

## **SBIRT IOWA EVALUTION**

## **Focus Group Questions:**

- 1. Did the trainings and the curriculum material help better prepare you for the SBIRT project?
- 2. Describe how the SBIRT process takes place at your site. Are there any modifications you have made to the model as a result of implementation?
- 3. Are any patients slipping through the cracks in any aspects of SBIRT? For example, not getting pre-screened, full screened, receiving BI, BT, or RT?
- 4. Do you rely solely on Alcohol Use Disorders Identification Test (AUDIT) and Drug Abuse Screening Test (DAST-10) scores or do you sometimes use clinical judgment to determine the level of service for patients? What do you do if a patient is identified as a positive prescreen or screen and resists further steps?
- 5. When the client is identified for a follow-up interview, who conducts the follow-up interview? What protocol is followed to stay in touch with the client from the screening until the six month follow-up interview? [Ask about: client locator forms, collateral contacts.]
- 6. What are the biggest successes and accomplishments so far?
- 7. What barriers have you encountered during implementation? How were they overcome?
- 8. Is there anything else that would be helpful for the evaluation team to know?

## **Key Informant Interviews:**

- 1. Health Clinics: How many of your clinic sites (satellites) are currently using SBIRT? Are the satellite clinics situated within the same building, same town, or elsewhere?
- 2. How are you receiving staff feedback about the SBIRT project? Do you feel you receive regular feedback from the staff? How often do you receive feedback (daily/weekly)? Do you hold any quality assurance meetings?
- 3. Health Clinics: How has the implementation of SBIRT affected your patient flow? Is the SBIRT process causing any delay or disruption to your health clinic? Is there a wait time for the pre-screening, screening, BI, BT, or RT due to the medical appointments; or a wait time for the clients for their actual doctor's appointment due to the SBIRT process?
- 4. IA Army National Guard: Describe how SBIRT has been implemented in the National Guard. How are SBIRT services provided to Soldiers located in remote areas of the state?
- 5. Are you reaching your target numbers IDPH established for this project? If no, what have been the barriers and what strategies are you using to attempt to reach the target?
- 6. Do you feel SBIRT is supported by all the staff, including those who do not perform any SBIRT tasks? In preparation for SBIRT what sort of substance abuse trainings did the staff receive?
- 7. What have been the biggest successes?
- 8. What have been the biggest barriers?
- 9. Do you have any technical assistance needs or suggestions for future training topics?
- 10. Is there anything else that would be helpful for the evaluation team to know?