Acknowledgements

SBIRT in Colorado
A program of Peer Assistance Services, Inc.
CNE Offering*

2.0 contact hours of CNE available for nurses who:

- Attend the full 2-hour training
- Complete and submit the post-training evaluation form

*This educational activity does not include any content related to the products and/or services of a commercial interest entity

This continuing nursing education activity was approved by the Continuing Nursing Education Group, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Arizona, Idaho, and Utah Nurses Associations are members of the Continuing Nursing Education Group
CPE Offering*

2.0 contact hours of CPE available for pharmacists who:
• Attend the full 2-hour training
• Complete and submit the post-training evaluation form

Disclosure Statement – no financial relationships to disclose
I have no relevant financial relationships with commercial interests pertaining to the content presented in this program.
NASW Offering*

2.0 contact hours of NASW available for Social Workers who:
• Attend the full 2-hour training
• Complete and submit the post-training evaluation form

Disclosure Statement – no financial relationships to disclose

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Agenda

1. Examine alcohol and health
2. Examine marijuana and health
3. Explore *Screening, Brief Intervention & Referral to Treatment* (SBIRT) for prevention of alcohol and drug problems
4. Practice brief intervention skills
5. Allow time for discussion
6. Additional Role-Play
Learning Objectives

1. Summarize the relationship between substance use and health

2. Describe *Screening, Brief Intervention & Referral to Treatment* (SBIRT) as an evidence-based public health approach for screening patients for alcohol, tobacco, and other drug use.

3. Demonstrate how to incorporate SBIRT into practice.
# Alcohol and Public Health

<table>
<thead>
<tr>
<th>National</th>
<th>Colorado</th>
</tr>
</thead>
<tbody>
<tr>
<td>• <strong>3rd</strong> leading cause of preventable death</td>
<td>• <strong>5 deaths</strong> each day due to excessive drinking</td>
</tr>
<tr>
<td>• <strong>106,000 deaths</strong> per year</td>
<td>• <strong>1 in 5</strong> adults binge drink</td>
</tr>
<tr>
<td>• <strong>65.3 million</strong> report binge alcohol use</td>
<td>• <strong>$5 billion</strong> in economic costs</td>
</tr>
<tr>
<td>• <strong>$249 billion</strong> in Economic costs</td>
<td>▪ Lost work productivity</td>
</tr>
<tr>
<td></td>
<td>▪ Healthcare costs</td>
</tr>
<tr>
<td></td>
<td>▪ Criminal justice</td>
</tr>
<tr>
<td></td>
<td>▪ Vehicle crashes</td>
</tr>
<tr>
<td></td>
<td>▪ Property damage</td>
</tr>
</tbody>
</table>
What is one drink?

It takes your body approximately 1 hour to process 1 standard drink.
Lower-Risk Drink Limits

Adapted from CDC

<table>
<thead>
<tr>
<th></th>
<th>Per Day No more than</th>
<th>Per Week No more than</th>
</tr>
</thead>
<tbody>
<tr>
<td>WOMEN</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>MEN</td>
<td>4</td>
<td>14</td>
</tr>
<tr>
<td>OVER 65</td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

LESS IS BETTER

- Why different limits for women?
- There is no “safe” amount.
  - Alcohol is a toxin.
Types of Unhealthy Drinking

Created by the Center for Disease Control
The Focus of SBIRT

- Severe Alcohol Use Disorder (4%)
  - Brief Intervention + Referral to Treatment
- Alcohol Misuse (25%)
  - Brief Intervention + Monitoring and Support
- Low Risk Use or Abstention (71%)
  - Positive Reinforcement + Continued Screening

Alcohol use in the U.S. general population
adults age ≥ 21 years

Adapted from SAMHSA
Why screen for alcohol in health care?

**Risks**
- Cancers of breast, colon, liver, head and neck
- Stroke
- Accidents and injuries: falls, intimate partner violence, child abuse
- Unintended pregnancy & sexually transmitted infections
- Birth defects
- Suicide

**Causes**
- Medication interactions
- Alcohol use disorder
- Fatty liver
- Cirrhosis and cardiomyopathy
- Pancreatitis

**Worsens**
- Hypertension
- Diabetes
- Depression and Anxiety
- Insomnia
- Gastrointestinal conditions
- Atrial Fibrillation
- Weight gain
In addition, excessive substance use...

- Negatively affects work productivity
- Interferes with healthy relationships and family life
- Increases negative emotions and anger
- Disrupts academic achievement
- Hinders ability to successfully manage stress and sleep problems
- Increases the risk of early childhood exposures to substance use for children of heavy drinkers
“Addiction is a pediatric disease.”
- John Knight, MD
Boston Children’s Hospital

“A child who reaches his or her 21st birthday without using drugs, tobacco or alcohol is ‘virtually certain’ never to slip into those habits.”
- Joseph A. Califano, Jr.
How to Raise a Drug-Free Kid
Bio-Psycho-Social Framework

Substance use disorders and related conditions are influenced by three primary reinforcement factors:

• **Biological** – genes, hormones, age, brain circuitry, tolerance, sensitization
• **Psychological** – mood regulation, trauma, chronic exposures to stress, craving, judgment, perception, motivation, resilience, memory, learning
• **Social/Environmental** – family, social network, school, employment, culture, community
What about Marijuana?

Clinical guidelines for addressing marijuana in adolescents, adults, pregnant and breastfeeding women

- [https://www.colorado.gov/cdphe/marijuana-clinical-guidelines](https://www.colorado.gov/cdphe/marijuana-clinical-guidelines)

Responsibility Grows Here Campaign

- [https://responsibilitygrowshere.com/](https://responsibilitygrowshere.com/)
Marijuana and Adolescents
What is SBIRT?

**Screening:** Using validated questions

**Brief Intervention:** Brief conversation to enhance motivation to change

**Referral to Treatment:** Assessment and services for the person with a more severe alcohol or drug use problem
Team Approach to SBIRT
SBIRT:

Screening
Screening

- Use validated questions exactly as worded
- Self-administered preferred (paper or electronic forms the client fills out alone)
  - Enhanced comfort for patient
  - Potentially more accurate results
  - More efficient
- Two-step process
  1. Brief screening
  2. Further screening when brief screen positive

*Most efficient approach: brief screening = vital sign*
Brief Screening

1. “How many times in the past year have you had X or more drinks in one day?”

<table>
<thead>
<tr>
<th>Positive Response</th>
<th>Men &lt; 65 years</th>
<th>Women Anyone ≥ 65 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1 or more times)</td>
<td>5 or more drinks/day</td>
<td>4 or more drinks/day</td>
</tr>
</tbody>
</table>

2. “How many drinks do you have on average each week?”

<table>
<thead>
<tr>
<th>Positive Response</th>
<th>Men &lt; 65 years</th>
<th>Women Anyone ≥ 65 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1 or more times)</td>
<td>15+ drinks/week</td>
<td>8+ drinks/week</td>
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*Any alcohol use by pregnant women or < age 21 = positive score*
Further screening for alcohol: AUDIT

- **Alcohol Use Disorders Identification Test**
- Developed for primary care
- Identifies low/no-risk, hazardous or harmful use and possible severe alcohol use disorder
- Self-administer whenever possible
Brief Screening for Marijuana Use

“In the past year, how many times have you used marijuana?
Positive screen = 1 or more times

Next steps:
• Further assessment to determine quantity and frequency of use
• Further screening may be indicated: CUDIT-R
• See Marijuana Clinical Guidance document for more information
• Daily or near daily use: corresponds to greater risk for Cannabis Use Disorder
Activity: Listen and Summarize

Dyads (10 minutes – 3-5 mins each speaker)

**Speaker:** Pick a **real-life** change issue

**Listener:** Actively listen and seek to understand – *do not give advice*

Use these four questions:

1. “Why might you like to make a change in _____?”
2. “How might you go about changing _____?”
3. “What are the best reasons to change _____?”
4. “How will your life be different if you change _____?”

**Listener:**

1. Reflect back and summarize what you heard
2. Ask: “So, what do you think you’ll do?”

Source: rawpixel
Change Talk

Desire
Ability
Reasons
Need
SBIRT:

**Brief Intervention**

*a conversation with a goal*
Brief Negotiated Interview

1. Raise the subject
2. Provide feedback
3. Enhance motivation
4. Negotiate a plan and advise

Source: Shutterstock
Step 1: Raise the Subject

“Would you mind taking a few minutes to talk with me about your screening results?”

*Ask permission to have the conversation*
Step 2: Provide Feedback

• Review reported alcohol use; compare to lower risk limits

• Connect alcohol to presenting concerns or risk for future health conditions

• Express concern

• Advise to quit or cut back

Don’t give too much information

Always elicit the person’s response
Step 3: Enhancing Motivation
Assess Importance or Readiness

“On a scale of 0 -10, how important is it to you to decrease your drinking?”

“On a scale of 0-10, how ready are you to cut back on how much alcohol you drink?”

Then Respond:

“What makes you a X and not a lower number?”
Step 3: Enhancing Motivation
Assess Confidence

“On a scale of 0 - 10, how confident are you that you could make a change if you decide to?”

Then Respond:
“What could help you feel more confident?”

![Confidence Scale](image)
Step 3: When readiness is low
Explore the pros and cons

“What do you like about your current level of drinking?”

Followed by:

“What are the not so good things about your current level of drinking?”

Then summarize both sides:

“So, on the one hand ___________, and on the other hand, __________.”
Step 3: Elicit “Change Talk”
Exploring Ambivalence

“Why might you want to consider making a change in your alcohol or drug use?”

“Let’s say you did decide to quit or cut back, how would you go about doing it?”

“What are some of the best reasons you can think of to make a change?”

“How does your current alcohol use fit with what matters most to you in your life?”
Step 4: Negotiate and Advise

Elicit response:
“What you decide to do is up to you.”
“What steps could you take to make a change?”

Negotiate a goal and specific next steps:
Offer input with permission.

Assist with developing a plan:
“What will be challenging?
“How will you approach this?”
“How can we help?”

Summarize:
“Your plan and next steps are...”

Arrange follow-up:
Depending on level of risk and circumstances.

Thank them:
For their honesty and willingness to have the conversation.
Brief intervention demonstration:

https://www.youtube.com/watch?edufilter=NULL&feature=youtu.be&v=wIn1GhtFq0M

SBIRT Colorado: Demonstration of Brief Intervention for Alcohol
Tips for Talking to Youth

• Feedback from focus groups with adolescents
  • **Science** “Don’t tell us what to do. Just give us the facts, and trust us to make the right decisions.”
  • **Stories** “Put a human face on it to drive the message home.”
    • (Avoid personal stories)

• **Express Empathy** — Acceptance facilitates change
• **Develop Discrepancy** — Weigh the pros/cons
• **Roll with Resistance** — Change the subject and focus on a plan you both can agree on
• **Support Self-Efficacy** — Help them believe they can do it, even if they think they have bitten off more than they can chew
Skills Practice

Groups of 3

Round Robin

Source: Rawpixel
Referral to Treatment
Barriers to Treatment

Fear of stigma is a common reason for not seeking treatment.

“Vital Sign” We ask everyone about Alcohol

Substance use can affect our health in a lot of different ways. When we make a point to ask everyone about their use, it not only allows us to let them know the risks, but it can help to normalize conversations around substance use in the future.

Only about 15% of people who meet criteria for a lifetime alcohol use disorder report receiving treatment.
Reducing Stigma Through Elevated Language

1. **Words Matter**
   - Avoid terms like “addict” and “junkie”
     - Instead use “suffering with addiction”

2. **Avoid Stigmatizing Language**
   - Perform language audits
   - Dispel myths and misconceptions

3. **Authenticity**
   - Be Open, Connecting, Passionate, use Active Listening

4. **Use Clinical Terminology**
   - DSM-5 and/or ICD-10
     - Substance Use Disorder
       - Mild, Moderate, Severe
   - Avoid previous designations
     - Abuse and Dependence

5. **Stigma and Suicide**
   - Unintentionally harmful terms: completed, commit, successful
   - Preferred terms:
     - Died of suicide
     - Suicide Death
     - Suicide Attempt

*If we want addiction destigmatized, we need a language that’s unified. [www.recoveryanswers.org/addiction-ary/](http://www.recoveryanswers.org/addiction-ary/)*
Referral to Treatment

Who?

• A pattern of binge drinking
• Serious consequences of alcohol or drug use
• Continuation of alcohol or drug use despite awareness of harmful consequences
• Unsuccessful attempts to cut back or abstain from alcohol or drugs
Management of Alcohol or Other Drug Use Disorders

Collaborative Shared Decision-Making

• Implemented in conjunction with Motivational Interviewing and repeated brief counseling

Management includes:

• Medications (MAT) and counseling
• One-on-one behavioral treatment
• Peer support groups
• Group-based treatment
• Resources and support for self-management
• Patient preferences, values, priorities
Treatment Resources

How?

• Treatment referrals must be made to the member’s Regional Accountable Entity (RAE). Please visit the RAE web page at https://www.colorado.gov/hcpf/behavioral-health-services
• for contact information and further details.
• Identify community-based programs:
  • Substance use treatment services
  • Employee Assistance Programs (EAPs)
  • Faith community/clergy support
  • Mutual support self-help groups (AA, Life Ring, Smart Recovery, Etc.)

Key points:

• Ongoing care coordination is essential
• Services integrated into primary care is ideal
• It is critical to identify and manage barriers
Treatment Locators

• Colorado LADDERS:  
  https://www.colorado.gov/ladders

• SAMHSA Treatment Locator  
  https://findtreatment.samhsa.gov/
No-cost Online SBIRT Training

Online, Freely Available Professional Development Simulations

Alcohol and Drug Use Basics
Learn the basics of Screening, Brief Intervention, and Referral to Treatment (SBIRT) to prevent alcohol and drug misuse in adults and adolescents.

SBI with Adolescents*
Learn effective techniques to conduct substance use screening and brief intervention with adolescent patients.

SBI Skills Assessment*
Practice and assess your skills in conducting substance use screening and motivational interviewing with adult patients.

At-Risk in the ED**
Learn effective techniques to discuss mental health and substance use with adult patients in an emergency room setting.

At-Risk in Primary Care**
Learn effective techniques to discuss mental health and substance use with adult patients in a primary care setting.

Visit:
shifttheinfluence.org/providers
to access these free simulations for CO health professionals.

Free access to these simulations is provided to all Colorado health and mental health professionals by One Degree and Peer Assistance Services, Inc.
The **One Degree app** allows **anyone** to practice difficult conversations about substance use with those they care about:

**Available online and as a mobile app (Apple and Android) at** [www.shifttheinfluence.org](http://www.shifttheinfluence.org)

**Conversation goals:**

- **Bring up concerns about substance use without upsetting Jordan, Donna, or Sienna**
- **Brainstorm healthier ways to cope with stress**
- **Set expectations for Sienna without causing her to shut down**

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Hi, I’m Jordan!
I enjoy partying, but my drinking and smoking marijuana have been getting in the way of keeping my job.

Hi, I’m Donna!
I’m dealing with a lot these days, and I use alcohol to cope with stress.

Hi, I’m Sienna!
I’m getting ready to go to my first high school party. I am not sure what to expect, but I know there might be alcohol.
For Further Information

See our website!
www.sbirtcolorado.org

- Screening and clinical tools
  - Pocket cards
  - Posters
  - Clinical Guides
- Patient education materials
  - Posters
  - Wallet Cards
- Schedule of all upcoming community trainings
- Information on Parity Law
- Helpful links and resources for SBIRT!

Other useful tools

- SBIRT Billing Manual
- FAQ for SBIRT in Colorado
  - https://www.colorado.gov/pacific/hcpf/sbirt-benefit
- Substance Use & Mental Health Screening Tool Site
  - http://screeningtools.peerassistanceservices.org/
We offer technical assistance on SBIRT to Clinics, hospitals, or any other organization looking to implement SBIRT into their practice. Technical assistance can either be done by phone, email or in person.

Technical Assistance Topics Include

- Workflow
- Materials
- SBIRT for specific populations
- SBIRT with specific substances
- Coaching on motivational interviewing
- Using technology to support implementation
- Developing SBIRT champions and trainers for your organization
Thank you!

Questions

Discussion

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www.SBIRTColorado.com