SCREENING, BRIEF INTERVENTION & REFERRAL TO TREATMENT (SBIRT) IN THE HOSPITAL EMERGENCY DEPARTMENT

June 23, 2015
HOUSEKEEPING ITEMS

- Please enter your AUDIO PIN
- To communicate with speakers, please use the “chat” function;
- Ask questions at any time.
- Webcast will be recorded.
TODAY’S AGENDA

➢ SBIRT in the Emergency Department
  Jim Winkle, MPH
  Dept. of Family Medicine
  OHSU

➢ Hospital Case Studies
  • Mercy Medical Center-Todd Luther
  • Willamette Valley Medical Center-Carolyn Lash
SBIRT in the Emergency Department

Jim Winkle, MPH
Website: sbirtoregon.org

- Demonstration videos
- Screening forms
- Billing code information
- Pocket cards and tools
- Interactive training curriculum
- Role play handouts and slides
SBIRT

Screening  Brief Intervention  Referral to Treatment

“A public health approach to the delivery of early intervention and treatment services for people with substance use disorders and those at risk of developing these disorders.”
<table>
<thead>
<tr>
<th>SBIRT implemented</th>
<th>No SBIRT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine and universal screening, regardless of medical complaint</td>
<td>Inconsistent and selective screening</td>
</tr>
<tr>
<td>Validated, standardized screening tools</td>
<td>Non-systematized narrative questions</td>
</tr>
<tr>
<td>Alcohol use seen as a continuum</td>
<td>Alcohol use seen as dichotomous</td>
</tr>
<tr>
<td>Evidence-based, patient-centered change talk</td>
<td>Ineffective, directive style of communication</td>
</tr>
<tr>
<td>Ongoing transition between primary care and treatment</td>
<td>Discoordinate/unclear referrals and follow up</td>
</tr>
</tbody>
</table>
Relevance to medical settings

- Significant prevalence of unhealthy alcohol and drug use
- Substantial associated morbidity, mortality, and health care cost
- Valid screening instruments
- Interventions are effective, inexpensive, and feasible
Zones of substance use

I: Low risk
II: Risky
III: Harmful
IV: Dependent

SBIRT
Zone I: Low risk

Defined by:

- No use, or
- Adult alcohol use within low-risk limits

Low-risk limits do not apply to drug use
Adult low-risk limits for alcohol use in the U.S

<table>
<thead>
<tr>
<th>Group</th>
<th>Drinks per week</th>
<th>Drinks per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>Women</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Ages &gt;65</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

- Commonly recognized limits in U.S
- Standard drink contains .6 oz of pure ethanol
Adolescent low-risk limit for alcohol use: 0

- Even first use can result in tragic consequences.
- Adolescence is a period of neurodevelopmental vulnerability.
- Earlier use increases chance of later addiction.
Zone II: Risky

Defined by:

- Alcohol use that exceeds low-risk limits
- Any adolescent use
- Any recreational drug use

Not (yet) dealing with consequences of use
Zone III: Harmful

Defined by:

- Repeated negative consequences from use
- Failure to fulfill some major obligations
- Use continues despite persistent problems

Likely correlates with mild or moderate SUD
Zone IV: Dependent

Defined by:

- Patient’s life orbits around use
- Distress or disability
- Tolerance and withdrawal
- Use in larger amounts or longer period than intended

Likely correlates with moderate or severe SUD
Alcohol use among adult pts

Emergency Room

- 26%
- 74% Low risk or abstention

Primary Care

- 22%
- Low risk: 38%
- Abstention: 40%
- Risky 9%
- Harmful 8%
- Dependent 5%

Alcohol use among adolescents

Johnston et al, 2013
Drinking among pregnant women

- All Pregnant Women: 8.5%
- Women in First Trimester: 17.9%
- Women in Second Trimester: 6.6%
- Women in Third Trimester: 4.2%

SAMHSA, 2013
Morbidity of unhealthy adult alcohol use:

- Liver cancer and cirrhosis
- Mouth and throat cancer
- Hypertension
- Breast cancer
- Coronary heart disease
- Cerebrovascular disease
- Pancreatitis
- Stroke

- Alcoholic Cardiomyopathy
- Injuries
- Pneumonia
- Gastritis/PUD
- Contraindicates many medications
- Exacerbates numerous chronic medical conditions

NIAAA, 2003
Depression. Anxiety. Aggression.

Cancer of the throat and mouth

Frequent colds and infections, increased risk of pneumonia

Liver damage

Erectile dysfunction, birth defects, developmentally delayed or low birth weight babies.

Painful nerves. Numb, tingling toes.


Premature aging.


Inflammation of the pancreas.

Impaired sensation leading to falls.

Failure to fulfill obligations at work, school, or home. Car accidents. Legal problems.
Risks of adolescent alcohol and marijuana use

- Brain damage
- Injuries
- School Failure
- Violence
- Arrests, Incarceration
- Sexual assaults
- Pregnancy
- STDs
- Later addiction
- Stunted growth and fertility
- Suicide

NIDA, Office of the Surgeon General, NPR, CSAM, Hendershot et al, IBT GWU, 2007 - 2014
Leading Causes of mortality, ages 10-24

<table>
<thead>
<tr>
<th>Cause</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor vehicle crashes</td>
<td>30%</td>
</tr>
<tr>
<td>Other unintentional injuries</td>
<td>16%</td>
</tr>
<tr>
<td>Homicides</td>
<td>16%</td>
</tr>
<tr>
<td>Suicides</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>74%</strong></td>
</tr>
</tbody>
</table>

All are associated with alcohol and drug use

Eaton et al., 2010
Percent experiencing dependence in lifetime, based on age of first use, U.S.

Hingson et al 2006, SAMHSA 2010
Risks of drinking while pregnant

- Fetal alcohol spectrum disorders
- Birth defects
- Low birth weight
- Miscarriage
- First trimester drinking most harmful
Past month drug use among adults

Percent

Age

18-20
21-25
26-29
30-34
35-39
40-44
45-49
50-54
55-59
60-64
65+

NIDA, 2014
Past year drug use among adolescents

- Salvia
- Ritalin
- Cocaine
- OxyContin
- MDMA
- Hallucinogens
- Cough medicine
- Tranquilizers
- Vicodin
- Inhalants
- Synthetic marijuana
- Adderall
- Marijuana

8\textsuperscript{th} grade

12\textsuperscript{th} grade

NIDA, 2014
Drug use during pregnancy

- Around 5%
- Marijuana and opioids the most commonly used drugs
- Varies across low-high risk populations

SAMHSA, 2014
Morbidity of adult illicit drug use

- Overdose
- Hepatitis
- Psychotic symptoms
- Prenatal exposure: Low birth weight and diminished child development
- Addiction
- Motor vehicle crashes

- Cardiac arrest
- STDs, HIV
- Co-morbidity with mental disorders
- Respiratory illness
Interventions in medical settings

- Positive reinforcement
- Brief intervention
- Referral to specialized treatment
- Brief treatment

SAMHSA, 2013
Interventions and zones

- **I**: Positive reinforcement
- **II**: Brief intervention
- **III**: Brief intervention/referral
- **IV**: Referral to specialized treatment

Levels:
- **Dependent**
- **Harmful**
- **Risky**
Washington state SBIRT ER project

- Two-year study in ER depts.
- Medicaid savings from pts receiving BI: $185-192 per member per month
- Due to less inpatient hospitalizations from ER admissions

Alcohol SBI ranks high

- 25 recommended preventative services
- Ranked on health impact and cost effectiveness
- Only 3 score higher than alcohol SBI

### Nine highest-scoring preventative services

<table>
<thead>
<tr>
<th>Service</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aspirin chemoprophylaxis</td>
<td>10</td>
</tr>
<tr>
<td>Childhood immunization series</td>
<td></td>
</tr>
<tr>
<td>Tobacco-use screening and brief intervention</td>
<td></td>
</tr>
<tr>
<td><strong>Alcohol screening and brief intervention</strong></td>
<td>8</td>
</tr>
<tr>
<td>Colorectal cancer screening</td>
<td></td>
</tr>
<tr>
<td>Hypertension screening</td>
<td></td>
</tr>
<tr>
<td>Influenza immunization</td>
<td></td>
</tr>
<tr>
<td>Pneumococcal immunization</td>
<td></td>
</tr>
<tr>
<td>Vision screening—adults</td>
<td></td>
</tr>
</tbody>
</table>

Maciosek, et al. 2006
Common SBIRT clinic workflows

- Adult brief screen
- Adult full screen
- Adolescent full screen
- Brief intervention or Referral to treatment
Adult screening forms

**Brief screen**

**AUDIT**

**DAST**

www.sbirtoregon.org
Adult brief screen

One alcohol question ➔

One drug question ➔

www.sbirtoregon.org
Single alcohol question

- Single item question recommended by the NIAAA
- Sens: 82% Spec: 79% for risky alcohol use

Single drug question

**Drugs:** Recreational drugs include methamphetamines (speed, crystal) cannabis (marijuana, pot), inhalants (paint thinner, aerosol, glue), tranquilizers (Valium), barbiturates, cocaine, ecstasy, hallucinogens (LSD, mushrooms), or narcotics (heroin).

<table>
<thead>
<tr>
<th>How many times in the past year have you used a recreational drug or used a prescription medication for nonmedical reasons?</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

- Sens: 93% Spec: 94% for self-reported current drug use.

Smith, et al. 2010
### AUDIT

**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.

<table>
<thead>
<tr>
<th>One drink equals:</th>
<th>12 oz. beer</th>
<th>5 oz. wine</th>
<th>1.5 oz. liquor (one shot)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How often do you have a drink containing alcohol?</td>
<td>Never</td>
<td>Monthly or less</td>
<td>2-4 times a month</td>
</tr>
<tr>
<td>2. How many drinks containing alcohol do you have in a typical day when you drink?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>3. How often do you have four or more drinks on one occasion?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>4. How often during the last year have you found that you wanted or tried to cut down but couldn’t?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>5. How often during the last year have you failed to meet obligations at work or at home because of drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>6. How often during the last year have you had a feeling of guilt or remorse after drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>7. How often during the last year have you felt the need to cut down on drinking or had trouble controlling your drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>8. How often during the last year have you had a desire, thought, or action of drinking in the morning to make your hangover go away or have you had a drink or been unable to stop drinking once you started?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>9. How often during the last year have you had trouble with family, friends, or work because of drinking?</td>
<td>No</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?</td>
<td>No</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

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

| | Never | Currently | In the past |

### DAST

**Drug Screening Questionnaire (DAST)**

Using drugs 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.

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

Have you ever injected drugs? | Never | Yes, in the past 90 days | Yes, more than 90 days ago |

Have you ever been in treatment for substance abuse? | Never | Currently | In the past |
Administering the full screen

• Typically delivered verbally by behavioral health specialist

• When there’s a “break in the action” - waiting for x-rays, labs, or ready for discharge

• Best case scenario: warm handoff

• Pts may be more receptive to BHS than medical clinician and answer more honestly than in triage
**Alcohol Use Disorders Identification Test**

- Created by WHO, accurate across many cultures/nations
- 10 questions - multiple choice
- Addresses alcohol only
Scoring the AUDIT

- Each question has five answer choices
- Answers correlate with points, totaled for score

<table>
<thead>
<tr>
<th>Question</th>
<th>Never</th>
<th>Less than monthly</th>
<th>Monthly</th>
<th>Weekly</th>
<th>Daily or almost daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. How often during the last year have you had a feeling of guilt or remorse after drinking?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. How often during the last year have you been unable to remember what happened the night before because of your drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Have you or someone else been injured because of your drinking?</td>
<td>No</td>
<td></td>
<td>Yes, but not in the last year</td>
<td></td>
<td>Yes, in the last year</td>
</tr>
<tr>
<td>10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?</td>
<td>No</td>
<td></td>
<td>Yes, but not in the last year</td>
<td></td>
<td>Yes, in the last year</td>
</tr>
</tbody>
</table>

0 1 2 3 4
AUDIT zones and scores

- I: Women: 4-12, Men: 5-14
- II: Women: 13-19, Men: 15-19
- III: Women and Men: 20+
- IV: Harmful
- V: Dependent

Johnson, et al., 2013
Circling the zone of use

<table>
<thead>
<tr>
<th></th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>0-4</td>
<td>5-14</td>
<td>15-19</td>
<td>20+</td>
</tr>
<tr>
<td>W</td>
<td>0-3</td>
<td>4-12</td>
<td>13-19</td>
<td>20+</td>
</tr>
</tbody>
</table>
AUDIT zones and interventions

I. No intervention
II. Brief intervention
III. Brief intervention/referral
IV. Referral

Dependent
Harmful
Risky
Drug Abuse Screening Test

DAST-10 version

Validated for adults

Cut-off score of 3 has high validity for drug abuse

Scoring the DAST

- Each question has yes or no answer
- Yes answers get one point

<table>
<thead>
<tr>
<th>Question</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Have you neglected your family because of your use of drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Have you engaged in illegal activities in order to obtain drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Have you had medical problems as a result of your drug use (e.g. memory loss, hepatitis, convulsions, bleeding)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Count: 0-1
# Scoring the DAST

The Drug Screening Questionnaire (DAST) is used to assess the likelihood of drug use. The scoring ranges from 0 to 6, with higher scores indicating a greater likelihood of drug use. The scoring is based on the answers to the questions in the questionnaire.

### Drug Screening Questionnaire (DAST)

<table>
<thead>
<tr>
<th>Question</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>How much of the following drugs have you used in the past month?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Synthetic cannabinoids (e.g., lysergic acid diethylamide, PCP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hallucinogens (e.g., mescaline, psilocybin, psilocin)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LSD (lysergic acid diethylamide)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How often have you used these drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daily or almost daily</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weekly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monthly or less</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ever</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many times did you use these drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to obtain money or other favors?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to avoid withdrawal symptoms?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to achieve a desired effect?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to avoid withdrawal symptoms?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to achieve a desired effect?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to avoid withdrawal symptoms?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever used these drugs in order to achieve a desired effect?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Scoring Range

- **Score 0**: No or low risk of drug use
- **Score 1-2**: Moderate risk
- **Score 3-5**: High risk
- **Score 6+**: Very high risk

---

DAST zones and scores

- Dependent: 6+
- Harmful: 3 - 5
- Risky: 1 - 2
Adolescent full screen

CRAFFT

Front

Back

www.sbirtoregon.org
CRAFFFT

- Car Relax Alone Forget Friends Trouble
- Designed for adolescents
- Validated, developmentally appropriate, easy-to-use
- Less than a minute to complete when self-administered
Validation of the CRAFFT

- General adolescent outpatients, ages 12-18
- Spanish-speaking teens (CARLOS)
- Native American teens

Acceptable and feasible with 9-12 year olds

## Interpreting the CRAFFT

<table>
<thead>
<tr>
<th>Score</th>
<th>Risk</th>
<th>Recommended action</th>
</tr>
</thead>
<tbody>
<tr>
<td>“No” to 3 opening questions</td>
<td>No risk</td>
<td>Positive reinforcement</td>
</tr>
<tr>
<td>“Yes” to car question</td>
<td>Riding risk</td>
<td>Discuss alternatives to riding with impaired drivers</td>
</tr>
<tr>
<td>CRAFFT score = 0</td>
<td>Medium risk</td>
<td>Brief advice</td>
</tr>
<tr>
<td>CRAFFT score = 1</td>
<td></td>
<td>Brief intervention</td>
</tr>
<tr>
<td>CRAFFT score ≥ 2</td>
<td>High risk</td>
<td>Consider referral for further assessment (delivered through brief intervention)</td>
</tr>
</tbody>
</table>
5Ps screening tool

- Designed for pregnant women
- Asks about use by Parents, her Peers, her Partner, in her Past, and during her Pregnancy
- Also screens for tobacco, emotional health, and intimate partner violence.
- Administered through interview
- Other validated tools: TWEAK and T-ACE (alcohol only)
5Ps screening tool

- Non-confrontational questions elicit genuine responses
- “YES” answers suggest need for a more complete assessment and possible treatment for substance abuse.
- Advise the client that the responses she provides are confidential.
Mr. Davis was given a **AUDIT** screening form today. His score placed him into the **Low Risk** zone of use.

We did not discuss this further because **the patient’s low risk** did not warrant further discussion.
Mr. Davis was given a _______ screening form today. His score placed him into the _______ zone of use.

In discussing this issue, my medical advice was that he _______. His readiness to change was _______ on a scale of 0 - 10. We explored why it was not a lower number and discussed the patient’s own motivation for change.

He agreed to _______ and to make a follow up appointment in _______ weeks.

Total clinic time administering and interpreting the screening form, plus performing a face-to-face brief intervention with Mr. Davis was _______ minutes.
Communication styles during the patient visit

Directing

Following

Guiding

Rollnick and Miller, 2008
Characteristics of guiding communication

- Respect for autonomy, goals, values
- Readiness to change
- Ambivalence
- Patient is the expert
- Empathy, non-judgment, respect
Steps of the brief intervention

- Raise subject
- Provide feedback
- Enhance motivation
- Negotiate plan

D'Onofrio, et al., 2005
Video demonstration:
Brief intervention:
“Tom”
Steps of the brief intervention

- Screening forms act as conversation starters
- Ask permission
- “Tell me about your substance alcohol/drug use”

Raise subject
Steps of the brief intervention

Provide feedback

- State Zone of use
- Ask and explain connection between use and health issue
- State low risk limits
- Give recommendation to reduce use or abstain
## Patient recommendations

<table>
<thead>
<tr>
<th>Zone of use</th>
<th>Adult alcohol use</th>
<th>Adult drug use</th>
<th>Adolescent use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low risk</td>
<td>Positive reinforcement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risky</td>
<td>Reduce use</td>
<td></td>
<td>Abstain</td>
</tr>
<tr>
<td>Harmful</td>
<td>Reduce use or Abstain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependent</td>
<td></td>
<td>Abstain</td>
<td></td>
</tr>
</tbody>
</table>
Steps of the brief intervention

- Ask and reflect about perceived pros and cons of use
- Use the 0 – 10 scale
- “Why not a lower number?”

Enhance motivation
Steps of the brief intervention

- If pt sounds ready, ask: “What would that look like for you?”
- Re-state your recommendation
- Ask to schedule follow-up

Negotiate plan
Pocket cards

Adult

Adolescent
Case study: “Clark”

- 68yo male, never married, retired, lives alone
- Mild hypertension and diabetes since 1999,
- Presents with cut finger from kitchen knife
- Drinks 10 beers a night at local bar
Clark’s AUDIT answers:

<table>
<thead>
<tr>
<th>Questions</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How often do you have a drink containing alcohol?</td>
<td>Never</td>
<td>Monthly or less</td>
<td>2-4 times a month</td>
<td>2-3 times a week</td>
<td>4 or more times a week</td>
</tr>
<tr>
<td>2. How many drinks do you have on a typical day when drinking?</td>
<td>1 or 2</td>
<td>3 or 4</td>
<td>5 or 6</td>
<td>7 to 9</td>
<td>10 or more</td>
</tr>
<tr>
<td>3. How often do you have six or more drinks on one occasion?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>4. How often during the last year have you found that you were not able to stop drinking once you had started?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>5. How often during the last year have you failed to do what was normally expected of you because of drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>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?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>7. How often during the last year have you had a feeling of guilt or remorse after drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>8. How often during the last year have you been unable to remember what happened the night before because of your drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>9. Have you or someone else been injured because of your drinking?</td>
<td>No</td>
<td>Yes, but not in the last year</td>
<td>Yes, during the last year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?</td>
<td>No</td>
<td>Yes, but not in the last year</td>
<td>Yes, during the last year</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Clark’s AUDIT score: 15

<table>
<thead>
<tr>
<th></th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>0-4</td>
<td>5-14</td>
<td>15-19</td>
<td>20+</td>
</tr>
<tr>
<td>W</td>
<td>0-3</td>
<td>4-12</td>
<td>13-19</td>
<td>20+</td>
</tr>
</tbody>
</table>
Case study: “Stacey”

- 28yo female, never married, works at restaurant, lives with housemate
- Takes Aderall for ADHD since 2010
- Presents with earache
- Uses a “bump” of cocaine most weekends
Which of the following drugs have you used in the past year?

- methamphetamines (speed, crystal)
- cannabis (marijuana, pot)
- inhalants (paint thinner, aerosol, glue)
- tranquilizers (valium)
- narcotics (heroin, oxycodone, methadone, etc.)
- hallucinogens (LSD, mushrooms)
- other __________

How often have you used these drugs?  □ Monthly or less  X Weekly  □ Daily or almost daily

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

Have you ever injected drugs?  X Never  □ Yes, in the past 90 days  □ Yes, more than 90 days ago

Have you ever been in treatment for substance abuse?  X Never  □ Currently  □ In the past

I  II  III  IV
0  1-2  3-5  6+
Treatment is underutilized

- Alcohol: 10.7% (29,000 per year)
- Illicit drugs: 14.0% (17,000 per year)

Oregonians age 12+ with abuse or dependence

Same individuals who received treatment in last year

SAMHSA, 2009 - 2013
“Abuse”, “dependence” or “alcoholism” are terms no longer used.

Official term: Substance Use Disorder

A spectrum of 11 symptoms experienced in one year.

Hasin, et al., 2013
# 11 SUD criteria

<table>
<thead>
<tr>
<th></th>
<th>DSM-IV Abuse&lt;sup&gt;a&lt;/sup&gt;</th>
<th>DSM-IV Dependence&lt;sup&gt;b&lt;/sup&gt;</th>
<th>DSM-5 Substance Use Disorders&lt;sup&gt;c&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hazardous use</td>
<td>X</td>
<td>-</td>
<td>X</td>
</tr>
<tr>
<td>Social/interpersonal problems related to use</td>
<td>X</td>
<td>-</td>
<td>X</td>
</tr>
<tr>
<td>Neglected major roles to use</td>
<td>X</td>
<td>-</td>
<td>X</td>
</tr>
<tr>
<td>Legal problems</td>
<td>X</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

- **≥1 criterion**

<table>
<thead>
<tr>
<th>Withdrawal&lt;sup&gt;d&lt;/sup&gt;</th>
<th>-</th>
<th>X</th>
<th>-</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tolerance</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Used larger amounts/longer</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Repeated attempts to quit/control use</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Much time spent using</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Physical/psychological problems related to use</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Activities given up to use</td>
<td>-</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Craving</td>
<td>-</td>
<td>-</td>
<td>X</td>
</tr>
</tbody>
</table>

- **≥2 criteria**
Categories of substance use disorders

- 2-3 symptoms: mild
- 4-5 symptoms: moderate
- 6 or more symptoms: severe

Hasin, et al., 2013
Substance use treatment

• Not everyone with substance use disorders needs the same treatment

• No need to wait until patients are ready to abstain and enter abstinence-based treatment before we treat substance use disorders.
Some pts cannot or will not obtain conventional specialized treatment

BT can be performed in primary care or ED settings

More numerous and comprehensive sessions than BIs

Involves a combination of techniques
Levels of treatment in specialty addiction clinics

Purpose: determine diagnosis and appropriate level of care:

- Level I: Outpatient treatment
- Level II: Intensive outpatient treatment
- Level III: Residential/inpatient treatment
- Level IV: Medically managed intensive inpatient treatment

SAMHSA, 2006
Effective treatment options for AUDs:

- Counseling
- Medications
- Alcoholics Anonymous (AA) and other mutual help groups

Questions?

Jim Winkle, MPH
OHSU Family Medicine
Phone: 503-720-8605
winklej@ohsu.edu
www.sbirtoregon.org
SBIRT IN THE EMERGENCY DEPARTMENT

Hospital Presentations

- Mercy Medical Center-Todd Luther
- Willamette Valley Medical Center-Carolyn Lash
SBIRT Implementation

• Prior to screening measure
  – All patients received brief prescreening questions for alcohol and illicit drugs (Yes/No current or recent past hx)

• After screening measure
  – Implemented the CAGE Assessment Tool for adults
  – CRAFT Assessment Tool for adolescents

• All patients with positive prescreening have an age appropriate screening

• Positive brief screening alerts the provider
  – Color coded on provider electronic tracker board
What worked:

• Previous process of prescreening all patients
• Prompts in EMR
• Mandatory documentation in EMR

What didn’t work:

• Privacy issues with completing the screening in our Rapid Medical Exam (RME) Unit
• Not having trained nursing or social worker staff to complete brief intervention
SBIRT Implementation

- Shared importance of this measure with the Executive Team
- Developed goals for performance with ED Manager
- ED Manager developed process for monitoring staff performance
  - SBIRT screening tool added to the EMR
  - Referral process for brief intervention developed for physician
WILLAMETTE VALLEY MEDICAL CENTER

What worked:
• Embedded hospital performance into Manager’s annual goals
• Developed process for screening directly in the EMR

What didn’t work:
• Screening was not built directly in the patient assessment
QUESTIONS?
THANK YOU

Diane Waldo
Associate VP of Quality and Clinical Operations
Diane.Waldo@oahhs.org

Oregon Association of Hospitals and Health Systems
www.oahhs.org