Introduction

- Screening, Brief Intervention, and Referral to Treatment (SBIRT):
  - Evidence-based approach
  - Delivery of early intervention and treatment services
  - Responds to substance misuse

- UVM SBIRT Collaborative:
  - Curriculum on integrated SBIRT approach
  - Graduate students in nursing, counseling, & social work
  - Medical residents in primary care

Objectives

- Develop an interprofessional curriculum focused on SBIRT
- Increase participants’
  - Knowledge
  - Attitudes
  - Competence
  - Focus on patients with substance misuse issues.
- Establish competencies of Interprofessional Educational Collaboration (IPEC)
- Integrate team-based learning and coaching sessions
- Create a process for sustainability after completion of the grant

Methods

- Create a council with faculty representation from each discipline.
- Develop a curriculum integrating
  - On-line SBIRT content
  - Team-based interprofessional learning experiences
  - Standardized patients
  - Inter-professional faculty coaching sessions
- Implement curriculum with five disciplines over a 29 month period with 3 different cohorts.
- Evaluate the process of implementation with participant feedback after training sessions.
- Evaluate the knowledge, skills and competencies of the students and residents pre and post training sessions.

IPEC Competencies Observed

- Values/Ethics
  - Patient-Centered Care Planning
  - Mutual respect for other professions
  - Act with dignity and integrity

- Roles/Responsibilities
  - Recognize one’s limitations in skills, knowledge and abilities
  - Engage diverse professionals to complement one’s own expertise
  - Use unique and complementary abilities of all members of the team

- Interprofessional Communication
  - Confident expression of one’s knowledge and opinions
  - Listen actively
  - Encourage ideas and opinions of others
  - Give timely, sensitive, instructive feedback

- Teams/Teamwork
  - Engage and integrate other professionals in patient centered care.
  - Share accountability
  - Reflect on team performance

Results

- Demographics of participants

<table>
<thead>
<tr>
<th></th>
<th>#</th>
<th>%</th>
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<tbody>
<tr>
<td>Counseling</td>
<td>13</td>
<td>18%</td>
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<tr>
<td>Medical Residents</td>
<td>18</td>
<td>25%</td>
</tr>
<tr>
<td>Nursing</td>
<td>20</td>
<td>28%</td>
</tr>
<tr>
<td>Social Work</td>
<td>21</td>
<td>29%</td>
</tr>
<tr>
<td>Total</td>
<td>72</td>
<td>100%</td>
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- Outcomes - Knowledge and Skills Self Assessment

- Attitudes Self Assessment

- Conclusion
  - Significant increases in IPE participants’ knowledge, skills, & attitudes working with patients with substance misuse issues
  - Practical components were key to interprofessional growth
  - Knowledge assessment had limited discriminatory ability
  - Logistical challenges were consistent with integrating multiple programs (schedules, knowledge of learners, context of practical cases)

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