Improving Screening for Substance Use Disorders in Primary Care Clinic Using SBIRT

U. Nnadozie, DNP, MSN, APRN, PMHNP-BC, FNP-C, J. Grimm, DNP. APRN, ACNP-BC, CNE[1], and C. Ezeokoye, DNP. FNP-C, PMHNP-BC, RN[2]
[1]Touro University Nevada School of Nursing, Henderson, NV.

More than 20 million people aged 12 years and above have substance use disorder (SUD) in the United States. It is estimated that in 2020, $42 billion was spent to treat SUD. At the project site, there is inconsistent use of Screening, Brief Intervention and Rereferral to Treatment (SBIRT) screening tool in screening adolescents and adult patients for alcohol and substance use disorders and this may contribute to poor health outcomes.

This quality improvement project aimed to improve the screening for SUD using SBIRT screening tool and initiate appropriate actions based on CMS guidelines for substance use disorder using SBIRT. This was a pre- and post-intervention project.

A goodness of fit chi-square showed that the *chi-square* statistics for pre and post-implementation referral were 32 and 87.548, respectively, with $p<0.001$, implying that the results are significant. On the other hand, the pre-implementation screening and post-implementation screening showed a chi-square statistic of 45.5 and 40.75, respectively, with a $p<0.001$, implying that the change in the number of patients screened after the introduction of the SBIRT tool was statistically significant. There was an increase and improvement in the number of patients screened for substance use disorder (SUD) and those referred for brief intervention and treatment.

The results demonstrated that with effective use of SBIRT, there would be an improvement in the SUD screening and initiation of appropriate intervention to improve the health outcomes.

Keywords: Substance use disorder, Screening, Primary Care, SBIRT, Knowledge, Educational Session, Quality Improvement.