

VT SBIRT: Baseline Data Collection Flow

V. 5.9.14

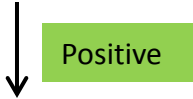
INITIAL SCREEN & GPRA A
completed about Patient



Negative
→

- Assign GPRA ID
- Enter screening result in EHR
- Complete Initial Screen
- Send Initial Screen (GPRA Section A & screening responses) to Data Coordinator (EBS)

SECONDARY SCREEN
completed about Patient
AUDIT
DAST
PHQ-9



Negative
→

- Assign GPRA ID
- Enter screening result in EHR
- Complete Initial & Secondary screen
- Send Initial Screen & Secondary Screen responses to data coordinator (EBS)

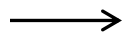
Patient offered **BRIEF
NEGOTIATED
INTERVENTION (BNI)**



Refused
→

- Assign GPRA ID
- Enter screening result in EHR
- Complete Initial & Secondary screen, & GPRA A6
- Send Initial Screen , Secondary Screen, & A6 responses to data coordinator (EBS)

- Enter screening result in EHR
- Document SBIRT intervention and follow up
- Complete BI Data Intake & Discharge OR pages 1 & 2 of BT & RT Data Intake if will be receiving BT or RT
- **IF SSN=60-69 & AGREES TO BE FOLLOWED UP THEN** complete Locator & Release of Info form



No additional intervention indicated

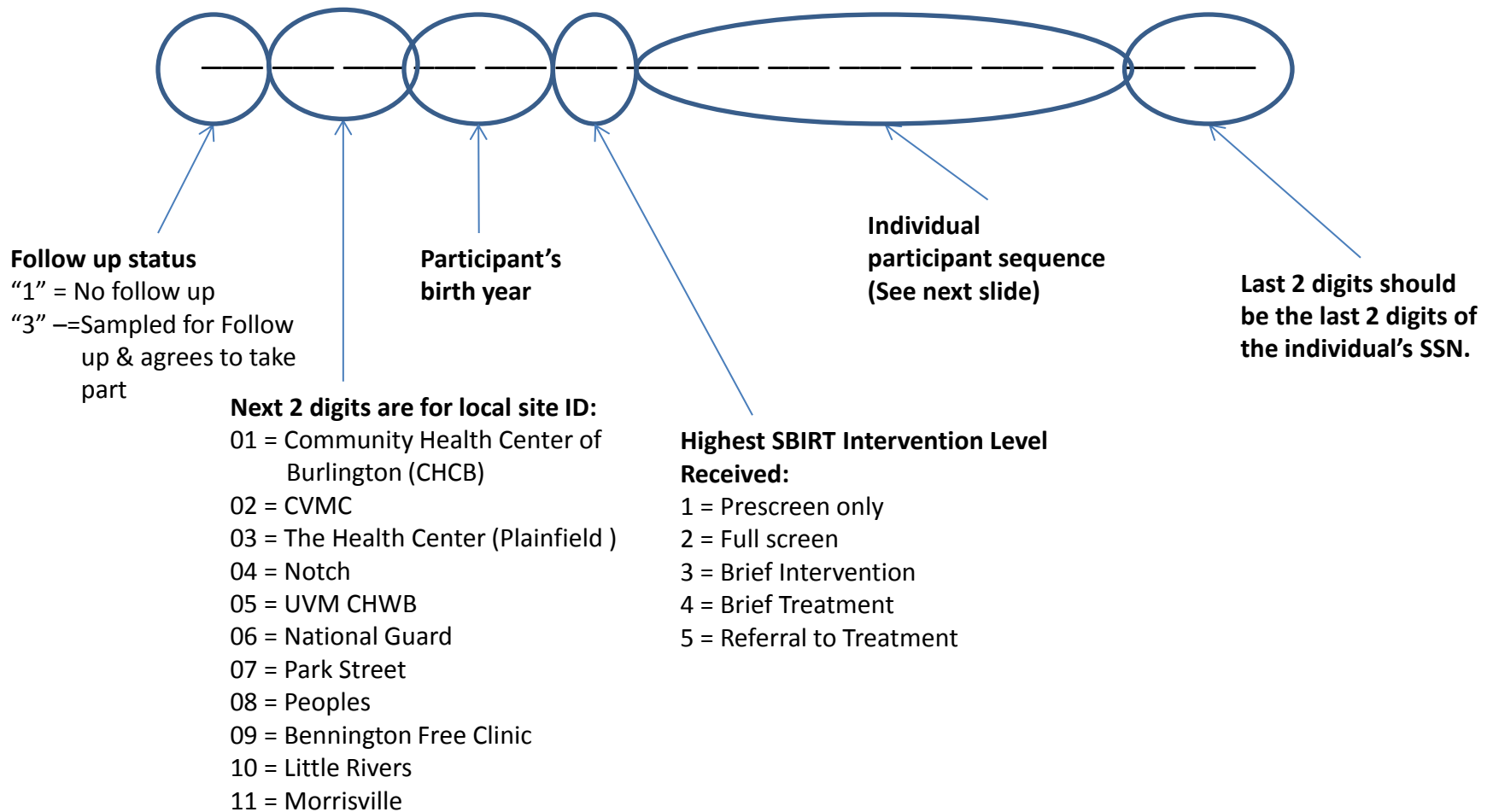
- Assign GPRA ID
- Send Initial Screen, Secondary Screen, BI Data Intake & Discharge , and Locator form if applicable to data coordinator (EBS)



BRIEF TREATMENT (BT) or REFERRAL TO TREATMENT (RT) Indicated

- Assign GPRA ID
- Document SBIRT intervention and follow up
- Complete additional BT & RT Data Intake
- **IF RT was to outside provider**, complete BT & RT Admin Discharge
- Send Initial Screen, Secondary Screen, BT & RT Data Intake, & BT & RT Admin Discharge if applicable to data coordinator (EBS)

Assigning Client ID Number

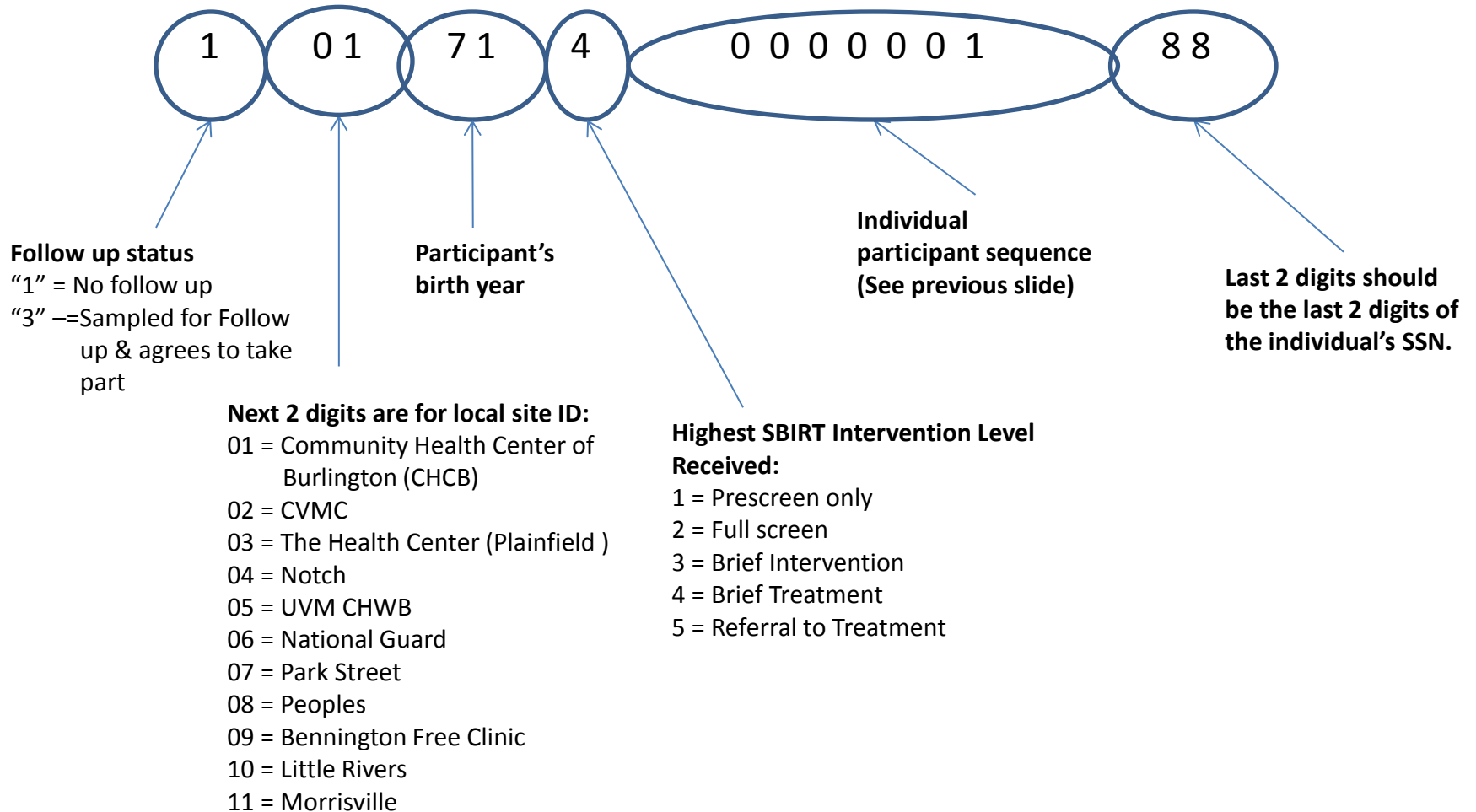


Individual Participant Sequence by Site

Site Name	Individual Participant Sequence Range
CHC	0000001 - 0100000
CVMC	0100001 - 0300000
Plainfield	0300001 - 0400000
Notch	0400001 - 0500000
UVM CHWB	0500001 - 0600000
National Guard	0600001 - 0700000
Park Street Clinic	0700001 - 0800000
Peoples	0800001 - 0900000
Bennington Free Clinic	0900001 - 1000000
Little Rivers	1000001 - 1100000
Morrisville	1100001 - 1200000

Example: Assigning Client ID Number

Joe is the first person screened for SBIRT at CHC ever. He receives Brief Treatment and is NOT sampled for follow up. He was born in 1971 and the last 2 digits of his SSN are 88. Below is his ID.



VT SBIRT: Discharge Data Collection Flow

V. 2.4.14

We are required to collect discharge data on **EVERYONE WHO RECEIVES A BNI or HIGHER LEVEL OF INTERVENTION**. Discharge data collected depend on the level of intervention and when the discharge occurs.

Level of intervention rec'd	What gets collected at Discharge	Process for collecting Discharge data
Brief Intervention	GPRC Sections A, J, & K (if length of intervention less than 8 days, Section B too if longer)	EBS LLC should be able to complete discharge data for all participants who receive BNI only provided questions about HIV testing (in "GPRC Secondary Screens generic 2.4.14.xls") are answered
Brief Treatment	GPRC Sections A through G, J, & K if done in an interview (see below) . If patient not available for interview, then complete GPRC Sections A, J & K	Individual providing BT would ideally complete the GPRC interview at the time of treatment completion & submit to EBS/AdCare. If interview not possible, the provider completes other sections on own and gets to EBS.
Referral to Treatment	SAME AS Brief Treatment	SAME AS Brief Treatment

For patients receiving BT or RT, discharge is defined as their completion of treatment or if there has been no contact with the patient for 30 days. Ideally, the expectation is discharge data for BT and RT patients will be collected at their completion of services through an interview. When the interview is done, sections A through G, J & K are completed. If the patient cannot be reached AND they are being discharged, an interview cannot be conducted. If an interview cannot be conducted, then you complete sections A, J & K only.

Administrative Discharges for BI

- Completion vs. Termination
 - Completion is defined as patient received level of intervention planned for them and no further action is required by the medical provider.
 - Note: If a provider refers out to specialty treatment (LADC or Substance Abuse Treatment Center), once they collect sections C - H, they can then discharge the person as all of their work with them around SBIRT is completed.
- Termination is defined for our purposes as there was a recommended service but the patient did not complete it. In most, if not all, cases, this would occur when a physician/clinician tried to offer a service - BI or even BT but the patient refused. We should be able to obtain that data from the first page of CVMC's form under level of intervention conducted as the provider can circle REF.

Given that, there is no need as I see it for CVMC to collect Discharge data on folks with whom they are doing a BI only or immediately referring out to RT. WE can create a discharge record based on the info we have.

Discharge Exception Coding

- IF a patient should have received a higher level of intervention but did not (e.g. should have gotten BT instead of BI only but refused BT), for question:
 - “What is the client’s discharge status?”
 - **Please select “Other” and specify “Pt refused [level of intervention – BI/BT/RT]”**

VT SBIRT:

6 Month Follow Up Data Collection Flow

V. 2.4.14

We are required to collect 6 month follow up interview data on **10% OF PATIENTS WHO RECEIVED A BNI, BT, OR RT**. Our proposed methodology for identifying who is in the 10% is that every person who :

- A) receives a BNI, BT, or RT intervention;
- B) has an SSN ending in the range of 60 to 69; AND
- C) agrees to complete the Locator Form & Authorization to Release Info Form.

Level of intervention received	What gets collected at 6 Month Follow-up	Process for collecting 6 month follow up data
Brief Intervention	GPR A Sections A, B, & I	Have patient complete Locator Form & Authorization to Release Info Form, allowing you to send Locator form to us. EBS/AdCare data coordinator will complete 6 month follow up interviews by phone. Data coordinator may contact you if we are having a hard time reaching patient.*
Brief Treatment	GPR A Sections A through G & I	
Referral to Treatment	GPR A Sections A & I if unable to reach for interview.	

For 6 month follow up interviews, **IF PATIENT IS STILL RECEIVING BT OR RT** when the interview is due, the interventionist will be asked to complete the GPR A interview with the patient. The Data Coordinator will work with your site's evaluation contact to make this determination.

IF PATIENT HAS BEEN DISCHARGED, the Data Coordinator will contact the patient directly via phone to complete the 6 month follow up interview. **PATIENTS ARE PAID A \$20 GIFT CARD FOR COMPLETING THE FOLLOW UP INTERVIEW.** Remember, CSAT requires us to obtain 80% of required follow up interviews. The Evaluation team will provide feedback to your site on fulfilling data collection requirements.

Patient Protections I

- Each site will need to complete a Business Associate Agreement with EBS.
- For individuals who are NOT identified for follow up:
 - Communicate with EBS about these folks using their GPRA ID assigned by you.
 - Please do not share individuals' names with EBS/AdCare.
- Goal is always to minimize any sharing of PHI and for you to send EBS only data that is needed/required.

Patient Protections II

- For the 10% of individuals in the BNI, BT, and RT conditions who are selected for follow up (SSN ends in 60-69 range AND they agree to be followed up):
 - Complete Participant Locator & Authorization to Release Information Form
 - Ensure original is kept on file and form is faxed to EBS.
- This allows EBS to contact them in 6 months for follow up.

Data Entry Rules

- At this time, we do NOT want you to give us a patient's real month of birth. Instead, please use the following to code birth month:
 - Born Jan through June = 07 for birth month
 - Born July through Dec = 01 for birth month
- For question “Is patient willing to continue SBIRT?” please use the following guidance in selecting your answer:

Circumstance	Response
Patient screens positive and is willing	Yes
Patient screens positive and is NOT willing for whatever reason (already in treatment elsewhere, just doesn't want to, etc.)	No
Patient screens positive and for whatever reason, you do not get a chance to ask them to continue	No
Patient screens negative	No

Evaluation Contact Information

- Evaluation Director: Jody Kamon
 - kamonjody@gmail.com
 - 802-999-1676
- Evaluator: TBD (in process of search)
- Data Coordinator: Erica Kind
 - ekind@adcarevt.org
 - 802-225-6066
- Project Director: Win Turner
 - win@metcbtplus.com
 - 802-233-6660
- VT-SBIRT Program Manager: Erin O'Keefe
 - Erin.Keefe@state.vt.us
 - 802-651-1550