

Consider the Setting: Challenges in Integrating Screening, Brief Intervention, and Referral to Treatment into Nursing and Social Work Students' Clinical Practice

Objective: Substantial funds are being invested into training health professions students to provide screening, brief intervention, and referral to treatment (SBIRT) for substance use, but will the newly trained workforce be ahead of its future employers? The goal of this study was to explore implementation facilitators and barriers.

Methods: This project educated 541 baccalaureate nursing (BSN), advanced practice nursing (NP), and master of social work (MSW) students through didactics, role plays, standardized patient practice, and clinical experience to help students achieve competency. One month after training, students were surveyed regarding their use of SBIRT in clinical practice and barriers/facilitators to their use of SBIRT.

Results: Efforts to integrate SBIRT into students' clinical experiences were met with numerous challenges. Follow-up surveys revealed a number of barriers to practicing SBIRT during clinical rotations, including feeling a lack of authority to implement, clinic policies not allowing SBIRT, clinic staff lacking SBIRT awareness and training, perceptions that SBIRT was inappropriate for the patient populations served, lack of time, and fear of patient reaction. Facilitators included faculty and supervisor support of SBIRT, clinic policies allowing SBIRT, acceptance of SBIRT by clinic staff, having a framework to discuss substance use, and having SBIRT practice as a course requirement.

Conclusion: Without clinical site buy-in, students do not receive adequate opportunities to practice with patients. Therefore, clinical site attitudes and policies need to be considered prior to implementing student practice so students can sustain gains in knowledge, attitudes, and skills.