In 2020, 584 Mainers died from alcohol-related causes, an increase of 28% from 2019

Program Overview

Lunder-Dineen Health Education Alliance of Maine developed the

Time To Ask Program

to expand regular screening and monitoring of unhealthy alcohol use in Maine by advancing the skills and increasing capacity of the interprofessional care team in discussing alcohol use with their patients.

The program was implemented at 7 primary care sites across 5 rural Maine counties serving over 35,000 patients

Program components include
Online **blended-learning modules** and **practice facilitation** consisting of support and **consultation** from experts

293
Participants were trained in at least one module across three healthcare organizations

Participant Outcomes

Training participants viewed the content and design of the training modules favorably
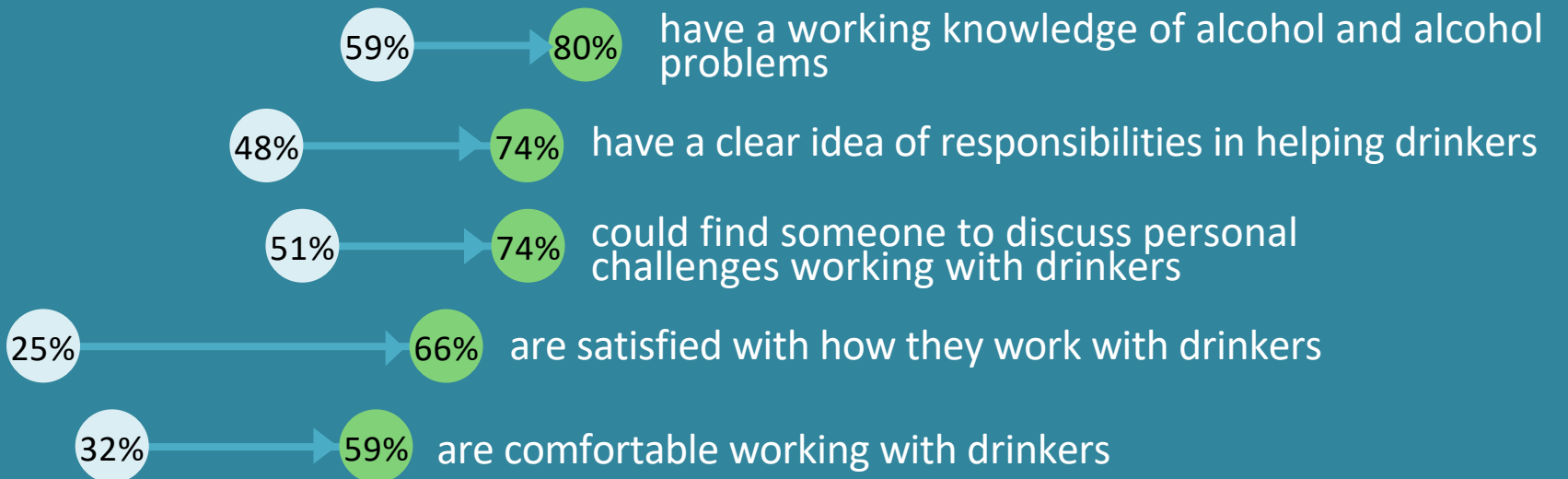
87%
of all staff agreed that language and approaches matter when working with patients who drink

81%
of clinical staff reported learning new information that they could implement within the same month

Program implementation improved staff attitudes and beliefs about working with patients who drink. There was a statistically significant increase in learner beliefs around the legitimacy of their roles, perceptions of support for their role, and self-esteem and satisfaction in working with drinkers.

before → after TTA implementation

59% → 80% have a working knowledge of alcohol and alcohol problems

48% → 74% have a clear idea of responsibilities in helping drinkers

51% → 74% could find someone to discuss personal challenges working with drinkers

25% → 66% are satisfied with how they work with drinkers

32% → 59% are comfortable working with drinkers

Participants viewed the peer support component of the expert consultation as valuable to their development of expertise and confidence in working with patients who drink. Reported benefits of consulting experts included:

- Support of team decisions by experts
- Enhanced provider understanding of application of SBIRT workflows in clinical practice
- Anecdotes from personal experience made implementing new clinical strategies seem more manageable
- Consultation around prescribing and medication management for alcohol use disorder

[As a result of the consultation] I feel better equipped to assess and manage patients

[I] appreciated his personal experiences and stories and practice anecdotes … [it was] informative and enhanced the written knowledge

Organizational Outcomes

Participants felt that practice facilitation helped practices embed SBIRT into the fabric of their organization.
Positive outcomes associated with onsite practice facilitation include:
- Incorporating TTA program curriculum into onboarding process for new staff
- Defining staff roles and responsibilities and clinical workflows related to SBIRT
- Updating alcohol screening policies; two of the three participating sites shifted screening practices to conducting standardized alcohol screening at all patient visits; and
- Using TTA collateral products including waiting room vides, posters on alcohol consumption and impact on the body, and patient and provider pocket guides on alcohol use.

Key Findings

Content relevant to interprofessional learners
Content was well received by health care professionals; although individuals entered the training with varied levels of exposure to individuals with AUDs, most participants gained new knowledge and skills to apply to their role

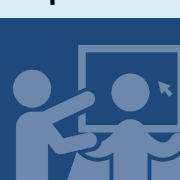**Positive impact on provider knowledge, attitudes, and behaviors**
Education had a positive impact on provider attitudes and behaviors. Participants reported they would change behavior by screening patients for unhealthy alcohol use; promoting collaboration within the care team; and changing their interaction with patients to be less stigmatizing and more patient-centered

Leveraging statewide expertise to enhance provider capacity
Health care professionals indicated overwhelmingly that the peer support they received as part of the expert consultation was one of the most valuable components of the program.

Expanded organizational capacity for SBIRT
Onsite consultative practice support by Lunder-Dineen played a key role in promoting enhanced alcohol screening polices, expanding the use of brief interventions and medications to treat alcohol use disorder as well as referrals to higher levels of specialty care when appropriate.

TIME TO ASK
Education that transforms conversations about alcohol use

For more information, visit
https://lunderdineen.org/alcohol-use-time-ask

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