

# SBIRT Colorado Lessons Learned



## Acknowledgements

SBIRT Colorado is an initiative of the Governor, funded by the Substance Abuse and Mental Health Services Administration, administered by the Colorado Department of Human Services, Division of Behavioral Health and managed by Peer Assistance Services, Inc.

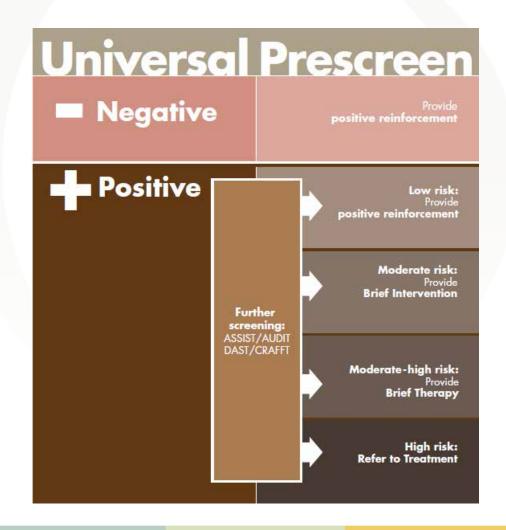


## Today's Presentation

- SBIRT Colorado and Evaluation Activities
- Share Key Lessons Learned
- Future Directions and Discussion

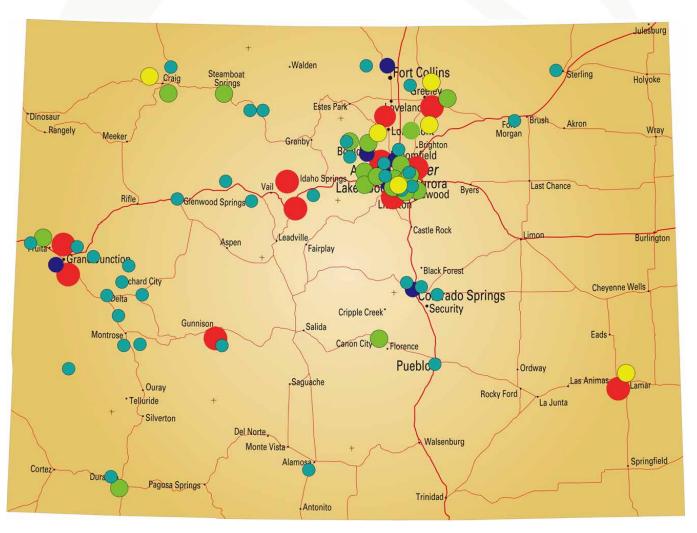


## SBIRT Model





## SBIRT Colorado



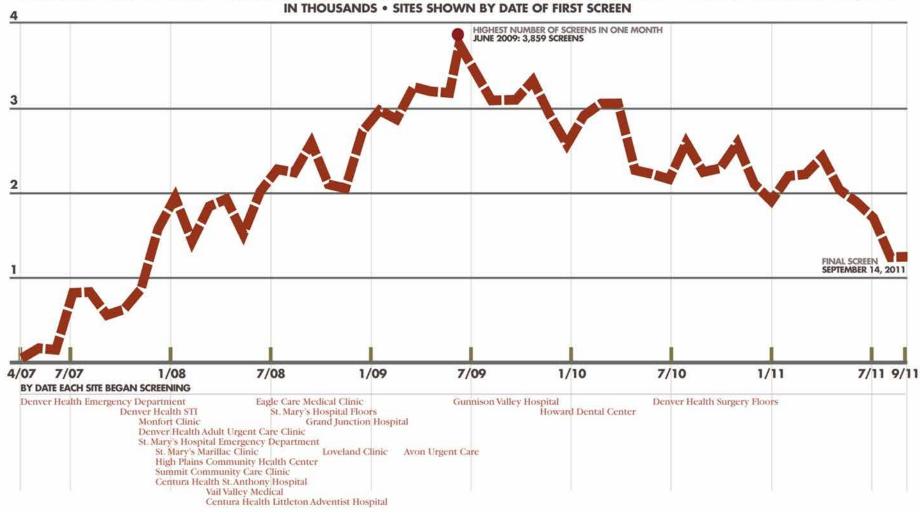


### SBIRT Colorado Evaluation

- » Grant-required data collection
  - Screening data (ASSIST World Health Organization)
  - GPRA data
  - Outcome evaluation
- » Qualitative data collection
  - Focus groups, key informant interviews
  - Health educators, healthcare providers, state & community leaders
- » Special projects

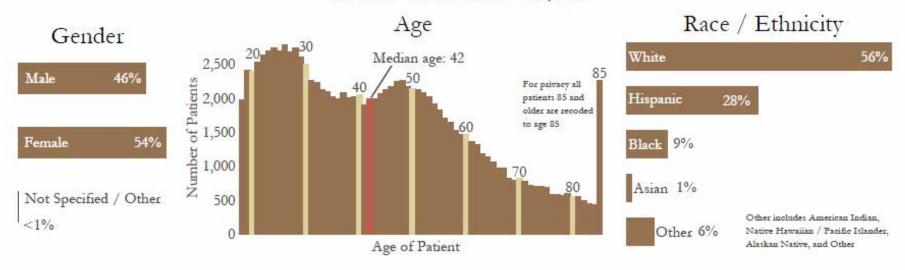


### SCREENS CONDUCTED PER MONTH IN 12 GRANT-FUNDED HEALTHCARE SITES • TOTAL SCREENS: 115,215





## DEMOGRAPHICS OF PATIENTS SCREENED AT 12 GRANT-FUNDED HEALTHCARE SITES TOTAL SCREENS: 115,215



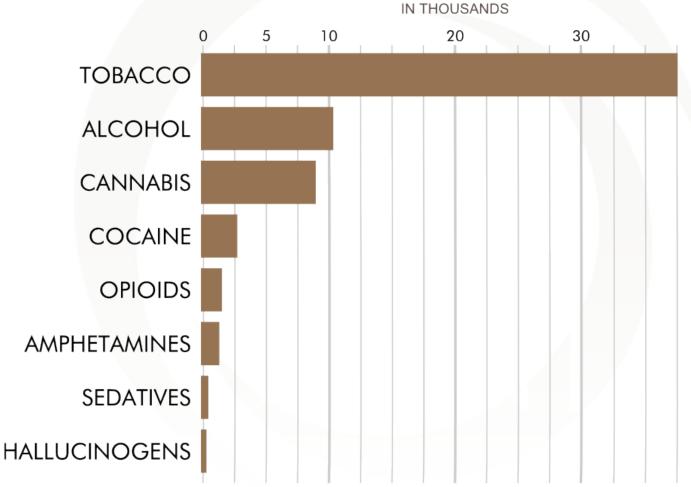


Lesson #1

SBIRT provides an important mechanism for the identification and intervention in tobacco use



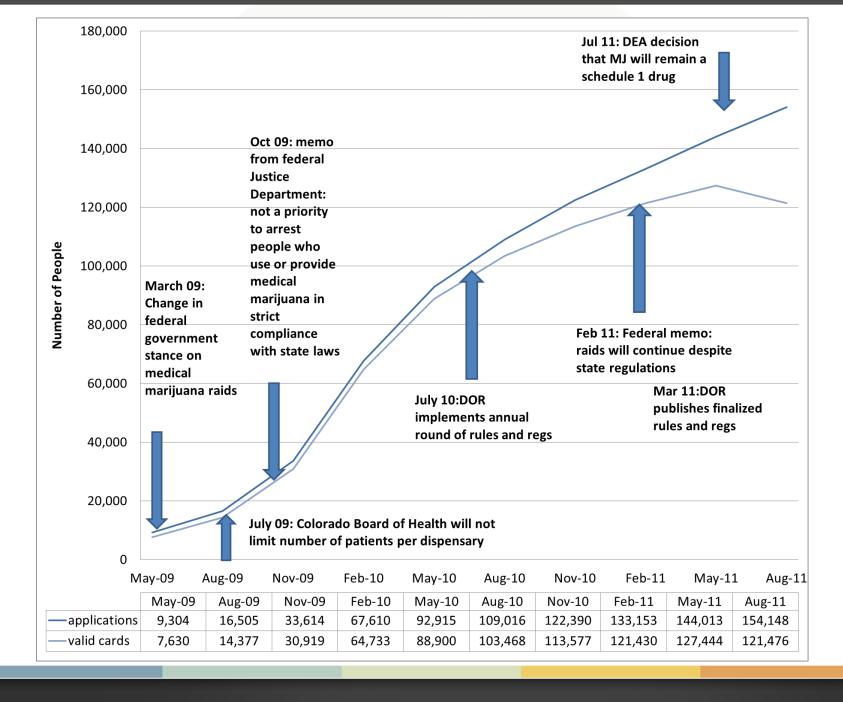
### NUMBER OF PATIENTS WHO SCREENED POSITIVE BY SUBSTANCE



TOBACCO: cigarettes, chewing tobacco, cigars, etc. ALCOHOL: beer, wine, spirits, etc. CANNABIS: marijuana, pot, grass, hash, etc. COCAINE: coke, crack, etc. OPIOIDS heroin, morphine, methadone, codeine, etc. AMPHETAMINES: speed, diet pills, ecstasy, methamphetamine, etc. SEDATIVES: Valium, Serepax, Rohypnol, etc. HALLUCINOGENS: ISD, acid,mushrooms, phencyclidine, pcp. ketamine, etc.

Lesson #2
The availability of medical marijuana may be contributing to an increase in harmful marijuana use



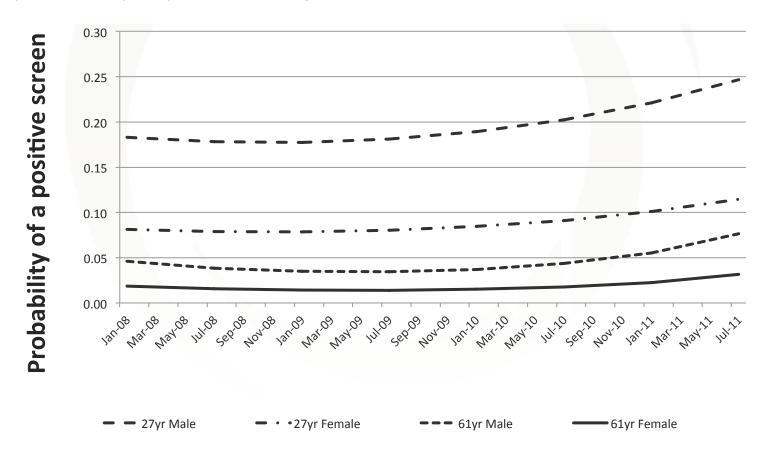


## Marijuana Study Results

- » 8,748 (8%) patients screened positive for marijuana
- » Odds of screening positive higher for males than females
- » Odds of screening positive accelerating in early 2009 (interaction with patient age)



FIGURE 1. Results of logistic regression analyses predicting probability of positive marijuana screen.



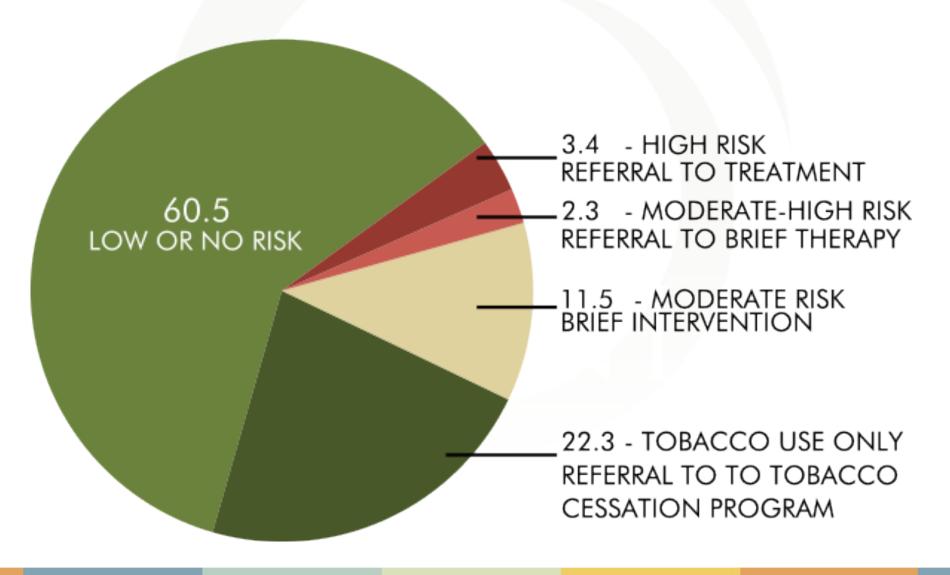
Lesson #3

SBIRT supports healthcare providers in meeting public health goals; it doesn't put them in the treatment business



### DEGREE OF RISK AND RECOMMENDED SERVICE

IN PERCENTAGE



Lesson #4

Adequate referral systems and resources

are necessary for providers to

conduct the screenings



# Referral Systems

"What we keep saying is—you ask the question and you'd better be prepared to answer it. So if you're asking questions about substance abuse, you'd better be prepared to offer that person some resources or get them some support, if their answers reflect that need."



# LinkingCare.org



· You want to find out if you drink too much?

· Need information on the risks of substance use?

You'll find comprehensive substance use resources right here.

Know someone who might benefit from LinkingCare.org? Share it with them.

· Looking for help in your recovery?

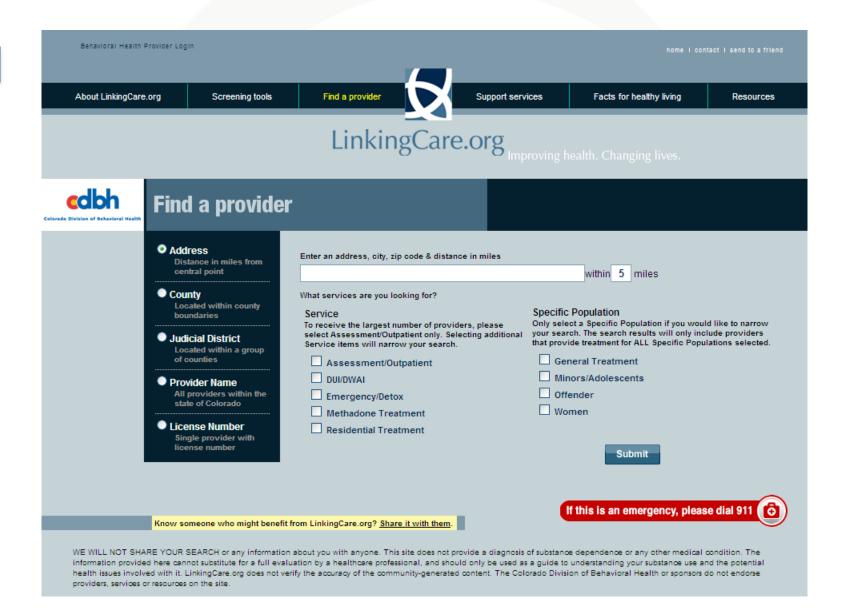
intervention, and treatment services and to enhance

LinkingCare.org supports these important goals for the

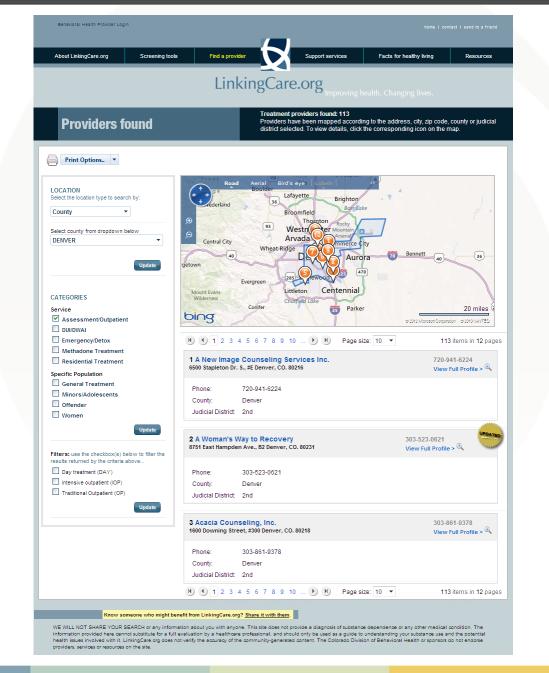
knowledge, understanding, and awareness of

behavioral health disorders. The creating of

benefit of all Coloradans.







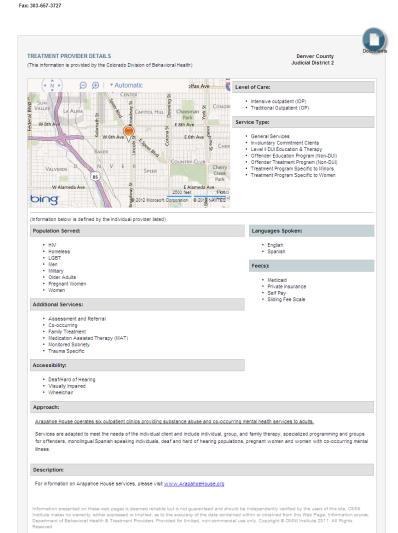
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#### Arapahoe House

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### LinkingCare.org



Lesson #5
Know your community,
but implement universal screening



- » "We found out so many patients were struggling with drugs and alcohol and we never knew about it."
- "There were patients who were substance users who I just never would have thought of in that way. So I hadn't really pursued the questions or asked the questions before. Because in my own mind, it didn't seem very likely and I was surprised the number of times where I saw the results."

Lesson #6
Improved quality of care is the primary motivator to do SBIRT



- » "Staff and providers see how SBIRT and integrated care can lead to behavior change for patients, and they simply don't feel that they are providing complete and comprehensive care unless they are asking the screening questions and having those conversations."
  - —Sarah E. Vaine, MA, LPC, Executive Director, Summit Community Care Clinic



Lesson #7

Patients are appreciative rather than resistant to the SBIRT process



Was the Health Educator respectful?

VERY 97

SOMEWHAT 3

NOT VERY 0

How satisfied were you with your experience with the Health Educator?

VERY SATISFIED 61

SATISFIED 38

DISSATISFIED <

VERY DISSATISFIED < 1

How useful was the information provided to you by the Health Educator?

VERY USEFUL 42

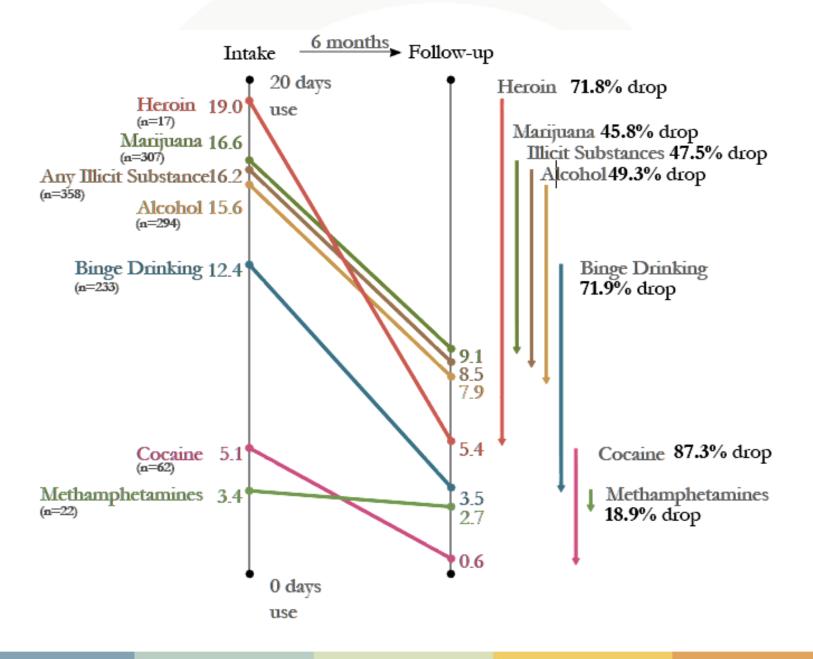
SOMEWHAT USEFUL 46

NOT VERY USEFUL 12

- » "The Health Educator was very friendly. We had a long conversation and it was a very good experience. I felt supported and it was very useful."
- » "I really just felt like they were very open and not judgmental. I felt ashamed of what I was doing and they made me very comfortable and not unique among people who have done this and that I would get better if I was willing to commit to it."

Lesson #8
Patients reduced use after participating in SBIRT





Percent of patients who abstained from use of illicit substances at follow-up.

Any Illicit Substance 358 patients used at intake

49% abstained

49% of patients who used an illicit substance at intake, abstained from use at follow-up.

Cocaine 62 patients used at intake

81% abstained

Methamphatamines 22 patients used at intake

68% abstained

Heroin 17 patients used at intake

65% abstained

Marijuana 307 patients used at intake

47% abstained

Lesson #9

Staff and institutional support is critical for successful implementation and sustainability



## Champions

- » Promote SBIRT
- » Advocate for funding
- » Manage & maintaining the process
- » Addressing barriers
- » Networking



# Sustainability Interviews

- » Key questions
  - » Whether and how sites were sustaining
  - » Success & challenges
- » Key informant interviews
  - » 11 site supervisors, representing the 12 sites
  - » Conducted 5-6 months after federal funding



# Sustainability Interviews

- » 10 of 12 sites reported sustaining
- » 3 general models of implementation
  - Identifying funding to retain the health educator position
  - Utilizing behavioral health specialists
  - Including SBIRT as part of a larger health and wellness program



### Additional Lessons

- » Funding remains a challenge for sustainability
- » Ongoing trainings are needed
- » Sites that were able to institutionalize SBIRT into systems and culture, the easier the transition from grant-funding to a sustainable model
- » Role of health educators, health coaches or behavioral health specialists



### **Future Directions**

- » New Implementation Sites
  - » Salud Family Health Centers (Ft. Morgan & Sterling)
  - » Peak Vista Community Health Centers (Myron Stratton)
  - » San Luis Valley Regional Medical Center
  - » Denver Health Medical Center (Dental Clinic & Primary Care Clinic)



### **Future Directions**

- » Screening
  - » FASD prevention
  - » Marijuana misuse/abuse
  - » Prescription-controlled drug misuse/abuse
- » HealthTeamWorks
  - » Trainings
  - » Guidelines



### **Future Directions**

- » Enhance referral process
  - » MINES and Associates
  - » Advocates for Recovery
- » Expand LinkingCare.org
  - » Recovery support
  - » Mental health
  - » Prevention

