M., & Mancuso, D. (2010). Evaluation of Washington state screening, brief intervention, and referral to treatment project: Cost outcomes for Medicaid patients screened in hospital emergency departments. *Medical Care*, 48 (1), 18-24.
3. Fleming, M.F., Mundt, M.P., French, M.T., Manwell, L.B., Stauffacher, E.A., & Barry, K.L. (2002). Brief physician advice for problem drinkers: Long-term efficacy and benefit-cost analysis. *Alcoholism: Clinical and Experimental Research*, 26(1), 36-43.
4. Madras BK, Compton WM, Avula D, Stegbauer T, Stein JB, & Clark HW. (2009). Screening, brief interventions, referral to treatment (SBIRT) for illicit drug and alcohol use at multiple healthcare sites: comparison at intake and 6 months later. *Drug Alcohol Depend.*, 99(1-3), 280-295.
5. Gentilello, L.M., Ebel, B.E., Wickizer, T.M., Salkever, D.S., & Rivara, F.P. (2005). Alcohol interventions for trauma patients treated in emergency departments and hospitals: A cost-benefit analysis. *Annals of Surgery*, 241, 541-550.

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SBIRT is endorsed by:

- The World Health Organization (WHO)
- U.S. Preventive Services Task Force (USPSTF)
- Committee on Trauma of the American College of Surgeons

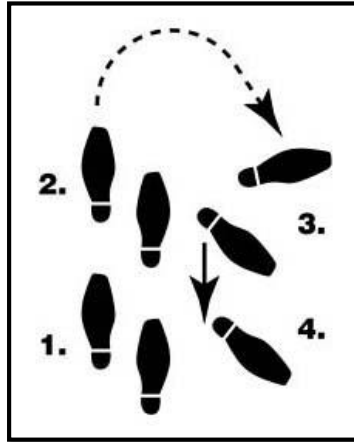
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Section 5

Motivational Interviewing

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Practice Brief Intervention Step by Step



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What Works Best?

Guiding

Directive



Following



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What is Motivational Interviewing?



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Health and Safety Quiz

1. Do you buckle up every time you're in a car, including an Uber or a taxi?
2. Do you floss daily?
3. Do you have a fire extinguisher in your kitchen?
4. Do you abstain from using your cell phone, including texting, while driving?
5. Do you exercise at least 30 minutes 3 times a week?
6. Do you have an earthquake kit in your car and in your home?
7. Do you abstain from using nicotine products?
8. Do you wear a helmet every time you ride a bicycle?
9. Do you wear a personal flotation device every time you get in a boat?
10. Do you take all medications as prescribed?

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Health and Safety Quiz: Persuading

1. Explain why the person should make this change.
2. Give at least three specific benefits that would result from making the change.
3. Tell the person how they could make the change.
4. Emphasize how important it is for them to make the change. This might include the negative consequences of not doing it.
5. Tell/persuade the person to do it. *And if you encounter resistance, repeat the above, perhaps **more emphatically**.*



Common Reactions:

Angry/agitated

Oppositional

Discounting

Defensive

Justifying

Not understood

Not heard

Procrastinate

Afraid

Helpless/Overwhelmed

Ashamed

Trapped

Disengaged

Not coming back---EVER!

Uncomfortable



Taste of Motivational Interviewing

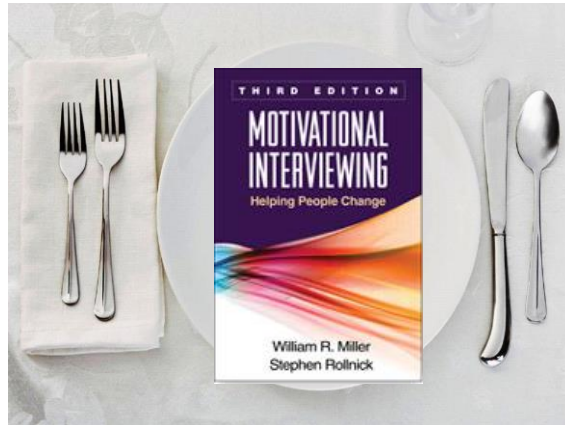


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Taste of Motivational Interviewing

- Identify a change that you are considering, something you are thinking about changing in your life, but have not definitely decided.
- It will be something you feel two ways about. It might be a change that would be “good for you,” that you “should” make for some reason, but have been putting off.
- Tell your partner about this change you are considering.

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Taste of Motivational Interviewing

1. Why would you want to make this change?
2. If you did decide to make this change, how might you go about it in order to succeed?
3. What are the three best reasons for you to do it?
4. How important would you say it is for you to make this change, on a scale from 0 to 10, where 0 is not at all important, and 10 is extremely important? [Follow-up question: And why are you at _____ rather than a lower number of 0?]
5. After you have listened carefully to the answers to these questions, give back a short summary of what you heard, of the person's motivations for change.
6. Then ask one more question: So what do you think you'll do? and listen with interest to the answer.

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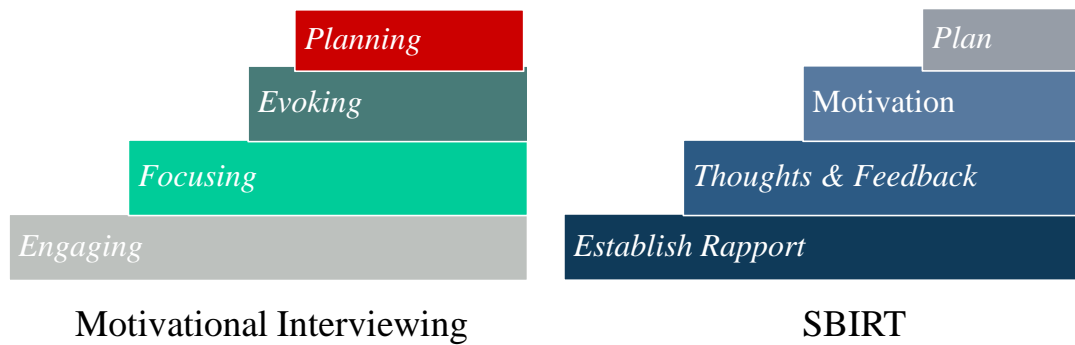
Common Reactions:

Understood	Safe
Want to talk more	Empowered
Liking the counselor	Hopeful
Open	Comfortable
Accepted	Interested
Respected	Want to come back
Engaged	Cooperative
Able to change	

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Compare Processes



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A Guiding Rule

Resist the “Righting Reflex”.

Understand and explore motivations.

Listen with empathy.

Empower the client.

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Motivational Interviewing References

1. Motivational Interviewing: Helping People change (3rd Edition), William Miller and Stephen Rollnick, Guilford Press
2. Motivational Interviewing in the Treatment of Psychological Problems, Hal Arkowitz et al, Guilford Press
3. Building Motivational Interviewing Skills, David Rosengren, Guilford Press
4. Motivational Interviewing in Health Care: Helping Patients Change Behavior, Stephen Rollnick, William Miller and Christopher butler, Guilford Press
5. Motivational Interviewing with Adolescents and Young Adults, Sylvie Naar-King and Mariann Suarez, Guilford Press
6. Motivational Interviewing in Social Work Practice, Melinda Hohman, Guilford Press
7. MINT website: www.motivationalinterviewing.org

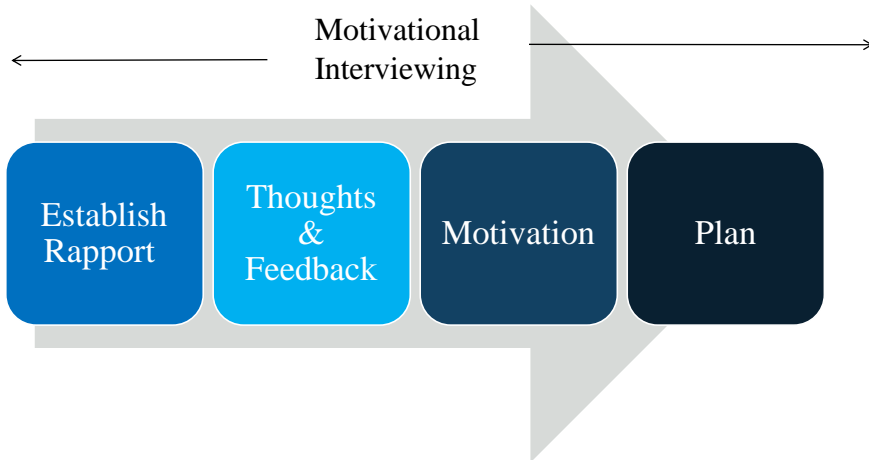
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Section 6

Brief Intervention Step-By-Step

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Putting MI and SBIRT Together



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Phase 1: Establish Rapport

- Elevator speech
 - Greeting
 - We Ask Everyone
 - Share confidentiality*
- Ask permission to ask questions

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Phase 1: Establish Rapport

Example 1:

- ✓ Hi, Mr. Jones. My name is Sara, I'm a part of your medical team here.
- ✓ I'm stopping in while you are waiting for the doctor, to take some information for your exam.
- ✓ We ask ALL of our patients a couple of questions once a year about alcohol and drug use.
- ✓ It will just take a minute or two. Then, you are set for the year. Is that ok?

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Phase 1: Establish Rapport

Example 2:

- ✓ Hi Mrs. Townes, I'm Tom, a nurse here. I'm coming by while you are waiting to take some vitals and get some information from RJ.
- ✓ I have a few standard questions we ask every year of all young people. It is something we usually like to do privately.
- ✓ Would it be ok if I spoke with RJ alone for a few minutes? I'll come get you in just a couple of minutes when we are finished.
- ✓ Hi RJ, today I'm here to ask you a few questions about alcohol and drug use. We ask all patients that are 12-18 these questions once a year.
- ✓ Your responses will be confidential. So, that means you would have to give permission for your responses to be shared with your mom.
- ✓ Would it be ok if I asked you these questions?"

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Phase 1: Establish Rapport

Example 3:

- ✓ Maria, I was wondering if I could follow-up with you on some questions you answered earlier today while you were waiting for me.
- ✓ We are trying to do a better job of blending physical and emotional health into all of our visits. Part of that is asking everyone once a year about alcohol and drug use.
- ✓ Would it be ok if I ask you a few questions?"

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Phase 1: Establish Rapport



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Phase 2: Thoughts & Feedback

- **Discuss Results**
 - The Score #
 - Range of Risk
 - What the level of risk means
 - Ask client/patient thoughts on the score
 - What do you think about the score?
 - How closely does this match the way you see things?
- **Pros/Cons of current use**
 - What do you like about _____? Not like about _____?
 - What would be better if _____ changed?
 - What would make _____ a concern to you?
- **Health Education**
 - Ask what is already known. Listen for existing knowledge.
 - Ask permission before briefly offering information.

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Phase 2: Thoughts & Feedback

Example 1:

Discuss Results:

- ✓ “Thanks for filling out the extra forms today. I reviewed your responses and tallied your score. Which, probably doesn’t mean too much without a little more information. Can I tell you a little bit about your score? A 14 on the alcohol use survey shows us that right now, your answers put you in zone II or the **risky or harmful range**. What do you think of that?”

Pros and Cons of Use:

- ✓ “What do you like about drinking?”
- ✓ *(Listen, reflect)* “You enjoy drinking, the taste, its fun and it feels good too. What if anything at all, even something little do you NOT like about drinking?”

Health Information:

- ✓ What do you know about when it comes to drinking and ways to lower your risk?
- ✓ *(Listen, reflect)* *It sounds like you know a lot about ways to take care of yourself once you have consumed alcohol.*
- ✓ Would it be alright with you if I shared a little information about the # of drinks that can keep your risk lower?

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Phase 2: Thoughts & Feedback

Example 2:

Discuss Results:

- ✓ “Scores on this screening tool are between 0 and 10. You scored a 3 which puts you in the **moderate risk** category. How closely does this fit within what you think about your current use?”
- ✓ “Folks that have scores in this range can make small changes to lower their level of risk.”

Pros and Cons of Use:

- ✓ “It sounds like you have a lot of reasons you like smoking marijuana. Tell me more about what you enjoy about it.”
- ✓ (*Listen, reflect*) “Sure, it sounds like marijuana does a lot for you. You sound like you really rely on it and the only snag in all of this is that you aren’t able to feel supported because it’s illegal. You don’t see it as a problem right now. If it did become a problem, what would that look like or how would you know if it was a problem?”

Health Information:


- ✓ “Sounds like you know a lot about marijuana. What do you know about how it might affect your blood pressure?”
- ✓ “If it’s ok, I can share a little bit about that.”

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Brief Intervention

IndianaSBIRT

WE ASK EVERYONE.




Alcohol

Indiana Prevention Resource Center

What is a considered one drink?

One drink, or a standard drink, is the same as a beer, a shot of liquor, or a glass of wine if the amount poured is 12 ounces of beer, 1.5 ounces of liquor or 5 ounces of wine.



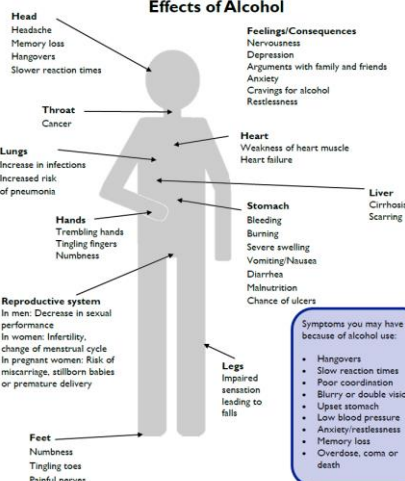
Follow this chart to keep drinking at low risk. If you drink more than these amounts, you are at risk for developing problems due to alcohol use.

Men	Women
No more than 4 drinks on any day	No more than 3 drinks on any day
No more than 14 drinks per week	No more than 7 drinks per week

Who people should not drink at all:

- Women who are pregnant
- People who plan to drive or engage in activities that require alertness and skill
- People taking certain medications
- People with medical conditions involving alcoholics
- People under the age of 21

Effects of Alcohol



- Head:** Headache, Memory loss, Hangovers, Slower reaction times
- Throat:** Cancer
- Lungs:** Increase in infections, Increased risk of pneumonia
- Hands:** Trembling hands, Tingling fingers, Numbness
- Reproductive system:** In men: Decrease in sexual performance; In women: Infertility, change of menstrual cycle; In pregnant women: Risk of miscarriage, stillborn babies or premature delivery
- Feet:** Numbness, Tingling toes, Painful nerves
- Feelings/Consequences:** Nervousness, Depression, Arguments with family and friends, Anxiety, Cravings for alcohol, Restlessness
- Heart:** Weakness of heart muscle, Heart failure
- Stomach:** Bleeding, Burning, Severe swelling, Vomiting/Nausea, Diarrhea, Malnutrition, Chance of ulcers
- Liver:** Cirrhosis, Scarring
- Legs:** Impaired sensation leading to falls

Symptoms you may have because of alcohol use:

- Hangovers
- Slow reaction times
- Poor coordination
- Blurry or double vision
- Upset stomach
- Low blood pressure
- Anxiety/restlessness
- Memory loss
- Overdose, coma or death

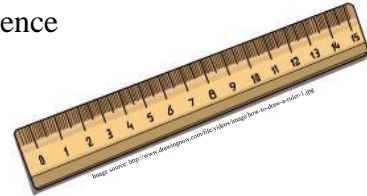
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Phase 3: Enhance Motivation

- Readiness ruler
 - Importance, Readiness, Confidence

- Ideas for change
 - Build on past successes
 - What are the barriers

- Validate control over decision



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Phase 3: Enhance Motivation

Example 1:

- ✓ “How ready would you say you are to make a change if you were to put yourself on a scale from 0-10? Zero is not ready at all and ten is 100% ready.”
- ✓ “What things might get in the way of you making a change?”
- ✓ “How have you been successful in the past?”

(Listen and reflect)

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Phase 3: Enhance Motivation

Example 2:

- ✓ “How important is it that you make some kind of change with drinking; even something small? On a scale of 0 to 10, with zero being not important at all and ten meaning it is significantly important to you, where would you say you would put yourself?”
- ✓ “What kinds of things have you done before that you think have helped you?”
- ✓ “What would be better if you did decide to do something different?”

(Listen and reflect)

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Phase 3: Enhance Motivation

Example 3:

- ✓ “You are right, this is totally your call. It is your decision whether or not now is the time to do something different. If you were to look at this ruler in my hand and point to the number that best describes how willing you are to consider some sort of change, where would you put yourself. Zero is not willing at all and ten is completely willing.
- ✓ “If there was a time that you would see yourself doing some sort of change, how would you know it was time?”

(Listen and reflect)

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Phase 4: Negotiate a plan

- Set Goals
 - What change is reasonable?
 - Small steps that can be taken?
 - What do you need to accomplish your goal?
 - Define success.

- Discuss Follow-up as Needed

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Phase 4: Negotiate a plan

Set Goals & Discuss Follow-up

Example 1:

Professional: “ You have talked about cutting back. What would that look like for you?”

Client: “ Yeah, I think I could cut back. I don’t think I need to stop drinking, but I want to cut down. I could see myself give up a drink or two each time I go out, so I don’t drink as much.”

Professional: “ That sounds like something you think will be reasonable. Tell me what you think you will need to make sure this plan works for you?”

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Phase 4: Negotiate a plan

Set Goals & Discuss Follow-up

Example 2:

Professional: “I’ve heard you talk about wanting to quit smoking; you don’t see marijuana fitting in your long-term plan. What is a step that you think would help you get closer to your goal?”

Client: “I think I need to start by finding some other things to help me sleep. If I can get to sleep without smoking I will be happy.”

Professional: “Sounds like your first direction is to figure out other ways to fall asleep. How would you like to explore the options?”

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Section 7

SBIRT Role Play

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Practice Practice Practice!



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Role-play SBIRT Conversation

Groups of 3 people.

Spend 15 minutes in each role.

1. Speaker
2. SBIRT Provider
3. Observer

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SBIRT Provider

- Ask pre-screening questions.
- Complete appropriate screening tool(s).
- Have a brief intervention conversation about change using MI.
- Integrate appropriate education *when appropriate.*

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Speaker

- Select role play character from scenarios provided.
- Respond to questions as suggested to all levels of screening.
- Role play scenario as an “*easy*” client.
- Moderate level of ambivalence.

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Observer

- Use fidelity coding sheet.
- Observe MI consistent behaviors and SBIRT phases.
- Write down examples of successful exchanges.

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Role-play Feedback

SBIRT Provider

- What went well?
- What would you change?

Speaker

- What went well?

Observer

- What went well?
- Advice with permission.



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Wrap Up!

Questions?

Please complete an evaluation.

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