



# Massachusetts SBIRT News



Prevent • Treat • Recover • For Life

[www.mass.gov/dph/bsas](http://www.mass.gov/dph/bsas)

Spring 2010, Issue 2

Screening, Brief Intervention, Referral and Treatment (SBIRT)

## In this issue

AlcoholScreening.org

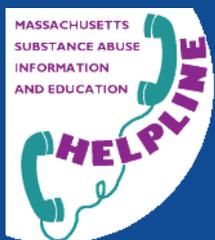
MASBIRT  
Brief Interventions

Project ASSERT  
'Selling Treatment'

CeASAR  
Update

Resources

SBIRT Web Page on  
Mass.gov



Helpline # (Toll Free):  
1-800-327-5050  
TTY (Toll Free):  
1-888-448-8321  
[www.helpline-online.com](http://www.helpline-online.com)

Free, confidential information  
and referrals for alcohol and  
other drug abuse problems and  
related concerns.

Use its website 24/7 or speak  
with a Referral Specialist

Monday - Friday:  
8:00 am to 11:00 pm  
Saturday and Sunday:  
9:00 am to 5:00 pm

Language interpreters are  
available during these hours

## MASBIRT program completes 100,000 screens

The MASBIRT program reached its 100,000<sup>th</sup> patient encounter with over 80,000 unique patients screened.

The team has delivered over 17,500 brief interventions, and continues to provide feedback and recovery support for patients who did not report unhealthy substance use.



The program continues to expand to reach new clinical sites and new patients.

### Substance Abuse in a Changing Environment

**Thursday, June 10**  
**Sheraton Framingham Hotel & Conference Center**

An opportunity to gain greater understanding of parity, healthcare reform, performance monitoring and performance contracting, and how the state and providers can adapt and thrive in this changing environment.

To register and learn more

[Register link](#)

## Massachusetts link on AlcoholScreening.org

Massachusetts residents can now link directly to the Helpline from [www.AlcoholScreening.org](http://www.AlcoholScreening.org).

This free, confidential web-based screening tool helps those who use it understand *How Much is Too Much* for them. It is based on the validated Alcohol Use Disorders Identification Test (AUDIT) and provides users with feedback based on their responses to questions.

A [recent expansion](#) also provides brief intervention techniques that have been proven to work in clinical settings to help people change their behavior and get on a new track.

AlcoholScreening.org features the BSAS logo and provides a direct link to the Helpline on its *Get Help* page when a Massachusetts resident inputs his or her zip code.

AlcoholScreening.org was developed by Join Together, a project of the Boston University School of Public Health and has been used by over 1 million people to date.

Join Together's newer [www.DrugScreening.org](http://www.DrugScreening.org) asks about *tobacco, alcohol and other drug use*. Like *AlcoholScreening.org*, it provides feedback and information on local resources.

'No one ever asked me about my alcohol use before. It's good that I was asked about this.'  
*MASBIRT patient*

'I was a little caught off-guard. She just went right into the questions; could see how some people might feel cornered. It's a really great program...a lot of people wouldn't be able to network on their own, sometimes all it takes is someone asking a question.'

*MASBIRT patient*

Substance Abuse and Mental Health Services Administration, Office of Applied Studies (December 29, 2009) The NSDUH Report. Illicit drug use among older adults. Rockville, MD

### Aging with Dignity XV

A conference on preventing and responding to alcohol and other drug problems among older people

[Register Online](#)

**Tuesday June 8**

College of the Holy Cross  
Hogan Campus Center  
Worcester

Anthony EK, Austin MJ and Cormier DR. Early detection of prenatal substance exposure and the role of child welfare. *Children and Youth Services Review*. 2010; 32: 6-12.

Discussion on the importance of and barriers related to detecting substance use and reviews appropriate tools for screening pregnant women.

# MASBIRT

18 trained Health Promotion Advocates (HPAs) perform screenings at:

**Boston Medical Center**  
Emergency room  
At bedside on 7 Inpatient Services  
At annual visits in  
11 Outpatient Clinics

**Quincy Medical Center**  
Emergency Room  
At bedside in 2 Inpatient Services

## Community Health Centers

Codman Square Health Center

Dorchester House Multi-Service Center

East Boston Neighborhood Health Center

South Boston Community Health Center

Whittier Street Health Center

Funded through a 5-year \$14 million federal grant from SAMSHA, Massachusetts SBIRT (MASBIRT) is administered by the Massachusetts Department of Public Health Bureau of Substance Abuse Services.



## Brief Intervention (BI) in Medical Settings:

The definition of Brief Intervention varies from 'simple advice' to 'brief counseling.' MASBIRT staff use a model based on the Brief Negotiated Interview - Active Referral to Treatment (BNI-ART) developed in 1994 by Drs. Edward Bernstein, Judith Bernstein and Gail D'Onofrio, in consultation with Dr. Stephen Rollnick, for the then-SAMHSA-funded Project ASSERT, and still used in the emergency department at Boston Medical Center.

The BI is used with patients whose alcohol and drug screening reveals a level of risk. We set a respectful tone by asking permission to provide feedback about screening results, and continue to use a non-judgmental tone throughout the conversation.

## Three Step Guide for Providing a BI

Try to engage the patient in a conversation about their substance use by avoiding "yes/no" questions. This format can be used with patients to address a range of health problems with behavioral components.

'It was good talking to her. She really enlightened me; brought up some very good points. Programs like this can change people's lives!'

MASBIRT patient

**1. Provide Feedback.** When screen is positive, inform the patient about health risks of alcohol/drugs and discuss the NIAAA risky drinking guidelines.

*Are you aware of any health risks related to using [X]?*

*If YES: Which ones are you aware of?*

*If NO: Indicate general medical problems associated with unhealthy use*

**2. a. Enhance Motivation.** Explore pros and cons. Emphasize negative consequences, while acknowledging the pro's of using.

*I'd like to know more about your use of [X].*

*Help me to understand what you enjoy about using [X]?*

*Now tell me what you enjoy less about [X] or regret about your use.*

*So, on the one hand you say you enjoy [X] because... but on the other hand you said....Where does this leave you?*

**b. Explore Readiness** to change by asking,

*If you were going to make a change in your use of X, on a 1-10 scale, how important is making that change?*

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**ED SBIRT  
Hospital Emergency  
Departments**

Southeast Region:  
St Anne’s Hospital

Western Region:  
Mercy Medical Center

Central Region:  
Heywood Hospital  
UMASS Memorial  
Medical Center

Southeast Region:  
South Shore Hospital

Boston Region:  
Boston Medical Center  
Pediatric ED

**Updates:**

The Massachusetts ED SBIRT continues to perform at full capacity, screening over 3000 patients and conducting over 700 brief interventions in the four months between November, 2009 and March, 2010. The program welcomes a new part-time health promotion advocate, Anthony Martin, at Baystate Medical Center who screened over 200 patients in his first month on the job.

**Selling Treatment:  
Referral means more than making an appointment**

The foundation of “selling treatment” is to motivate patients to seek it rather than to tell them what they need.

Based on motivational interviewing, the Brief Negotiated Interview (BNI) strives to help patients resolve ambivalence around seeking treatment for substance abuse.

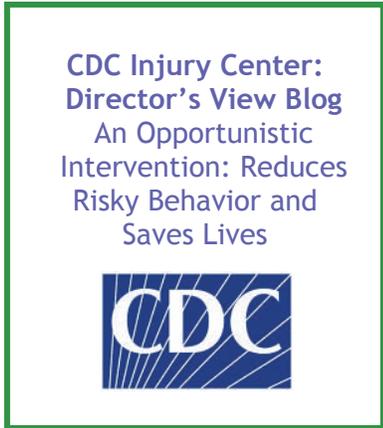
The model evokes the patient’s own reasons for change and strengthens his/her motivation and commitment. Individuals can then *choose* treatment and embrace the process of self-initiated recovery.

The BNI begins with a discussion about how substances fit into the patient’s life, and then explores ambivalence by verbalizing advantages and disadvantages of his/her alcohol and/or drug use. During the conversation, an exchange of information around the effects of substances on health occurs.

The provider elicits a response from the patient and builds their readiness to change, concluding with the patient’s own ideas for actions steps to improve their health. This may mean cutting back on quantity or frequency, reducing environmental risk factors such as unhealthy social contacts, or seeking the appropriate treatment.

**Treatment, in essence, sells itself.**

An “active” referral in which the provider works with the patient to make an appointment or find a placement affirms a patient’s decision to seek treatment and supports their plan for change while removing some of the isolating feelings of having to go through the process alone.



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## Brief Treatment

The MASBIRT project, like other SAMHSA-funded SBIRT projects around the country, refers some patients to Brief Treatment - an outpatient treatment protocol that uses motivational interviewing and cognitive behavioral therapy techniques in 6 -12 sessions.

This structured process uses a manual, and focuses on building client skills to positively change behaviors and maintain those changes.

Recent research has found that brief treatment approaches that emphasize client motivation, cognition, and behavior are effective for treating a broad range of substance use disorders.

SBIRT projects initially saw Brief Treatment as a way to help people who might not meet criteria for dependence or addiction, but who needed more than a few 15-30 minute brief intervention conversations.

In MASBIRT's experience this approach may also be appropriate for people who do not want to go to traditional treatment for a variety of reasons, but who are to speak with someone for a shorter period of time. Some have decided that they need to continue beyond their final week, and are then open to considering further treatment options.

MASBIRT is offering a training series for some of its SBIRT treatment providers this spring, and plans to open up this series to other specialty treatment providers during the coming year.

'I was drinking more regularly, and I cut back... He explained the effects of alcohol on the body. I cut back a lot and I'd like to cut back even more.'

*MASBIRT patient*

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## Recent Articles on SBIRT

Estee S, Wickizer T, He L, et al. [Evaluation of the Washington state screening, brief intervention, and referral to treatment project: cost outcomes for Medicaid patients screened in hospital emergency departments.](#) *Med Care.* 2010;48(1):18-24.

Quanbek A, et al. A cost benefit analysis of Wisconsin's screening, brief intervention and referral to treatment program: Adding the employers perspective. *Wisconsin Medical Journal.* 2010;109 (1): 9-14.

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### MASBIRT Continued from page 3

**3. Negotiate and Advise.** Help the patient develop a plan for change and think through obstacles that might challenge the stated goal. Close on good terms and thank the patient for his/her willingness to discuss the topic.

*What challenges can you anticipate/imagine?*

*How have you handled similar challenges in the past?*

*What is the next step for you? What can you do to stay healthy & safe?*

*Thanks for taking the time to discuss this with me ....or...Thanks for being so open with me.*

\*\*\* MASBIRT patient quotes throughout this issue were provided during 6 month follow-up conversations

## NEW RESOURCE

Committee on Substance Abuse. Policy Statement Alcohol Use by Youth and Adolescents: A Pediatric Concern.

*Pediatrics*. 2010; 125 (5): 1078-1087.

Published online at  
[www.pediatrics.org](http://www.pediatrics.org)  
4/12/10.

**The SBIRT residency training program** at Children's Hospital Boston continues to focus on developing materials specific to adolescent SBIRT. We are developing a handy one-page brochure for providers that outlines the pediatric SBIRT algorithm.

We are also preparing new teaching modules on the topics of adolescent confidentiality; co-occurring disorders; substance abuse and infectious diseases; and guidance providers can give to parents whose children are abusing substances. All the curriculum materials will be available on the internet by the end of the project.

**CeASAR launched a new internet resource for parents** in mid-May. Parents can watch an interview with parents who lost their son due to an alcohol-related accident; learn how substance use affects the teen brain; and hear answers from Dr. Knight to common questions parents have about how to keep their teen-aged children safe from alcohol and drug use.

[www.teen-safe.org](http://www.teen-safe.org)

**BNI-ART Institute educational materials** demonstrate quick and effective methods for screening, motivational interviewing, and referral.

[www.ed.bmc.org/sbirt](http://www.ed.bmc.org/sbirt)

[Educational Videos](#)

Amaro H, et al. Brief screening and intervention for alcohol and drug use in a college student health clinic: Feasibility, implementation and outcomes. *Journal of American College Health*. 2010; 58 (4): 357-364.

Fleming MF et al. Brief physician advice for heavy drinking college students: a randomized controlled trial in college health clinics. *J Stud Alcohol Drugs*. 2010;71(1):23-31.

## Selling Treatment Continued from Page 3



The BNI - ART Institute  
Brief Negotiated Interview and Active Referral to Treatment

**A recent example** occurred when a middle-aged woman presented in a local ED with stomach pain. She reported drinking regularly and called herself an "alcoholic." During the BNI, she expressed remorse about how her young daughter worried and cared for her when she became sick after a night of heavy drinking. The provider explored the discrepancy between her drinking behaviors and the mother she wanted to be. The conversation empowered her with the desire to seek treatment and, when options were discussed, she could identify treatment she not only wanted to go to, but would be committed to stick with.

She enrolled in an outpatient treatment program tailored specifically for women and mothers. Because she came to the decision herself, she was more willing to take responsibility for taking action than if the interventionist had 'planted' the idea.

### For more info:

Carol Girard  
SBIRT Coordinator  
Bureau of Substance  
Abuse Services  
(617) 624-5189

[www.mass.gov/dph/bsas](http://www.mass.gov/dph/bsas)



Project ASSERT is a key component of the BNI-ART Institute

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