

# Guideline



## CCHMC Trauma Service Guidelines

Title: CRAFT Screening

Effective Date: 06/2023

Number: TR-25

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### 1.0 SCOPE

- 1.1. Care of the Trauma Services Patient at CCHMC.

### 2.0 DEFINITIONS

- 2.1. **CRAFT**: A validated tool for pre-adolescent / adolescent substance abuse screening (CRAFT: **C**ar, **R**elax, **A**lone, **F**orget, **F**riends, **T**rouble)
- 2.2. **SBIRT**: Screening brief intervention and referral for treatment
- 2.3. **ACS**: American College of Surgeons

### 3.0 GUIDELINE

- 3.1. The 2022 ACS Verification Standard 5.3: Alcohol Misuse Screening requires trauma centers screen for substance abuse.
  - 3.1.1. Programs must achieve a screening rate of at least 80 percent.
  - 3.1.2. The standard applies to all admitted injured patients, regardless of activation status.
  - 3.1.3. Applies to all admitted injured patients greater than 12 years old.
  - 3.1.4. Screening needs to be completed with a validated tool or routine blood alcohol content testing.
- 3.2. The CRAFT is an efficient and effective health screening tool designed to identify substance use, substance-related riding/driving risk, and substance use disorder among youth ages 12-21.
  - 3.2.1. The CRAFT has been shown to be valid for adolescents from diverse socioeconomic and racial/ethnic backgrounds.
  - 3.2.2. The current version of CRAFT 2.1, includes evidence-based revisions to increase the sensitivity and specificity of the tool and includes vaping.
  - 3.2.3. The CRAFT 2.1+N contains additional questions about tobacco and nicotine use.
- 3.3. CRAFT screen should be completed for injured patients that are admitted  $\geq 24$  hours who are capable; ages 12 years and older.
  - 3.3.1. Patients that are not developmentally able to answer the questions are ineligible.
  - 3.3.2. Patients with a traumatic brain injury that are not able to answer questions are ineligible.
  - 3.3.3. Families retain the right to refuse the screening.
  - 3.3.4. Injured and eligible patients may be admitted to various services including but not limited to: Trauma, Orthopedics, Plastic Surgery, Hospital Medicine, etc.
  - 3.3.5. Injured and eligible patients may be admitted to various units including but not limited to: A7 North South, A3 North, A6 North South, etc.
- 3.4. Complete CRAFT screening tool.
  - 3.4.1. CRAFT screening should be completed upon patients' arrival to general care unit.
    - 3.4.1.1. If screening is not completed upon arrival to unit, it must be completed prior to discharge.
  - 3.4.2. Access CRAFT doc-flow sheet in EPIC to complete screening and document score (or see 3.4.4.).
    - 3.4.2.1. Record if patient is eligible, ineligible, or refused.
    - 3.4.2.2. Record the answers (in number of days) to the first four questions in part A.
    - 3.4.2.3. If applicable, part B of the screening will automatically populate.
      - 3.4.2.3.1. Record the answers (yes or no) to the remaining questions in part B.
  - 3.4.3. Once CRAFT Screening is completed, RN staff should mark the screening order in *Active Orders* as "Completed" in the electronic health record.
  - 3.4.4. A paper copy of CRAFT screen is also available and may be given to the patient to be completed (see form below).
    - 3.4.4.1. If a paper screen is used, this data must then be entered into the patient's electronic medical record.
- 3.5. Scoring and interventions.
  - 3.5.1. Scoring will automatically be calculated when answers are entered into the EPIC flowsheet.
    - 3.5.1.1. CRAFT Score 0 = Low Risk of substance abuse. Appropriate interventions include brief advice and positive reinforcement of behavior by screener.

- 3.5.1.2. CRAFFT Score 1 = Medium Risk of substance abuse. Appropriate interventions include providing the family with Knowing Note Alcohol and Drug Screening (KN-00051).
- 3.5.1.3. CRAFFT Score  $\geq 2$  = High Risk of substance abuse. Appropriate intervention includes Social Services consultation.
  - 3.5.1.3.1. Primary care team or nursing will order Social Services consult (evaluate for positive CRAFFT screening).
  - 3.5.1.3.2. Social Services will complete evaluation and referral as necessary followed by documentation in patient's medical record.

**Scoring CRAFFT+N Screening Tool**

ANSWERS	RISK	ACTION
"No" to opening questions	None	Positive reinforcement
"Yes" to Car Question	Riding risk	Discuss alternative to riding with impaired drivers
CRAFFT score = 0	Low	Brief advice / Reinforcement of behavior by nursing
CRAFFT score = 1	Medium	Nursing intervention / Provide Knowing note handout
CRAFFT score $\geq 2$	High	Consult to Social Services

# The CRAFFT 2.1+N Interview

To be verbally administered by the clinician

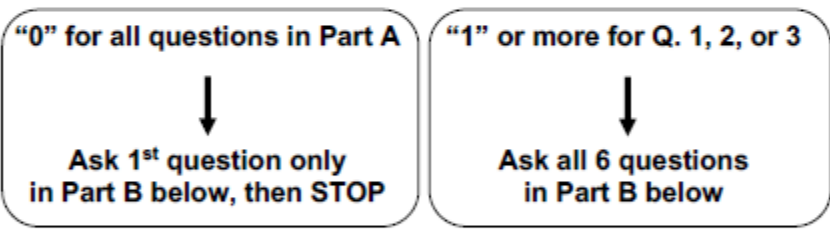
**Begin:** "I'm going to ask you a few questions that I ask all my patients. Please be honest. I will keep your answers confidential."

## Part A

During the PAST 12 MONTHS, on how many days did you:

- |   |   |
|---|---|
| 1. Drink more than a few sips of beer, wine, or any drink containing <b>alcohol</b> ? Say "0" if none.  | <input style="width: 100px; height: 20px;" type="text"/><br># of days |
| 2. Use any <b>marijuana</b> (cannabis, weed, oil, wax, or hash by smoking, vaping, dabbing, or in edibles) or " <b>synthetic marijuana</b> " (like "K2," "Spice")? Say "0" if none.   | <input style="width: 100px; height: 20px;" type="text"/><br># of days |
| 3. Use <b>anything else to get high</b> (like other illegal drugs, pills, prescription or over-the-counter medications, and things that you sniff, huff, vape, or inject)? Say "0" if none.   | <input style="width: 100px; height: 20px;" type="text"/><br># of days |
| 4. Use a <b>vaping device*</b> containing <b>nicotine and/or flavors</b> , or use any <b>tobacco products†</b> ? Say "0" if none.<br><small>*Such as e-cigs, mods, pod devices like JUUL, disposable vapes like Puff Bar, vape pens, or e-hookahs. †Cigarettes, cigars, cigarillos, hookahs, chewing tobacco, snuff, snus, dissolvables, or nicotine pouches.</small> | <input style="width: 100px; height: 20px;" type="text"/><br># of days |

### If the patient answered...



- |               |  |                   |
|---------------|--|-------------------|
| <b>Part B</b> |  | <b>Circle one</b> |
| <b>C</b>      | Have you ever ridden in a <b>CAR</b> driven by someone (including yourself) who was "high" or had been using alcohol or drugs? | <b>No Yes</b>     |
| <b>R</b>      | Do you ever use alcohol or drugs to <b>RELAX</b> , feel better about yourself, or fit in?                                      | <b>No Yes</b>     |
| <b>A</b>      | Do you ever use alcohol or drugs while you are by yourself, or <b>ALONE</b> ?  | <b>No Yes</b>     |
| <b>F</b>      | Do you ever <b>FORGET</b> things you did while using alcohol or drugs?   | <b>No Yes</b>     |
| <b>F</b>      | Do your <b>FAMILY</b> or <b>FRIENDS</b> ever tell you that you should cut down on your drinking or drug use?                   | <b>No Yes</b>     |
| <b>T</b>      | Have you ever gotten into <b>TROUBLE</b> while you were using alcohol or drugs?  | <b>No Yes</b>     |

**NOTICE TO CLINIC STAFF AND MEDICAL RECORDS:**  
The information on this page is protected by special federal confidentiality rules (42 CFR Part 2), which prohibit disclosure of this information unless authorized by specific written consent.

#### 4.0 REFERENCES

- 4.1 American College of Surgeons. (2002). Resources for optimal care of the injured patient: 2022 Standards. American College of Surgeons.
- 4.2 Boston Children's Hospital. (2018). About the CRAFFT. Retrieved January 23, 2023, from <https://craftt.org/>
- 4.3 CDC. Youth Risk Behavior Surveillance- United States,. (2009). MMWR Recomm Rep, 59.
- 4.4 NIAAA Alcohol screening and brief intervention for youth: A practitioner's guide. (2011). Accessed May 1, 2015, at [www.niaaa.nih.gov/YouthGuide](http://www.niaaa.nih.gov/YouthGuide)).
- 4.5 SAMHSA. Results from the 2010 National Survey on Drug Use and Health: Summary of National Findings. (2011). Rockville, MD: SAMHSA.

#### 5.0 APPROVALS

All revisions of this guideline are approved by the Trauma Service Department. This guideline is reviewed every three years or sooner if deemed necessary. Policy authority for this document resides with the Trauma Service Department. This guideline is approved by the Trauma Service Manager and the Director of Trauma Services.

<b>HISTORY</b>	
<b>Original Date</b>	
	09/2009
<b>Revision Date</b>	
	05/15, 06/21, 6/23
<b>Review Date</b>	
	06/18