



School SBIRT Tool Kit

Protocol (Initial/Follow Up)
GAIN-SS (Initial/Follow Up)
TLFB Calendar (AOD, general)
Pros & Cons worksheet
Change Plan worksheet

2016-2017

School SBIRT Protocol – Initial Session (2016-2017)

ENGAGING

- [Introduction] *What I would like to do in our meeting today is to administer a brief questionnaire, then we might meet 2 to 4 times to check in during the next few weeks. What I would like to do is talk with you about your experiences with (target behavior). I'm not going to lecture you or tell you what to do; only you can make those decisions for yourself. I just want to think with you about how (target behavior) fits into your life. Would this be okay?*
- *Everything we discuss is confidential. What is your understanding of "confidential"?* [Discuss limits of confidentiality.]
- *Tell me a little about your thoughts about (target behavior).*
- Listen carefully and Reflect.

SCREENING → FOCUSING

- [Administer **GAIN-SS/ TLFB Calendar**] *To get our conversation started, I'd like you to complete a brief confidential questionnaire...*
- Review and ask for more detail about selected symptoms. Provide feedback using E-P-E:
 - 1) *Would it be okay if I shared with you some feedback based on your responses?*
 - 2) Provide results in terms of risk level,
 - 3) *What are your thoughts on this?* Reflect.
- Collaboratively select target behavior or substance.

EVOKING

- [**Importance Ruler, 0-10**] *On a scale of 0 to 10 where 0 is "not at all important" and 10 is "very important," how important is it for you to address or make a change with (target behavior)?*

0 1 – 4 Not at all Important	<i>What would it take to get to a 1 or 2 on importance for change? Reflect.</i> <i>Why a ___ and not a 0 on importance for change? Reflect.</i> <ul style="list-style-type: none"> • [Pros & Cons] <i>In your view, what are some of the good things of continuing <u>(target behavior)</u>? What else? On the other hand, what are some of the not-so-good things of continuing? What else?...</i> • <i>Summarize Pros/Cons: So given the good things and not-so-good things, where does this leave you?</i> • <i>If you decided to make a change, like cutting down or taking a break with <u>(target behavior)</u>, what do you think would happen? Reflect.</i>
5 – 7 Somewhat Important	<i>What would it take to go from a ___ to a (slightly higher number) on importance for change? Reflect.</i> <ul style="list-style-type: none"> • <i>What do you think you might be able to change? Reflect.</i> • <i>How has <u>(target behavior)</u> stopped you from being able to do what you want to do? Reflect.</i> • <i>What concerns you the most about <u>(target behavior)</u>? Reflect.</i>
8 – 10 Very Important	<i>Talk about why you're at this high number. Reflect.</i> <ul style="list-style-type: none"> • <i>If you had a month off from <u>(target behavior)</u>, how would your life be different? Reflect.</i> • <i>From your point of view, what needs to happen... what has to change? Reflect.</i> • <i>How ready are you to change <u>(target behavior)</u>? Reflect.</i>

- Signals of readiness? If **yes**, summarize Evoking and "test the water" for Planning. If **no**, summarize Evoking and Wrap-up.

PLANNING

- [Test the water] *If we looked ahead to the next week or two, I'm wondering if you'd be willing to try a specific goal? What are your thoughts about changing (target behavior)? What goal would you be willing to try?*
- [**Change Plan**] With the student's full input, collaboratively develop a specific goal. If needed, use E-P-E to provide a menu of options (e.g., decrease frequency, quantity, or take a break). Complete **Change Plan**.
- [**Confidence Ruler, 0-10**] *On a scale of 0 to 10 where 0 is "not at all confident" and 10 is "very confident" how confident are you right now for achieving the goal of _____? Ask follow-up question. Reflect.*

Wrap-up: *We're just about done. To summarize our conversation...* (highlight: perceived importance and reasons for change; goal and confidence for change). Find out student's willingness to meet again and schedule follow-up session.

School SBIRT Protocol – Follow Up Session (2016-2017)

ENGAGING

- *I'd like to check in with you for a few minutes about how things have been going with (target behavior). Is this a good time?*
- *Tell me, how have things been going since we last met. Reflect.*
- *[If a Change Plan was developed last time.] How did you do with your goal of _____? Reflect.*
- *Continuing Focusing on target behavior as before.*

EVOKING

- *If student seems ambivalent about continuing to address the target behavior, administer **Pros & Cons**: I'm wondering if we could continue to explore your perspectives on (target behavior) ?*
 - *In your view, what are some of the good things about (target behavior) ? What else?... Reflect.*
 - *On the other hand, what are some of the not-so-good things? What else?... Reflect.*
 - *Summarize Pros/Cons: So given the good things and not-so-good things, where does this leave you?*
 - *Reflect.*
- **[Importance Ruler]** *On a scale of 0 to 10 where 0 is "not at all important" and 10 is "very important" how important is it for you to continue addressing or making changes with (target behavior) ? Follow up question:*
 - *What would it take to go from a ___ to a (slightly higher number) for importance? OR Tell me about why you're at this high number.*
 - *Reflect.*
- *What was good about the making the change?*
- *How has your life been better since you started making this change?*

PLANNING

- *If we looked ahead to the next week or two, what are your thoughts about...*
 - *Trying the same goal? OR*
 - *Trying a more ambitious goal?*
- **[Change Plan]** *With student input, set the goal for change, then review the original plan and make any revisions:*
 - *How might you go about achieving this goal?*
 - *What might get in the way (obstacles) of reaching it?*
 - *What can you do to prevent these obstacles?*
 - *Who would support you the most in achieving this goal?*
- **[Confidence Ruler]** *On a scale of 0 to 10 where 0 is "not at all confident" and 10 is "very confident" how confident are you right now for achieving the current goal of _____? Ask follow-up question. Reflect.*

* * * * *

[About one month after Initial Session] **Final BI Session**

- Re-administer the **GAIN-SS** [Follow Up Version] and **TLFB Calendar** (same target behavior) for the past 30 days.
- Review Initial/Follow Up **GAIN-SS** with student. *What do you see from the first questionnaire you completed a month ago compared to this one? Reflect.*
- Review Initial/Follow Up **TLFB Calendars** with student. *What do you see from the first calendar you completed a month ago to this one? Reflect.*
- *Talk about the connection between changes you made to (target behavior) and (decrease of problem symptoms).*

Wrap-up: *We're just about done. To summarize our conversation...* (highlight: perceived importance and reasons for change; goal and confidence for change). Consider referral for further services, if needed.

GAIN-Short Screen

Student name: _____

Today's date: _____

<p>The following questions are about common psychological, behavioral, and personal problems. These problems are considered <u>significant</u> when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on.</p> <p>After each of the following questions, please tell us the last time that you had the problem, if ever, by answering, "In the past month" (3), "2-12 months ago" (2), "1 or more years ago" (1), or "Never" (0).</p>	Past month	2 to 12 months ago	1+ years ago	Never
	3	2	1	0

1. When was the last time that you had significant problems...
 - a. with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future? ... 3 2 1 0
 - b. with sleeping, such as bad dreams, sleeping restlessly, or falling asleep during the day? 3 2 1 0
 - c. with feeling very anxious, nervous, tense, fearful, scared, panicked, or like something bad was going to happen? 3 2 1 0
 - d. with becoming very distressed and upset when something reminded you of the past? ... 3 2 1 0
 - e. with thinking about ending your life or committing suicide? 3 2 1 0

2. When was the last time that you did the following things two or more times?
 - a. Lied or conned to get things you wanted or to avoid having to do something? 3 2 1 0
 - b. Had a hard time paying attention at school, work, or home? 3 2 1 0
 - c. Had a hard time listening to instructions at school, work, or home? 3 2 1 0
 - d. Were a bully or threatened other people? 3 2 1 0
 - e. Started fights with other people? 3 2 1 0

3. When was the last time that...
 - a. you used alcohol or drugs weekly? 3 2 1 0
 - b. you spent a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs? 3 2 1 0
 - c. you kept using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people? 3 2 1 0
 - d. your use of alcohol or drugs caused you to give up, reduce or have problems at important activities at work, school, home, or social events? 3 2 1 0
 - e. you had withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or that you used any alcohol or drugs to stop being sick or avoid withdrawal problems? 3 2 1 0

4. When was the last time that you...
 - a. had a disagreement in which you pushed, grabbed, or shoved someone? 3 2 1 0
 - b. took something from a store without paying for it? 3 2 1 0
 - c. sold, distributed, or helped to make illegal drugs? 3 2 1 0
 - d. drove a vehicle while under the influence of alcohol or illegal drugs? 3 2 1 0
 - e. purposely damaged or destroyed property that did not belong to you? 3 2 1 0

GAIN-Short Screen
[Follow Up Version]

Student name: _____

Today's date: _____

The following questions are about common psychological, behavioral, and personal problems. These problems are considered significant when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. After each of the following questions, please let us know if you had the problem in the past month by responding Yes (1) or No (0).

	<u>Yes</u>	<u>No</u>
1. <u>During the past month</u> , have you had <u>significant</u> problems...		
a. with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?.....	1	0
b. with sleeping, such as bad dreams, sleeping restlessly, or falling asleep during the day?.....	1	0
c. with feeling very anxious, nervous, tense, fearful, scared, panicked, or like something bad was going to happen?	1	0
d. with becoming very distressed and upset when something reminded you of the past?	1	0
e. with thinking about ending your life or committing suicide?	1	0
2. <u>During the past month</u> , did you do the following things <u>two or more times</u> ?		
a. Lied or conned to get things you wanted or to avoid having to do something?	1	0
b. Had a hard time paying attention at school, work, or home?	1	0
c. Had a hard time listening to instructions at school, work, or home?	1	0
d. Were a bully or threatened other people?	1	0
e. Started fights with other people?	1	0
3. <u>During the past month</u> , have you...		
a. used alcohol or drugs weekly?	1	0
b. spent a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs?	1	0
c. kept using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	1	0
d. your use of alcohol or drugs caused you to give up, reduce or have problems at important activities at work, school, home, or social events?	1	0
e. you had withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or that you used any alcohol or drugs to stop being sick or avoid withdrawal problems?	1	0
4. <u>During the past month</u> , have you...		
a. had a disagreement in which you pushed, grabbed, or shoved someone?	1	0
b. took something from a store without paying for it?	1	0
c. sold, distributed, or helped to make illegal drugs?	1	0
d. drove a vehicle while under the influence of alcohol or illegal drugs?	1	0
e. purposely damaged or destroyed property that did not belong to you?	1	0

TLFB Calendar

Student name: _____

Today's date: _____

- O – alcohol (days)
- X – marijuana (times)
- ☆ – other drugs (days)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

During the past 30 days, on how many days did you have at least one drink of alcohol? _____

During the past 30 days, how many times did you use marijuana? _____

During the past 30 days, on how many days did you use other drugs, including prescription drugs without a doctor's prescription? _____

TLFB Calendar

Student name: _____

Today's date: _____

X – target behavior (days or times)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

During the past 30 days, on how many days (or times) did the target behavior occur? _____

Pros & Cons

Student: _____

Today's date: _____

In your view...

On the other hand...

<i>What are some of the good things, or "pros" of continuing <u> (target behavior) </u> ?</i>	<i>What are some of the not-so-good things, or "cons" of continuing <u> (target behavior) </u> ?</i>
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
<i>What else?</i>	<i>What else?</i>

Summarize pros and cons.

So, based on the good things and the not-so-good things, where does this leave you?

Change Plan

Student: _____

Initial Session date: _____

Follow Up Session dates: _____

*If we looked ahead to the next week or two, I'm wondering if you'd be willing to try a specific goal?
What are your thoughts about changing (target behavior) ?*

- With student input, develop a goal for change which is specific, in terms of target behavior, time-limited.
- If needed, use E-P-E to offer a menu of options (e.g., decrease frequency, quantity, or take a break).
- Write down the goal that the student will work on.

Initial Session	Follow Up Session Notes
<p>1. Change goal (specific, in terms of target behavior, time-limited):</p> <hr style="border: 0.5px solid black; margin: 10px 0;"/> <p>2. <i>How might you go about achieving this goal? What else?</i></p> <p>3. <i>What might get in the way (obstacles) of reaching your goal?</i></p> <ul style="list-style-type: none"> ❖ ❖ ❖ <p>4. <i>What could you do to prevent these obstacles?</i></p> <ul style="list-style-type: none"> ❖ ❖ ❖ <p>5. <i>Who would support you the most in achieving this goal? What would your best friend say about you making this change?</i></p>	

- Administer **Confidence Ruler** regarding the goal.
- Wrap-up with summary of session.