

## SBIRT OVERVIEW

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SBIRT: Screening, Brief Intervention, Referral to Treatment

- Risk stratification and population based intervention.
- Evidence based screening and brief intervention procedure proven to lower alcohol consumption in a population of patients.
- Comparable to other routine primary care screenings such as blood pressure and lipids.
- Targets moderate risk, pre-disease state patients. Comparable to pre-diabetic clinic.
- Does not change care process for intervention and management of patients who meet criteria for a substance abuse or dependence diagnosis.

Implementation:

- Timeline: 2 months development/training, 6 months up and running.
- People: SBIRT expert, physician champion, staff champion, EMR tools IT analyst.
- Internal metric tracking and process problem solving (PDCA) crucial.

Common Barriers

- Physician: time, skills, skepticism regarding patient veracity and ability to change, fear of offending patients, lack of resource knowledge for patients needing treatment. Common provider barriers addressed in training with data and skills.
- Staff: broadly supportive and engaged, some concern for offending patients –easily addressed with training.

Overview of sample workflow:

- Front desk or clinic staff rooming patient ask 1 item pre-screen question.
- Rooming staff follows up with 10 item screening tool if indicated.
- Primary care provider performs brief intervention for patients stratified as moderate risk.
- Primary care provider engages patient in existing clinic care engagement and referral procedure for patients stratified as at high risk associated with active substance related disease process.

SBIRT Oregon Website: [www.sbirtoregon.org](http://www.sbirtoregon.org)

One stop resource for all things SBIRT. Power Point and video training modules, AUDIT and DAST forms, pocket guides, billing information.

Meta-analysis of alcohol brief intervention in primary care:

Bertholet N, Daeppen JB, Wietlisbach V, Fleming M, Burnand B. [Reduction of alcohol consumption by brief alcohol intervention in primary care: systematic review and meta-analysis](#). Arch Intern Med. 2005 May 9; 165(9): 986-95. Review.

Summary: Meta-analysis of SBIRT intervention in primary care practices. 17 studies with alcohol consumption outcome with 5639 pooled patients. Mean reduction of 38g (approx. 4 drinks) per week at 6 and 12 months.