

Abstract

Objective: This quality improvement project's purpose was to integrate consistent screening for substance use disorder into an urban adult primary care clinic for patients without insurance and improve referral and treatment rates for those that screened positive.

Methods: This project compared two independent patient samples before and after introducing the validated Substance Use Brief Screen tool to the practice. All clinic patients that visited during a two-month window in Fall 2020 (Sample 2) were asked to fill out this self-administered survey. Using a post hoc chart review, the results were compared to those of all clinic patients that visited during the same two-month window in 2019 (Sample 1).

Results: The rate of screening improved from 34.5% in Sample 1 (N=119) to 65% in Sample 2 (N=80), an improvement of 88.7% ($P < 0.001$). The rate of provider follow-up after a positive screen increased from 31.7% in Sample 1 to 50% in Sample 2; however, this increase was not statistically significant ($P = 0.181$).

Conclusions: This study showed that there is likely benefit to implementing universal patient-drive screening for substance use disorder in this setting, but there were too many confounding variables during the COVID-19 global pandemic to reliably interpret the data, and continued study is warranted.