




Addressing Substance Abuse
using Evidenced Based Practice:
Screening, Brief Intervention, and
Referral to Treatment (SBIRT)

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- Describe on-line module training and simulation with live standardized patients
- Identify the impact of SBIRT training on core knowledge, attitudes and perceptions of undergraduate nursing students in a community health nursing course
- Authors deny any conflict of interest identified with this presentation.



Funding and Acknowledgements



- ▶ SBIRT Student Training grant
- ▶ Primary Investigator
- ▶ Project Director
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- ▶ Jan Pringle, PhD
University of Pittsburgh, School of Pharmacy, Program Evaluation and Research Unit (PERU)
- ▶ Dawn Tyus, LPC, MAC, NCC,
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Background

- Approximately 20.8 million people (7.8 percent of the population) met the diagnostic criteria for a substance use disorder in 2015
- Only 2.2 million individuals (10.4 percent) received any type of treatment
- US Surgeon General report calls for a cultural shift in thinking about addiction as a disease rather than a personal weakness
- Nurses work in a variety of healthcare settings and are apt to encounter individuals at risk for substance abuse



SBIRT Background

- SBIRT is an evidence-based public health approach for providing early intervention and treatment for individuals at risk for developing substance use disorders
- SBIRT is an approach that incorporates motivational interview skills that helps individuals make positive behavioral changes to support better health
- This interview style is collaborative, non-judgmental and recognizes patient responsibility
- The SBIRT model respects patients' autonomy, is patient centered, and minimizes resistance to change

SBIRT Curriculum

- The curriculum consists of two parts; a self-directed on-line program and a two hour required face to face workshop
- The self-directed on-line program was developed by the University of Pittsburgh, School of Pharmacy, Program Evaluation and Research Unit (PERU)
- Five modules: Screening, Brief Intervention, Referral to Treatment, Medical and Psychiatric Complications, Pharmacological Therapy for Nurses
 - Each module includes a power point presentation and requires 100% accuracy on a quiz
- Three virtual interactive guided nursing training videos were required



SBIRT Simulation

- A simulation was designed to provide experience for nursing students to apply SBIRT with live standardized patients (SPs)
- Students in groups of three rotated through five stations
 - Interviewed three SPs
 - Role played using screening tools
 - AUDIT, ASSIST, DAST-10
- Recordings of the SPs interviews were used to enhance reflection and learning during the debriefing session held immediately after the workshop



Implementation

- ▶ Fall 2016 began implementation of the SBIRT training program in a community health nursing course
- ▶ Training is required of all students enrolled in the course, participation in the research component of the project was optional
- ▶ As part of the training program and funding obligations, all students were required to complete two post-training satisfaction surveys (GPRA-T and GPRA-30)

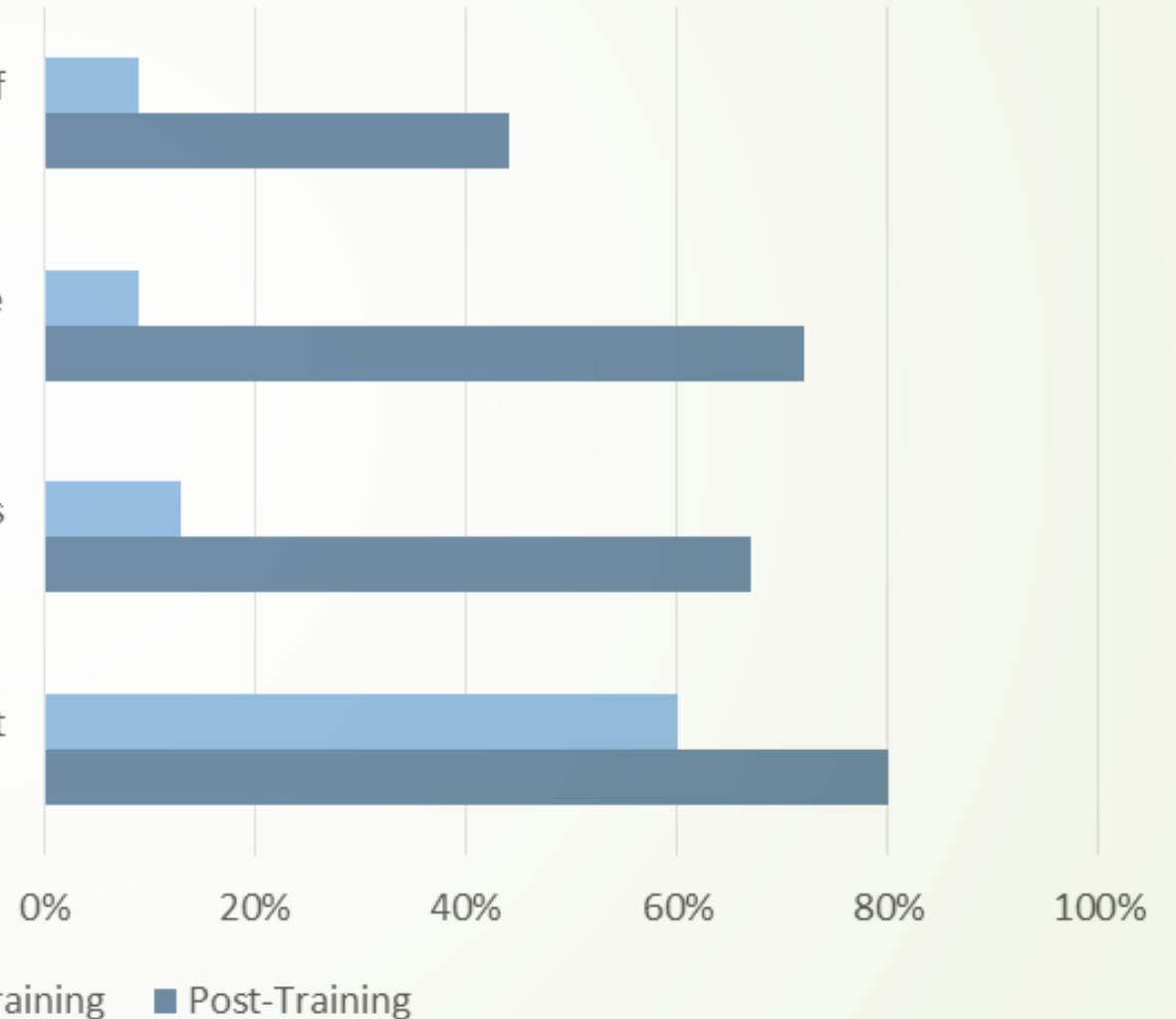
Changes in Core Knowledge: Percent of Correct Answers

A "Standard Drink" includes 14 g of alcohol, 1.5 oz of whiskey & 5 oz of wine.

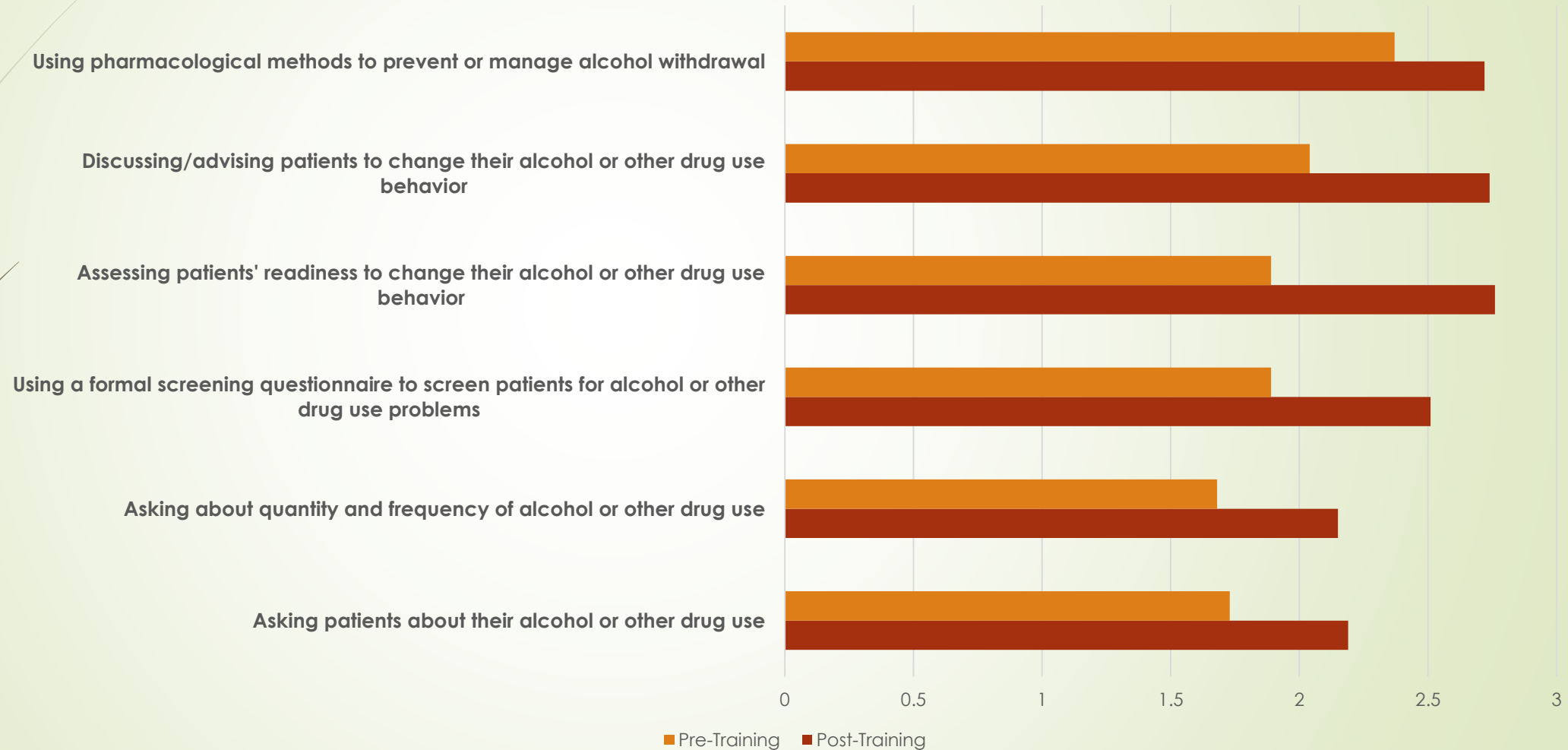
Correct identification of drinking limits for three age/gender groups.

AUDIT is the best alcohol screening test for hazardous drinking (of the available options).

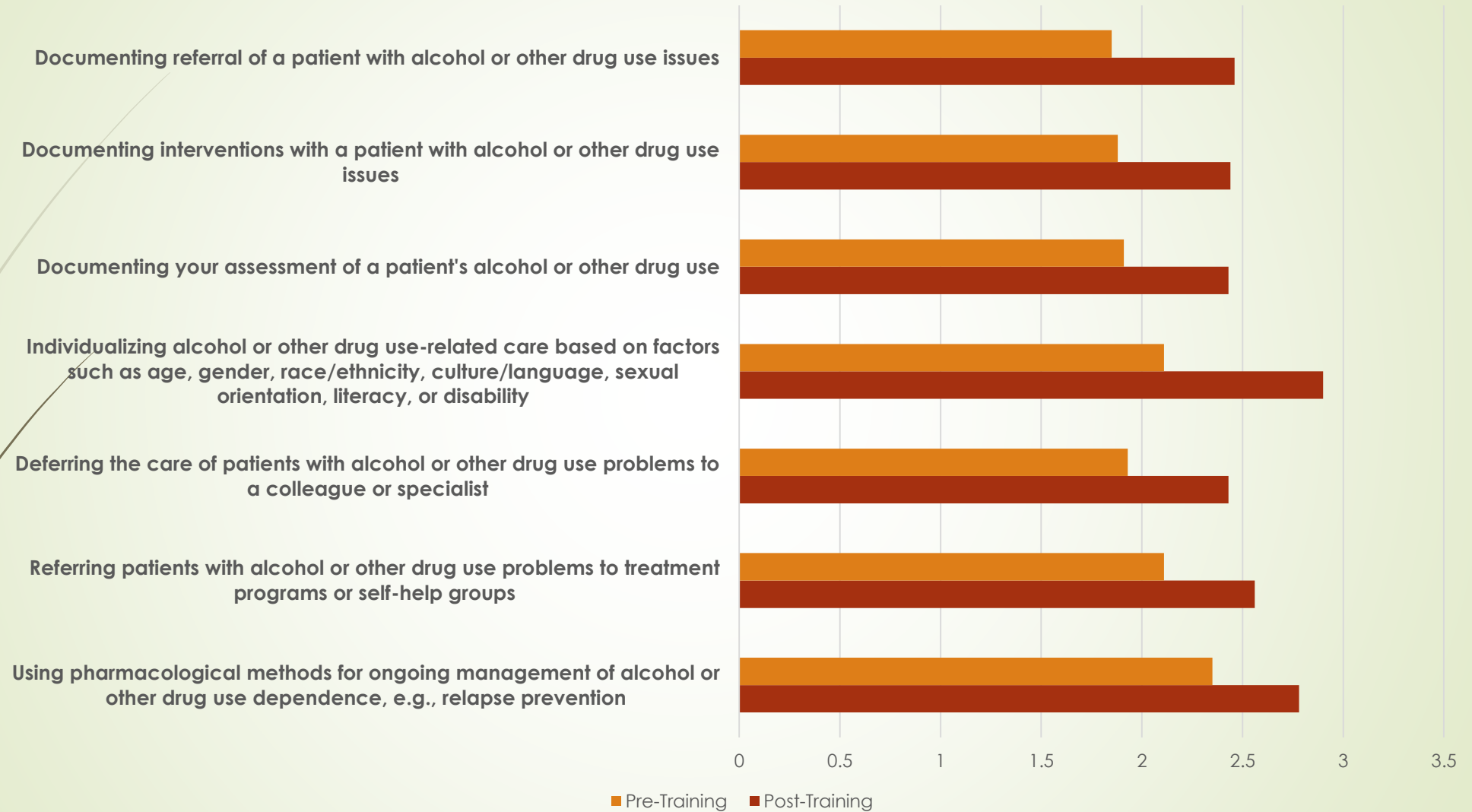
Brief Intervention does not include promoting that patients cannot make changes without help.



Changes in Perceived Competency: Mean Responses from Pre and Post-Training



Changes in Perceived Competency: Mean Responses from Pre and Post-Training Continued



Changes in Attitudes & Perceptions: Differences in Mean Responses from Pre to Post-Training

I feel I have a working knowledge of alcohol/drugs and alcohol/drug use-related problems.

All in all, I am inclined to feel I am a failure with drinkers/drug users.*

I feel I have the right to ask patients about their alcohol/drug use when necessary.

I am interested in the nature of alcohol/drug use-related problems and the responses that can be made to them.

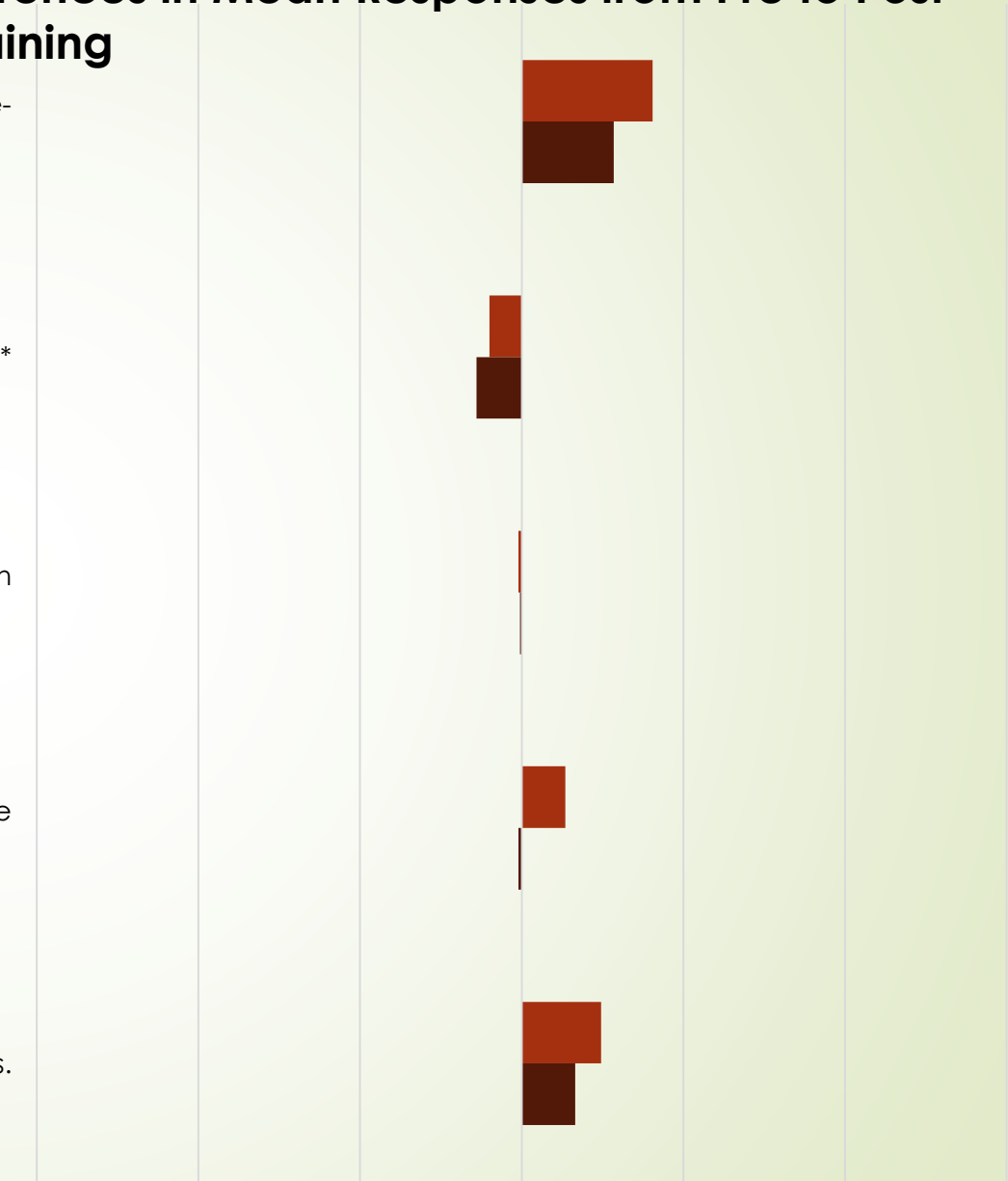
In general, I like drinkers/drug users.

■ Alcohol ■ Drugs

*An increase in disagreement is favorable for these statements post-training.

← Increase in Disagreement

Increase in →



Changes in Attitudes & Perceptions: Differences in Mean Responses from Pre to Post-Training

If I felt the need, I could easily find someone who would be able to help me formulate the best approach to a drinker/drug user.

I feel I do not have much to be proud of when working with drinkers/drug users.*

I feel I can appropriately advise my patients about alcohol/drugs and their effects.

On the whole, I am satisfied with the way I work with drinkers/drug users.

I feel I know how to counsel drinkers/drug users over the long term.

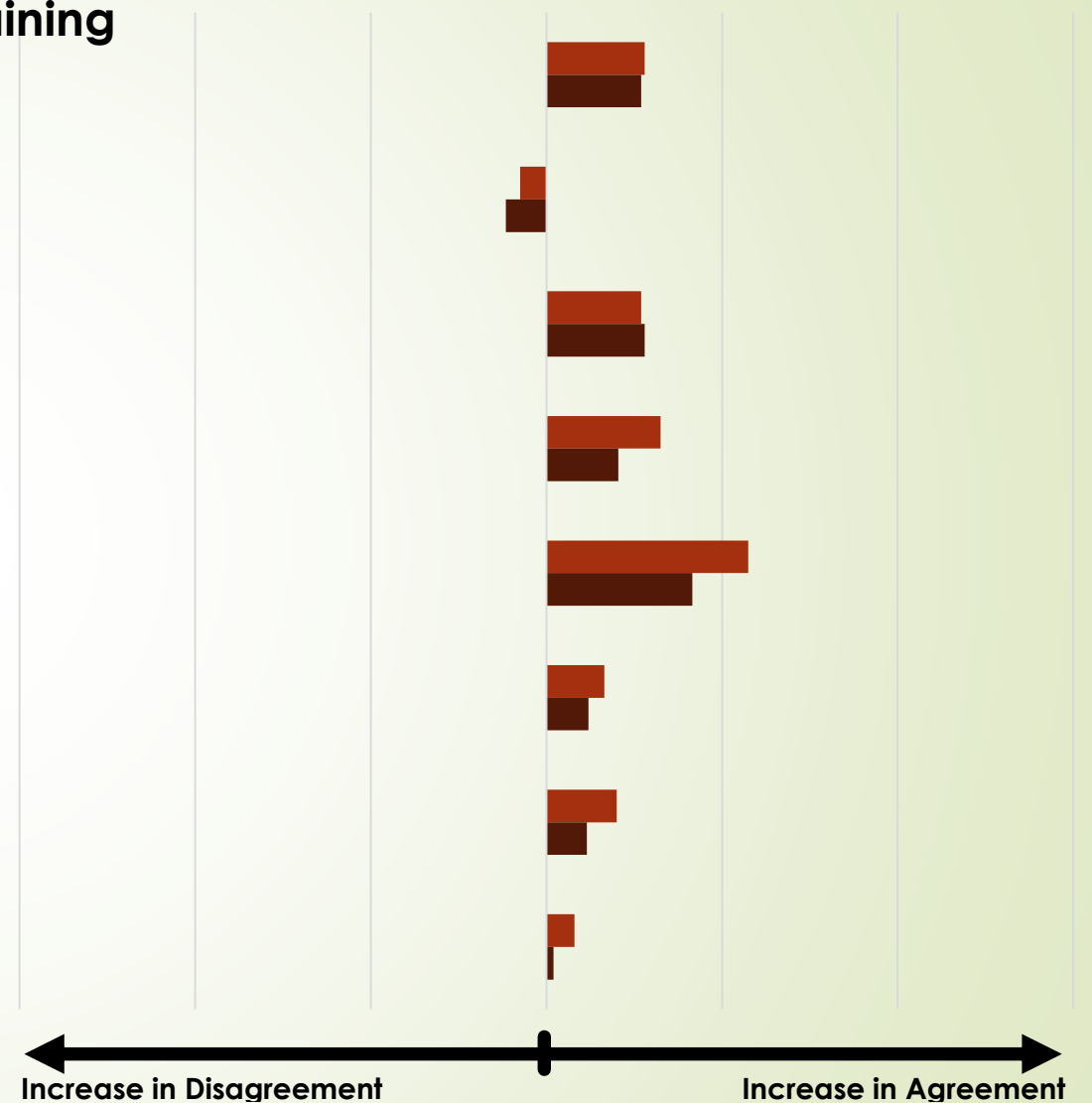
In general, it is rewarding to work with drinkers/drug users.

I feel that my patients believe I have the right to ask them questions about their drinking/drug use when necessary.

I want to work with drinkers/drug users.

■ Alcohol ■ Drugs

*An increase in disagreement is favorable for these statements post-training.





Measurement of Training Satisfaction (5-Point Scale: 1=Very Satisfied to 5=Very Dissatisfied)

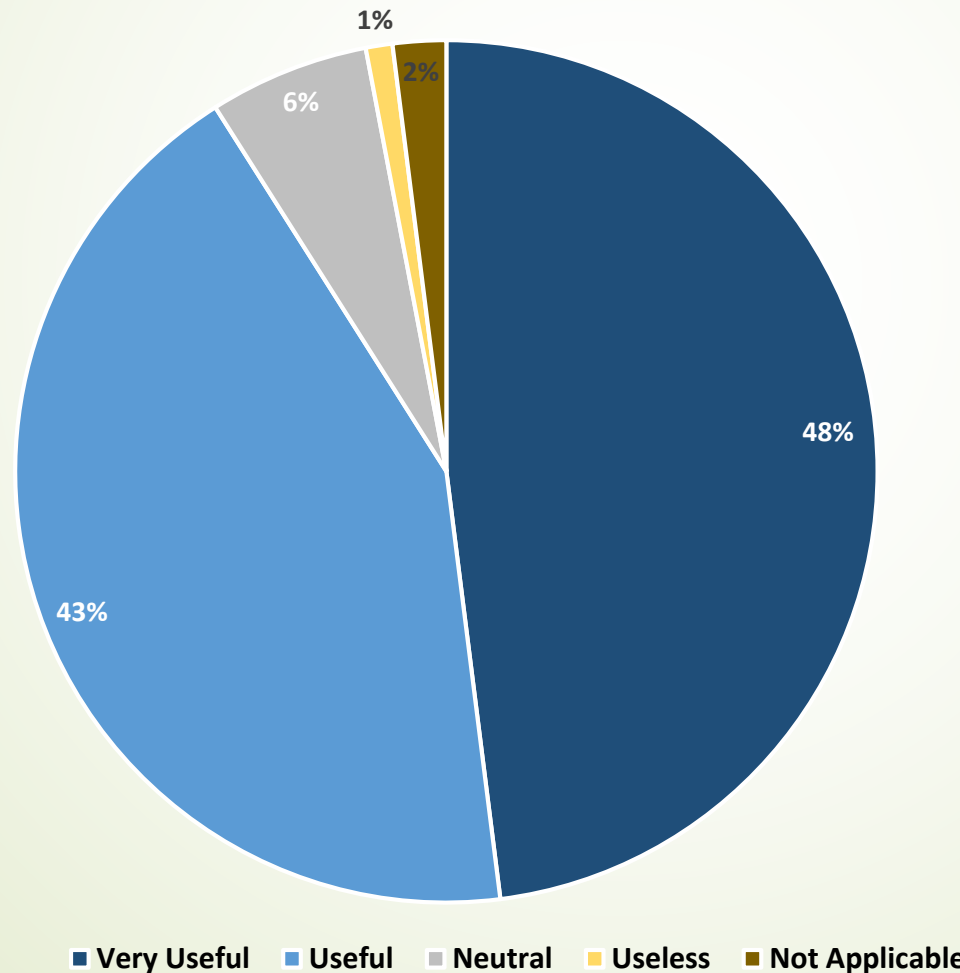
	Mean	Mode
How satisfied are you with the overall quality of this training?	1.7	2
How satisfied are you with the quality of the instruction?	1.8	2
How satisfied are you with the quality of the training materials?	1.7	2
Overall, how satisfied are you with your training experience?	1.7	2

Measurement of Assessment

(5-Point Scale: 1=Strongly Agree; 5=Strongly Disagree)

	Mean	Mode
The training class was well organized	1.7	1
The material presented in this class will be useful to me in dealing with substance abuse	1.5	1
The instructor was knowledgeable about the subject matter	1.6	1
The instructor was well-prepared for the course	1.6	1
The instructor was receptive to participant comments and questions	1.5	1
I am currently effective when working in this topic area	2.1	2
The training enhanced my skills in this topic area	1.6	1
The training was relevant to my career	1.5	1
I expect to use the information gained from this training	1.6	1
I expect this training to benefit my clients	1.6	1
This training was relevant to substance abuse treatment	1.5	1
I would recommend this training to a colleague	1.7	1

How useful was the information you received from the instructor?



Training Satisfaction Common Themes

➤ **Relevance/Applicability**

- *“As an ED tech, I see a lot of substance use issues. This training is helpful.”*
- *“When encountering patients who admit to a history of excessive alcohol intake, I have considered how I might approach them using techniques I learned from the SBIRT training.”*

➤ **Curriculum**

- *“I found the materials to be extremely helpful, especially the pocket reference card.”*
- *“Learning how much is an actual serving of wine, beer, and liquor (was most useful).”*

Satisfaction Common Themes Continued

▶ Training Delivery

- ▶ *“Being able to complete the online modules at my convenience (was most useful).”*
- ▶ *“I liked the video scenarios. More of them would help cement the concepts and allow me to practice SBIRT administration before meeting with a live standardized patient.”*

▶ Simulation

- ▶ *“The interaction with a live patient was very effective. I feel that it helped me approach a subject that is not easy to address. I was nervous ahead of time, but felt more confident by the end of the training.”*
- ▶ *“It would be more helpful to have more explanation before we go into the simulation. I felt a little lost at the beginning because we were just sent into the rooms without information.”*



Key Quotes from Clinical Encounters

- ▶ “ I have to learn to be comfortable with talking about uncomfortable things such as drug and alcohol use”
- ▶ “The more I utilize the screening tool the more confident I will feel. It is just a matter of constant practice. One challenge I face is remembering to ask more open ended questions and also understanding which open ended questions to ask. I find that writing questions before entering the room helps but I also have to remember that each person is different and will require me to ask more questions that I may not have been prepared to ask”
- ▶ “The most difficult part of the encounter was to ask permission to discuss the substance abuse. I believe this is a great training, but to fully master it, one has to practice continuously”



Key Findings

- The majority of trainees (92 %) found the training to be *very useful* or *useful*, providing them with an effective tool to better interact with patients regarding substance use
- Training results indicated an increase in core knowledge, perceived competency, and attitude/perceptions relative to working with patients to reduce risk of substance use related harms
- The Simulation workshop was well-received, and trainees expressed it helped to solidify the skills they learned. Trainees shared that having the pocket care on hand was beneficial and effective when talking with patients about their substance use

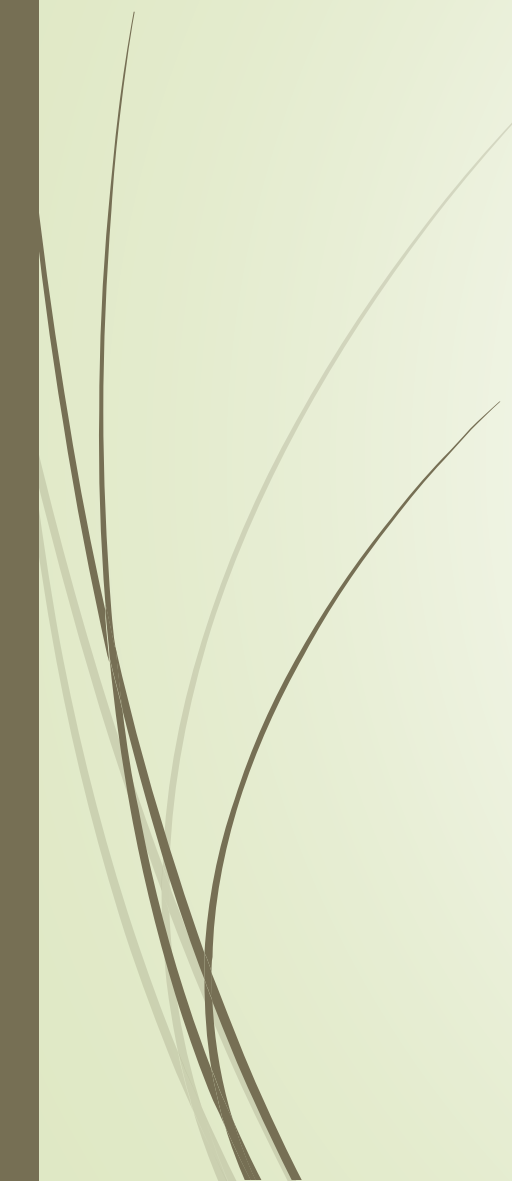


Key Recommendations

- Review resources available to trainees on the website during class time
- Incorporate additional information on drug use, specifically on how to educate patients on their drug use
- Provide practice time for role-playing with peers prior to engaging in the live standardized patient simulation, even if only for 10-15 minutes
- Include additional interactive videos to enhance the online training. Include scenarios of reluctant, or non-receptive patients



Conclusion

- A certificate of completion is awarded to each student completing both the SBIRT training and surveys
 - Quantitative and qualitative evaluation indicate SBIRT training has a positive impact on core knowledge, attitudes, and perceptions of undergraduate nursing students
 - SBIRT training and SBIRT simulation are embedded into both the community health course and simulation curriculum
 - SBIRT training is recommended for other Schools of Nursing and Health Professions
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Morehouse School of Medicine, Project Director: Dawn Tyus, LPC, MAC, NCC, Southeast Addiction Technology Transfer Center(SATTC): Region IV

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