

The SBIRT Program and the BNI/Brief Conversation: What They Are, How They Work, and What You Can Do

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SBIRT

Screening, Brief Intervention, & Referral to Treatment

SBIRT is a substance abuse prevention program in the ED, AUCC, Surgery and STI Clinics

The emphasis for SBIRT is to *universally* screen incoming patients for un-healthy substance use and for a clinician to give feedback to the patient if they are engaging in risky use

• The target population for this approach is the at-risk, <u>not</u> the dependent user

Reminder: Please complete the SBIRT web-based training assigned to you, if you have not already done so

SBIRT

Screening, Brief Intervention, & Referral to Treatment

- 1. All incoming patients should be <u>Screened</u> for tobacco, alcohol, and other drug use
- Un-healthy substance use should be addressed by a healthcare provider with a <u>Brief Intervention</u>, aka BNI or "Brief Conversation"
- Addicted/dependent patients may also be <u>*Referred*</u> for appropriate <u>*Treatment*</u>

Screening for Un-Healthy Substance Use

There are two ways to get patients screened:

- At intake, aka triage, in the Central Evaluation Unit (CEU) via the Medical Screening Exam (MSE)
 - The "brief screen" is done in electronic format
 - The questions are the same as the bedside screen
- At the bedside
 - The "brief screen" can be administered on paper at bedside
 - The "brief screen" *can also* be administered electronically on a bedside computer

The next slide shows you the paper "brief screen" for bedside use

DENVER HEALTH MEDICAL CENTER CONFIDENTIAL/ CONFIDENCIAL Screening, Brief Intervention and Referral to Treatment SBIRT Screen

Brief Screen Questions:

In the past 3 months, have you smoked or used any form of tobacco?
□ Yes □ No
En los últimos 3 meses, ¿ha fumado o usado usted algún tipo de tabaco?
□ Sí □ No

In the past 3 months, have you used any street drugs? \Box Yes \Box NoEn los últimos 3 meses, ¿ha usado usted alguna droga ilegal? \Box Sí \Box No

In the past 3 months have you used any marijuana?	□ Yes	🗆 No
En los últimos 3 meses, ¿ha usado usted mariguana?	🗆 Sí	🗆 No

In the past 3 months, have you had more than 3 (for women) or 4 (for men) drinks in one day? □ Yes □ No En los últimos 3 meses, ¿ha tomado usted más de tres 3 tragos (si es mujer) o 4 tragos (si es hombre) en un día? □ Sí □ No



When there is no SBIRT screen in the charts:

 If there is no screen in the charts or if the information in the charts is inaccurate:

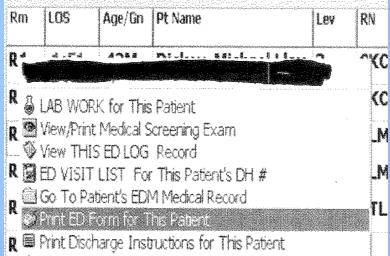
 You can go into EMeSIS and (re)administer the MSE

or

Printing a Paper Screen

- You can print a blank screen using EMeSIS:
- -Click the patient name
- or room number
- -From the dropdown list that appears, click "Print

ED Form for This Patient"



-On the next dropdown list, click "SBIRT Form" (see next slide)

-The form will print on the nearest, local printer

Screening for Un-Healthy Substance Use

- At MSE in the Central Evaluation Unit (CEU—aka "triage")
 - This is done electronically
 - The questions are the same as the paper "brief screen"

The next slide shows you the results for an MSE "brief screen"



Age: 49Y

DHH

Pt Name:

ED Encounter Continuation ED Influenza Encounter Encounter for Unregistered Patients (APPLY LABEL) General Obs Note and Order Sheet BAT Obs Note and Order Sheet R/O Injury in Intox Pt. Note & Order sheet CP Low Risk Obs and Order Sheet. CP VERY Low Risk Obs and Order Sheet Bronchiolitis Obs Sheet Attending Note Attending Note, Full (for students) Ultrasound Report & Image Sheets Attending Note for Unreg Patients (APPLY LABEL) Attending Continuation Sheet, Only Attending EKG/Additional Procedures Sheet Radiology Overread Addendum Discharge Instruction Sheet SBIRTForm

> Printing Form "SBIRT Form" On Local Station Printer

> > Form Printing Completed.





MSE Brief screen

Screening, Brief Intervention & Referral [SBIRT]:

SBIRT positive based upon chief complaint / presentation.

1. Tobacco in past 3 months: Y

2. Street drugs in past 3 months: N

Marijuana use in past 3 months: N SBIRT Screen: POSITIVE.

4. More than 4 drinks in a day in past 3 months: N

Objective Data / Physical Examination

BP: 100/63 Pulse: 83 Resp: 18 Temp: 36.5 (O) Oxy Sat: 93% on RA. <<<<<<< Vital Signs:

General Appearance: Normal, Dry, Cool

HEENT: No Abnormalities., Pupils equal, Pupils reactive, holding head eyes closed Cardio/Resp: BS: clear, Heart sounds normal, no distress

GI/GU: Abdomen soft, Abdomen non-tender to palpation

Musculoskeletal: No Abnormalities.

Skin: Normal

Neuro: reports blurry vision "from the pain"

MSE Level: 3 (ED-Emergent)

Patient MSE Disposition: To ED Wait

MSE Screener: s pulcino m (Evaluated & signed by s pulcino m at 01/02/11 22:21)

Screening, Brief Intervention & Referral [SBIRT] Action for POSITIVE Screening:

 Patient received a brief intervention by Health Provider(s) 	LIYes LINO		
* Patient referred for further assessment/treatment	🗆 Yes 🗆 No		
* Summary of discussion:	Time spent with	n Patient:	
-	Tobacco	🗆 3-10min	🖾 10+ min
	Alcohol	🖾 15-30 min	🗆 30+ min
	Substance	15-30 min	🗆 30+ min

□ Attending or □ NP Signature Date/Time Provider Signature C RN C MD C MS Date/Time

962

Health Educator Signature Date/Time

Results of the Brief Screen

• Some patients screened at bedside will have paper screens on the charts, and the results will be at the bottom of the screen itself:

Any Yes is positive. If positive, must write summary below:

• Walk-in ED patients will get screened via the MSE, and the results will be on the MSE sheet:

Screening, Brief Intervention & Referral [SBIRT] Action for POSITIVE Screening:			
* Patient received a brief intervention by Health Provider(s)	🗆 Yes 🗆 No		
* Patient referred for further assessment/treatment	🗆 Yes 🗆 No		
* Summary of discussion:	Time spent with	Patient:	
	Tobacco	🗆 3-10min	🖾 10+ min
	Alcohol	🖾 15-30 min	🛛 30+ min
	Substance	🖾 15-30 min	🗆 30+ min

Patients benefit from a BNI/Brief Conversation!

- **"Brief Conversation"**: What is it?
- Having a brief conversation with your patients about un-healthy substance by:
- Raising the subject of their positive brief screen or
- Relating substance use with their ED visit, when relevant e.g. they were intoxicated on their presentation
- Providing feedback regarding NIAAA* recommended limits or the 'one visit while intoxicated data'
- Referring, if appropriate

Did you just ask yourself, "What are the 'one visit while intoxicated' data?"

 Davidson, et al noted that a single alcohol related ED visit is an important predictor of continued problem drinking, alcohol impaired driving, and, possibly, premature death

Davidson et al, Ann Emerg. Med. 1997

Did you also ask yourself, "What are the NIAAA advisable limits?"

- Men
 - No more than 4 drinks per occasion
 - No more than 14 drinks per week
- Women
 - No more than 3 drinks per occasion
 - No more than 7 drinks in one week

How many standard drinks are you drinking?

The numbers underneath these commonly used glasses and bottle show the number of standard drinks.



When to provide the Brief Conversation

- <u>Any time</u> the chart indicates a positive substance screen AND
- Especially when the patient's ED visit is a consequence of substance use (e.g. injuries or medical complications due to acute intoxication)
- Once an MD has provided the BC, they should document the chart appropriately

How to get the "Brief Conversation" started Suggested Scripts

- You screened positive today for _____ on your Brief Screen, Can we talk about that for a minute?
- You were injured and possibly intoxicated at the time, can we talk about that for a minute?
- Have you ever had an injury while intoxicated?
- Research shows that one doctor visit while intoxicated or injury while high is a serious predictor of future injury, dui, job difficulties, or interpersonal problems. Could this be true for you?



How to close the "Brief Conversation" Suggested Scripts

- We know from research that people who use at your levels may have trouble cutting back. Could this be true for you?
- If you find this to be true for you after a few weeks, will you consider giving the referral number a call?
- Will you promise me to think about our discussion today?
- Thanks for discussing such a sensitive topic.

What if the patient does not want to talk about their use/abuse ?

"Okay, I see you aren' t ready to talk about this today. Remember that we are here if you change your mind"

Documenting the BNI

 After discussing unhealthy Substance use with patients, a healthcare provider should then fill in appropriate notes & instructions in the charts Pictured at right is part of the "Physicians Record" sheet—boxes indicating that an EtOH screen and/or referral was done should checked, & this section should be circled Additional documentation is covered in the following slides

Time Seen:
Tob'
<u>Top:</u>
EtOH:
Oth Soc Hx:
ROS: HEENT:
HEENT
The same (All)
Derm/All:
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Documenting the BNI

Attending/Resident/Intern/ Students MDs, after documenting the Brief Conversation as shown below, need to circle as shown in the picture to the right, this will alert the Attending to sign off for billing

Time Seen:	
Tob:	
EtOH:	
Oth Soc Hx:	
ROS:	
ROS: HEENT:	
Derm/All:	
Derm/All: Den:	
CV:	
CV:	
<u>GI:</u>	
Hem:	
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Fam Hx:	
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Screening, Brief Intervention & Referral [SBIRT] Action for POSITIVE Screening:

- Patient received a brief intervention by Health Provider(s)
- * Patient referred for further assessment/treatment
- * Summary of discussion:

🗆 Yes	🗆 No
🗆 Yes	🗆 No
Time s	pent with

Tobacco	🗆 3-10min	🖾 10+ mir
Alcohol	🖾 15-30 min	🗆 30+ mir
Substance	[7] 15-30 min	CT 30+ mir

Patient:

□ Attending or □ NP Signature Date/Time

Provider Signature C RN C MD C MS Date/Time

Health Educator Signature Date/Time

Documenting SBI

- Notes on the Brief Screen should show that a patient received Screening and
 <u>Brief Intervention from a healthcare provider for the substances discussed;</u>
 notes should include a brief narrative and if the patient was referred for
 treatment
- An MD should check off on how much time was spent* with the patient; the provider and attending MD should both sign off to verify this information
- If the attending MD is the sole provider of the BI—the "Brief Conversation"—that person need only sign off here for verification

Screening, Brief Intervention & Referral [SBIRT] Action f * Patient received a brief intervention by Health Provider(s) * Patient referred for further assessment/treatment * Summary of discussion:			
□ Attending or □ NP Signature Date/Time	Provider Signature C RN C MD C MS Date/Time		
Health Educator Signature Date/Time			
Time spent also includes brief screen completion, Brief Conversation, Health Educator time(if here) and discharge instructons related to Un-healthy substance use			

SBIRT Services

- Denver Health currently has a grant to implement SBIRT services
- These duties are performed by SBIRT Health Educators—specially trained staff who provide a more in-depth screen on patients & talk to them about substance misuse
- Health Educators are not on duty 24-7, so
- ED doctors and nurses play crucial roles!

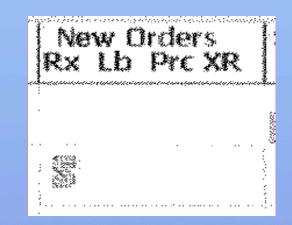
Accessing SBIRT info on EMeSIS

In the "Pending/Plan/Notes' column, you may see a note that the SBIRT Conversation is needed.

In the "New Orders" Column, a yellow "S" indicates that the brief screen needs to be administered by an, RN, MD, or other provider

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Remember:

Just start the Conversation Maybe save a life !