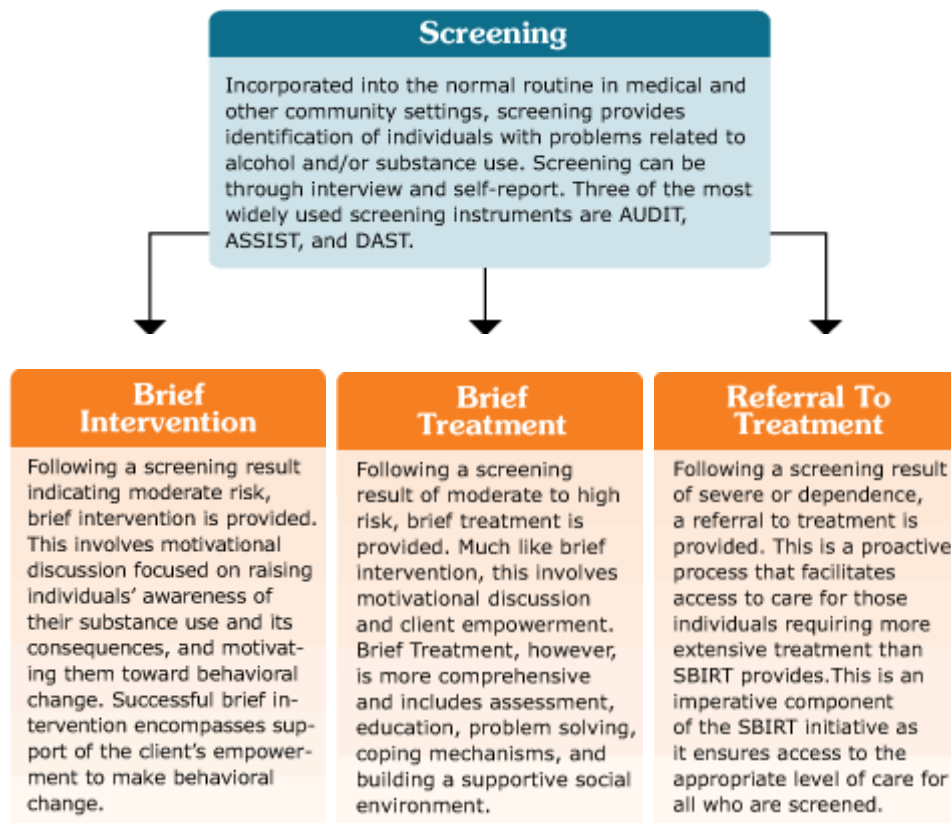


Screening, Brief Intervention and Referral to Treatment: Resource Manual

As defined by the Substance Abuse and Mental Health Services Administration, SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders.

- [Screening](#) quickly assesses for the presence of risky substance use, follows positive screens with further assessment of problem use, and identifies the appropriate level of treatment.
- [Brief intervention](#) focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change.
- [Referral to treatment](#) provides those identified as needing more extensive treatment with access to specialty care.



Adapted from: http://www.sbirt.samhsa.gov/core_comp/index.htm

Resources

General

Below is a list of general SBIRT resources. They focus on SBIRT for alcohol and drug use in medical settings.

Substance Abuse and Mental Health Services Administration SBIRT Website

<http://www.sbirt.samhsa.gov/index.htm>

NIAAA Alcohol Alert on Screening for Alcohol and Alcohol Related Problems

<http://pubs.niaaa.nih.gov/publications/aa65/AA65.htm>

Published in April 2005, this Alcohol Alert from the National Institute on Alcohol Abuse and Alcoholism focuses on the use of routine alcohol screening in a variety of medical settings.

SAMHSA's SBIRT Cooperative Agreements

<http://sbirt.samhsa.gov/grantees/state.htm>

State SBIRT Websites

Pennsylvania

www.ireta.org/sbirt/

Texas

www.utexas.edu/research/cswr/nida/researchProjects/sbirt.html

Washington

www1.dshs.wa.gov/rda/projects/wasbirt.shtm

Project ASSERT

<http://www.ed.bmc.org/assert/assert.htm>

ACEP project

<http://acepeducation.org/sbi/>

Screening Instruments

The goal of screening is to quickly and efficiently identify patients who may require further assessment or treatment for substance use disorders. Screening does not definitively establish diagnosis or treatment needs. In a medical setting, screening typically involves at least two components: biomarkers and patient report. Biomarkers can include a positive drug screen (e.g., urine) or physical indications of possible substance abuse. Patient reports are based on structured or semi-structured questionnaires administered by interview, paper and pencil, or computer. Generally, it is recommended that all agencies within the same health care system use the same screener and administer and score them in the same way.

Numerous substance abuse screening instruments have been developed and are presented below. Substance specific instruments are listed first, followed by instruments that assess for more than one substance.

Alcohol Screeners

(1) Alcohol Use Disorders Identification Test (AUDIT)

Brief definition: <http://www.sbirt.samhsa.gov/glossary.htm#audit>

Copy of scale and scoring: Pennsylvania Department of Health SBIRT Toolkit (AUDIT and DAST)
www.ireta.org/sbirt/pdf/SBIRT_TOOL_KIT.pdf

(2) NIAAA Pocket Screening Guide (Alcohol)

pubs.niaaa.nih.gov/publications/Practitioner/PocketGuide/pocket.pdf

Drug Screeners

(1) Drug Abuse Screening Test (DAST)

Brief definition: <http://www.sbirt.samhsa.gov/glossary.htm#dast>

Copy of scale and scoring: Pennsylvania Department of Health SBIRT Toolkit (AUDIT and DAST)
www.ireta.org/sbirt/pdf/SBIRT_TOOL_KIT.pdf

Tobacco Screeners

(1) CDC/Behavioral Risk Factor Surveillance Survey Questions:

1. Have you smoked at least 100 cigarettes in your entire life? NOTE: 5 packs = 100 cigarettes
2. Do you now smoke cigarettes every day, some days, or not at all?

(2) Fagerstrom Nicotine Dependence Test

Copy of scale and scoring: http://ww2.heartandstroke.ca/DownloadDocs/PDF/Fagerstrom_Test.pdf

(3) Heavy Smoking Index

Simply use the first 2 items of the Fagerstrom. Cut-off ≥ 4 indicates probable dependence.

Multiple Substance Screeners

(1) Alcohol, Smoking and Substance Involvement Screening Test (ASSIST)

Brief definition: <http://www.sbirt.samhsa.gov/glossary.htm#assist>

Copy of scale and scoring: http://www.who.int/substance_abuse/activities/assist/en/index.html

Other Screening Resources

(1) Pennsylvania Department of Health SBIRT Toolkit (AUDIT and DAST)

www.ireta.org/sbirt/pdf/SBIRT_TOOL_KIT.pdf

(2) Substance Abuse Screening and Assessment Instruments Database

<http://lib.adai.washington.edu/instruments>

The Alcohol and Drug Abuse Institute at the University of Washington developed the database to assist treatment providers and researchers in finding appropriate instruments.

Brief Interventions

Brief intervention comprises a single session, or sometimes multiple sessions, of motivational discussion focused on increasing insight and awareness regarding substance use and motivation toward behavioral change. Brief intervention can be used as a stand-alone treatment for those at-risk, as well as a vehicle for engaging those in need of more intensive specialized care.

Manuals and Training

(1) Motivational Interviewing

<http://motivationalinterview.org/>

(2) Alcohol Screening and Brief Intervention for Trauma Patients: COT Quick Guide

http://www.sbirt.samhsa.gov/documents/SBIRT_guide_Sep07.pdf

A guide to assist Level I and II trauma centers incorporate alcohol screening and brief intervention as part of routine trauma care.

(3) Alcohol Screening and Brief Intervention Curriculum

<http://www.bu.edu/act/mdalcoholtraining/index.html>

Free web-based training curriculum geared toward generalist clinicians and developed by the Boston Medical Center.

(4) Brief Counseling for Marijuana Dependence: A Manual for Treating Adults

<http://kap.samhsa.gov/products/brochures/pdfs/bmdc.pdf>

(5) National Institute on Alcohol Abuse and Alcoholism

Helping Patients Who Drink Too Much: A Clinician's Guide

<http://www.niaaa.nih.gov/Publications/EducationTrainingMaterials/guide.htm>

(6) Ensuring Solutions to Alcohol Problems

SBI Implementation Guide for Hospitals

http://www.ensuringsolutions.org/resources/resources_show.htm?doc_id=503275&cat_id=2005

(8) BNI ART Institute

<http://www.ed.bmc.org/sbirt/>

Patient Education Information

(1) Tobacco

(a) *You Can Quit Smoking*. Information kit for consumers. April 2007. U.S. Public Health Service.
<http://www.ahrq.gov/consumer/tobacco/>

You Can Quit Smoking: Good Information for Smokers
<http://www.ahrq.gov/consumer/tobacco/lowlit.pdf>

You Can Quit Smoking: Five Day Countdown
<http://www.ahrq.gov/consumer/tobacco/5daybook.pdf>

You Can Quit Smoking: Consumer Guide
<http://www.ahrq.gov/consumer/tobacco/5daybook.pdf>

You Can Quit Smoking: Quitting Helps You Heal Faster
<http://www.ahrq.gov/consumer/tobacco/hospital.pdf>

(All items also available in Spanish at <http://www.ahrq.gov/consumer/tobacco/>)

(2) Alcohol

(a) NIAAA Patient Education

Easy-to-read material for the public covering a wide range of alcohol-related topics:

www.niaaa.nih.gov/Publications/PamphletsBrochuresPosters/English/

Spanish versions also available:

www.niaaa.nih.gov/Publications/PamphletsBrochuresPosters/Spanish/

(3) Drugs

(a) National Institute on Drug Abuse. (2007) Understanding Drug Abuse and Addiction. *NIDA InfoFacts*.

www.nida.nih.gov/drugpages/treatment.html

(b) National Institute on Drug Abuse. (2006). Drug Abuse and the Link to HIV/AIDS and Other Infectious Diseases. *NIDA InfoFacts*.

www.nida.nih.gov/DrugPages/HIV.html

Referral to Treatment

For patients identified as needing more extensive treatment than what can be offered through an SBIRT program, referral to a specialized treatment provider may be necessary. Referral to treatment is an integral component of the SBIRT process and necessitates strong collaboration between the SBIRT team and substance abuse treatment providers in the community. Some useful links to treatment resources are provided below.

(1) SAMHSA Treatment Locator

findtreatment.samhsa.gov/

(2) Buprenorphine Physician and Treatment Locator

buprenorphine.samhsa.gov/bwns_locator/

(3) National Tobacco Quitlines

www.smokefree.gov/expert.html

(4) State Substance Abuse Agencies

findtreatment.samhsa.gov/ufds/abusedirectors

Coding for Reimbursement

(1) SAMHSA's list of codes for SBI reimbursement. Reimbursement for screening and brief intervention is available through commercial insurance CPT codes, Medicare G codes, and Medicaid HCPCS codes:

www.sbirt.samhsa.gov/coding.htm

(2) SAMHSA's downloadable coding chart:

www.sbirt.samhsa.gov/SBIRT/documents/SBIRT_Coding_Chart2.pdf

(3) Medicare/Medicaid Health and Behavior Assessment and Intervention Codes

www.dhfs.state.wi.us/Medicaid/updates/2007/2007-09att16d.htm

(4) Smoking and Tobacco Use Cessation Counseling Billing Code Update to Medicare

www.cms.hhs.gov/mlnmattersarticles/downloads/MM5878.pdf

www.cms.hhs.gov/transmittals/downloads/R1433CP.pdf

(5) Ensuring Solutions SBI Reimbursement Guide: Everything You Need to Know to Conduct SBI and Get Paid for It:

www.ensuringsolutions.org/resources/resources_show.htm?doc_id=385233

References

Selected Evidence Based Reviews

US Preventive Services Task Force. Counseling to prevent tobacco use and tobacco-caused disease: Recommendation statement. www.ahrq.gov/clinic/3rduspstf/tobaccoun/tobcounrs.pdf

Bernstein, S. L., & Becker, B. M. (2002). Preventive care in the emergency department: diagnosis and management of smoking and smoking-related illness in the emergency department: a systematic review. *Acad Emerg Med*, 9(7), 720-729.

Bernstein SL, Boudreaux ED, Cydulka RK, Rhodes KV, Lettman NA, Almeida SL, McCullough L, Mizouni S, Kellerman AL, for the ACEP Task Force on Smoking Cessation. Tobacco control interventions in the emergency department: A joint statement of emergency medicine organizations. Jointly published in *Annals of Emergency Medicine*, 2006;4:417-426 and *Journal of Emergency Nursing*, 2006;32:370-381.

US Preventive Services Task Force. Screening and behavioral counseling interventions in primary care to reduce alcohol misuse. *Ann Intern Med*. 2004;140:555-7.

D'Onofrio, G., & Degutis, L. C. (2002). Preventive care in the emergency department: Screening and brief intervention for alcohol problems in the emergency department: A systematic review. *Acad Emerg Med*, 9(6), 627-638.

US Preventive Services Task Force.(1996) Screening for drug abuse. www.ahrq.gov/clinic/uspstfix.htm

Selected Empirical Articles

Bernstein E, Bernstein J, et al. Project ASSERT: An ED-based intervention to increase access to primary care, preventive services, and the substance abuse treatment system. *Ann Emerg Med*. 1997;30:181-9.

Bernstein J, Bernstein E, et al. Brief motivational intervention at a clinic visit reduces cocaine and heroin use. *Drug Alcohol Depend*. 2005;77:49-59.

Academic ED SBIRT Research Collaborative. An evidence based alcohol screening, brief intervention and referral to treatment (SBIRT) curriculum for emergency department (ED) providers improves skills and utilization. *Subst Abus*. 2007;28(4):79-92.

Academic ED SBIRT Research Collaborative. The impact of screening, brief intervention, and referral for treatment on emergency department patients' alcohol use. *Ann Emerg Med*. 2007;50(6):699-710.

Other Selected Readings

Topic: Substance Abuse Interventions for Trauma Patients
Journal: *The Journal of Trauma Injury, Infection, and Critical Care*
www.cdc.gov/ncipc/Spotlight/section3S76-100.pdf#page=5