

SBIRT+RM Conceptual Framework for Managing Substance Use Disorders in Primary Care Settings

**Institute for Research, Education and Training in Addictions (IRETA)
Wednesday Webinar: September 20, 2017**

Katherine Fornili, DNP, MPH, RN, CARN, FIAAN



Disclosure: No conflicts of
interest to declare

JOIN THE VOICES FOR RECOVERY STRENGTHEN FAMILIES AND COMMUNITIES



National
Recovery Month
Prevention Works • Treatment is Effective • People Recover
SEPTEMBER 2017

TERMINOLOGY: SBIRT + RM

- **SBIRT:** Screening, Brief Intervention and Referral to Treatment

PLUS

- **RM:** Recovery Management

Background-Screening & Brief Intervention

- **1990:** Improved alcohol screening recommended (*IOM, Broadening the Base of Treatment for Alcohol Problems, 1990*)
- **2003-present:** Federally-funded SBIRT projects
- **2007:** 5th decade of evidence, yet still under-implemented in primary care (*Saitz, 2007*)
- **2012-2014:** SBIRT-related measures endorsed
 - National Institute on Drug Abuse (*Tai, Wu & Clark, 2012*)
 - The Joint Commission (2014)
 - The National Quality Forum (2014)

2014: “Those two studies in JAMA”

(Saitz et al., and Roy-Byrne et al.)

- *Brief interventions not effective for decreasing drug use among primary care patients identified through screening;*
- *Widespread adoption of screening and brief intervention for drug use was not warranted.*

2017: Rethinking Brief Interventions

(McCambridge & Saitz)

- **Stronger scrutiny of the evidence:**
Discussion contents and counseling microskills associated with improved outcomes
- **Alcohol screening:** *Don't isolate from other risky behaviors and mental health questions*
- **More clarity:** *Unmet needs of people with alcohol problems*
- **Brief interventions as guiding principle:**
Reduction of substance use and consequences (not defined by time or # of sessions)

Unanswered Questions: Absence of Evidence is Not Evidence of Absence

	Alcohol Misuse	Alcohol Dependence	Drug Use	Drug Dependence
SCREENING	✓	✓	✓	✓
BRIEF INTERVENTION	✓	?	?	?
REFERRAL	?	?	?	?
TREATMENT	✓	✓	✓	✓

SBIRT has many moving parts, and its measurement is tricky

(Lindsay, 2014)

Analysis of Theoretical Framework

- **Examined SBIRT-Related Middle-Range Theories**
 - To conceptualize clinical problems and outcomes
 - To delineate effective interventions and methods of outcome measurement (*Donaldson, 1995*)
- **Utilized Smith and Liehr's Evaluation Framework for Middle Range Theory** (*Smith & Liehr, in Gaubard & Rosen, 2008*)
 - Substantive foundations
 - Structural integrity
 - Functional adequacy

Two SBIRT-related Middle Range Theories

- **Wagner's Chronic Care Model (CCM)**
 - Featured prominently in early SBIRT literature
 - (Bodenheimer, Wagner & Grumbach, 2002; Coleman, Austin, Branch & Wagner, 2009)*
- **White's Recovery Management (RM) Model**
 - Component of the Ecology of Addiction Recovery Model;
 - Adapted from Bronfenbrenner's Ecologic Framework Model
 - (William White, 2008)*

Wagner's Chronic Care Model (CCM)

- CCM is associated with changes in:
 - Provider expertise & skill;
 - Patient education & support
 - Team-based care delivery; and
 - Better use of information systems
- CCM does not articulate how it can be used to improve **substance use disorder outcomes**

Recovery Management (RM) Model

- Specifically addresses the needs of individuals with **substance use disorders**, their families and communities
- Outperforms the CCM in terms of describing, explaining and interpreting the phenomenon of interest (**recovery**)

Phenomenon of Recovery

WORKING DEFINITION: (SAMHSA, 2011)

- “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.”



CORE RECOVERY MEASURES: (SAMHSA, 2014)

- **Health**—Overcoming or managing disease process; physical/emotional well-being;
- **Home**—Stable and safe place to live
- **Purpose**—Meaningful daily activities (job, school); and
- **Community**—relationships and social networks that provide support, friendship, love and hope.

Screening, Brief Intervention, and Referral to Treatment PLUS Recovery Management (SBIRT + RM) Model for Managing Substance Use Disorders in Primary Care Settings

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

4 Key Concepts of the Recovery Management Model

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

The Recovery Management Model

Recovery Management (RM)

**Pre-Recovery
Identification
& Engagement**

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Therapeutic alliance between the practitioner and the individual:

- **Practitioner:** Awareness of a window of opportunity to intervene;
- **Individual:** Awareness that the primary care provide is helpful and supportive

RECOVERY

Prevention

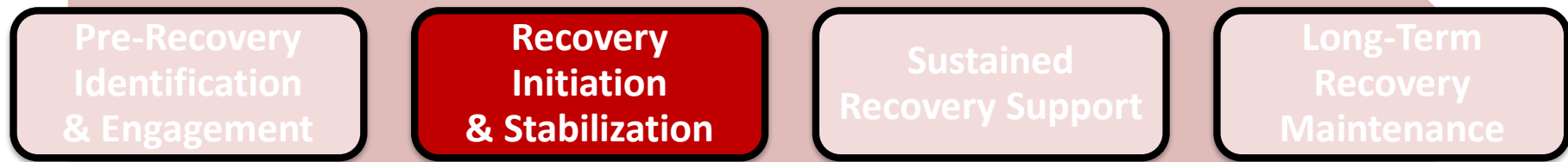
Early
Intervention

Specialty
Addictions
Treatment

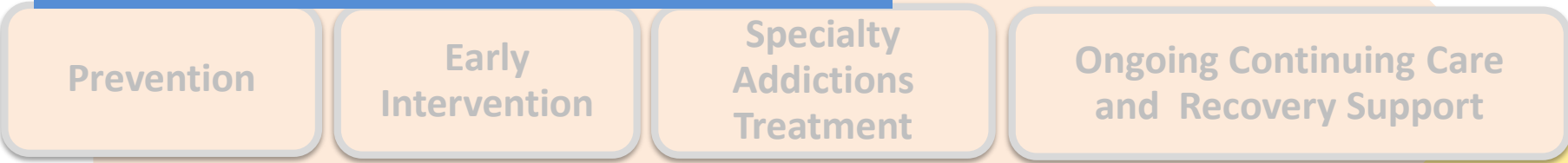
Ongoing Continuing Care
and Recovery Support

The Recovery Management Model

Recovery Management (RM)



Failure to initiate and stabilize recovery is often viewed as the failure (non-compliance) of the individual rather than flaws in the design or execution of the referral protocol (White, 2008)



The Recovery Management Model

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

**Sustained
Recovery Support**

Long-Term
Recovery
Maintenance

- Child care
- Transportation
- Housing
- Life skills training
- Employment readiness
- Legal consultation
- Wellness checks
- Self-management support

Abilities

Continuum-of-Care

Prevention

Intervention

Substance Use
Disorders
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

RECOVERY

The Recovery Management Model

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

- Shifting focus from service environment to the client's natural environment;
- Service commitment to extended post-treatment monitoring and support

ilities

RECOVERY

Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

Recovery Management and the Substance Use Disorders (SUDs) Continuum-of-Care

Recovery Management (RM)

Pre-Recovery Identification & Engagement

Recovery Initiation & Stabilization

Sustained Recovery Support

Long-Term Recovery Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early Intervention

Specialty Addictions Treatment

Ongoing Continuing Care and Recovery Support

The Substance Use Disorder (SUDs) Continuum-of-Care

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

The Substance Use Disorder (SUDs) Continuum-of-Care

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT



RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

The Substance Use Disorder (SUDs) Continuum-of-Care

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

The Substance Use Disorder (SUDs) Continuum-of-Care

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Continued contact is the responsibility of the primary care and other service staff rather than the patient.

Responsibilities

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

Looking at SBIRT Through a Traditional Lens: SCREENING

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

SCREEN
NEGATIVE

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

**PREVENTION
MESSAGES:
Congratulations for
Low Risk**

Substance Use Disorder Services Continuum-of-Care

Looking at SBIRT Through a Traditional Lens: BRIEF INTERVENTION

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

**BRIEF INTERVENTION
MESSAGES:**
Recommended limits;
Reduce risks &
consequences

SCREEN
POSITIVE (Mild)

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

Substance Use Disorder Services Continuum-of-Care

Looking at SBIRT Through a Traditional Lens: REFERRAL TO TREATMENT

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

REFERRAL MESSAGES:

Serious need for
specialist,
encouragement &
support

SCREEN
POSITIVE (Severe)

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

Substance Use Disorder Services Continuum-of-Care

REFERRAL TO TREATMENT— “Least-studied of the three components”

(Dr. Dawn Lindsay, IRETA, 2015)

- Type of Referral
- Access to traditional specialty treatment
- Follow-up
- Self help and/or Peer/Recovery Support
- Measurement of Success

RM Theory and Primary Care Responsibilities

Recovery Management (RM) Concepts

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

JOB HALF-DONE

Long-Term
Maintenance

Primary Care Provider Responsibilities

Traditional SBIRT



RECOVERY

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

Substance Use Disorder Services Continuum-of-Care

SBIRT + RM

BOTH HALVES OF THE RECOVERY PUZZLE

Recovery Management (RM)

Pre-Recovery
Identification
& Engagement

Recovery
Initiation
& Stabilization

Sustained
Recovery Support

Long-Term
Recovery
Maintenance

Primary Care Provider Responsibilities

SBIRT

+

RM

RECOVERY

Substance Use Disorder Services Continuum-of-Care

Prevention

Early
Intervention

Specialty
Addictions
Treatment

Ongoing Continuing Care
and Recovery Support

What if behavioral health problems and specialty referrals were addressed like other types of health care problems?



CHRONIC CARE



SUBSTANCE USE DISORDERS

ACUTE CARE

Conclusions: The SBIRT+RM Model

- Provides insight into why **SBIRT alone** may not be effective for more serious substance use disorders (drug use, alcohol/drug dependence)
- Articulates how the proposed **SBIRT + RM Model** can enhance outcomes of substance use disorder interventions delivered within primary care settings
- Will help **individuals in recovery** lead safe, healthy, meaningful lives in the community, surrounded by people who love them and encourage them to succeed

For More Information

Katherine Fornili, DNP, MPH, RN, CARN, FIAAN
Assistant Professor
University of Maryland School of Nursing
Dept. of Family & Community Health

President-Elect (2016-2018)
International Nurses Society on Addictions www.intnsa.org

Email: fornili@son.umaryland.edu
Office: 410-706-5553

*"Knowing is not enough, we must apply. Willing is not enough,
we must do." Goethe*