

Integrating Adolescent SBIRT Training In Nursing, Social Work and Interprofessional Education

An Analysis of Barriers and Facilitators Utilizing the CFIR Model



Institute for Research, Education & Training in Addictions

Project Team

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**Project
Sponsor:**



Background

- ▶ Support exists for screening and brief intervention to identify and address alcohol and related problems
- ▶ Adolescent application of SBI is growing and promising
- ▶ Screening and brief intervention skill development is rarely integrated into the professional education of future practitioners

Background

- ▶ NORC led a multi-year learning collaborative to infuse adolescent SBIRT curriculum in social work, nursing, & interprofessional programs (Learn more: sbirt.webs.com)
 - Partnered with the Council on Social Work Education and the American Association of Colleges of Nursing
 - NORC & IRETA collaborated on retrospective analysis using CFIR model to identify barriers/ facilitators to implementation of adolescent SBIRT curriculum

Materials and Methods

- ▶ Sites assessed– 10 individual schools infusing adolescent SBIRT curricula
 - Sites included undergraduate/graduate nursing & social work programs
- ▶ Data– 150 statements from implementation progress reports, learning collaborative & implementation calls

Materials and Methods

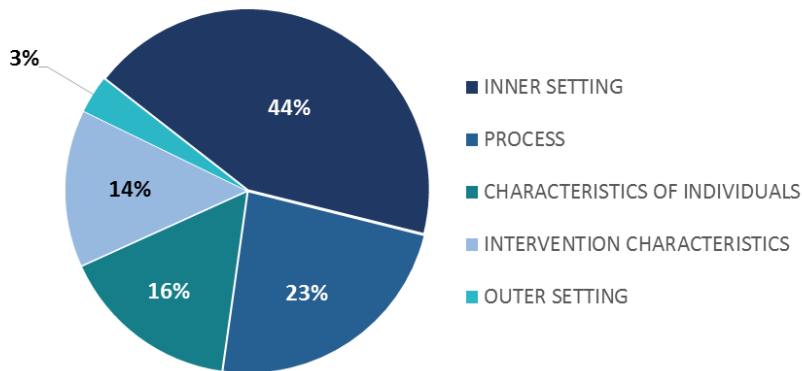
- ▶ Two raters reviewed/categorized statements using Consolidated Framework for Implementation Research
 - Implementation science model to organize implementation barriers and facilitators
 - CFIR– outlines domains/constructs related to effective implementation
- ▶ Domains
 - I. **Inner Setting:** internal structural, political, cultural context
Ex– networks, culture, climate, readiness for implementation
 - II. **Process:** steps toward use of intervention
Ex– planning, engaging, reflecting & evaluating
 - III. **Characteristics of Individuals:** characteristics of those involved w/ implementation
Ex– individual beliefs, self–efficacy, personal attributes
 - IV. **Intervention Characteristics:** attributes of intervention influencing implementation
Ex– design, cost, evidence, advantage, evidence
 - V. **Outer Setting:** organization’s external economic, political, social context
Ex– peer pressure, external policies/ incentives

Results

DOMAIN	# STATEMENTS	%
INNER SETTING	65	43%
PROCESS	35	23%
CHARACT. OF INDIVIDUALS	24	16%
INTERVENTION CHARACT.	21	14%
OUTER SETTING	5	3%
TOTAL	150	

- ▶ Barriers & facilitators were identified in several key stakeholder groups– educators, field supervisors, preceptors, and administrators
- ▶ Elements of CFIR components of Inner Setting, Process and Characteristics of Individuals were most common
- ▶ Intervention Characteristics and Outer Setting factors uncommon

NUMBER OF STATEMENTS BY DOMAIN



Results– Inner Setting

“Material in the Learner’s Guide helped instructor’s feel more confident in adding it into their course.”

“The main challenges have been finding time for MSW and NP students to collaborate and finding room in an already packed curriculum.”

“A major barrier is if students do not see it in practice already... uninformed nurses at clinical sites become a barrier.”

- ▶ Inner Setting= 65 / 150 (41%)
- ▶ Readiness for Implementation
 - Availability of Resources
 - i.e.– time, space, technology
 - Access to Knowledge
 - Lack of faculty/supervisor training → limited utilization of SBIRT by student (barrier)
 - Training/ materials easily obtainable → increased implementation (facilitator)

Results– Process

- ▶ **Process= 35 / 150 (23%)**
- ▶ **Reflecting & Evaluating**
 - Progress monitored → adjustments made & practices improved
- ▶ **Planning**
 - Methods developed in advance → better outcomes
 - Key factor– engaging appropriate individuals/ stakeholders

“Developing online training that participants can complete at their own pace has helped rectify the situation in getting more professionals engaged.”

“[We] discussed barriers with each discipline including how scheduling courses and field placements worked between nursing and social work students... It was helpful for the students to share and see differences.”

Results– Characteristics of Individuals

▶ Characteristics of Individuals= 24/150 (16%)

▶ Knowledge/Beliefs & Personal Attributes

- Effect of individuals' motivation, attitude, values, etc.
- Ex: faculty values intervention→ requires coursework
→ student participation

“Student buy-in: if not necessary for grade, then difficult to get students to complete.”

▶ Stage of Change

- Individual phase– experience/familiarity with intervention facilitates implementation

“...we have faculty already doing work in substance use and prevention–so [it's] easy to get buy-in.”

“[There have been] positive reviews, clinical faculty has used it and like it– it will be widely administered to their undergraduate nursing students as part of clinical simulation.”

“Variation depends on the faculty... levels of expertise and comfort with SBIRT.”

Conclusions

- ▶ Pre-service education is critical to SBIRT implementation
- ▶ The CFIR model identified barriers & facilitators related to curriculum integration across programs
 - Primarily within the Inner Setting, Process & Characteristics of Individuals
- ▶ Findings can inform other institutions' approaches to implementing SBIRT education
- ▶ Findings can be used by professionals who provide guidance on educational standards/ curriculum infusion

Thank you!

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- ▶ Dawn Lindsay, PhD, Sarah King, Rachael Vargo, Brayden Kameg, Holly Hagle, PhD, Piper Lincoln, Hildie Cohen, MA, MEd, Tracy McPherson, PhD, Sabrina Bauroth, MSW. (2017). *Barriers to and Facilitators of Integrating Adolescent SBIRT Training in Nursing, Social Work and Inter-professional Education*. Oral presentation at the International Network on Brief Interventions for Alcohol & Other Drugs (INEBRIA) Conference "Screening and brief intervention at the intersection of research, policy and practice: Advancing knowledge and meeting new challenges." September 14–15, 2017. New York, NY.