



Screening, Brief Intervention, & Referral to Treatment

Program Operations of a Level II Community Hospital

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Objective

- Describe evaluation and management of SBIRT at Henry Ford Macomb Hospital a Level II Adult Trauma Center.



Overview

- Resources
- Brief Historical Perspective
- Our SBIRT Guidelines
- Overall Process
- Dashboard and Monitoring
- What's Next?



HFMH

- Level II Adult Trauma Center (as of 02/27/13)
- 349 Licensed Beds
- ~58K ED visits annually
- ~130 Trauma Registry Cases Monthly
- Private practice model
- Multiple Residency Programs



Resources

- **Trauma Rounder**
-M-F-0600-1800
-S/SU 48 Hours
- **General Surgery Resident (1)**
- **Off Service Resident (1)**



Resources

- **TPM**
- **Injury Prevention Coordinator**
- **Trauma Nurse Registrar**
- **Administrative Support Coordinator (12/13)**
- **Social Work M-F Days**
- **Psychiatry Available**



Historical Perspective

- **Nurses were completing AUDIT-C's on admitted patients**
- **Use that or develop further**
- **If screening should provide intervention**
- **Physicians needed to discuss during H & P anyway**



Historical Perspective

- **IPC developed program-team decided residents would complete**
- **Initially significant resistance**
- **Chief Resident then owned it**
- **Still have starts & stops but.....**



SBIRT Guidelines

Screening	Intervention	Referral to Treatment
1	2	3

Screening Brief Intervention & Referral to Treatment (SBIRT) Guidelines

I. Scope
These guidelines are for assessment and care management of adult inpatients who are at increased risk for traumatic injury due to hazardous alcohol consumption.

II. Purpose
Reduce recidivism through implementation of consistent identification and counseling strategies for at-risk inpatients at risk for recurrent alcohol-related hospitalizations.

III. Goals/Objectives
The Trauma Service at Henry Ford Macomb Hospitals shall develop the practice outlined herein.

All use of the following will begin the start of SBIRT process:

- Positioning in "H&P" on Trauma Form-Case
- Positioning in Patient Care Plan (PCC) on H&P
- Positioning on existing order Social History in existing record

Screening Brief Intervention & Referral to Treatment (SBIRT) Guidelines

A. Successful completion of SBIRT requires the following elements:

- Complete Section The Decision Determination: The AUDIT-C Form
- Provide appropriate counseling and/or referral to treatment
- Counsel patient on the use of alcohol to reduce risk of injury
- Document all interventions and assessment findings on appropriate form

B. The following items represent the minimum level of implementation in defined below:

- All staff members are trained in SBIRT
- All staff members are trained in SBIRT
- All staff members are trained in SBIRT

C. Considerations will be required for patient entry in or above:

- Positioning
- Social History

D. Reporting
The American College of Surgeons Committee on Trauma (ACS-COT) recommends that all interventions be reported for patient care. It is recommended that all interventions be reported in order to allow for review of developing policies. Identify specific interventions in patient care and report on appropriate form.

- Trauma of injured patients
- Patient of trauma services (including all admissions)
- Patient of trauma services (including all admissions)



SBIRT Guidelines


- **SCOPE**
Provide recommendations for the assessment and care management of individuals who are at increased risk for traumatic injury due to hazardous alcohol consumption.
- **PURPOSE**
Reduce traumatic injury recidivism through implementation of consistent identification and counseling strategies for admitted injured patients at risk for recurrent alcohol related hospitalizations.



SBIRT Guidelines

- **Who is responsible for SBIRT?**
 - Screening and interventions completed by Trauma Service resident
 - Injury Prevention Coordinator monitors and reports compliance


- **Who do we screen?**
 - Positive notation of "ETOH" on Trauma Flow Sheet
 - Positive Blood Alcohol Content
 - Positive notation for alcohol use in Social History



SBIRT Guidelines

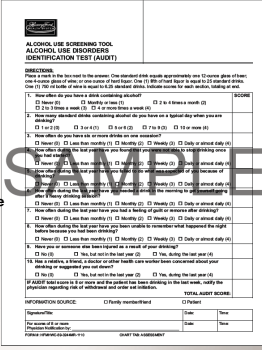

- **When do we perform SBIRT tasks?**
 - **Screening**
 - Typically first patient encounter
 - Pros & Cons

 - **Intervention**
 - Brief Interventions
 - Consults

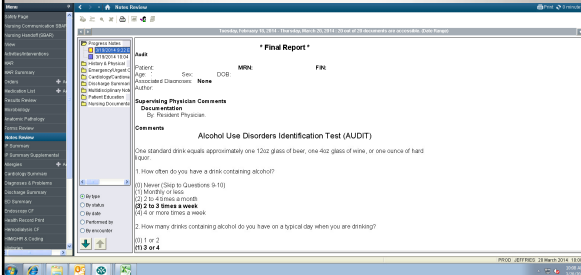



SBIRT Guidelines

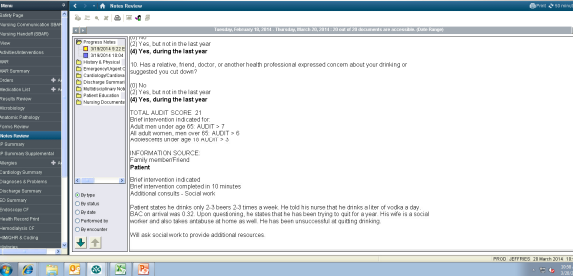

- **How do we screen?**
 - **AUDIT tool**
 - **Scoring:**
 - Tallied score 0-40
 - **Adult men under age of 66: 8 or above**
 - **All adult women; men over 65: 7 or above**
 - **Adolescents under age 18: 4 or above**
 - **Total score >19 requires consult**
 - **Documentation**
 - H&P, Progress Notes

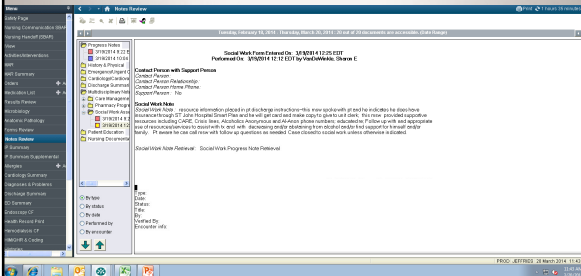

SBIRT Documentation

SBIRT Documentation

SBIRT Documentation

SBIRT Maintenance

- Coordinated by IPC
- Education
 - Program Guidelines
 - Current literature
 - NIAAA Clinician's Guide
 - Sample forms
 - Online component [click](#)
- Compliance monitoring
 - Daily tracking
 - Monthly review



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SBIRT Maintenance

6	DATE	NAME	MRN	CO	SOCIAL HISTORY	BAC	ALCOH	BT	DOCTOR	KEY	Consult
7	1/15/2013	TYNAN, MARCO V	1133	E	TTD	NA	ETD	NA	Mathews		Blue
8	1/15/2013	SCHERZLE, MAX G	1124	E	Negative	0	0	NA	Wahb		Blue
9	1/15/2013	WYHAMER, LOU Z	1125	E	Positive	NA	SB	SB	Mathews		Blue
10	1/15/2013	HANFT, ANISSA	1126	E	Negative	NA	0	NA	Levitt		Blue
11	1/15/2013	ENERTEN, ALBERT G	1127	E	Negative	0	0	NA	Mathews		Blue
12	1/15/2013	WASIKOWSKI, GEORGE W	1128	E	Negative	0	0	NA	Wahb		Blue
13	1/15/2013	JORDAN, MICHAEL V	1129	E	Negative	0	0	NA	Wahb		Blue
14	1/15/2013	ARTHUR, KEVIN	1131	E	Positive	0	0	NA	Socolor		Blue
15	1/20/2013	BARBLEY, CHARLES Q	1132	E	Negative	NA	0	NA	Socolor		Blue
16	1/20/2013	OTTI, BRADLEY	1133	E	Positive	SB	SB	SB	Socolor		Blue
17	1/20/2013	ANSTON, JENNIFER Z	1134	HS	Positive	NA	ADTY C	MSB	Wahb		Blue
18	1/20/2013	BUCK, DUBY	1135	E	Positive	NA	1	NA	Socolor		Blue
19	1/20/2013	MAKOC, BRINNE	1136	E	Negative	0	0	NA	Socolor		Blue
20	1/20/2013	MEYERS, MICHAEL	1137	E	Negative	0	0	NA	Wahb		Blue
21	1/20/2013	GREER, ELIA	1138	E	Negative	0	0	NA	Wahb		Blue
22	1/20/2013	TUCK, FRANK	1139	E	Negative	0	0	NA	Wahb		Blue
23	1/20/2013	HOOD, ROBIN	1141	E	Positive	SB	SB	SB	Wahb		Blue
24	1/20/2013	SOUTHER, ELISA	1142	E	Negative	NA	NA	NA	Wahb		Blue
25	1/4/2013	PEROT, BOSS X	1143	E	Negative	NA	0	NA	Wahb		Blue
26	1/4/2013	DOUKHTLY, HOLLY	1144	E	Negative	0	NA	NA	Wahb		Blue



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SBIRT Maintenance

Henry Ford Macomb Hospital Trauma Services													
Screening and Brief Intervention and Referral to Treatment (SBIRT) Progress 2013													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	YTD
1	Addressed Trauma												289
2	Required Screening												40149
3	Number Screened												2954
4	Remaining Further												14160
5	Brief Interventions												1011
6	Referrals												41
7	Compliance												100%
8	Missed Patients												0
9	Non-attendance												0
10	Distribution												16
11	1st												1
12	2nd												15
13	3rd												0
14	4th												0
15	5th												0
16	6th												0
17	7th												0
18	8th												0
19	9th												0
20	10th												0
21	11th												0
22	12th												0
23	TOTAL												16
24	Screened												100%
25	Brief Interventions												100%
26	Referrals												100%
27	Compliance												100%
28	Missed Patients												0
29	Non-attendance												0



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SBIRT Compliance

- Common issues
- Clinician notification
- Clinician meetings



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SBIRT: What's Next?

- Maintain education and compliance
- Revisit literature
- Investigate alcohol-related recidivism
 - Review SBIRT patient data from 2012 & 2013
 - Who is returning? How many times?
 - Identify trends and common characteristics
 - What can we do for this specific population?



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Questions



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