PrimeWest HEALTH
HealthTeamWorks
Building Systems. Empowering Excellence.

Guideline for Alcohol and Substance Use
Screening, Brief Intervention, Referral to Treatment (SBIRT)

Why screen for alcohol and drug use?

Brief motivational conversations with patients can promote significant, lasting reduction in risky use of alcohol and other drugs. Nearly 30% of adult Americans engage in unhealthy use of alcohol and/or other drugs, yet very few are identified or participate in a conversation that could prevent injury, disease or more severe use disorders.*

STEP 1

Brief Screening

Frequency:

» *Tobacco*: Every visit.

» *Alcohol and Drugs*: At least yearly; consider screening at every visit.† Consider more frequent screening for women who are pregnant or who are contemplating pregnancy; adolescents; and those with high levels of psychosocial stressors.

Substance	Questions	Positive Screen	Negative Screen
Alcohol: *Assess frequency and quantity*	1. How many drinks do you have per week? ---------- *OR* ---------- 2. When was the last time you had 4 or more (for men >65 years and all women) or 5 or more (for men ≤65 years) drinks in one day?	1. All women or men >65 years: **More than 7.** Men ≤65 years old: **More than 14.** ---------- *OR* ---------- 2. In the past 3 months.	Reinforce healthy behaviors. See **"For all patients, consider:"**
Drugs‡	In the past year, have you used or experimented with an illegal drug or a prescription drug for nonmedical reasons?	Yes	
Tobacco	Do you currently smoke or use any form of tobacco?	Yes	

For all patients, consider:

- Any alcohol use is a positive screen for patients under 21 yrs. or pregnant women.§
- Potential for alcohol-exposed pregnancy in women of childbearing age; assess for effective contraception use.§
- Alcohol/medication interactions.
- Chronic disease/alcohol precautions.
- Role of substance use in depression and other mental health conditions.¶
- Medical marijuana use.

A standard drink is:

Positive on alcohol and/or drug brief screen: proceed to Step 2.
Tobacco use only: see page 2 for Tobacco Advise and Refer.

STEP 2

Further Screening

Patients with a positive brief screen should receive further screening/assessment using a validated screening tool. Scoring instructions are on each tool. Screening tools are available at **www.integration.samhsa.gov/clinical-practice/screening-tools**.

Screening tools:

- AUDIT *(adult alcohol use)* **www.integration.samhsa.gov/AUDIT_screener_for_alcohol.pdf**
- DAST-10© *(adult drug use)* **www.integration.samhsa.gov/clinical-practice/screening-tools#drugs**
- ASSIST *(adult poly-substance use)* **www.integration.samhsa.gov/clinical-practice/sbirt/ASSIST.pdf**
- CRAFFT *(adolescent alcohol and drug use)* **www.integration.samhsa.gov/clinical-practice/sbirt/CRAFFT_Screening_interview.pdf**
- CAGE-AID *(alcohol and drug use)* **www.integration.samhsa.gov/images/res/CAGEAID.pdf**

Low risk: Provide positive reinforcement
Moderate risk: Provide brief intervention
Moderate-high risk: Provide referral to brief therapy
High risk: Refer to treatment

STEP 3 ⟶ *(page 2)*

* "Helping Patients Who Drink Too Much: A Clinician's Guide," U.S. Department of Health and Human Services, National Institutes of Health, National Institute on Alcohol Abuse and Alcoholism. Updated 2005. **www.niaaa.nih.gov/guide**

† See Clinical Preventive Health Recommendations for the General and Targeted Populations Guideline at: **www.healthteamworks.org/guidelines/prevention.html**.

‡ See Prescription Drug Misuse supplement at **www.healthteamworks.org/guidelines/sbirt.html**.

§ See Fetal Alcohol Spectrum Disorder (FASD) supplement, Preconception and Interconception Care Guideline, and Contraception Guideline at **www.healthteamworks.org**.

¶ See Depression in Adults: Diagnosis and Treatment Guideline at: **www.healthteamworks.org/guidelines/depression.html**.

STEP 3

Brief Intervention - Brief Therapy - Referral to Treatment

A Brief Intervention is a short motivational conversation to educate and promote health behavior change.
Important: Recognize a person's readiness to change and respond accordingly.

Use OARS:
Open-ended questions
Affirmations
Reflections
Summaries

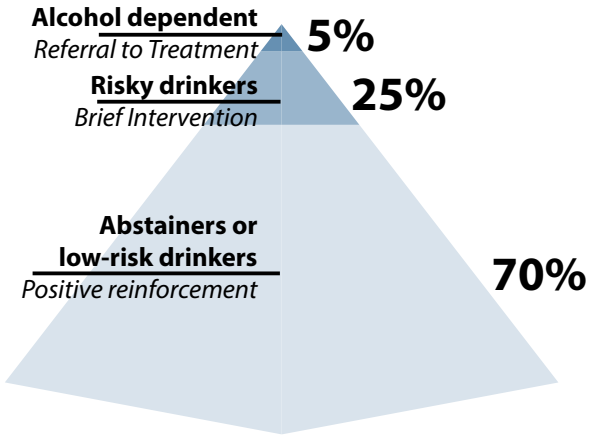
Brief Intervention (Brief Negotiated Interview model[\\]): This model may also be used to address other substance use.

1. **Raise the subject.**
   - » *"Would you mind if we talked for a few minutes about your alcohol use?"*
     - › Ask permission.
     - › Avoid arguing or confrontation.
2. **Provide feedback.**
   - » *"We know that drinking above certain levels can cause problems such as..."*
     - › Review reported substance use amounts and patterns.
     - › Provide information about substance use and health.
     - › Advise to cut down or abstain.
     - › Compare the person's alcohol use to general adult population (see drinking pyramid below).
   - » *"What do you think about this information?"*
     - › Elicit patient's response.
3. **Enhance motivation.**
   - » *"What do you like about your current level of drinking? What do you not like about your current level of drinking?"*
   - » *"On a scale from 0-10, how **important** is it for you to decrease your drinking?"*
   - » *"What makes you a 5 and not a lower number?"*
   - » *"On a scale from 0-10, how **ready** are you to decrease your drinking?"*
   - » *"What would make you more ready to make a change?"*
     - › Assess readiness to change.
     - › Discuss pros and cons.
     - › Explore ambivalence.
4. **Negotiate and advise.**
   - » *"What's the next step?"*
   - » *"What are the barriers you anticipate in meeting this goal? How do you plan to overcome these barriers?"*
   - » *"On a scale from 0-10, how **confident** are you that you will be able to make this change?"*
   - » *"What might help you feel more confident?"*
     - › Negotiate goal.
     - › Provide advice and information.
     - › Summarize next steps and thank the patient.

Importance — Readiness — Confidence

U.S. Adult Alcohol Use Estimate

Potential consequences of risky drinking: multiple health, work and family issues



Tobacco Advise and Refer:

Ask permission, then advise every tobacco user to quit with a personalized health message.

You can refer patients to call PrimeWest Health Member Services at **1-866-431-0801** (toll free) to get more information on quitting.

STEP 3 continued:

Referral to treatment

Spectrum: *Screening* — *Brief Intervention* — *Brief Therapy* — *Specialty Treatment*

Brief Therapy: For moderate to high risk use of alcohol or drugs	**Substance Use Disorder Treatment:** For high risk alcohol or drug use
• Motivational discussion; focused on empowerment and goal setting • Includes assessment, education, problem-solving, coping strategies, supportive social environment • Typically 4-6 sessions, each one approached as though it could be the last	• Proactive process to facilitate access to specialty care • Focus on motivating a person to follow-up on referral for further assessment and possible treatment • Appropriate level of care may include inpatient, outpatient, residential • Pharmacotherapy options: **www.healthteamworks.org/guidelines/sbirt.html**
***Referral information*: call the PrimeWest Health Provider Contact Center at 1-866-431-0802 (toll free)**	

SBIRT is reimbursable if:	**Documentation: Key points**
• A validated screening tool is used • It is properly documented • Time requirement is met See **www.primewest.org** for up-to-date information.	• SBIRT should be documented like any other healthcare service. • These records may require special permission for release. Consult your organization's privacy policy. • Documented use of a validated screening tool (e.g., AUDIT, DAST, CRAFFT, ASSIST, CAGE-AID) required for reimbursement.

[\\] The Yale Brief Negotiated Interview Manual. D'Onofrio, et al. New Haven, CT: Yale University School of Medicine. 2005.