

Addressing Adolescent Substance Misuse in Primary Care



Substance abuse is a common chronic condition throughout primary care, affecting one out of six patients. The misuse of substances frequently begins in adolescence, but only a quarter of patients recall having a conversation with a health care professional about this issue as a teen, according to a 2014 study from The Centers for Disease Control and Prevention. But thanks to a Greenbelt-led DMAIC project, Dartmouth-Hitchcock's (D-H) primary care service line is now talking about substance misuse with teenagers during their primary care visits.

Research shows that investing in SBIRT, which stands for Screening, Brief Intervention and Referral to Treatment, can result in health care cost savings between \$3.81 and \$5.60 for each dollar spent. By identifying patients early, SBIRT successfully reduces health care costs, the severity of patient drug and alcohol use, and the percentage of at-risk patients who go without specialized substance use treatment. In the SBIRT model, providers employ motivational interviewing to help patients recognize unhealthy substance use patterns.

Screening at D-H began in October 2014, with patients between the ages 13 and their early 20s, since 50 to 60 percent of substance misuse will start in this age group. Patients are given a tablet with all the screening questions, which they answer in the waiting room. Because the screening questionnaire is built into the electronic medical record, providers can see the patients' responses in real-time. This enables providers to be ready for the Brief Intervention when they walk into the room.

The team's goal was to screen 80 percent of adolescent patients and they're screening almost 100 adolescent patients a month with an average rate of positive screens at eight percent. SBIRT screening is being conducted at D-H locations in Plymouth, Manchester and Bedford with plans to launch in Concord and Nashua this year.