Improving Substance Use Screening using S2BI in a Pediatric Primary Care Clinic

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Background

- Addressing substance use early is crucial to mitigate its effects on the developing brain and prevent its health related consequences
- SAMHSA recommends universal screening for substance use among adolescents
- S2BI is a 7-item validated screening tool for identifying substance use disorders among adolescents with excellent sensitivity and specificity in identifying substance use disorder.
- This quality improvement project aims to increase substance use screening using S2BI in a pediatric primary care practice

S2BI: Screening to Brief Intervention

In the past year, how many times have you used

- Tobacco?
- Alcohol?
- Marijuana?
- STOP if all “Never”.

Otherwise, CONTINUE with:

- Prescription drugs that were not prescribed for you (such as pain medication or Adderall)?
- Illegal drugs (such as cocaine or Ecstasy)?
- Inhalants (such as nitrous oxide)?
- Herbs or synthetic drugs (such as salvia, "K2", or bath salts)?

Results

1 in 4 providers fail to ask about substance use

According to Providers in the Pilot Study, S2BI is:

- ...brief (< 1 min to screen)
- ...easy to perform
- ...useful and comprehensive

Discussion & Conclusion

- S2BI is a brief and useful screening tool to identify risky substance use among adolescents and guides clinicians in selecting appropriate interventions for each level of use.
- In our busy primary care practice, major challenges encountered in the implementation of this project include (1) time constraints, (2) knowledge gaps on teenage substance use and (3) lack of awareness on available resources.
- Integration of the screening tool into the electronic medical record and collaboration with other healthcare professionals in the clinic were the strategies that had the most impact in increasing provider screening rates.
- Most of the patients screened reported no substance use. This is in part due to the population served by our clinic which mostly consists of recent immigrants.
- For brief intervention, majority received positive reinforcement—an indispensable strategy to delay initiation of substance use and prevent its detrimental effects on the developing brain.

Methods

1. Preintervention
   - Questionnaire (KAPs)
   - EMR review
   - SBIRT/S2BI Training (Lectures, Modules)
2. Pilot Study (3 months)
   - 10 providers
3. Plan-Do-Study-Act
   - Cycle 1 (3 months)
     - Implementation
     - Barrier Identification
   - Cycle 2 (2 months)
     - Full EMR Integration
     - Barriers Addressed

References


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