

# Implementation of SBIRT in an Emergency Department without Additional Resources

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Friday, September 20, 2013

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## Program

**Screening, Brief Intervention** and warm-handoff **Referral** to:

- reduce overdose deaths through identification of patients who are at increased risk for overdose, and
- reduce healthcare utilization through intervention with patients to reduce unhealthy substance use.

# Partners

**Allegheny County Overdose Prevention Coalition (ACOPC)**

**Allegheny Health Network**

**Allegheny General Hospital, Emergency Department**

**University of Pittsburgh School of Pharmacy**

**Program Evaluation and Research Unit/PERU**

## **Community Support Partners**

- **Re:Solve Crisis Network**
- **Pyramid Healthcare, Inc.**
- **POWER - PA Organization for Women in Early Recovery**



# Preparing a Safe Landing

## TRAINING

- Nurses, Medics, Residents
- Overview & Introductory Training
- Booster Sessions
- Advanced Training
- Staff Feedback

# Preparing a Safe Landing

**TRAINING**

## **TOOLS**

- Embed Brief Screen in Triage Note
- Assessment in EMR
- Reporting Systems

# Preparing a Safe Landing

**TRAINING**

**TOOLS**

## **CONNECTIONS**

- re: Solve Crisis Network
- Pyramid Healthcare, Inc.
- POWER

# Preparing a Safe Landing

**CONNECT**

**TRAINING**

**TOOLS**

## **REIMBURSEMENT**

- Medicaid Pilot with payors
- Billing, Coding & Reimbursement Guidelines



# Safe Landing Statistics

	Jan 2011 through Apr 2013	
Aged 18+, Triaged Visits	66,711	
Individuals with Positive Brief Screen	12,615	20% Brief Screened Positive
Hx Overdose	458	4% Positive for Hx of Overdose
Patients Assessed with A.S.S.I.S.T	7,996	63% of Positive Brief Screens Assessed
Brief Interventions	2,058	26% of Assessed Patients had BI
"Referrals"	137	7% of BI result in Referral Recommendation

# Lessons for a Safe Landing

- Ensure organization is a “good risk” for implementation
- Create a “Greater Purpose” for the project
- Engage several leadership layers
- Develop and use a Performance Measurement System
- Develop and use an improvement process
- Tailor training to the emerging need

**TRAINING**

**CONNECT**

# Lessons for a Safe Landing

- DO not have a “project” mentality – you must persevere to succeed.
- Routine staff turnover requires on-going, resource conservative training program.
- Build supportive relationships by letting others know what you are doing (payors, community support services)

**TRAINING**

**CONNECT**

## Referral Linkages

- Increasing awareness and connections with community treatment and recovery support providers
- POWER and Pyramid intake officers embedded in Emergency Department two days a week (Pilot program – August-September-October 2013)

**Continuing Forward in 2013**

## **Staff Education**

- Additional Assessment and BI Skill Training for ED Nursing and Medic Staff (Jan-Feb 2013)
- ED resident training

**Continuing Forward in 2013**

## **Social Services Staff**

- Incorporating Social Services staff to support nursing staff with Safe Landing Processes: ASSIST, Brief Intervention, Referral to Treatment

**Continuing Forward in 2013**

## **Overdose Reduction**

- Enhance overdose prevention education for patients
- Naloxone prescribing

**Continuing Forward in 2013**

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***Thank you***