Curriculum Objectives

• To develop an evidence-based SBIRT curriculum for a university-affiliated, community hospital-based Internal Medicine (IM) residency program
• To increase awareness among trainees & faculty about SBIRT importance
• To teach & promote sustained SBIRT practices among residents & attendings
• To involve faculty in SBIRT training, skills development & curriculum evaluation

Outline:
• Describe project & evaluation process
• Present rationale for SBIRT practices
• Review Screening Tools
• Demonstrate Screening
• Review and practice Motivational Interviewing (as a brief intervention)
• Review local resources for referral

Teaching Strategies

✓ Large Group Didactic Lectures
✓ Skill-Building Workshops
✓ Reading Assignments
✓ Reminder Pocket Cards
✓ Inpatient Clinical Supervision
✓ Outpatient Clinical Supervision
✓ Independent Study Module on Blackboard

Adaptation of Mini-CEX

Dr. Frazier’s project as part of the national chief resident intensive SBIRT training (CRIT) led to a plan to adapt a “Mini-CEX” to reinforce the SBIRT curriculum at the RAHC IM residency. A “Mini-CEX” is a direct observation tool for faculty to evaluate residents to assure development of a certain competency. For the SBIRT “Mini-CEX,” the competency is the ability to screen and perform a brief intervention. The faculty attending physician observes resident performance, then evaluates and provides feedback. We believe this is a robust method to enhance and reinforce the SBIRT curriculum, since it requires residents to screen all their patients and develop the necessary skills. It also requires faculty to learn and understand the methods of both screening and brief intervention.

Reinforcing SBIRT strategies

Faculty Training
Training sessions about SBIRT concepts are integrated into core faculty development program.

Quality Improvement Project
Once yearly, each resident reviews own patient panel to evaluate whether adequate screening & interventions have been documented in the EMR.

Case Presentations
Yearly, each resident presents a clinical case where tools/interventions learned during SBIRT sessions were used. Cases focus on substance use history, interventions used, result of intervention/referral, and overall analysis.

Outpatient Clinical Supervision
Faculty from Su Clinica Familiar supervise the residents in the use of SBIRT during the outpatient continuity clinic sessions.