PA SBIRT Newsletter



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PA SBIRT is funded by the Substance Abuse and Mental Health Services Administration:

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Welcome!

Welcome to the latest issue of the Pennsylvania Screening, Brief Intervention and Referral to Treatment (PA SBIRT) Newsletter, a quarterly publication dedicated to the PA SBIRT initiative. In this and future issues, we will feature a progress report, quarterly recap, evaluation update, and more. We hope that you find this information helpful and encourage you to share!



The PA SBIRT Initiative

PA SBIRT is a five-year initiative that will provide SBIRT services to over 20,000 patients throughout the Commonwealth by September 2021. SBIRT is a comprehensive and integrated public health approach to the delivery of screening, early intervention, and treatment services employing empirically-based and clinically useful practices to circumvent harmful consequences related to substance use.

The PA SBIRT Vision:

To ensure that every patient in our primary care clinics receives the right screening, brief intervention, and referral to treatment (SBIRT) services by the right providers every time.

The project is directed by the Pennsylvania Department of Drug and Alcohol Programs (DDAP) and The University of Pittsburgh School Of Pharmacy Program Evaluation and Research Unit (PERU). Funding for the project is granted through the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment (CSAT). All data is collected and reported in accordance with the Government and Performance Results (GPRA) Act of 2010.

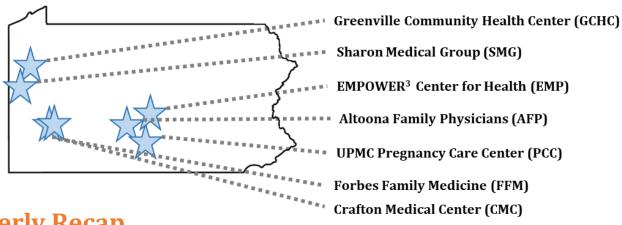
The PA SBIRT Team would like to thank the staff of participating project sites and Single County Authorities, who dedicate their time and effort to ensure that every patient receives the right SBIRT services every time.





Progress Report

To date, the PA SBIRT initiative has partnered with 7 healthcare sites in Pennsylvania: EMPOWER³ Center for Health, Altoona Family Physicians, and UPMC Pregnancy Care Center in Blair County; Sharon Medical Group and Greenville Community Health Center in Mercer County; and Forbes Family Medicine and Crafton Medical Center in Allegheny County. Together, these sites have provided SBIRT services to a total of 17,563 unduplicated patients, conducted **5,049** brief interventions, and connected **943** patients to community resources.



Quarterly Recap

Month	Project Highlights		
October 2020	 PERU and SMG Site Champion completed a virtual walkthrough of the SBIRT workflow Presented at the Lehigh Capital Physical Health and Behavioral Health Annual Meeting Held a Policy Steering Committee Meeting Conducted a site visit to EMP and AFP 		
November 2020	 Distributed a performance measures guide to each project site PHN sites met to discuss lessons learned Onboarded new AFP Care Coordinator Implemented SBIRT in telemedicine appointments at AFP and GCHC Increased GCHC follow-up enrollment rate by 9 percentage points The FFM Care Coordinator co-facilitated in SBIRT training at Forbes Hospital with PERU 		
December 2020	 Implemented SBIRT in telemedicine appointments at EMP Increased AFP follow-up enrollment by over 2 percentage points Increased the overall project follow-up enrollment rate to 10.31%, exceeding grant requirements Trained the onboarding CMC Care Coordinator Identified staff to become Champion Trainers for SBIRT sustainability at PCC 		



DID YOU KNOW?

The Substance Abuse and Mental Health Services Administration (SAMSHA) have a National Helpline. SAMHSA's National Helpline is free and confidential for anyone looking for help with mental or behavior health issues, and is available anytime.

PA SBIRT: Understanding the Impact

PERU is currently completing the development of several analytical scripts that will allow PERU to report further information about the impact of services. Below is a preliminary snapshot of information that will be found in future analytical reports.

Preliminary Demographic Findings

- <u>Age</u>: Patients between 18-24 years old were **2.08 times more likely** to screen positive and **4.02** times more likely to be referred for treatment compared to patients 65 years and older.
- <u>Race/Ethnicity:</u> Hispanic/Latino patients were **not significantly** more or less likely to screen positive compare to White people; Asian patients were **0.284 times more likely** to screen positive compare to White people; Black people were **1.23 times more likely** to screen positive compared to White people.
- **Gender:** Females were **0.625 times less likely** to screen positive compared to males.
- <u>Military:</u> Serving in the military was **not a significant predictor** for screening positive.
- **County:** County was **not a great predictor** of screening outcome.

Preliminary Psychological-Social-Emotional Findings

When analyzing data from patients enrolled in the follow-up pool:

- At least half of the patients disclosing a decrease in days of use of alcohol or other drugs reported a **greater dissatisfaction with their housing arrangements**, and **lower self-satisfaction** at follow-up.
- Almost 50% of those patients reported a **decrease in stress level** and **increase in their ability to engage** in important activities.
- Almost 50% of patients disclosing a decrease in days of drug use reported an **increase in energy** for everyday life.

What's Next?

As project teams continue to collect GPRA data and enroll patients into follow-up, the PERU team will continue to explore research questions, review literature, and report results. Please contact Grace Drnach for additional information at gmd53@pitt.edu

Project sites have transitioned into Quarter 2 of the Year 5 Work Plan. Please review PERU's activities below and let PERU know of any additional needs for technical support.

Year 5	Project Site Activities	Sustainability Activities	Data/Evaluation Activities
Quarter 2 Jan – Mar 2021	 Provide Monthly Data Reports Co-Lead Regular CQI Meetings Co-Facilitate Trainings Sites conduct 6-month 	 Develop Implementation Manual Develop SBIRT App user manual and implementation guide Develop Billing Resource 	 Ongoing GPRA Data Collection and Entry Complete Follow Up Interviews Define Research Questions and Plans to Disseminate
	check-in with DDAP regarding stat no cost extension.	Prepare for Champion Training	Results (Manuscript Opportunities)

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In the News:

Mental Health, Substance Use, and Suicidal Ideation **During the COVID-19 Pandemic**

The COVID-19 pandemic has lead to many changes in normal routines. Reduced physical contact and isolation can cause people to experience an increase in stress or anxiety. This was shown in a Morbidity and Mortality Weekly Report (MMWR) by the Centers for Disease Control (CDC).

The survey was conducted from June 24–30, 2020 among adults across the United States. Overall, around 40% of people surveyed reported at least one mental or behavioral health condition affected or caused by the pandemic. This included anxiety, depression, and thoughts or attempts at suicide. Respondents' behaviors changed as well. 1 in 10 respondents reported either having started to use substances or that they had increased their use due to the COVID-19 pandemic.



In the report, the authors state that "Expanded use of telehealth, an effective means of delivering treatment for mental health conditions, including depression, substance use disorder, and suicidal ideation, might reduce COVID-19-related mental health consequences."

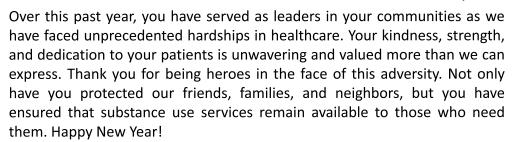
The pandemic has highlighted and increased the need for connection to treatment services. Initiatives such as PA SBIRT are working to close that gap in the provision of services. The continued efforts of all those involved in this project are always appreciated and will be instrumental in helping meet this increasing need.



Mental Health and Coping During COVID-19. cdc.gov https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stressanxiety.html. Updated December 11, 2020. Accessed January 4, 2021.

Czeisler MÉ, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24-30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049-1057. DOI: http://dx.doi.org/10.15585/mmwr.mm6932a1external icon.

A Message from PERU



- Abby Talbert Program Manager at PERU