

# **SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT (SBIRT) CROSS-SITE EVALUATION**

## **SUPPORTING STATEMENT**

### **B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

#### **1. Respondent Universe and Sampling Methods**

To evaluate the success of SBIRT implementation at the organizational level, a web-based survey will be administered to staff in sites where SBIRT services are being delivered—referred to as performance sites. The Performance Site Survey will target individuals who directly provide SBIRT services and staff who interact with SBIRT providers and SBIRT patients regularly. The types of staff surveyed will include intake staff, medical providers, behavioral health providers, social workers, and managerial and administrative staff who oversee these staff. Since cross-site evaluation team members will be traveling to selected SBIRT providers and coordinating with state and site administrators on a yearly basis, there is an opportunity to complete a near-census of all SBIRT-related staff at performance sites with a minimal level of burden.

#### **2. Information Collection Procedures**

Individual site administrators will be contacted approximately 8 weeks ahead of the planned distribution to inform and remind them of the survey and to ask for their help to obtain a roster of SBIRT staff and to inform and remind staff about the survey's intent. Before the planned distribution of the survey, administrators will again be contacted to coordinate and confirm survey distribution with all those eligible to be surveyed. To protect the privacy of responses, the site administrators will not be informed of which staff eventually participate in the survey.

The cross-site evaluation team will administer paper-and-pencil versions of the survey to be returned in sealed envelopes if the web survey is not feasible. Paper-based distribution of the survey will occur in concordance with an approved process negotiated with the site administrator. This could occur during a site visit or during a regular staff meeting. Pre-paid

envelopes will contain no information that can uniquely identify the respondent. The surveys distributed will only be identified by number. The SBIRT cross-site evaluation team will keep the names of respondents in a secured separate file. Team members will use the cross-walk of surveys to respondent names only to follow up with staff to encourage them to complete the survey. Reminders to staff to return the survey will stop within 4 weeks of the survey launch.

### **3. Methods to Maximize Response Rates**

The SBIRT cross-site evaluation team expects an 80 percent or greater response rate on the Performance Site Survey. To maximize response rates, the SBIRT cross-site evaluation team will follow protocols that have been used successfully on other projects to achieve a greater than 80 percent response rate on similar surveys. The focus will be on reducing the burden on staff. The web survey will be compatible with any device capable of web browsing. Using a web survey will allow staff to take the survey at their convenience and avoid interrupting patient interactions.

For the paper survey, the protocols include proper timing and location of survey administration to accommodate the practitioners. Survey staff will work with site administrators to ensure that the survey is distributed at a staff meeting or scheduled briefing to increase the overall response rate and decrease individual burden.

The survey launch will occur around a site visit as timing and scheduling permit to increase the likelihood of response. Survey staff will work with key staff at these sites at least 3 months before the survey to lay the groundwork for seamless data collection and to obtain buy-in from staff who act as local champions. All staff at these performance sites will be informed, in advance, of the purpose and significance of the survey to encourage their participation in this survey. Finally, the efficiency of the survey and the assurance of privacy will make survey completion more amenable to performance site staff.

### **4. Test of Procedures**

The cross-site evaluation team tested a pencil-and-paper version of the Performance Site Survey with 17 respondents and found that it takes approximately 13 minutes to complete.

The 78 question web survey includes the collection of basic demographic information, questions about the organization's readiness to implement SBIRT, and questions about the use of

HIT to deliver SBIRT services. The demographic questions were tailored from a previous cross-site evaluation survey to fit the current set of cross-site grantees. The organizational readiness questions were developed through a review of the extant implementation science research literature (e.g., Chaudoir, Dugan, & Barr, 2013; Damschroder et al., 2009; Garner, 2009; Greenhalgh, MacFarlane, & Kyriakidou, 2004; Weiner, 2009; Weiner, Belden, Bergmire, & Johnston, 2011). Based on this review, the Organizational Readiness for Implementation Change (Shea, Jacobs, Esserman, Bruce, & Weiner, 2014) and the Implementation Climate Scale (Jacobs, Weiner, & Bungler, 2014) were identified as the two most appropriate instruments. In addition to questions from these two instruments, the survey includes questions to assess satisfaction, capacity, and infrastructure to implement screening, brief intervention, brief treatment, and referral to treatment.

To identify relevant HIT measures, the cross-site evaluation team modified measures from socio-technical frameworks (Kling, 1980), including the DeLone and McClean framework (DeLone & McLean, 2004), the Public Health Informatics Institute Framework (PHII, 2005), and the Human Organization and Technology (HOT)-Fit Framework (Yusof, 2008). Across these three frameworks, the survey captures measures of system availability, information availability, organizational structure and environment, utilization, and user satisfaction.

## **5. Statistical Consultants**

As noted in Section A.8, the SBIRT cross-site evaluation team has consulted extensively with an expert panel that has reviewed and approved all data collection and analysis methodologies outlined in this package. Panel members will also continue to provide expert advice throughout the course of the program. In addition, several in-house experts will be consulted throughout the program on statistical aspects of the design, methodological issues, economic analysis, database management, and data analysis (Exhibit 5).

## Exhibit 5. Senior Advisors

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## **ATTACHMENTS**

- Attachment 1: Performance site survey
- Attachment 2: Network security at RTI International
- Attachment 3: Privacy pledge
- Attachment 4: Performance site survey consent script
- Attachment 5: Table shells for descriptive results