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| **SBIRT** **Organizational Readiness and Satisfaction Survey**Funding for data collection supported by theCenter for Substance Abuse Treatment (CSAT)Substance Abuse and Mental Health Services Administration (SAMHSA)U.S. Department of Health and Human Services (HHS) |

OMB No. 0930-0197

 Expiration Date: 01/31/17

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.  The OMB control number for this project is 0930-0197.  Public reporting burden for this collection of information is estimated to average 9 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 2-1057, Rockville, Maryland, 20857.

| **SBIRT Organizational Readiness and Satisfaction Survey** | 1= Disagree2= Somewhat Disagree3= Neither Agree nor  Disagree4= Somewhat Agree5= Agree |
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| **1** | **2** | **3** | **4** | **5** |
|  | I am involved in the implementation of the SBIRT Program in this organization |  |  |  |  |  |
|  | This organization has received useful SAMHSA technical assistance to develop protocols and procedures for SBIRT implementation  |  |  |  |  |  |
|  | This organization has a clear plan for implementing SBIRT |  |  |  |  |  |
|  | The SBIRT program is well integrated into patient care in this organization |  |  |  |  |  |
|  | Staff in this organization are encouraged to recommend ways to improve SBIRT implementation  |  |  |  |  |  |
|  | I feel confident that leadership here will supportSBIRT staff as they adjust to change in their workplace. |  |  |  |  |  |
|  | The leadership here trustsstaff’s professional judgment to implement SBIRT |  |  |  |  |  |
|  | Staff in this organization are committed to implementing SBIRT |  |  |  |  |  |
|  | It is difficult to change procedures in this organization to meet new conditions  |  |  |  |  |  |
|  | Staff in this organization can manage the processes for implementing SBIRT |  |  |  |  |  |
|  | Staff in this organization can handle the challenges that might arise in implementing SBIRT |  |  |  |  |  |
|  | Staff in this organization coordinate tasks so that SBIRT implementation goes smoothly |  |  |  |  |  |
| **Screening** |
|  | This organization has received useful SAMHSA technical assistance for conducting SBIRT screening. |  |  |  |  |  |
|  | Staff are generally satisfied with the technical assistance they have received for conducting SBIRT screening. |  |  |  |  |  |
|  | Staff in this organization are expected to screen patients for substance use |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary skill-level/proficiency to implement screenings effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have received the necessary training to implement screenings effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary knowledge to implement screenings effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary time to implement screenings effectively |  |  |  |  |  |
|  | Staff get the leadership support they need to conduct screenings. |  |  |  |  |  |
|  | Staff providing SBIRT services have all of the resourcesnecessary to implement screenings effectively |  |  |  |  |  |
|  | Sufficient staff are available to make the implementation of screening work |  |  |  |  |  |
| **Brief Intervention**  |
|  | This organization has received useful SAMHSA technical assistance on conducting brief interventions  |  |  |  |  |  |
|  | Staff are generally satisfied with the technical assistance they have received for conducting brief interventions. |  |  |  |  |  |
|  | Staff in this organization are expected to conduct brief intervention sessions with eligible clients |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary skill-level/proficiency to implement brief interventions effectively  |  |  |  |  |  |
|  | Staff providing SBIRT services have received the necessary training to implement brief interventions effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have gained the necessary knowledge to implement brief interventions effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary time to implement brief interventions effectively |  |  |  |  |  |
|  | Staff get the leadership support they need to conduct brief interventions with eligible clients.  |  |  |  | DK==d |  |
|  | Staff providing SBIRT services have all of the resources necessary to implement brief interventions effectively |  |  |  |  |  |
|  | Sufficient staffare available to make the implementation of brief interventions work |  |  |  |  |  |
| **Brief Treatment** |
|  | This organization has received useful SAMHSA technical assistance on conducting brief treatment sessions |  |  |  |  |  |
|  | Staff are generally satisfied with the technical assistance they have received for conducting brief treatment sessions |  |  |  |  |  |
|  | Staff in this organization are expected to conduct brief treatment sessions with eligible clients |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary skill-level/proficiency to implement brief treatment sessions effectively  |  |  |  |  |  |
|  | Staff providing SBIRT services have received the necessary training to implement brief treatment sessions effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have gained the necessary knowledge to implement brief treatment sessions effectively |  |  |  |  |  |
|  | Staff providing SBIRT services have the necessary time to implement brief treatment sessions effectively |  |  |  |  |  |
|  | Staff get the leadership support they need to conduct brief treatment sessions for eligible clients.  |  |  |  |  |  |
|  | Staff providing SBIRT services have all of the resourcesnecessary to implement brief treatment sessions effectively |  |  |  |  |  |
|  | Sufficient staff are available to make the implementation of brief treatment sessions work |  |  |  |  |  |