# Service Design Site Visit Report

Allegheny-Singer Research Institute

Monroeville, Pennsylvania



Dates of Site Visit: June 12–13, 2014

Prepared by JBS International, Inc., under Contract No. HHSS283200700003I/HHSS28300002T

Prepared for the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment





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# Allegheny-Singer Research Institute

| Grantee Name               | Allegheny-Singer Research Institute                                |
|----------------------------|--|
| Grantee Phone Number       | 412-457-1050   |
| Grantee Address            | 320 East North Avenue, Pittsburgh, PA 15212                        |
| Site Visit Dates           | June 12–13, 2014   |
| Program Name               | Professional and Organizational SBIRT Implementation with Training |
| Grant TI Number            | TI 25406-01  |
| SAIS Number (TA Number)    | TA 3848  |
| Grantee Contact Person     | William Johnjulio, M.D.  |
| Government Project Officer | Reed Forman  |
| Site Visit Team Members    | Marcus Hudson, M.S.; Joe Hyde, M.A.; James Bray, Ph.D.             |

| Grantee Project Team Memb  | pers  |
|----------------------------|---|
| William Johnjulio, M.D.    | Project Director, Forbes Family Medicine Residency  |
| Jan Pringle, Ph.D.         | Training and Evaluation Director, Program and Evaluation Research Unit (PERU)   |
| Sherry Rickard-Aasen       | Project Coordinator, PERU   |
| Robert Sukolsky, M.A.      | Cultural Competency Leader and Director of Behavioral Science, Council of Directors, Forbes Family Medicine Residency |
| Kim Grasso                 | Evaluation Coordinator, PERU  |
| Arvind Venkat, M.D., FACEP | Council of Directors, Allegheny General Emergency Medicine Residency  |
| Carol Haus, RN, Ph.D., CNE | Director, School of Nursing, Council of Directors, Western Pennsylvania<br>Hospital School of Nursing                 |
| Gina Sacco Tucker          | Recruitment and Medical Student Coordinator, Forbes Family Medicine   |
| Thomas Campbell, M.D.      | Council of Directors, Allegheny General Hospital  |

| Grantee Project Sites Visited    |  |
|----------------------------------|--|
| Forbes Family Medicine Residency | 2550 Mosside Boulevard, Suite 500, Monroeville, PA 15146 |

## **Executive Summary**

llegheny-Singer Research Institute (ASRI) is 1 of 14 sites recently awarded a screening, brief intervention, and referral to treatment (SBIRT) training grant by the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of the grant is to develop and implement a training program in both didactic and practice settings to teach health care professionals—including medical residents and nursing, social work, and counseling students—the skills necessary to provide SBIRT to individuals at risk for substance use disorders. The intended outcome is to increase the adoption and practice of SBIRT throughout the health care delivery system.

The site visit team conducted an implementation site visit on June 12–13, 2014, to assess the strengths of ASRI's Professional and Organizational SBIRT Implementation with Training (POSITive) program and engage the grantee in a continuing improvement process supported by technical assistance, as approved by SAMHSA. The team met with core project staff, site directors, and trainers participating in SBIRT implementation and the project evaluator. The site visit team received an overview of the implementation plan and training approach for each discipline, discussed evaluation processes and plans for sustainability, and visited the Forbes Family Medicine Residency clinic where SBIRT is being implemented.

ASRI anticipates training more than 2,857 medical residents and medical, pharmacy, dental, nursing, and social work students over the 3 years of the grant. The program seeks sustainability within diverse practice settings. It plans to broadly disseminate SBIRT throughout the health care community by establishing partnerships and training SBIRT champions in the Allegheny Health Network (AHN).

ASRI has created a Web site that serves as the host portal for the SBIRT curriculum, faculty and student resources, and reported data. Materials have been reviewed and adapted using core competencies for each discipline to ensure appropriateness for the allied health professionals and students being trained under the current grant. Materials provided by SAMHSA have augmented the curriculum.

ASRI's core program staff are experienced in and committed to providing high-quality training to medical and allied health professionals throughout the community. The staff have gained commitments from departments within AHN, whose leadership determine where SBIRT best fits into their respective curricula and training programs. The leaders are represented on the grantee's council of directors. Leadership involvement will help ensure continued commitment to the project after grant funding ends.

The grant appears to have been successfully implemented. The site visit team recommended engaging AHN clinical psychology interns and social work interns in SBIRT training.

## **Grantee Overview and Environmental Context**

The Allegheny Health Network (AHN), formerly the West Penn Allegheny Health System, is an academic health care system of seven hospitals and multiple primary care sites owned by Highmark (BlueCross and Blue Shield) serving Pittsburgh and western Pennsylvania. Allegheny-Singer Research Institute (ASRI) is a nonprofit research and evaluation organization that is part of AHN, which provides opportunities for enhanced collaboration and knowledge exchange.

The Professional and Organizational SBIRT Implementation with Training (POSITive) program anticipates training more than 2,857 students and residents over the 3 years of the grant through the following entities:

- Medical residency programs
  - Allegheny General Hospital Emergency Medicine Residency
  - Forbes Family Medicine Residency
  - St. Vincent's Emergency Medicine Residency
- Medical, pharmacy, and dental schools
  - Lake Erie College of Osteopathic Medicine (LECOM) Medical School
  - LECOM Pharmacy School
  - LECOM Dental School
- Nursing school
  - Western Pennsylvania Hospital School of Nursing
- Social work professionals
  - Allegheny General Hospital Social Work Department

The POSITive program builds on and uses many of the resources developed by the Pennsylvania SBIRT Medical Residency Training Program, which is implementing training at all of its sites. ASRI has built sustainability into the program from the beginning by engaging community leaders, training faculty champions, and seeking to embed SBIRT practices within AHN. The faculty champions at the site visit meeting were highly motivated and enthusiastic about the program.

## 1. Site Visit Overview

The JBS International, Inc., SBIRT program area site visit team conducted an implementation site visit at ASRI on June 12–13, 2014, to assess the strengths of the POSITive program and engage the grantee in a continuing improvement process supported by technical assistance (TA) as approved by SAMHSA. The site visit team—

- Met with core project staff, professors, and faculty champions from ASRI; key partners; and the project evaluator
- Reviewed the implementation plan and training approach
- Met with a residency practice site
- Met council of directors (COD) members
- Discussed the monitoring and evaluation system
- Identified successes, challenges, and TA needs
- Discussed plans for sustainability after SAMHSA funding ends

## 2. Program Vision and Design

The POSITive program aims to (1) train medical residents, medical students, nursing students, dental students, and pharmacy students using a state-of-the-art, innovative, evidence-based curriculum that can be individualized to the unique environment of each training site in identified knowledge objectives and skill targets; (2) ensure that each trainee is assessed to be proficient in applying SBIRT skills; and (3) ensure each learner has the opportunity to adequately practice SBIRT skills with a preceptor within at least one clinical practice site.

The ASRI team envisions that its trainees will promote and disseminate SBIRT practices throughout AHN and Pennsylvania. The grant will be a significant asset for infusing SBIRT into health care training programs and clinical practices that may sustain and reinforce SBIRT after grant funding ends. The grantee hopes AHN will become a model for other health systems to learn how to seamlessly apply SBIRT in a variety of settings. The POSITive program will help support the workforce necessary to evaluate integrated care approaches and develop a large number of professional champions who can influence SBIRT application regionally, statewide, and beyond.

The addition of pharmacists and dentists to the POSITive program is viewed as key to addressing substance use disorders. Pharmacists increasingly work with physicians in interdisciplinary teams to address patient care and are becoming more involved in addressing

prescription opioid use and overdose prevention. Dentists have become a preferred target for obtaining prescription opioids that are then misused or diverted.

## 3. Grantee Leadership

AHN's leadership is committed to implementing SBIRT throughout its systems. Project director William Johnjulio, M.D., is chairperson for the Department of Family Medicine at AHN and directs the family medicine residency program. He oversees planning and implementation of the POSITive program. Sherry Rickard-Aasen, the project coordinator, is responsible for the day-to-day work of the grant. Jan Pringle, Ph.D., is the training and evaluation director.

## 4. Implementation Plan

The program has established the following goals and objectives:

**Goal 1:** Train medical residents, medical students, dental students, nursing students, and pharmacy students in SBIRT practices.

**Objective 1.1** (a, b): Convene a curriculum committee composed of representatives from each school to assess the current curricula (medical resident, medical student, and pharmacist) at each participating institution/department and finalize the protocol for implementing the SBIRT curriculum in each site.

**Objective 1.2**: Develop a mechanism for updating the existing curricula and methods for evaluating the SBIRT curriculum's use and dissemination across the proposed training sites.

**Objective 1.3**: With the assistance of the curriculum committee, develop the dental and nursing curriculum using the existing structure and the collaborator's experience as the framework.

**Objective 1.4**: Create a training plan for the provision of the SBIRT curriculum in each training site.

**Objective 1.5:** Train the project training team(s) and designated faculty on the SBIRT curriculum.

**Objective 1.6**: Implement a core curriculum that can be supplemented to address the needs of each training site.

**Objective 1.7**: Assess and finalize an evaluation plan to determine the program's impact on targeted trainee attitudes, knowledge and skills acquisition, and the provision of culturally competent training and care, as well as for continually improving training quality.

**Goal 2**: Disseminate SBIRT practices throughout AHN and other clinical practice sites.

**Objective 2.1**: Create a sustainability plan to continue project training upon termination of funding, including the development of a dissemination plan.

**Objective 2.2**: Advocate for and facilitate the implementation of SBIRT practices in clinical practices within AHN and throughout the Commonwealth through valid dissemination mechanisms.

**Objective 2.3**: Convene a COD consisting of representatives from each training site to facilitate implementation and dissemination of the curriculum and SBIRT clinical practices.

**Objective 2.4**: Conduct SBIRT regional and related trainings as part of the dissemination effort.

The grantee training approach is significantly informed by implementation science. To foster leadership buy-in, the program begins by engaging senior leaders from each training program to form a multidisciplinary steering committee, the COD, to help address barriers to implementation of the SBIRT curriculum, develop sustainable strategies, disseminate the curriculum in professional training programs, and support application of SBIRT in clinical settings. The program actively identifies, engages, and develops champions within and across the training programs. These champions are actively involved in the development of training plans, curriculum modifications, and SBIRT preceptors. They bring knowledge and sensitivity to each training program.

The grantee training approach integrates comprehensive online training, skills-focused activities, preceptor supervision supporting development of competencies, and an actively engaged evaluation process that addresses outcomes and satisfaction.

The site visit team offered the grantee feedback in three areas. First, as AHN has approved psychology and social work internship programs, the team encouraged the grantee to expand its scope to include these trainees. Next, the grant application proposed providing training in brief treatment for behavioral health trainees; the team encouraged the grantee to pursue this. Finally, in response to the grantee's interest in developing mobile technology for SBIRT, peer consultant James Bray demonstrated the mobile application developed through the SBIRT program at Baylor College of Medicine.

# 5. Community Linkages, Partners, and Participation

The grantee is embedded within AHN, a large, integrated health system that will provide trainees ample opportunity to practice the SBIRT intervention. Further, AHN plans to integrate SBIRT throughout its care system. This offers opportunities for the grantee and trainees to study team-oriented models of service delivery. The grantee was encouraged to develop a training module on this subject.

## 6. Affordable Care Act Readiness

Trainees will learn and work within a health system that is aligning its operations with emerging models of health care.

# 7. Sustainability Planning

The POSITive training model integrates SBIRT elements into the existing curricula of the participating organizations. ASRI developed specific course content in collaboration with champions and course instructors to promote buy-in, ownership, and sustainability. It is hoped that over the life of the grant, additional champions will emerge within the various clinical settings to further promote SBIRT implementation. In this way, trainees will have enhanced access to experiential learning opportunities within a supportive work environment.

ASRI is working to integrate SBIRT within the AHN electronic health record systems and to adopt mobile applications to support service delivery. The grantee uses sustainable online learning approaches as part of its overall training approach.

## 8. Grantee Evaluation

ASRI has a well-organized evaluation plan and exemplary evaluation processes and procedures that facilitate continuous feedback and quality improvement. The evaluation team has incorporated mechanisms and protocols to monitor the impact of training on trainee knowledge, skills, attitudes, and perceptions of competency and confidence. Trainees complete satisfaction assessments posttraining, and trainees and champions participate in interviews and/or focus groups. Champions assess and report on trainee SBIRT proficiency, and the

evaluation team follows up with trainees after graduation. The grantee collects data supporting quality improvement specific to program elements such as the Web site and meetings. Lastly, the COD monitors lessons learned, assesses corrective actions when indicated, and documents successes through a quarterly scorecard that tracks progress toward achieving program goals.

The site visit team suggested that the grantee conduct focus groups 6–12 months after training to gather information about implementation successes and challenges that arise when trainees are in practice. This information would complement the extensive evaluation data already collected and could further support sustainable training and clinical programs.

# Strengths and Considerations for Action

### **Program Vision and Design**

#### **STRENGTHS**

 ASRI and AHN have a clearly defined mission to effectively train medical professional trainees and faculty members so they can proficiently practice SBIRT in any clinical site in which they work.
Further, they envision that trainees will promote and disseminate SBIRT practices throughout the Pennsylvania health care community,

#### **CHALLENGES**

None noted

| Potential Enhancements | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|------------------------|------------------------------------|---------------------------------|--------------------------|
| None noted             |                                    |                                 |                          |

### **Grantee Leadership**

#### **STRENGTHS**

- Program leaders include a former SBIRT Medical Residency Training Program director and the AHN director of family medicine. Leadership is highly experienced, dedicated, and competent.
- The program has enlisted and trained champions from all program areas.
- The COD is diverse and dedicated to the project.

#### **CHALLENGES**

| Potential Enhancements | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|------------------------|------------------------------------|---------------------------------|--------------------------|
| None noted             |                                    |                                 |                          |

## **Implementation Plan**

#### **STRENGTHS**

- The program is fully implemented in all disciplines and incorporates multiple learning strategies.
- The program has adopted strategies to support trainee practice within clinical settings, including use of preceptors/champions and a proficiency tool supporting fidelity.

#### **CHALLENGES**

• The grant application proposed training the behavioral health workforce in brief treatment, but this has not occurred.

|   | Potential Enhancements   | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|---|--|------------------------------------|---------------------------------|--------------------------|
| 1 | The grantee is encouraged to include social work and psychology interns in the training program. | X                                  |                                 |                          |
| 2 | The grantee is encouraged to train behavioral health trainees in brief treatment approaches.     | X                                  | X                               |                          |

## **Community Linkages, Partners, and Participation**

#### **STRENGTHS**

• The grantee is embedded within a large, integrated health system that offers ample opportunity to practice the SBIRT intervention and study team-oriented models of service delivery.

#### **CHALLENGES**

|   | Potential Enhancements   | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|---|--|------------------------------------|---------------------------------|--------------------------|
| 1 | The grantee was encouraged to develop training module(s) on team-oriented, integrated approaches to the delivery of SBIRT. | <b>X</b> .                         |                                 |                          |

#### **Affordable Care Act Readiness**

#### **STRENGTHS**

• Trainees will learn and work within a health care delivery system that is aligning operations with the newest models of care.

#### **CHALLENGES**

None noted

| Potential Enhancements | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|------------------------|------------------------------------|---------------------------------|--------------------------|
| None noted             | -                                  |                                 |                          |

## **Sustainability Planning**

#### **STRENGTHS**

- The grantee has developed specific course content in collaboration with champions and course instructors to promote buy-in, ownership, and sustainability. Further, the grantee is working to integrate SBIRT within the AHN electronic health record systems.
- The COD will support sustainability planning efforts.

#### **CHALLENGES**

| Potential Enhancements | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|------------------------|------------------------------------|---------------------------------|--------------------------|
| None noted             |                                    |                                 |                          |

## **Grantee Evaluation**

#### **S**TRENGTHS

- The grantee has a well-organized plan for evaluation, and its evaluation processes and procedures are exemplary.
- The grantee uses evaluation data for ongoing performance improvement efforts.

#### **CHALLENGES**

|   | Potential Enhancements   | Grantee<br>Resources To<br>Be Used | Will Request<br>TA From<br>CSAT | Information<br>Requested |
|---|--|------------------------------------|---------------------------------|--------------------------|
| 1 | The grantee could conduct focus groups 6–12 months posttraining to gather information about implementation successes, problems, and issues that arise when trainees are in practice. This information would complement the evaluation data already collected and could further support training and clinical programs. | <b>X</b>                           |                                 |                          |

# Abbreviations and Acronyms

AHN Allegheny Health Network

ASRI Allegheny-Singer Research Institute

COD council of directors

CSAT Center for Substance Abuse Treatment

LECOM Lake Erie College of Osteopathic Medicine

POSITive Professional and Organizational SBIRT Implementation with Training program

SAMHSA Substance Abuse and Mental Health Services Administration

SBIRT screening, brief intervention, and referral to treatment

TA technical assistance