

SCREENING FOR SUBSTANCE USE DURING PREGNANCY: USING AN SBIRT FRAMEWORK

Developing a Screening, Brief Intervention, and Referral to Treatment (SBIRT) process in the maternity care context

Note: While some medical tests may be used for both screening and diagnostic purposes, the terms are not interchangeable. Screening may occur in any healthcare setting to identify health risk behaviors, including substance use.

SBIRT implementation requires modification of existing clinic workflows. Each context is different. SBIRT should be incorporated into the existing intake process for new OB patients, which includes screening for other medical risks.

Brief description of a typical SBIRT implementation process

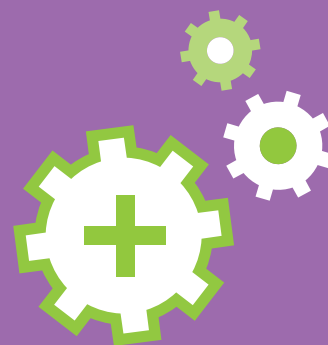
1 SBIRT Preparation

- Review institutional policies and update as needed to include use of the SBIRT framework for prenatal patients
- Develop a plan for modifying workflow to incorporate screening
- Train appropriate staff on screening process
- Train appropriate staff in brief intervention techniques
- Identify follow-up plan and key personnel for when screening is positive
- Create a list of resources to support women in need of referrals for substance use
- Identify billing requirements and opportunities
- Develop patient information script or written materials about substance use screening and institutional policies on substance use



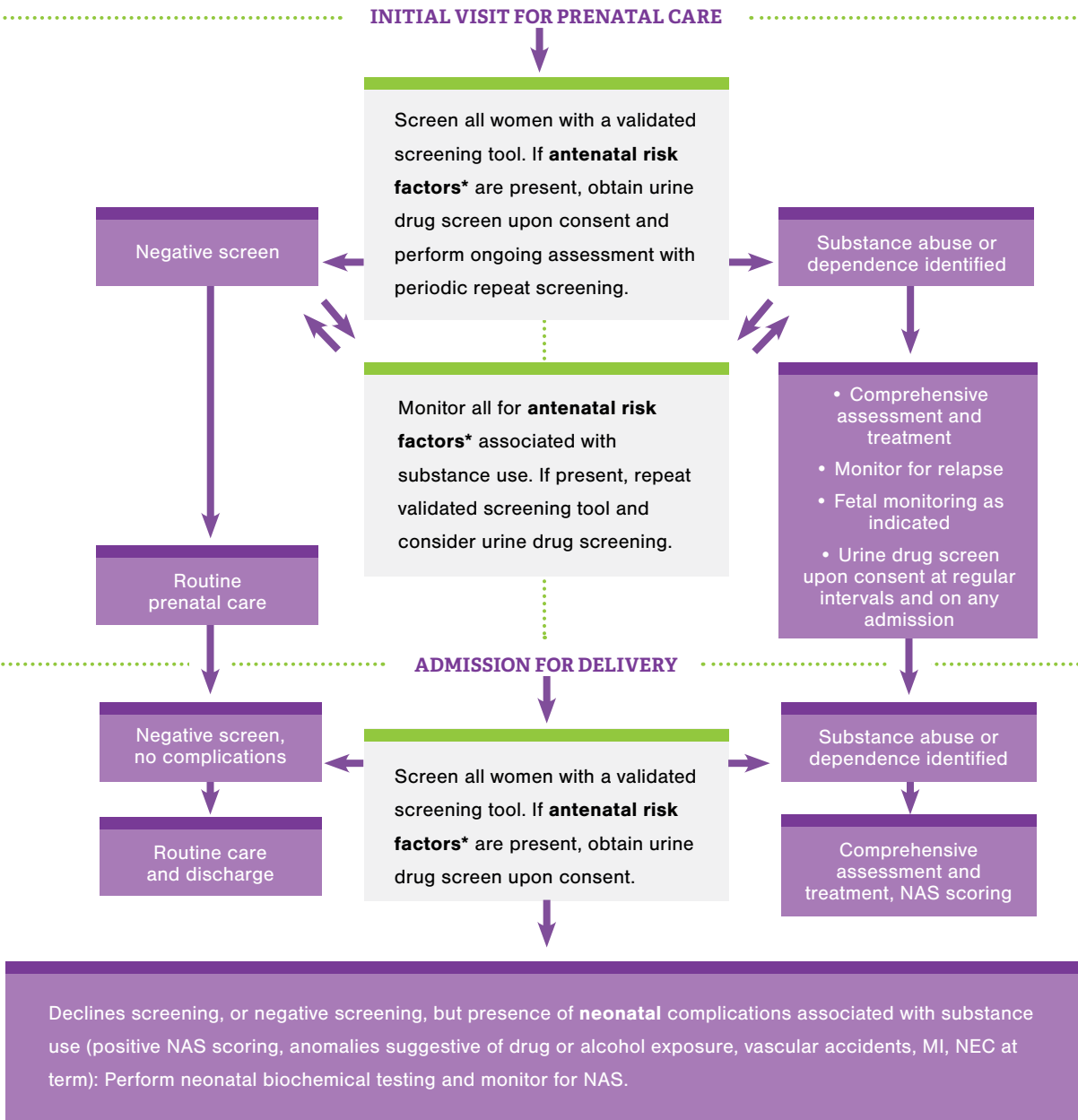
2 Implementation

- Implement workflow modification to include confidential screening and response
- Provide information about institutional substance use policies as part of new patient orientation
- Screen using a validated questionnaire on paper or electronically
- Ensure a warm handoff occurs from staff performing screening to staff who will address positive screening results
- Implement Brief Negotiated Interview (BNI) algorithm following positive screening
- Develop a follow-up plan when screening is positive
- Make referrals if needed



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ALGORITHM FOR SUBSTANCE ABUSE SCREENING IN PREGNANCY



***Antenatal risk factors:** no or inadequate prenatal care; exhibited signs and symptoms of drug and/or alcohol use or withdrawal; drug-seeking behavior; repeated use of prescription narcotics; personal history of domestic violence, incarceration, or child welfare referrals; hepatitis B/C; HIV-positive status; active STIs; unexplained preterm labor; placenta abruption; FGR; hypertension

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