

Implementing SBIRT at WHCHC

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About WHCHC

- Federally Qualified Health Center with integrated primary care, behavioral health, and dental services
- Serving > 62,000 residents of West Hawaii communities
- Covering over 80 miles of coastline
- Last year: 65,000 visits for over 12,000 individuals

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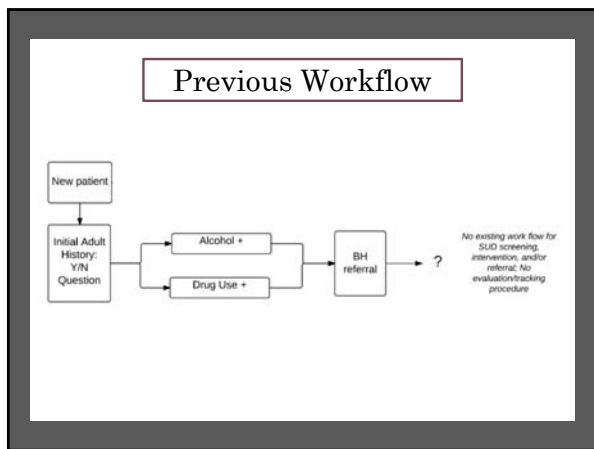


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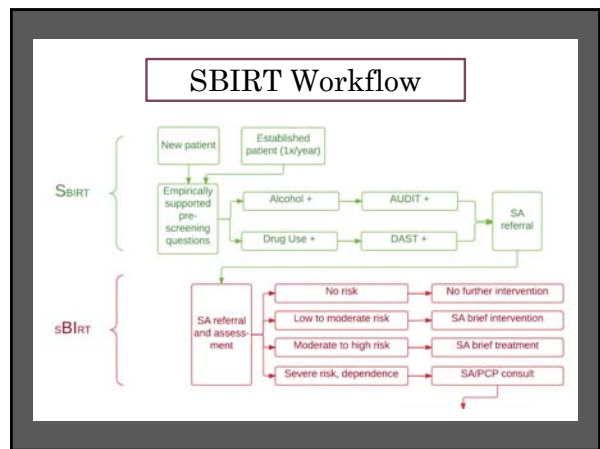
Substance Abuse Service Expansion (SASE)

- 2-year HRSA grant to expand services (2015)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Pharmacotherapy for substance use disorders

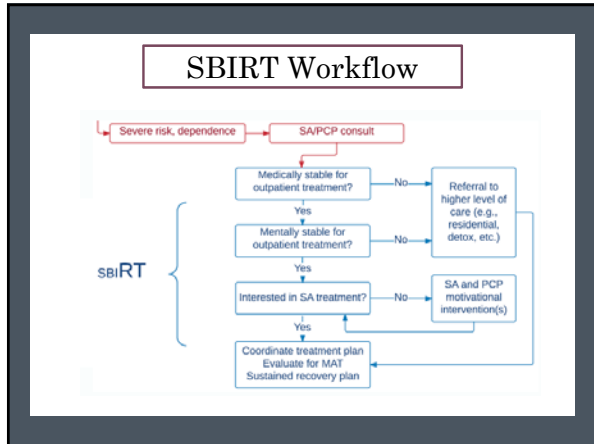
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New Patient Packet

At WHCHC, we care about your health. Please take a few minutes to complete these annual screening questions.

- Do you currently use any nicotine or tobacco products? (including cigarettes, chewing tobacco, e-cigarettes) Yes No

During the last 2 weeks, have you been bothered by:

2. Little interest or pleasure in doing things	YES	NO	(staff use) (any +)
3. Feeling down, depressed, or hopeless	YES	NO	PHQ-9
4. Feeling worried, tense, or anxious	YES	NO	GAD-7

During the last 12 months, have you:

5. Used marijuana	YES	NO	(staff use) (any +)
6. Used other drugs	YES	NO	DAST-10
7. Misused prescription drugs (took more than prescribed, someone else's, etc.)	YES	NO	

For the following questions, 1 standard drink = 12oz beer, 8-9oz malt liquor, 4-5oz wine, or 1oz shot of hard liquor.

	0	1	2	3	4	(staff use) (range)
8. How often do you have a drink containing alcohol?	Never	Monthly or less	2-3 times a month	2-3 times a week	4 or more times a week	
9. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	
10. How often do you have five or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

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West Hawaii Community Health Center (WHCHC) Pre-Screening Questionnaire

Name: _____ DOB: _____ Date: _____

At WHCHC, we care about your health. Please take a few minutes to complete these annual screening questions.

- Do you currently use any nicotine or tobacco products? (including cigarettes, chewing tobacco, e-cigarettes, etc.) Yes No

During the 2 weeks, have you been bothered by:

2. Little interest or pleasure in doing things	YES	NO	(staff use) (any +)
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New Patient (Child)

SOCIAL HISTORY: (please circle answers that apply)

Who does patient live with? Both parents Mother Father Step-parent Grandparent Other Relative Foster Care
 Are there pets in the home? None If yes, please circle: Dog Cat Bird Fish Reptile Other _____
 Daycare/Education? Home Babysitter Daycare Preschool School/Grade? _____ College GED Home School
 (travel outside of county) Yes or No If yes, please list where: _____

Smoking status? None Current smoker Exposure to secondhand smoke? Yes or No
 Other - please circle Caffeine use Alcohol use Drug use Exercise Habits Sports Contraception

Cultural/ethnic background List: _____
 Languages spoken? List: _____

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West Hawaii Community Health Center (WHCHC) Adolescent Pre-Screening Questionnaire

Name: _____ DOB: _____ Date: _____

At WHCHC, we care about your health. Please take a few minutes to complete these annual screening questions.

- Do you currently smoke any nicotine or tobacco products? Yes No
- Do you currently use any smokeless nicotine products (chew, vape, e-cig)? Yes No

During the last 2 weeks, have you been bothered by:

3. Little interest or pleasure in doing things	YES	NO	(staff use) PHQ-9
4. Feeling down, depressed, or hopeless	YES	NO	
5. Feeling worried, tense, or anxious	YES	NO	GAD-7

During the last 12 months, have you:

6. Drink any alcohol (more than a few sips)?	YES	NO	(staff use)
7. Smoked any marijuana?	YES	NO	
8. Used anything else to get high? (ANYTHING ELSE includes illegal drugs, over the counter and prescription drugs, and things that you sniff or sniff)	YES	NO	(staff use) CRAFT
9. Have you ever ridden in a car driven by someone (including yourself) who was "high" or had been using alcohol or drugs?	YES	NO	
10. Have you ever been sexually involved with anyone (girl, boy, both)?	YES	NO	

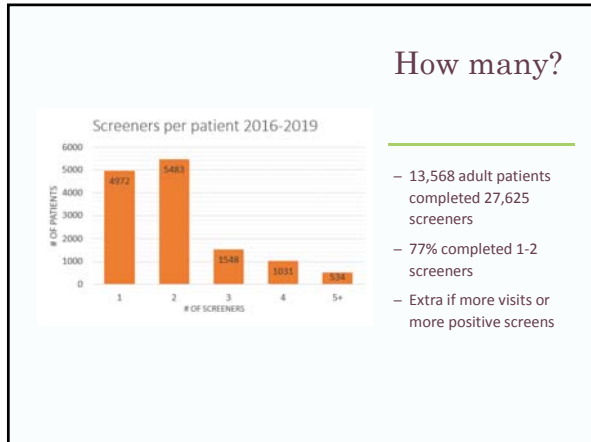
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Screening Data 2016-2019

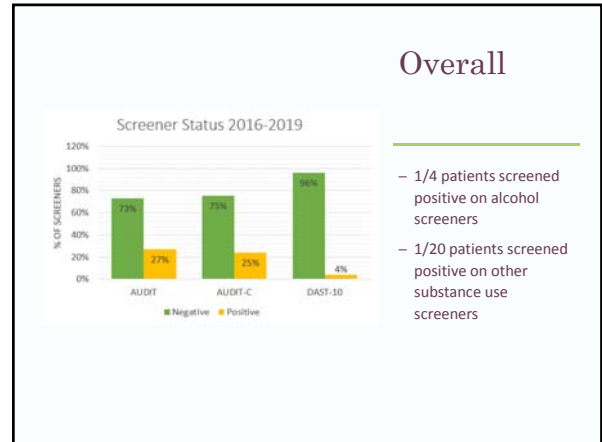
13,568 patients completed 27,625 screeners

Screens	N	% +	Mean	SD	Range
AUDIT	9201	27%	2.92	5.09	0-40
AUDIT-C	8882	25%	1.53	2.16	0-12
DAST	9542	4%	0.36	1.24	0-10

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Breakdown of Positive Screens

July 2016 – October 2019 (40 months)

3,908 unique patients screened positive

- 3,583 Alcohol only (92%)
- 170 Other drug only (4%)
- 155 Alcohol and other drug (4%)

Breakdown

- Roughly 100 patients per month
- *Approximately 5 patients per PCP per month*
- *Approximately 12 patients per BHP per month*

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We screened... now what?

Negative Screen

- **Action**
 - Check in next year (or as indicated)
- **Common misconceptions**
 - Waste of time
 - No issues now = no issues ever

Positive Screen

- **Action**
 - Offer assistance or refer
 - Monitor and support
- **Common misconceptions**
 - Everyone needs specialized treatment
 - No one needs specialized treatment
 - Brief is not enough
 - ...but they drink less than me!

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Case Example: Jane

Background

- Caucasian female in her 70s
- Retired from health care
- Widowed; found husband deceased
- Drank pint of bourbon every other day

Seeing PCP for hypertension, prediabetes


- PHQ-9 = 12 (moderate depression)
- AUDIT = 16 (elevated risk)
- DAST = 0 (no risk)

BH WHO initiated

- "I'm not an alcoholic"
- "I love the taste"
- "I don't want to quit"


Treatment

- Behavioral health: MI + CBT
- Medication management: Mood and AUD

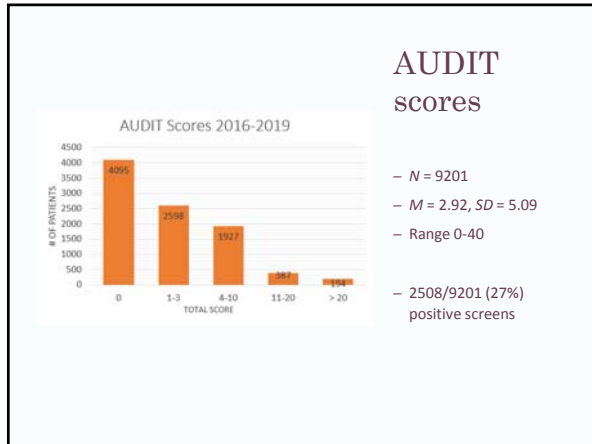


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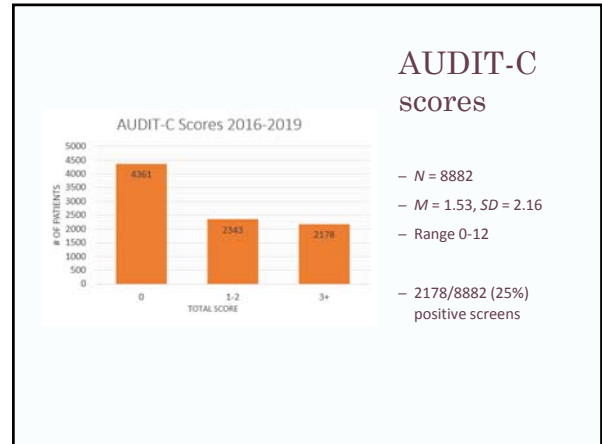
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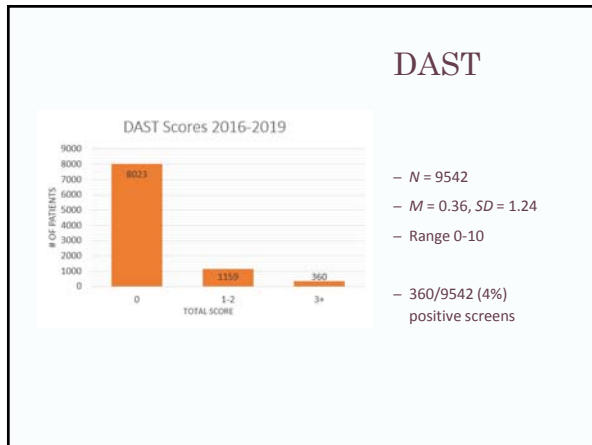
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