Curriculum Objectives
- Develop an evidence-based Psychiatry SBIRT curriculum that will be sustainable long-term
- Improve and enhance SBIRT practices of psychiatry residents
- Promote SBIRT skills that psychiatry residents will sustain beyond their training and into their psychiatry practice settings

Teaching Strategies
- Large Group Didactic Lectures
- Small Group Discussion
- Screening Questions in Medical Records
- Inpatient Clinical Supervision
- Outpatient Clinical Supervision

Introduction to SBIRT
Conducted during two one-hour Psychiatry Grand Rounds:
- Describe project & evaluation process
- Present the rationale for SBIRT
- Review Screening Tools
- Demonstrate Screening
- Review Motivational Interviewing (as a Brief Intervention)
- Practice Motivational Interviewing
- Review local resources for referral

Reinforcing SBIRT Strategies
Child Psychiatry Medical Record
The revised outpatient Child Psychiatry Initial Psychiatric Evaluation at the Clarity MHC site includes the SBIRT/CRAFFT algorithm. This algorithm reminds residents and faculty to use SBIRT screening questions during outpatient initial assessments and assists in the medical record documentation of patient answers.

Future Psychiatry SBIRT Plans
Train-the-Trainer Plans:
- to build and sustain a team of SBIRT teachers, including faculty and residents
- to provide train-the-trainer “Intro to SBIRT” sessions for faculty in the adult and child psychiatry training programs

Future Grand Rounds:
- Continue to deliver 2 one-hour SBIRT modules to a broad audience (faculty, residents & students) at multiple sites:
  1. Screening
  2. Brief Intervention
  3. Referral for Treatment

Future Directions:
- Continue to explore and define what SBIRT models are most helpful across adult and child psychiatry residency training and the field of Psychiatry.
- Training of psychiatry residents to use SBIRT skills on the Consultation-Liaison Service & development of an adaptive model of care.