

# ADOLESCENT SBIRT

Screening, Brief Intervention & Referral to Treatment

## EDUCATIONAL EXEMPLAR

## Teaching Advanced Practice Nursing Students at University of Michigan to Deliver Adolescent SBIRT for Substance Use

### Background

Adolescent substance use is a significant public health problem in the United States. Screening, brief intervention, and referral to treatment (SBIRT) is an evidence-based approach, designed to assist individuals in preventing, reducing, or eliminating substance use before serious problems develop.

Faculty at the University of Michigan School of Nursing provided education and training in adolescent SBIRT to 61 nurse practitioner students, in conjunction with an advanced practice health assessment

course, across an array of nursing specialty programs, including primary and acute care. Participants were registered nurses enrolled in an advanced practice nursing course, with didactic and clinical components.

### Challenge

Substance use has been identified as our nation's number one health problem, and adolescent substance use has been described as our nation's number one public health problem, contributing to preventable injury, illness, disability, and premature death. Yet, few clinicians, including advanced

SCHOOL



SCHOOL OF NURSING  
UNIVERSITY OF MICHIGAN

AUTHOR

**Stephen Strobbe**  
PhD, RN, PMHCNS-BC,  
CARN-AP, FIAAN, FAAN

**"I really enjoyed being able to learn the material in...different environments. Each step reinforced the previous and seemed to really maximize memory and content retention. I'll remember the SBIRT course for a long time."**

**- UMSN Advanced Practice Nursing Student**

practice registered nurses (APRNs), have been adequately prepared to address substance use and related disorders in their patients, representing a major gap in health care delivery.

Nurses are often the first point of contact for patients and families across various health care settings and specialties. As such, they are ideally situated, with appropriate education and training, to identify and address substance use across the continuum of care. It is essential that graduate nursing faculty prepare APRN students to assess, intervene, and respond to substance use in adolescents through screening, brief intervention, and referral to treatment. As an evidence-based practice, adolescent SBIRT provides a unique opportunity to respond to this important public health priority.

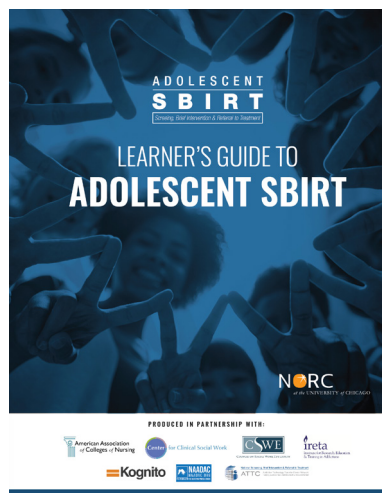
## Solution

Faculty at the University of Michigan School of Nursing graduate nursing program employed a four-pronged approach to the education and training of APRN students in adolescent SBIRT for substance use, in conjunction with an advanced practice health assessment course. This included independent reading of two peer-reviewed journal articles (1-2 hours) related to substance use and SBIRT in primary care (Strobbe, 2013, 2014). This was followed by a didactic lecture (3 hours), also with a focus on prevention and SBIRT in primary care.

As part of a national initiative to integrate adolescent SBIRT into schools of nursing and social work, funded by the Conrad N. Hilton Foundation, students were granted access to *SBI with Adolescents* (Kognito), a highly interactive online computer simulation, with case scenarios and real-time feedback related to responses (2 hours). This program included quantitative and



qualitative pre- and post-survey results related to self-perceived *competence* and *confidence* in the delivery of adolescent SBIRT, as well as an assessment challenge focused on essential elements of performance (i.e., engagement, building rapport, providing feedback, assessing readiness, and negotiating an action plan).

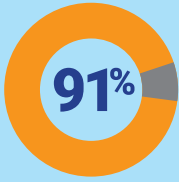


Content and associated skills were then reinforced and enhanced through face-to-face clinical simulation, including interactive role-plays in group settings, contained in the *Learner's Guide to Adolescent SBIRT* prepared and provided by NORC at the University of Chicago (2 hours).

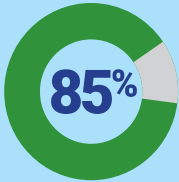
## Results

In exchange for 1% extra course credit, 61 of 67 (91%) students completed all required elements, and were included in the full data set (Kuzma et al., 2018). Of these, 52 of 61 (85%) obtained the desired assessment challenge score of  $\geq 75$  points, which was considered to be an acceptable level of competency in the delivery of *SBI with Adolescents*. Self-perceived *competence* and *confidence* scores increased significantly ( $p < 0.001$ ) across all identified domains. All of the students indicated that the *SBI with Adolescents* computer simulation enhanced his or her knowledge and skills, reporting that this was a useful tool, easy to use, likely to help with adolescent substance use, and relevant to their practice.

One student noted, "I really enjoyed being able to learn the material in...different environments. Each step reinforced the previous and seemed to really maximize memory and content retention. I'll remember the SBIRT course for a long time." Another student, when asked to "share at least one



**Percent of students who completed all required adolescent SBIRT training activities**



**Percent of students who obtained a score of  $\geq 75$  on the SBI with Adolescents\* simulation**

\*Powered by:  **Kognito**

action you will take to change your professional practice/performance,” replied, “Making drug and alcohol screening part of my daily practice.”

## Discussion

The purpose of this project was 1) to assess the feasibility of integrating adolescent SBIRT into an advanced practice health assessment course in nursing, and 2) to determine whether a combination of education and clinical simulation would result in improved *competence* and *confidence* in the delivery of adolescent SBIRT by nurse practitioner students in this context. As reflected in the results, these stated goals were achieved, and adolescent SBIRT was successfully integrated into an advance health assessment nursing course at a major Midwestern university.

In terms of lessons learned, rather than offering these activities for extra credit, it is suggested that they become integrated, and required, components of the course. Additionally, one way to ensure successful completion of the computer simulation assessment challenge is for individual results to become the “admission ticket” to the subsequent face-to-face clinical simulation.

## Conclusion

Although these advanced practice nursing students were already licensed as registered nurses, the majority (45/61, 74%) indicated that they had not received training in substance use screening prior to this course, revealing both a pronounced gap, and a pronounced opportunity for improvement. It has been emphasized in a position statement issued by the Emergency Nurses Association, and the International Nurses Society on Addictions, “that nurses in all practice settings be prepared to deliver SBIRT, to identify and effectively respond to alcohol use and related disorders across the lifespan” (Strobbe, Perhats, & Broyles, 2013). Integrating adolescent SBIRT into nursing curricula provides a viable and effective pathway to this vital destination.

## References

- Kuzma, E. K., Boucher, N. L., Burmester, K. A., Gray, B. L., Ploutz-Snyder, R. J., & Strobbe, S. (2018). Preparing advanced practice registered nursing students to deliver adolescent SBIRT for substance use. *Journal of Nursing Education*, 57(12), 736-741.
- Strobbe, S. (2013). Addressing substance use in primary care. *The Nurse Practitioner*, 38, 45-53.
- Strobbe, S. (2014). Prevention and screening, brief intervention, and referral to treatment for substance use in primary care. *Primary Care Clinical Practice*, 41, 185-213.
- Strobbe, S., Perhats, C. & Broyles, L.M. (2013). Expanded roles and responsibilities for nurses in screening, brief intervention, and referral to treatment (SBIRT) for alcohol use. *Journal of Addictions Nursing*, 24, 203–204. doi:10.1097/JAN.0b013e3182a6914f


## Recommended Citation

Strobbe, S. (2020). *Teaching Advanced Practice Nursing Students at University of Michigan to Deliver Adolescent SBIRT for Substance Use*. [Brochure]. Bethesda, MD: NORC at the University of Chicago.



**Strobbe, S.** PhD, RN, PMHCNS-BC, CARN-AP, FIAAN, FAAN  
*Clinical Professor*  
University of

Michigan School of Nursing  
University of Michigan Medical School, Department of Psychiatry

 <https://nursing.umich.edu/faculty-staff/faculty/stephen-strobbe>

 [strobbe@umich.edu](mailto:strobbe@umich.edu)