

Screening, Brief Intervention and Referral to Treatment

Purpose:

Screening, Brief Intervention and Referral for Treatment (SBIRT) is a structured set of questions designed to identify individuals at risk for alcohol use problems, followed by a brief discussion between an individual and a service provider, with referral to specialized treatment as needed. Screening asks several questions to determine whether individuals are misusing alcohol—that is, are they drinking too much, too often, or experiencing harm from their drinking.

Procedure:

For every trauma admission, the bedside nurse will complete the SBIRT screening tool in Epic. The patient must have a GCS ≥ 14 to complete the screen. Current screening tool used is the AUDIT-C.

AUDIT-C:

AUDIT-C consists of 3 questions. It is scored on a scale of 0-12. Each AUDIT-C question has 5 answer choices. Points allotted are:

a= 0 points, b= 1 point, c= 2 points, d= 3 points, and e= 4 points

- In men, a score of 4 or more is considered positive
- In women, a score of 3 or more is considered positive
- However, when the points are all from question #1 alone, it can be assumed that the patient is drinking below recommended limits and it is suggested that the provider review the patient's alcohol intake over the past few months to confirm accuracy.
- Generally, the higher the score, the more likely it is that the patient's drinking is affecting his or her safety.

For Positive Screens:

- Nurse will notify Trauma Nurse Practitioner (NP) of any positive screen
- Trauma NP will review screen and place social work consult
 - The patient must be at least a GCS ≥ 14 for the social worker to assess the patient
- Social worker will meet with patient and provide documentation in Estar surrounding the below
 - Complete substance use assessment and obtain substance use treatment history
 - Provide education about levels of substance use treatment available (Residential Treatment, Detox Programs, Intensive Outpatient Programs, Outpatient Programs, Community Groups)
 - Educate patient regarding initial intake process and funding options for substance use treatment (Insurance vs. Grant Beds for unfunded patients)
 - If requesting an inpatient level of treatment:

- Provide a list of appropriate options to patient at bedside
- Follow-up with referred facilities for any needed medical information
- Assist with transportation to substance use treatment
- If requesting an outpatient level of treatment...
 - If insured, schedule outpatient appointment and provide details to bedside
 - If uninsured, provide information regarding safety net and walk-in hours.
 - Provide list of free local community groups including AA, NA, and Al-Anon
- If not interested in treatment today, offer to leave a list of substance use resources and business card in the event patient changes their mind
- If needed the social worker can consult the VUH Addiction Consult Team

Quality/Performance Improvement:

- Trauma Program Manager and PI Nurses will review the SBIRT report regularly to ensure ≥80% compliance with completing the AUDIT-C screening on all trauma admissions.
- The Performance Improvement team will confirm that all positive AUDIT-C screens have corresponding social work consults and documented interventions, maintaining ≥80% compliance.

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References:

AUDIT-C. https://www.integration.samhsa.gov/images/res/tool_auditc.pdf

American College of Surgeons. Alcohol Screening and Brief Intervention (SBI) for Trauma Patients: COT Quick Guide.

<https://www.facs.org/~media/files/quality%20programs/trauma/publications/sbirtguide.ashx>