

**Integrating Adolescent Substance Use
Screening, Brief Intervention, and Referral to
Treatment in Health Professions Education**

INEBRIA 12th Congress
Atlanta, GA



NORC
at the UNIVERSITY of CHICAGO



Kognito



**ADOLESCENT
SBIRT**
Screening, Brief Intervention & Referral to Treatment

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Presenters



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Acknowledgements

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Partners:   

Adolescent substance use is a major public health concern

- Most adolescents are not identified or receive the treatment they need.
- Only 14% of young adults who reported exceeding alcohol consumption guidelines and visiting a doctor were asked about their alcohol use.
- Promising evidence to support use of adolescent SBI in community settings, emergency services, addiction clinics, primary care, colleges, and school-based health centers. More studies are needed.
- SW and Nursing health professionals need to be prepared to work in a range of settings where adolescents/young adults receive care, and where SBI is being implemented.

Preparing the next workforce: Settings where SBI is happening



- | | |
|---|--|
| <ul style="list-style-type: none"> ▪ Primary care ▪ Trauma ▪ Emergency Department ▪ Hospital Inpatient ▪ Colleges/Universities ▪ School-based Health Centers ▪ Federally Qualified Health Centers ▪ Community Mental Health Centers ▪ Counseling | <ul style="list-style-type: none"> ▪ Community Youth Programs ▪ Juvenile Justice, Drug Courts ▪ Employee Assistance Programs ▪ Peer Assistance Programs ▪ Health Promotion and Wellness Programs ▪ Occupational Health and Safety, Disability Management ▪ Dental Clinics ▪ HIV Clinics ▪ Addiction Treatment ▪ Faith-based Programs |
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Recommendations and guidelines on adolescent screening and brief intervention

- Endorsed by leading professional associations/government agencies:
 - American Academy of Pediatrics (AAP)
 - American Medical Association (AMA)
 - Substance Abuse and Mental Health Services Administration (SAMHSA)
 - Center for Medicare and Medicaid Services (CMS)
 - National Institute on Alcohol Abuse and Alcoholism (NIAAA)
- Slow uptake among health professionals.
 - Fewer than 50% AAP-affiliated providers systematically screen adolescents.
- Health professional education efforts have been slow but growing.
 - Support from federal agencies to educate pre-service professionals and the existing workforce is necessary but insufficient.
 - Need mechanisms for bringing education to scale.

Common barriers in educational settings

- Lack of time to add “something else” to the curriculum.
- Not required to teach substance use education, not an accreditation standard.
- Lack of awareness, skills, and knowledge about substance use prevention/early intervention and SBI.
- Don't know where to start, what to include, what educational resources and teaching materials are available.
- Not sure where the education fits – Separate course vs. woven throughout multiple courses, addiction specific vs. more general course, elective vs. required course?
- Lack of engaging, visual learning opportunities to supplement lecture/didactic content.

Aims of the Project

- **Engage** the leading national associations, experts, practitioners, students, researchers, and accrediting organizations for schools of social work and nursing.
- Develop and sustain adolescent **SBIRT learning collaborative** of schools of social work and nursing.
 - Fostering partnerships, collaboration, technical support, and sharing lessons learned.
- Develop, implement, and evaluate adolescent SBIRT curricula with Instructor's Toolkit and Kognito **interactive virtual patient simulations** for nursing and social work students.
- Offer **Stipends and TA** to support integration activities and sustainable practice over time.

Integrating Adolescent SBIRT into Social Work and Nursing Education Project

The screenshot shows the website for the Adolescent SBIRT project. At the top, there are navigation tabs: ABOUT, PARTNERS, CALENDAR, LEARNING COLLABORATIVE, STEERING COMMITTEE, and RESOURCES. The main heading is 'ADOLESCENT SBIRT' with the subtitle 'Developing Best Practices & Tools for Schools'. Below this is the title 'Integrating Adolescent SBIRT Throughout Social Work & Nursing School Education'. The text describes the project's goal to integrate SBIRT into social work and nursing education, mentioning the involvement of NORC at the University of Chicago, the American Association of Colleges of Nursing (AACN), and the American Association of Colleges of Nursing (AACN). It also lists the project's aims, including engaging national associations, developing a learning collaborative, and offering stipends and TA. Logos for NORC, AACN, and CSWE are visible at the bottom of the screenshot.

- Conrad N. Hilton Foundation
- Oct 2014–Sept 2017
- Steering Committee
 - 30+ SMEs, nursing and social work educators and practitioners, professional associations, BH orgs, researchers, and others
- Learning Collaborative
 - 70+ schools
 - 150+ educators, field placement supervisors, preceptors, practitioners
- Technology Partner – Kognito
- Website: sbirt.webs.com
- Join Us: SBIRTeam@norc.org

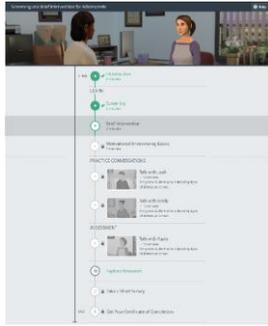
Virtual patient simulation

Iterative development of simulations with the Adolescent SBIRT Learning Collaborative and SMEs.

Learn: Engaging activities on SBIRT process and skills (screening, risk levels, Brief Negotiated Interview, MI).

Practice: Simulated conversations with realistic, emotionally-responsive virtual adolescents; choose your avatar. Coach feedback; patient inner thoughts; patient engagement meter.

Assess: Dashboard with scoring and feedback for learners and instructors.



Practice Conversations



Josh

- Setting: Hospital ED
- Condition: ankle ligament injury
- Remarks: jumped off roof into hot tub; was at party
- Screening results: High-risk/weekly use alcohol



Emily

- Setting: School nurse/social worker office
- Condition: decreased attention
- Remarks: referred by teacher; distracted in class
- Screening results: High-risk/weekly use marijuana

Assessment Conversation



Kayla

- Setting: Primary care
- Condition: Annual well visit
- Remarks: None
- Screening results: Moderate risk/weekly use alcohol

Assessment features

- Total score
- BI adherence score
- MI adherence score
- No undo button
- No coach feedback
- No inner thoughts

Demo

<https://staging.kognito.com/norc/>

Feedback & Analytics

Performance Dashboard | Get Certificate | PDF

John Applbaum

Overall Performance

Your Score

88
POINTS

Out of 100

Great!
You did well with this brief intervention.

Your Peers' Score

90
POINTS

Out of 100

MI Style

You: 4

Your Peers: 3

Kayla's Engagement

You: MEDIUM

Your Peers: MEDIUM

Competencies

- 14. Build Rapport**
 - Ask about life
 - Ask permission to raise subject
 - Attitude: understanding and
 - Empathy: you're trying to understand what they're saying. Check with a brief question to make sure you've understood correctly.
- 17. Risk Plan and Close**
 - Use cues
 - Encourage
 - Normalize use
 - Collaborate: Work with your patient to make sure they're not afraid of making any changes. Support your patient in their goals.
- 12. Provide Feedback**
 - Ask permission to provide feedback
 - Provide feedback often
 - Effect: reinforce
 - COMMENTS: We need to ask our patient before providing feedback...
- 17. Assess Readiness**
 - Ask about readiness
 - Make resources available for discussion
 - Help, help, and then let them decide how to change!
- 16. Negotiate an Action Plan**
 - Be realistic about
 - Collaborate on specific goals
 - Empower: challenge to change
 - Collaborate: Work together to develop a plan that you've negotiated together. Be sure to set a deadline. Address any other issues in the meantime. "What's the next step?"
- 19. Summarize and Thank**
 - Empower our patient again
 - Offer professional support
 - Address any concerns
 - COMMENTS: I hope you found it through some helpful suggestions on your case today!

Benefits of Virtual Humans

- Safe to experiment
- Increase in engagement
- Decrease in transference reactions
- Decrease in social evaluative threat
- Cost-effective

- Personalization of experience
- Reduce costs of updates
- "Choose your Avatar" option

Three Kognito simulations listed on SAMHSA National Registry of Evidence-Based Programs & Practice (NREPP)



Thank you



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