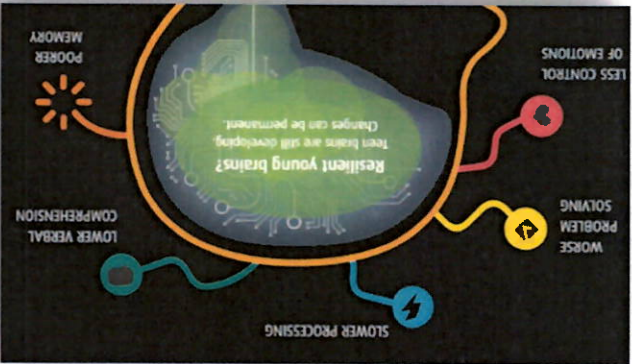


SB24-047 Senate Health & Human Services Committee
 Peer Assistance Services Inc., is pleased to support Section 13 of SB24-047 that requires the Screening, Brief Intervention, and Referral to Treatment statewide adolescent substance use screening in schools and pediatric settings.

Background

- 20-year history of statewide SBIRT programming.
- Consecutive 5-year SAMHSA grants from 2006-2016 → \$20 million for SBIRT implementation.
- Colorado has supported SBIRT using Marijuana Tax Cash Dollars since 2016.
- PAS has provided 500 SBIRT trainings provided statewide, with one-quarter adolescent-focused trainings.
- Trainings reached 40 out of 64 Colorado counties; 65% being Rural or Frontier counties.

- Substance Use
- Before age 15 significantly increases the risk of developing a substance use disorder.
- Substance use and mental illness are often co-occurring issues.
- SBIRT is...
- An evidence-based practice recommended by the American Academy of Pediatrics, to be implemented by age 12.
- Screening uses validated questions (e.g., CRAFFT, AUDIT, DAST).
- Brief Intervention involves a supportive conversation based on screening results, helping young people identify reasons to avoid or change substance their use.
- Referral to Treatment: includes further evaluation and follow-up to address any escalating substance use, identifying services to address concerns; for example, apps and virtual programs and positive social activities.
- Data demonstrates that most youth who report alcohol or drug use do not need treatment. They need follow-up and support.



- Key Data from the 2023 Youth Provider Survey
- PAS collaborated with NORC at the University of Chicago to conduct this research project. The Youth Provider Survey aimed to inform us on the extent of SBIRT implementation in adolescent settings. There were 260 respondents who work in pediatric settings and schools.

Topic	Respondent Demographics	Locations	Currently Screening	Common Challenges and Needs	Knowledge and Expertise	Past SBIRT Training
Primary Care including SBHCs	Physicians/APRNs/PAs	Urban Rural	80% currently screen	Resources Patient-related needs Competing priorities Lack of training	22% reported low knowledge 33% reported low expertise	53% reported past SBIRT training
K-12 Schools	Nurses and Behavioral Health staff	Urban Rural Suburban Frontier	27% currently screen	Resources Student-related needs Competing priorities Lack of training	50% reported low knowledge 61% reported low expertise	35% reported past SBIRT training