

PREVENTION SERVICES:

Screening, Brief Intervention, Referral and Treatment

Service Definition: Screening, Brief Intervention and Referral to Treatment (SBIRT) is a comprehensive, integrated, public health approach to screening the general population for substance use. The objective of this service is to ensure the delivery of early intervention and treatment services for individuals with or at-risk of developing substance use disorders. The essential components of SBIRT include:

- **Screening** entails universally asking patients a brief, validated, series of questions upon entry into the medical setting. These questions are designed to assess their level of substance consumption.
- **Brief Intervention** is considered to be a very brief (five minutes to one hour) single or multiple (1 -5 sessions) intervention with individuals who score in the risky use category; these are the majority or individuals who are positive at screening.
- **Brief Treatment** is a brief series of highly structured sessions (5-12 sessions) of motivational interviewing and cognitive-behavioral exercises designed for the individual scoring in the hazardous range on the screening.
- **The Referral to Treatment** is reserved for individuals who score in the dependency use range and require traditional specialty care.

Target Population	General adult population, over the age of 18. This service is intended to identify individuals who range from asymptomatic, but are consuming substances at a risky level, to those with symptoms requiring further diagnostic assessments and referral to specialty treatment.
Program Requirements	<p>Traditionally this service has been used as a face-to-face encounter upon presentation in a primary care or emergency room setting. However, on-line or computerized methods can be used for screening. For instance, screenings and brief interventions can be done through personalized feedback via the internet, with web-based outcomes monitoring to assist with treatment decisions and CBT techniques.</p> <p>Automated screening systems in locations such as waiting rooms can be constructed so that the results of positive screens are communicated to the identified SBIRT provider and/or primary care physician for further face to face contact and assessment.</p> <p>The activities for this service should include:</p> <ul style="list-style-type: none"> • Screening with a validated screening instrument used to detect risky to dependent levels of substance use. • Brief intervention upon score interpretations, including the following: <ul style="list-style-type: none"> ○ Informing patients what their score was and what it means. ○ Teaching patients what a standard drink is and what the

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	<p>recommended limits are and what the physical, psychological, and social consequences can be if they exceed the limits.</p> <ul style="list-style-type: none"> ○ Evaluating if a client is interested in changing their use habits or not. ○ Identification of and linkage with additional outpatient resources to ameliorate wait lists and treatment facility shortages. <ul style="list-style-type: none"> ● Brief therapy for those who score in the hazardous or abuse category requiring formalized, structured assistance in changing substance use. ● A referral to an appropriate specialty treatment system may be necessary to introduce the client to treatment services for dependency in a timely manner. <p>Activities should not include an actual diagnosis of substance abuse or provision of traditional intensive substance abuse treatment. Though patients with signs of abuse or dependence will score highly on a screening tool, this does not constitute diagnoses, but rather as a prompt for fuller assessment.</p>
Provider Requirements	<p>SBIRT should not be delivered in settings where there is a lack of access to specialty treatment.</p> <p>The following settings would be suitable for the delivery of SBIRT:</p> <ul style="list-style-type: none"> ● Emergency rooms ● Primary care settings ● College campus health centers ● Employee assistance programs ● Community health centers ● Community mental health centers ● Secondary school systems and school health clinics ● Addiction service providers ● Federally qualified health centers
Staffing Requirements	<p>As the SBI portion of the SBIRT service is not categorized as treatment, a human services paraprofessional, such as a Health Promotion Advocate (HPA) or Health Educator (HE), with a bachelor’s degree may provide SBI under supervision of a licensed health care provider proficient in SBIRT. Other professionals able to deliver this service include social workers, nurses, psychologists/psychiatrists, physician assistants and certified prevention professionals.</p> <p>The referral to treatment portion of the service should be conducted by a licensed health care provider.</p> <p>The competencies required to provide the service include:</p> <ul style="list-style-type: none"> ● Training in screening techniques and efficacy ● Ability to employ motivational interviewing techniques

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	<ul style="list-style-type: none"> • Ability to employ motivation enhancement techniques • Knowledge of what constitutes a "standard" drink and the amounts allowed (including DSM IV diagnostic criteria) • Knowledge of the substance abuse treatment resources available in a particular geographic location and ability to make linkages to allow for rapid referrals where necessary
Documentation Requirements	<p>Documentation on the patient's chart must show that:</p> <ul style="list-style-type: none"> • The results of the screen (score). • The recommended action following receipt of the score, i.e. feedback, brief intervention, brief treatment or referral to treatment.
Service Exclusion	N/A
Admission/Service Criteria	All clients should be universally screened on an annual basis. Also, particularly vulnerable populations such as pregnant and post partum women should be considered for more frequent attention.
Continuing Service Criteria	The frequency of this service will vary depending on the screening results of the individual patient. Those who screen negative may benefit from yearly screening. Those who score at higher levels of intervention may require more frequent screenings to determine the effect of intervention and to check on progress.
Discharge Criteria	N/A
Service Authorization Period	The length of time an individual should receive services depends on the initial screening outcome. The length of treatment, if any is deemed appropriate, is dependent on the individual patient's needs and level of substance use as determined by the screening and brief intervention. Especially vulnerable groups should be considered for increased screening activity.
Service Authorization Unit	N/A
Benefits Limits	N/A