

# IMPLEMENTATION OF SINGLE-ITEM ALCOHOL SCREENING AND BRIEF INTERVENTION IN A PRIMARY CARE CLINIC IN WESTERN COLORADO

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## INTRODUCTION

Screening and brief counseling interventions (SBI) for alcohol misuse in primary care is recommended by the US Preventive Services Task Force<sup>1</sup> and ranks as one of the most cost-effective preventive interventions available to healthcare providers<sup>2</sup>. Yet, only one in six individuals has had a conversation with a healthcare professional about alcohol use<sup>3</sup> and the practice of universal alcohol screening and brief counseling has yet to become a standard of care. SBIRT Colorado developed a simple approach to SBI that can be easily implemented in primary health care settings with the following core components:

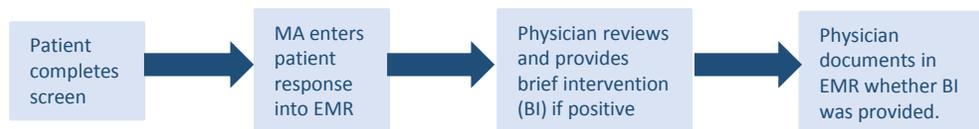
- Routine, universal alcohol screening of primary care patients 18 and older
- A validated single-item question to identify risky alcohol use
- Documentation of screening results in a health record
- For patients who screen positive, interpreting results and sharing with patients

We pilot tested these components in a primary care clinic to identify opportunities and challenges.

**When was the last time you had 4/5 or more drinks in 1 day?**

Question is asked 4 or more drinks for women, and 5 or more drinks for men.

## SBI workflow



## METHODS

### Staff trained

- 3 physicians
- 1 clinic manager
- 2 medical assistants (MAs)

### Patients screened

- New Patients
- Physical exams
- General office visits
- Medical reviews
- Depression/Anxiety visits

### Positive screen – 4/5 or more drinks in one day

- Within past 3 months
- Under 21
- Currently pregnant

### Data collection timeline

6 ½ months

### Evaluation

- Electronic medical record (EMR) data
- Site visit
- Focus group
- Interviews

## RESULTS

- 640 (54%) of 1,190 patients with designated appointment types had a recorded screening result.
- Of the 640, 124 (19%) screened positive.
- Of the 124 screening positive, 59 (48%) received a brief conversation, 20 (16%) did not, and 44 (36%) had no documentation.

Clinic staff and physicians responded positively to the screening process, reporting that:

- Physicians increased the number and frequency of conversations with patients about alcohol use.
- SBI increased patient awareness of how much alcohol is being consumed.
- Physicians and clinic staff reported SBI improved quality of care.

*“It makes the patient honest with the provider about what’s going on in their life.”*  
–Clinic MA

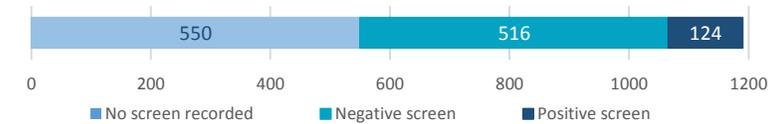
However, even a simple process requires careful planning and monitoring to be effective. Clinics should:

- Test and modify implementation practices.
- Monitor data to track implementation numbers.

It is important to interpret these results in the overall context of recommended prevention services. With limited time and numerous priorities, each primary care visit should be viewed as a potential prevention opportunity.

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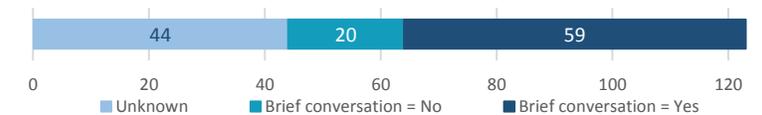
Of those with a screening result, most screened negative.



About one-third of patients with a positive screen exceeded the daily alcohol limit in the week prior to the visit.

Positive Screens	n	%
1-3 months ago	54	43.5
8 to 30 days ago	28	22.6
Within the past 7 days	42	33.9
<b>Total</b>	<b>124</b>	<b>100</b>

Of those with a positive screen, most received a brief conversation.



## RECOMMENDATIONS FOR FUTURE SBI IMPLEMENTATION:

- Promote a simple SBI process.
- Identify multiple options for screening questions.
- Identify and pilot test the best way to integrate SBI into clinic flow.
- Identify what information to track and set up a tracking system.
- Provide on-going training; including information about billing and reimbursement.

<sup>1</sup> U.S. Preventive Task Force [Internet]. Alcohol Misuse: Screening and Behavioral Counseling Intervention in Primary Care. 20113-May. Available from: <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/alcohol-misuse-screening-and-behavioral-counseling-interventions-in-primary-care>

<sup>2</sup> Soldberg, U, Maciosek, MV, Edwards, NM. Primary care intervention to reduce alcohol misuse: Ranking its health impact and cost effectiveness. Am J Prev Med. 2008; 34(2): 143-152.

<sup>3</sup> Centers for Disease Control [Internet]. Most health care providers don't talk about alcohol, even when patients drink too much. 2014-January. Available from: <http://www.cdc.gov/media/releases/2014/p0107-alcohol-screening.html>