Referral to Treatment: Brief Intervention for a Patient in the Severe Zone

For a patient in the Severe zone, the aim of the brief intervention is to enhance the patient’s motivation to accept a referral to treatment for an initial appointment/assessment.

### Risk Zone

<table>
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<th>IV-Severe</th>
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<tr>
<td>14+</td>
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<tr>
<td>6+</td>
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<td>“Could benefit from more assessment and assistance.”</td>
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### Step 1 – Raise the Subject

If a patient scores in Zone 4, he/she is likely to have some “initial” awareness of consequences related to substance use as evidenced by the items marked on the AUDIT/DAST.

- Explain your role; ask permission to discuss alcohol/drug use screening forms
- Ask about alcohol/drug use patterns: “What does your alcohol/drug use look like in a typical week?”
- Ask about the patient’s concerns about substance use: “I’m interested in finding out what concerns you have about your alcohol/drug use?”
- Listen carefully and provide reflections of change talk.

### Step 2 – Provide Feedback

- Provide feedback on the AUDIT and/or DAST: “Your score on the screening form puts you in the Severe Zone. Individuals who score in that Zone are usually experiencing significant consequences related to their alcohol/drug use. They often benefit from more assessment and assistance (than I can offer).” Review low-risk drinking limits.
- Elicit the patient’s reaction – “What do you think about that?”
- Explore connection to health/social/work issues (patient education materials): “What connection might there be...?”

### Step 3 – Enhance Motivation

Provide a summary and express concern:

- “As we just talked about, your alcohol/drug use puts you in the Severe zone. I am concerned about how your alcohol/drug use may be impacting your health, and it sounds like you have some concerns too. I would like to [have you talk to our behavioral health specialist or refer you to a treatment program], to assess together what might be most helpful for you.”
- Explore the patient’s reaction to the information; listen closely and reflect.
- If the patient doesn’t express “significant” concerns or seem interested in a referral, explore pros/cons: “What do you like about your alcohol/drug use? What don’t you like?” then explore readiness “On a scale of 0-10, how ready are you to make a change in your alcohol/drug use?” If readiness is greater than 2: “Why that number and not a _____ (lower one)?”
- If the patient is somewhat open to referral, use the readiness ruler: “On a scale of 0-10 how ready are you to consider seeing someone to talk more about your alcohol/drug use?” If readiness is greater than 2: “Why that number and not a _____ (lower one)?”
- Ask pros/cons of seeing someone for an assessment for treatment (ask about cons first, then pros).

### Step 4 – Negotiate Plan

- If not motivated for referral or to change substance use, stop, thank patient, offer patient education materials, negotiate follow-up visit.
- If not motivated for referral but motivated to change substance use:
  - Summarize the conversation (zone, pros/cons, readiness); ask question: “What steps would you be willing to take?”
  - Explore patient’s goal for change (offer options if needed); write down steps to achieve goal; assess confidence
  - Negotiate follow-up visit; thank patient
- If interested in accepting the referral:
  - Explore the patient’s understanding of what “treatment” is, provide feedback to explain types of treatment and support, and most importantly that treatment takes many forms. Elicit reactions: “Sounds like you are open to considering getting some help. I’m wondering what you know about the different types of treatment options?”
  - Use a warm handoff and plan how to get help or support: “Would it be okay if we called right now to make you an appointment?” or “Can I call in my colleague to talk to you for a few minutes?”
  - If needed, assess for withdrawal risks and management.