



Massachusetts SBIRT News



Summer 2013, Issue 3

Screening, Brief Intervention, Referral and Treatment (SBIRT)

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www.mass.gov/dph/bsas

Find SBIRT under Prevention Information

MASBIRT TTA and BNI-ART Institute Join Forces to Spread SBIRT Statewide

Massachusetts is fortunate to have two expert SBIRT organizations that provide training and technical assistance around the state: MASBIRT Training and Technical Assistance (TTA) at Boston Medical Center and the BNI-ART Institute at the Boston University School of Public Health. Now these two organizations will work together under the MASBIRT TTA umbrella to expand SBIRT in the Commonwealth.

As healthcare reforms and new payment models are more widely implemented, the need to identify unhealthy alcohol and/or drug use will become more important to healthcare organizations. SBIRT may help health care providers reduce negative health consequences from heavy or binge drinking, or misuse of prescription medications or illicit drugs. In addition, catching signs of dependence and intervening early may prevent or minimize lifelong health complications for some patients.

The changing healthcare environment should create more demand for building effective and sustainable SBIRT programs which will require this elevated, joint effort. Both groups bring no shortage of experience, knowledge and ability to this exciting collaboration.

Prescription Painkiller Overdoses Increase for Women



The number of prescription painkiller overdose deaths increased fivefold among women between 1999 and 2010, according to July's edition of *CDC Vital Signs*.

Men are more likely to die of a prescription painkiller overdose, but since 1999 the percentage increase in deaths was greater among women (400% in women compared to 265% in men).

More than 6,600 women, or 18 women every day, died from a prescription painkiller overdose in 2010.

To see the full Vital Signs edition:
<http://www.cdc.gov/vitalsigns/PrescriptionPainkillerOverdoses/index.html>

Women between the ages of 25 and 54 are most likely to go to the emergency department because of prescription painkiller misuse or abuse.



National Screening, Brief Intervention & Referral to Treatment ATTC

www.ATTCnetwork.org/sbirt

MASBIRT TTA and BNI-ART Institute Join Forces

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MASBIRT TTA, an outgrowth of the SAMHSA-funded MASBIRT project, has over six years' experience with screening and intervening with health care patients in hospital beds, emergency departments and outpatient clinics in the Boston area. Its staff and consultants continue to train and advise a variety of health care and other professionals in a number of settings on implementation and continuation issues.

The BNI-ART (Brief Negotiated Interview-Active Referral to Treatment) Institute has provided SBIRT training and consultation nationwide since 1993. Though its primary expertise has been in emergency departments, BNI-ART trainers have expanded their practice into variety of settings around the US and provided ongoing training with the MASBIRT project. The BNI algorithm has been widely used by many projects and in products produced by both groups. SAMHSA recognized the BNI-ART Institute as a part of their National Registry of Evidence-based Programs and Practices (NREPP).

MASBIRT TTA provides training, on-going coaching, skills booster sessions, implementation protocol development and/or technical assistance for starting, maintaining and sustaining SBIRT operations in Massachusetts.

New MASBIRT.org

provides access to:

- More information about SBIRT and MASBIRT TTA;
- Resources for providers and patients;
- Local and national SBIRT resources;
- Insights on SBIRT and special populations

The US Preventive Services Task Force updated its Grade B recommendation that clinicians screen adults aged 18 years or older for alcohol misuse and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse.

Virginia A. Moyer, MD, MPH, on behalf of the U.S. Preventive Services Task Force. Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse: U.S. Preventive Services Task Force Recommendation Statement. Published at www.annals.org on 5/14/13.

MASBIRT Training and Technical Assistance

MASBIRT TTA can provide your site with these **FREE** services:

Grand Rounds on the intersection of alcohol, drugs and health, and importance of early identification;

Training and on-going skills coaching

For all staff levels — professional and administrative. Train-the-trainer programs are also available;

Guidance with clinical protocol development; screening instruments and methods, brief intervention strategies;

Help with administrative aspects, such as data collection strategies, documentation protocols; and revenue generation potential;

Identification and development of resources for patients who need specialty care, including medication assisted treatment for alcohol and opioids; and

Expert guidance for work with special populations.

Contact MASBIRT TTA :

617-414-3749

Or e-mail: MASBIRT@bmc.org



SAVE THE DATE

Implementing SBIRT to Address Unhealthy Substance Use in Your Medical Home

November 22, 2013

MASBIRT TTA
Statewide Meeting



Fetal
Alcohol
Spectrum
Disorders

Center for
Excellence

www.fascenter.samhsa.gov

CAREERS OF SUBSTANCE

Supporting the Massachusetts Substance Use
and Addictions Workforce

Central resource for anyone
involved in preventing, intervening,
treating, and supporting recovery
from addictions in Massachusetts.

Look for career information,
upcoming trainings around the
state, links to professional
organizations and more.

maworkforce.adcare-educational.org

Fetal Alcohol Spectrum Disorders Conference Brings People Together!

The April statewide conference, "Why FASD is Relevant to You!" which was sponsored by the Massachusetts Department of Public Health drew families, human service providers, staff of state agencies, and addiction professionals.

The day-long meeting addressed the impact prenatal alcohol use can have on individuals across the life span. Speakers included a diagnostic pediatrician from Children's Hospital who discussed the science and developmental implications, an obstetrician from Massachusetts General Hospital, a birth mother of three children with an FASD, and a panel of adoptive parents of children with an FASD.

Workshops included "Screening for FASD Risk" and "Interventions for Individuals Across the Life Span," as well as conversations with families, a young adult with FAS, and a birth mother.

A social worker from the Massachusetts Department of Children and Families summed up many attendee comments: "This was the best training I have ever been to over the past 24 years of social work! The format of being able to choose different seminars, the personal stories of the people who presented, and the variety of presenters was perfect. Their stories have continued to resonate with me and with co-workers who attended and we find ourselves talking about it days later."

- There is no known safe amount of alcohol to drink while pregnant.
- There is no safe time during pregnancy to drink.
- There is no safe kind of alcohol.

**CDC urges pregnant women
not to drink alcohol
any time during pregnancy.**

Another attendee said: "Hearing a birth mother speak about her own childhood trauma, early onset of her disease of alcoholism, her drinking through her pregnancies and the damage it did to her children, her recovery, and how her son with FAS forgave her, was just amazing. Seeing adoptive parents embrace this birth mother was one of the most moving sights I have even seen! "

- For information about the FASD Task Force, focused on prevention (which includes regular universal SBIRT with women of childbearing age) and on addressing/supporting the continuing needs of families;

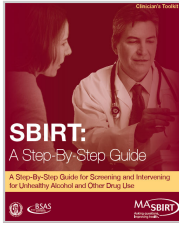
or

- For training on Screening for FASD Risk and Interventions;

Contact Enid Watson, MDiv
Massachusetts FASD State Coordinator
Institute for Health & Recovery
617-661-3991
enidwatson@healthrecovery.org

FOR PRIMARY CARE PROVIDERS

SBIRT: A Step by Step Guide



This toolkit was developed with input from primary care physicians and nurse practitioners, and provides a rationale for SBIRT.

It lays out two screening approaches, pointers on providing feedback and eliciting change talk through brief interventions, and suggested resources for making referrals and obtaining consents.

maclearinghouse.com/

Order number SA3522

To learn more contact:

Carol Girard
Coordinator, SBIRT Programs
Bureau of Substance Abuse Services
MA Department of Public Health

Carol.D.Girard@state.ma.us



MASSACHUSETTS
SUBSTANCE ABUSE INFORMATION
AND EDUCATION HELPLINE

800-327-5050 • HELPLINE-ONLINE.COM

SBIRT is part of National Prevention Strategy

The US Surgeon General's office released the National Prevention, Health Promotion, and Public Health Council's 2013 Annual Report on July 1. The Surgeon General chairs the Council, which involves 20 Cabinet and other Federal agency heads.

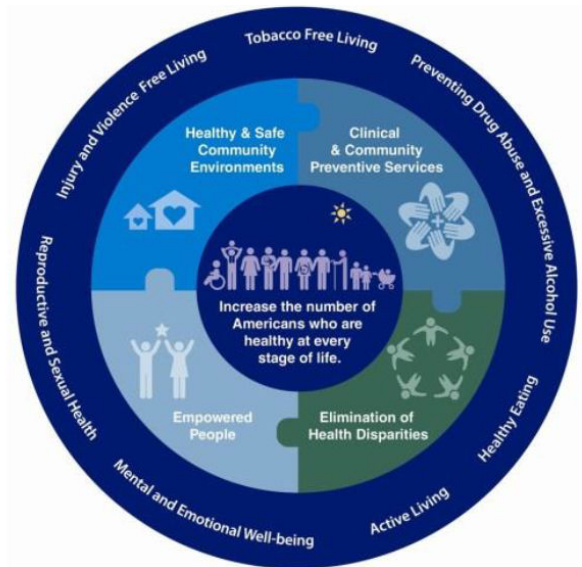
This annual report provides an update to the Council's 2011 *National Prevention Strategy: America's Plan for Better Health and Wellness*.

The National Prevention Strategy's vision is:

"Working together to improve the health and quality of life for individuals, families, and communities by moving the nation from a focus on sickness and disease to one based on prevention and wellness."

Since many of the strongest predictors of health and well-being fall outside of the health care setting, the Strategy envisions a prevention-oriented society where all sectors contribute to the health of individuals, families, and communities.

The National Prevention Strategy identifies four Strategic Directions—the foundation for all prevention efforts—and seven targeted Priorities designed to improve health.



One of these seven is "Preventing Drug Abuse and Excessive Alcohol Use."

Six of the Council's Departments are implementing actions to promote prevention of unhealthy alcohol and drug use. Several have a direct prevention focus and several promote SBIRT.

- The Whitehouse Office of National Drug Control Policy supports integration of SBIRT into healthcare settings, and is disseminating information on SBIRT practice, efficiencies and outcomes; highlighting models; educating associations of health professions, licensing boards and provider organizations to increase screening and early interventions.
- SAMHSA, part of the Department of Health and Human Services, continues to fund SBIRT programs at the state level, and also funds medical residency training programs.
- Veterans Affairs and the Indian Health Service also provide SBIRT services.