

## Acknowledgment

This project is supported in part by funds from the Division of Nursing (DN), Bureau of Health Professions (BHPr), Health Resources and Services Administration (HRSA), Department of Health and Human Services (DHHS) under cooperative agreement number UD7HP25060. The information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by the DN, BHPr, HRSA, DHHS or the U.S. Government.

#### **Declaration of interest**

The authors report no declarations of interest.

#### The Team



Kathryn Puskar, DrPH, RN, FAAN, Professor of Nursing and Psychiatry, Associate Dean, *Project Director* 



Ann M. Mitchell, PhD, RN, FAAN Professor Vice-Chair for Administration Health and Community Systems



Susan A. Albrecht, PhD, RN, CRNP, FAAN Associate Professor Associate Dean for External Relations Health and Community Systems



Holly Hagle, PhD, Institute for Research, Education, and Training in Addictions [IRETA], Curriculum Specialist



Dawn Lindsay, PhD, Institute for Research, Education, and Training in Addictions [IRETA], Evaluator

#### The Team (continued)



Linda Rose Frank, PhD, MSN, CS, ACRN, FAAN Associate Professor Graduate School of Public Health, Faculty Expert



Heeyoung Lee, PhD, NP, Assistant Professor and Director of the Primary Care Psychiatric Nurse Practitioner Program, *Faculty Expert* 

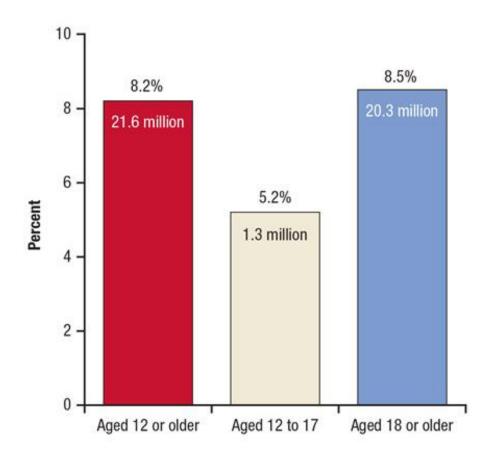


Marie Fioravanti, DNP, RN, Instructor, Project Faculty Nurse Expert



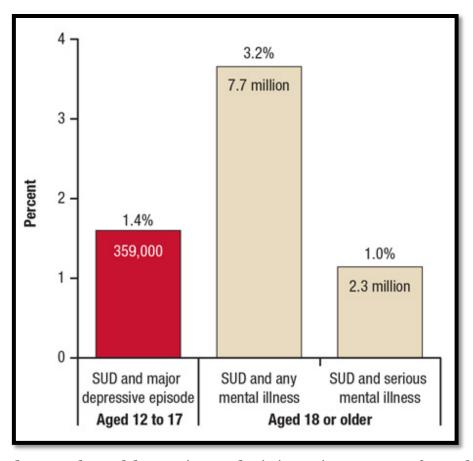
Irene Kane PhD, RN, CNAA, EP-C, Associate Professor of Nursing, Project SBIRT Expert

#### Fact #1. Substance use disorder in the past year



Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (September 4, 2014). *The NSDUH Report: Substance Use and Mental Health Estimates from the 2013 National Survey on Drug Use and Health: Overview of Findings*. Rockville, MD.

#### Fact #2. Substance use disorder and mental issue



Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (September 4, 2014). *The NSDUH Report: Substance Use and Mental Health Estimates from the 2013 National Survey on Drug Use and Health: Overview of Findings.* Rockville, MD.

#### Fact #3. Cost of substance abuse

	Health care	Overall
Tobacco	\$130 billion	\$295 billion
Alcohol	\$25 billion	\$224 billion
Illicit drugs	\$11 billion	\$193 billion

http://www.drugabuse.gov/related-topics/trends-statistics

## Fact #4. Medical consequence of substance use

- HIV/AIDS, Hepatitis, and other infectious disease
- Cardiovascular disease
- Stroke
- Cancer
- Hepatitis
- Lung disease

#### Fact #5. Challenges in rural areas

- Vulnerable population
  - Older and poorer
  - Chronic disease (e.g., obesity, diabetes, hypertension)
- Substance use and comorbid medical conditions
- Limited access to treatment and resources

## Interprofessional Collaborative Practice

## Based on the Institute of Medicine (IOM) recommendations

■ The goal of this interprofessional learning is to prepare all health professions to - deliberatively work together with the common goal of building a safer and better patient-centered and community/population oriented U.S. health care system.

Source: Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, D.C.: Interprofessional Education Collaborative.

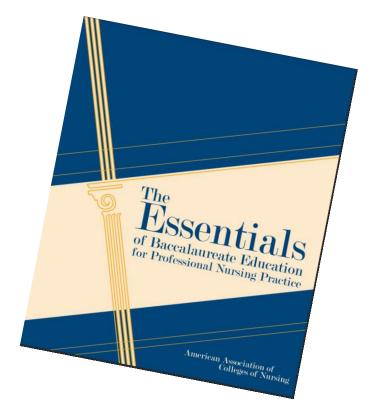
#### **AACN Essentials for Baccalaureate Nursing Education**

American Association of Colleges of Nursing (AACN)

Essential VI:

Interprofessional Communication and Collaboration for Improving Patient Health Outcomes

Essential VIII:Professionalism and Professional Values



#### Purpose of this presentation

 To present an interprofessional practice model to educate rural healthcare teams and apply interprofessional practice to substance use/misuse screening through the use of online technology

## Overview of project

- A pre-post test design with a convenience sample obtained primarily from rural mental health facilities located in Pennsylvania, Western Virginia, and Ohio.
- Implemented between 2012 and 2015

#### Cont'd

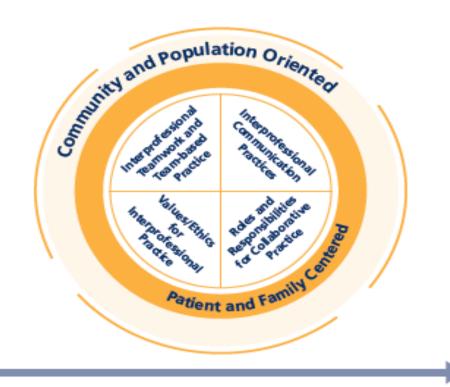
1.5 Hours 0.5 Hours 0.5 Hours 1.5 Hours 1.5 Hours 1 Hour 1.5 Hours Case Interprofessional **Technical** Modules **Evaluation** Blog Dialogues with Site Visit **Simulations Assistance** Site Cases Practice To help us learn Join our online We'll assist you We'll ask for your Using a self-paced We'll lead you Apply the model about the community for with issues, cases or feedback on online module, though scenarios to you've learned to specific patients interprofessional situations needed questionnaires and participants learn try out your new blinded cases from served at your collaborative to foster improved during a focus about substance skills. your site. site and respond practice updates, patient outcomes. group. use screening and to the needs of videos, and interprofessional your healthcare emergent topics roles. staff and patient from other sites. population. 8 total hours over 3 months

# **Screening**, **Brief Intervention**, and **Referral to Treatment (SBIRT)**

- Public health model provides universal screening
- Detecting risky or hazardous substance use before the onset of abuse or dependence
- Short, valid and reliable evidence-based used within the time constraints of a health visit
- Brief set of questions to assess patient's alcohol and other drug use risk level

## **Interprofessional Collaborative Practice Model**

FIGURE 6: Interprofessional Collaborative Practice Domains



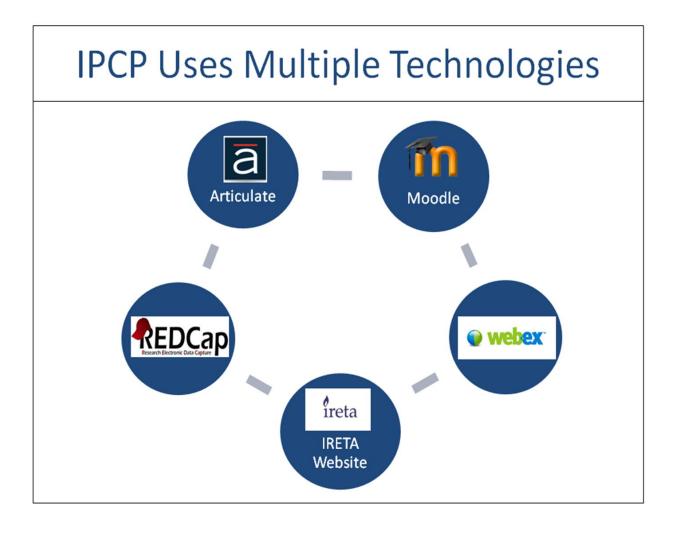
The Learning Continuum pre-licensure through practice trajectory

Source: Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for Interprofessional collaborative practice: Report of an expert pane. Washington, D.C.: Interprofessional Education Collaborative.

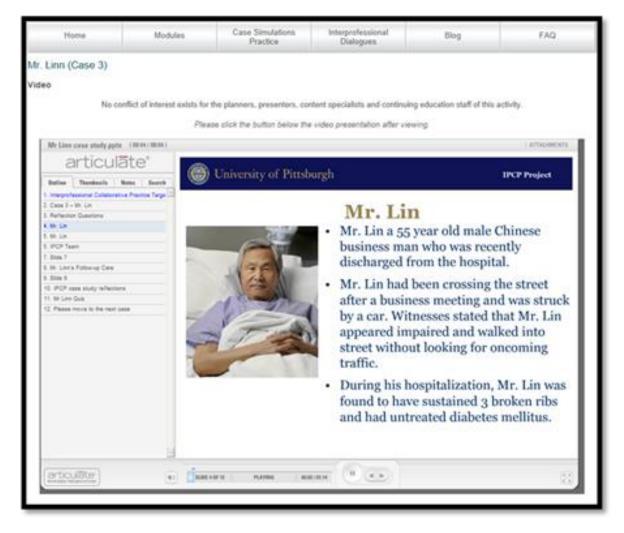
#### **Online Module Presentations**

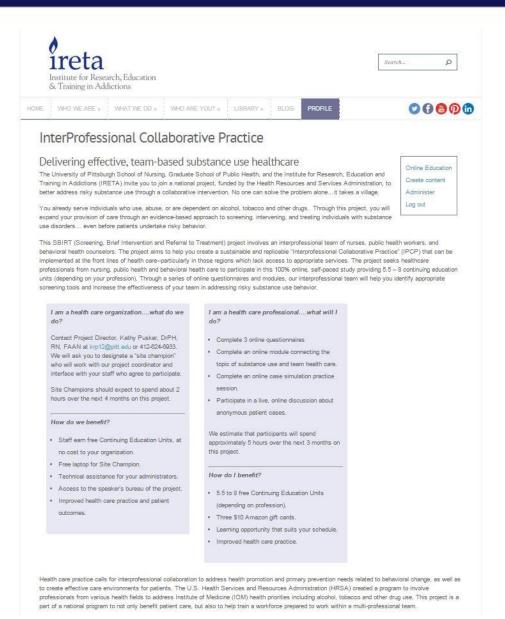
- 1. Intro to Project Partners
- 2. Continuum of Use
- 3. SBIRT
- 4. Motivational Interviewing Strategies
- 5. Practicing IPCP
- 6. Case Studies

#### **Technology**

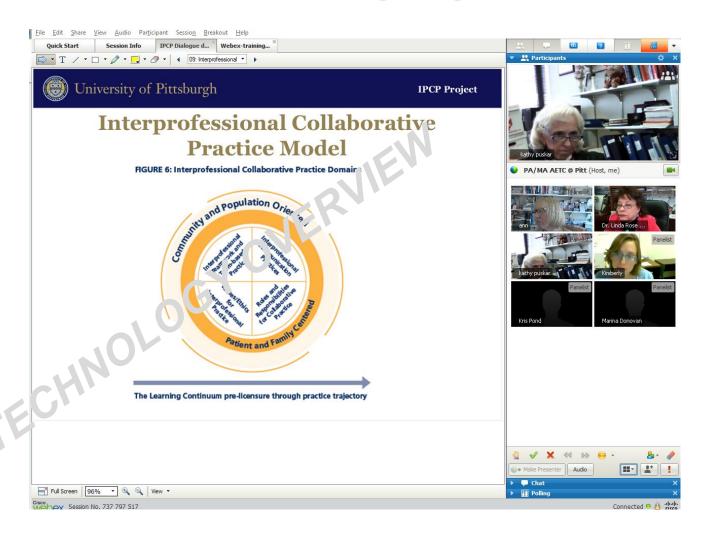


## Case simulation practice





#### IPCP diaglogue



Home	Modules	Case Simulations Practice	Interprofessional Dialogues	Blog	FAQ
------	---------	------------------------------	--------------------------------	------	-----

Your progress (?

#### Home

This online course is approved for 5.5 ANCC Nursing CEUs, 8 SW CEUs, 8 PA CADC CEUs

Click here for course instructions

On this website, you will participate in the online modules, practice-based case simulations, and interprofessional (IP) dialogues with cases from your own organization.

Site visits, blog, technical assistance and evaluation are ongoing activities.

GIFT CARDS: Receive a \$10 Amazon.com gift card as a thank you for completing the pre-course survey, a second \$10 Amazon.com gift card for completing the online modules, the case studies, and their surveys. You'll receive a third \$10 Amazon.com gift card after completing the dialogue and survey.

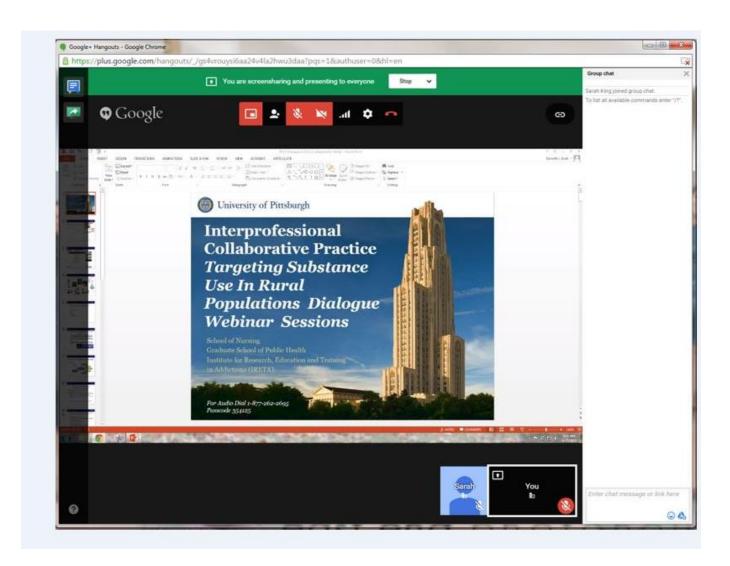
CONTINUING EDUCATION CERTIFICATION: Upon completion of the full course, you will receive your continuing education certificate by email for Nursing or CADC credits, and via postal mail for Social Work credits.

As a result of your interaction with these practice-based learning activities, you and your colleagues will help to improve patient outcomes.

Click here for project overview.

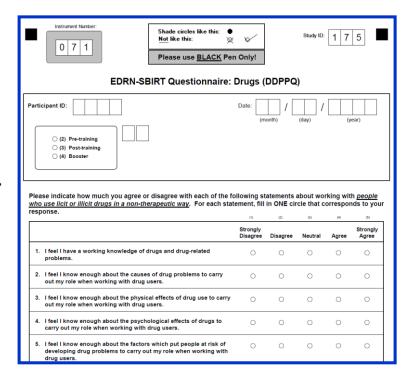
Our ability to award contact hours for these activities expires April 22, 2015.

QUESTIONS? Visit our FAQ or E-mail ipcp@ireta.org - we will respond within 24 hours



#### Drug and Drug Problems Perceptions Questionnaire (DDPPQ)

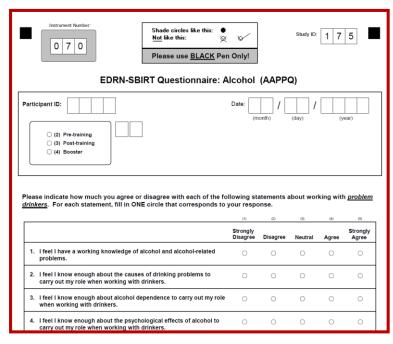
- **Motivation**: Example: "I feel that there is little I can do to help drug users."
- Work Satisfaction: Example: "I want to work with drug users."
- Task-Specific Self-Esteem: Example: "In general, I have less respect for drug users than for most other patients/clients I work with."
- Other subscales:
  - Role Adequacy
  - Role Legitimacy
  - Role Support



Watson, H., Maclaren, W., Shaw, F., Nolan, A. (2003). Measuring staff attitudes to people with drug problems: The development of a tool. Scottish Executive, Drug Misuse Research Programme.

# Alcohol and Alcohol Problems Perceptions Questionnaire (AAPPQ)

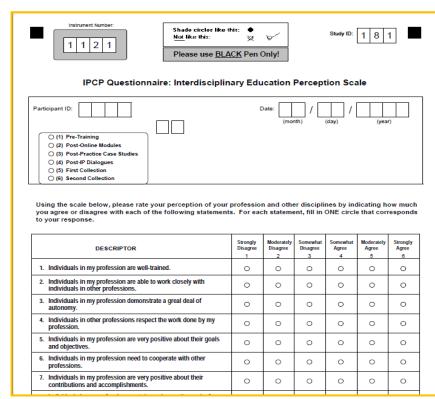
- Role Adequacy: Example: "I feel I have a working knowledge of alcohol and alcohol related problems."
- **Role Legitimacy**: Example: "I feel I have a clear idea of my responsibilities in helping drinkers."
- **Role Support**: Example: "If I felt the need when working with drinkers I could easily find someone who would help me clarify my professional responsibilities."
- Other subscales:
  - Work Satisfaction
  - Task-Specific Self-Esteem
  - Motivation



Shaw, S., Cartwright, A., Spratley, T. and Harwin, J. (1978). Responding to Drinking Problems. London: Croom Helm.

#### IPCP Questionnaire: Interdisciplinary Education Perception Scale (IEPS)

- Professional Competence and Autonomy: Example "Individuals in my profession are extremely competent."
- Perceived Need for Professional Cooperation: Example "Individuals in my profession must depend upon the work of people in other professions."
- **Perception of Actual Cooperation:**Example "Individuals in my profession think highly of other related professions."
- Understanding Value of other Professions: Example "Individuals in my profession make every effort to understand the capabilities and contributions of other professions."



Luecht et al, (1990, Journal of Allied Health, 181-191) with permission.

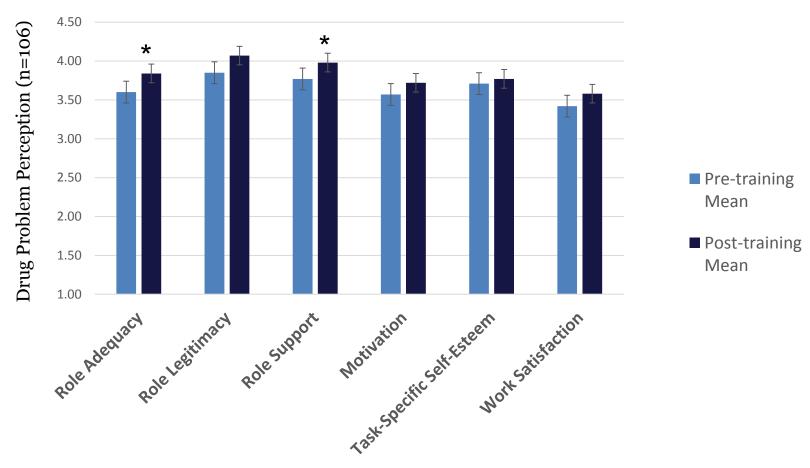
## **Analysis**

- A total of 240 participants enrolled in the study (completed the pre-training survey). Of these, 106 successfully completed the educational intervention program and post-training surveys.
- Statistical analyses were performed using SPSS 21 (Armonk, NY: IBM Corp.).
- Descriptive statistics and Linear mixed modeling was used to analyze data

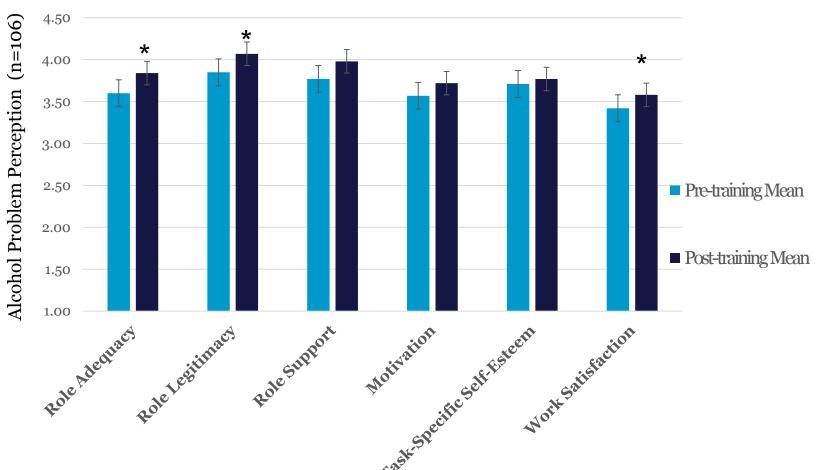
#### Demographic information (n=106)

	Mean (±SD) or n (%)
Age (years)	39.9 (±13.6)
Gender	
Women	90 (85%)
Men	16 (15%)
Race/Ethnicity	
White	99 (93.4%)
Black	5 (4.7%)
Others (e.g., Native Hawaian/other Pacific Islander)	2 (1.9%)
Health care professionals	
Nurses	37 (34.9%)
Counselors	16 (15.1%)
Social workers	6 (5.7%)
Substance abuse professionals	11 (10.4%)

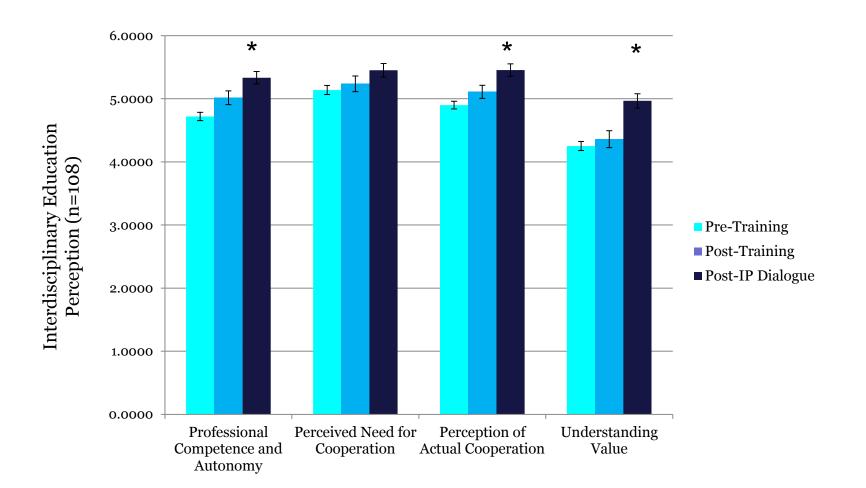
#### Drug problem perception



#### Alcohol problem perception



#### **Interdisciplinary Education Perception**



## Challenge related technology

- Some participants found it challenging to use the online platform because of their limited technical skills and ability to use (and access) the equipment needed for this type of program.
- Some participants were not familiar with the webinar platform and had difficulty navigating the project due to their lack of knowledge about web-based platforms.
- Some cases ad to use their home computers because work computers were not available.

#### **Conclusion**

- Online program improved the participants' competence to work with people with substance use disorder.
- Health professionals can collaboratively prevent or lower the risks of alcohol and substance use, which impact on the quality and safety of care for patients.

#### Cont'd

- The benefit of using technology to overcome limited access to training and educational resources and accessibility in rural settings needs to be considered.
- Nurse managers' active involvement to facilitate IPCP for nurses and their employers can sustain IPCP in rural clinical settings.



# Sigma Theta Tau International Honor Society of Nursing®

#### **Evidence-Based Practice Award**



- •Advances evidence-based practice through work in integrating knowledge and evidence in practice.
- •Influences health of individuals and communities by brining together professionals from various disciplines and roles.
- •Engages researchers, clinicians, patients and families.

#### **Screening Manual for Nurses**

- Trainer's Manual
- Ring of Knowledge Cards
- Handouts
  - Small Group Scenarios
  - Role Play Scenario
- Power Points
  - Initial Training
  - Review/Refresher Training

# Substance Use Education for Nurses SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT) University of Pittsburgh School of Nursing

© 2014, University of Pittsburgh. All Rights Reserved.

#### **Screening Manual for Nurses**

Developed by the University of Pittsburgh School of Nursing

Train Nurses

• **Free** Download:

http://www.nursing.pitt.edu/academics/ce/SBIRT\_teaching\_resources.jsp

#### **Online Module**

To enroll: nursing.pitt.edu/academics/ce/SBIRT.jsp

- •SBIRT Overview and History
- Screening Assessments
- Video Case Studies



## **SBIRT Teaching Resources**



#### SBIRT\* Teaching Resources

\*Screening, Brief Intervention and Referral to Treatment (SBIRT)

More than half (52%) of Americans aged 12 or older report being current drinkers of alcohol, 27% report current use of a tobacco product, and 9% report illicit drug use (Substance Abuse and Mental Health Services Administration [SAMHSA], 2013). Nurses treating patients in a variety of healthcare settings will encounter individuals who use alcohol, tobacco, and other drugs.

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a universal screening and prevention approach. An evidence-based practice, SBIRT targets individuals who use alcohol, tobacco, and other drugs but are not yet dependent on those substances. Any level of dirinking or drug use may complicate an individual's health condition, work, and family life (Centers for Medicare and Medicaid Services (CMS], 2013). SBIRT is an approach nurses can use to provide effective risk reduction and intervention prior to a patient's need for more extensive treatment.

The Substance Use Education for Nurses: SEIRT curriculum has been used to successfully train over 500 undergraduate student nurses at the University of Pittsburgh. We provide the following resources to you free of charge with the hope you will utilize them in training and education of student and professional nurses, along with other healthcare professionals.

- 1. Trainer's Manual
- 2. Ring of Knowledge (ROK) Cards
- 3. Substance Use Education for Nurses PowerPoint
- 4. Substance Use Education for Nurses Handout
- 5. Review/Refresher Powerpoint
- 6. Review/Refresher Handout



http://www.nursing.pitt.edu/continuing-education/sbirt-teaching-resources