Identifying Core Behavioral and Psychosocial Data Elements relevant to substance use disorders for the Electronic Health Record (EHR)

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Immediate CTN EHR Project Goals

- Incorporate consensus-based common data elements relevant to screening and treatment of substance use disorders into a public data standards repository database as a resource for biomedical researchers and EHR vendors.

  Consider:

  - Office of the National Coordinator for Health Information Technology (ONC) **common data standards** requirements
  - CMS requirements for "**meaningful use**"

- Code selected common data elements in terms of established vocabularies and data standards consistent with those of ONC and CMS

- Deposit these common data elements into the NCI's Cancer Data Standards Registry and Repository (caDSR)

- Our current effort of identifying consensus-based common data elements relevant to screening and treatment of substance use disorders has been informed by 7 meetings at national conferences with federal, state, professional society and community-based treatment stakeholders. An example follows.

Summary: May 2-3 NIH OBSSR and Society of Behavioral Medicine Meeting on "Identifying Core Behavioral and Psychosocial Data Elements for the Electronic Health Record"

Background

- **This NIH meeting was organized and supported by the Office of Behavioral and Social Sciences Research (OBSSR) and Society of Behavioral Medicine.**

- **<u>Goal:</u> To develop a consensus among various federal, state, community and industry stakeholders on:**

  – **Recommendations for standardized, practical set of behavioral and psychosocial patient report variables to be collected in primary care electronic health record systems (EHRs)**

- **Could lead to advancements in data harmonization in behavioral health research.**

Background

- **Harmonized screening and collection of standard data on behavioral issues will facilitate:**
  - **Screening, brief interventions and appropriate referrals to specialty treatment in primary care**
  - **Patient-centered shared clinical decision-making**
  - **Population health management**
  - **Biomedical research**
    - **Comparative Effectiveness Research**
    - **Epidemiology**
    - **Personalized medicine (through meta-analyses of large data sets combining health behavior data with medical and biological information)**

Substance Use Disorders: General Recommendations

- Illicit drug, alcohol and tobacco use should be screened (i.e., screening, brief intervention and referral to treatment) in the primary care setting.

- Employ a staged approach to screening and assessment
  - Employ single-question screeners for illicit drug and alcohol use (validated where available)
  - Employ additional brief assessment instruments (validated where available)

- Future considerations
  - Employ additional substance use disorder screening assessment questions from standardized instruments where there is significant alcohol or illicit substance use
  - Employ longitudinal data collection with standardized questions and timeframe (for example, 3 months)

Substance Use Disorders: Specific Recommendations

- **Specific Recommendations for core validated drug use screening questions for EHR:**
  - Single-question screening for illicit drug use and prescription medication use for non-medical reasons:
    - Smith PC, Schmidt SM, Allensworth-Davies D, and Saitz R. A single-question screening test for drug use in primary care. *Arch Intern Med* 2010; 170(13):1155-1160

  "How many times in the past year have you used an illegal drug or used a prescription medication for non-medical reasons?"

  - For additional screening/assessment, the DAST-10 was chosen over the NM-ASSIST because of brevity and the extent of validation:
    - Yudko E, Lozhkina O, Fouts A. A comprehensive review of the psychometric properties of the Drug Abuse Screening Test.

    J Subst Abuse Treat 2007;32(2):189-198

Risky Drinking/Alcohol Use: Specific Recommendations

- **Specific Recommendations for core validated risky drinking/ alcohol use disorder questions for EHR:**
  - **Pre-screen question: "Do you sometimes drink alcoholic beverages?"**
  - **Single Question Alcohol Use Screener:**
    - **Smith PC, Schmidt SM, Allensworth-Davies D and Saitz R. Primary care validation of a single-question alcohol screening test.** *J Gen Intern Med* **2009; 24(7):783-8 (NIAAA recommended question)**

  "How many times in the past year have you had X or more drinks in a day? (where X is 5 for men and 4 for women, and a response of $\geq$ 1 is considered positive)."
  - **Additional assessment: Alcohol Use Disorders Identification Test – Consumption (3-item AUDIT-C):**
    - **Bush K, Kivlahan DR, McDonell MB, Fihn SD and Bradley KE. The AUDIT alcohol consumption questions (AUDIT-C): an effective brief screening test for problem drinking. Ambulatory Care Quality Improvement Project (ACQUIP). Alcohol use disorders identification test.** *Arch Intern Med* **1998; 158:1789-95**

Tobacco Use: Specific Recommendations

- **Specific Recommendations for core validated tobacco use questions for EHR:**
  - **Implement screening and assessment with validated questions for the 5 A's.**
  - **Additional suggestions:**
    - **Use BRFSS – Behavioral Risk Surveillance System (CDC) for the "Ask" question regarding identifying and documenting tobacco use status for every patient**
    - **Ask about exposure to secondary smoke**
  - **Other screening instruments commented in the wiki, such as the FTND, were not considered to be appropriate for primary care.**

Tobacco Use: Specific Recommendations

- **<u>Recommended Screener questions for all patients at every visit</u>**
  Have you used tobacco in the last 30 days?
  Smoked Cigarettes: Yes _____   No_____
  Used a Smokeless Tobacco Product:
  Yes_____   No_____
  For all who responded YES to having smoked or used smokeless tobacco in the last 30 days:
- **Would you be interested in quitting tobacco use within the next few weeks?**
 Yes_____   No_____

  <u>For all who responded YES to Question 2, the EHR then prompts the CLINICIAN to answer the following questions</u>:
  Did you provide brief counseling/coaching to quit?   Yes_____   No_____

  Did you prescribe or recommend that the patient to use one of the seven FDA-approved medications for tobacco cessation?   Yes_____   No_____
  Did you refer the patient to your State's Tobacco Quitline (1-800-QUIT-NOW):
  Yes_____   No_____
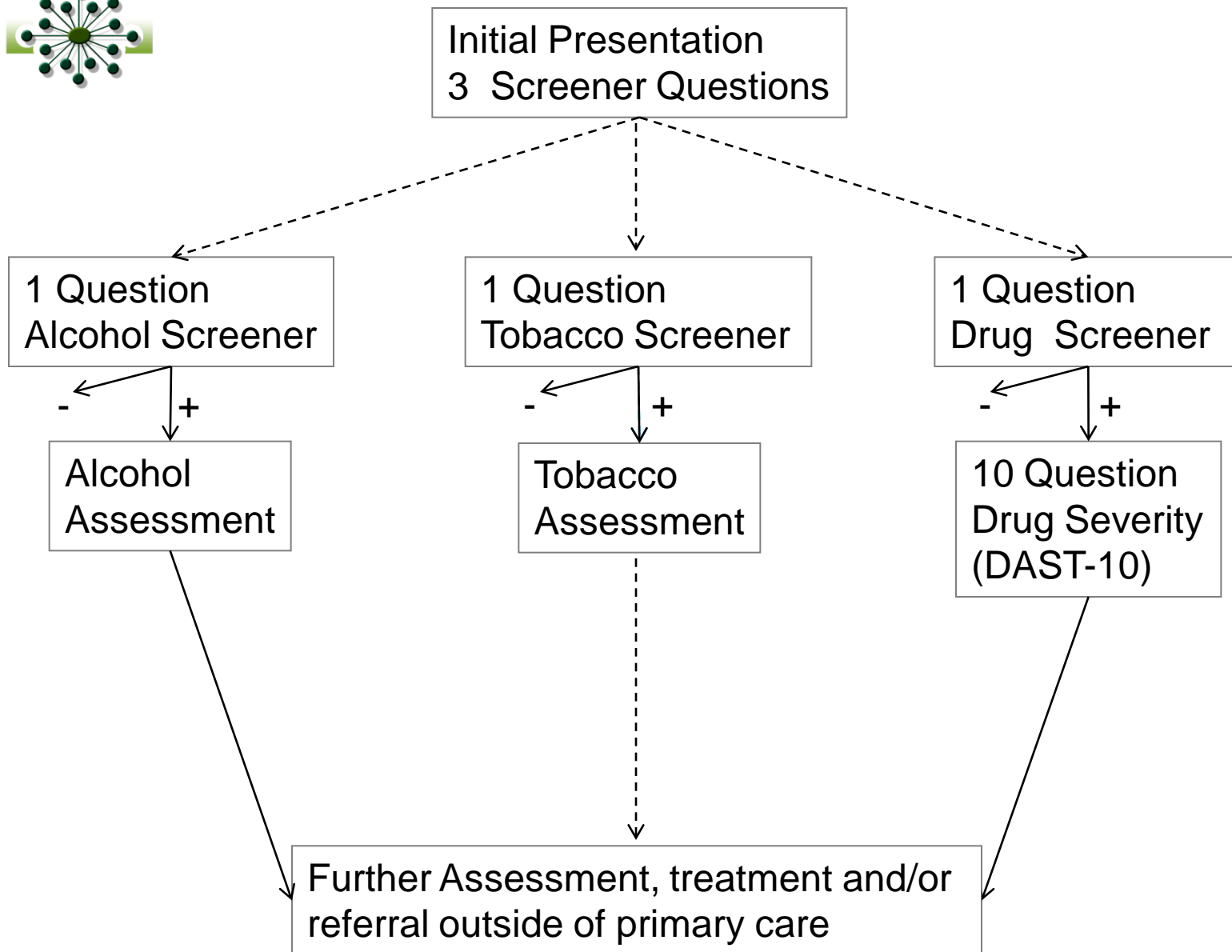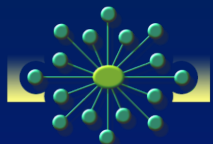
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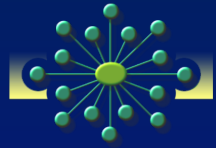 - Brian Campbell
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