Using Simulation to Teach SBIRT in Undergraduate Nursing

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Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services (HHS) under grant number 5H79TI025987-02: Implementation of Screening, Brief Intervention, and Referral to Treatment Education for Health Professionals in South Dakota.

BACKGROUND

- **3.3 million deaths** annually from “harmful use of alcohol” (WHO, 2014).
- WHO goal is a **10% reduction in the “harmful use of alcohol”** by 2025 (WHO, 2014).
- Use of the evidence-based **Screening, Brief Intervention, and Referral to Treatment (SBIRT)** in all settings by registered nurses could reduce at-risk alcohol use.
- Education of nursing students in the SBIRT approach is **lacking and not consistently included** in undergraduate education.
- Simulation, an effective teaching strategy (Hayden et al., 2014), could be utilized for delivery of SBIRT education.

REFERENCE:


DESCRIPTION OF SIMULATIONS

- 2 existing simulations intended to address other health issues were modified to allow for practical incorporation of SBIRT.
- Faculty members incorporated the appropriateness of using SBIRT in “real-life” patients who seek care for problems other than alcohol use.
- Debriefing allows students the opportunity to make decisions in the referral process for the patient after they have completed the screening.

SIGNIFICANCE TO NURSING

- Incorporating SBIRT into multiple simulations helps with learning repetition and allows students to recognize the **applicability of the screening in multiple settings with a wide variety of patient populations.**
- Undergraduate nursing students will be **equipped** to utilize motivational interviewing to provide SBIRT to patients in a variety of settings who are seeking care for a variety of medication issues.

CONCLUSION

- 25% of population misuses alcohol (CDC, 2014)
- Only 4% of the population suffers from a “true” addiction problem (CDC, 2014)
- Many missed opportunities with the larger at-risk population that uses alcohol in ways that increase their own health risks/increase risks of harm to others
- Exposure to SBIRT using real-life scenarios enhances the education of undergraduate nursing students
- Engagement of nurses in all setting may improve patient screening and/or outcomes

REFERENCES:

