Patient-centered care and Motivational Interviewing

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Agenda

• 45-60 minutes recorded lecture
  • Patient-centered care
    • Evaluating the patient perspective
  • Treatment adherence
    • Introduction to motivational interviewing

• 45-60 minutes for discussion
  • Questions
  • Case examples and consultation
Review

• What is Behavioral Health?
• The stress response
  • Will follow up on this more next session
• The importance of relationship and communication
What is Behavioral Health?

Mental Health:
- Psychiatric
  - Severe and persistent mental illness
- Substance use
- Evaluation & diagnosis
- Coping skills for stress & common psychosocial issues

Stress:
- Suicidality & passive morbid ideation
- Being overwhelmed
- Major life changes or events

Health Behaviors:
- Weight loss
- Substance use
- Sleep hygiene
- Managing new diagnosis
- Chronic illness management
**Physician-patient relationship**

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Common factors in treatment adherence

- **TECHNIQUE/ORIENTATION 15%**
  (Skills and counseling orientation.)

- **HOPE EXPECTANCY 15%**
  (The belief that one can change and will be successful at making changes.)

- **CLIENT TRAITS 40%**
  (Their strengths, temperament, resources, and skills.)

- **THERAPEUTIC RELATIONSHIP 30%**
  (The degree to which a provider conveys a nonjudgemental, empathic, accepting, warm environment.)

(Weinberger, 1995; Beutler et al., 2002)
Physician-patient relationship

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Eliciting the patient perspective - ICE

• Ideas
  • What does the patient think is going on? What are their ideas about the possible diagnosis, treatment, or prognosis?

• Concerns
  • What are they worried is going on? What are their concerns about what is going on or about the diagnosis, treatment, or prognosis?

• Expectations
  • What are they expecting from their doctor? What are they expecting from the diagnosis, treatment, or prognosis?

(Matthys et al., 2009)
Elicit-provide-elicit

• Elicit
  • History of the presenting problem
  • Patient’s current functioning
  • Patient’s perspective

• Provide
  • Education
  • Advice

• Elicit
  • Patient’s perspective
Five “A”s

• Ask
• Advise
• Assess
  • Patient’s perspective
  • Stage of change?
• Assist
  • Problem solving
  • Motivational Interviewing
• Arrange
Non-adherence

Lack of knowledge?
- Education

Logistical barriers?
- Problem solving

Readiness for change?
- Pre-contemplative
  - Focus on relationship
- Contemplative
  - Motivational Interviewing
- Determination/Action
  - Problem solving

Relationship/Trust?
- Rapport building
Stages of Change

1. Pre-Contemplation
2. Contemplation
3. Determination/Preparation
4. Action
5. Maintenance
Stages of Change

1. Pre-contemplation
   • Unwilling or unable to recognize that a change should be made

2. Contemplation
   • Can recognize that a change should be made but expresses ambivalence

3. Determination/preparation
   • Ready to make a change, planning to make a change

4. Action
   • Actively working towards sustainable change

5. Maintenance
Stages of Change

Pre-Contemplation → Contemplation → Determination/Preparation → Action → Maintenance
Stages of Change

Motivational Interviewing

- Pre-Contemplation
- Contemplation
- Determination/Preparation
- Action
- Maintenance
Motivational Interviewing

• “Motivational Interviewing is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.” (Miller and Rollnick, 2012 pg. 12)

• An Overall Person-Centered Approach
  • Collaborative
    • Working in partnership and consultation with the person; negotiating
  • Evocative
    • Listening more than telling; eliciting rather than installing
  • Respectful
    • Honoring the person’s autonomy, resourcefulness, ability to choose

(Adapted from Stewert, 2013)
### Table 2. Meta-analysis, the motivational interviewing effect.

<table>
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<th>Effect measure</th>
<th>n</th>
<th>Combined effect estimate</th>
<th>P-value (95% CI)</th>
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<tr>
<td>Body mass index</td>
<td>1140</td>
<td>0.72</td>
<td>0.0001 (0.33 to 1.11)</td>
</tr>
<tr>
<td>HbA$_{1c}$ (%GHB)</td>
<td>243</td>
<td>0.43</td>
<td>0.155 (-0.16 to 1.01)</td>
</tr>
<tr>
<td>Total blood cholesterol (mmol/l)</td>
<td>1358</td>
<td>0.27</td>
<td>0.0001 (0.20 to 0.34)</td>
</tr>
<tr>
<td>Systolic blood pressure (mmHg)</td>
<td>316</td>
<td>4.22</td>
<td>0.038 (0.23 to 8.99)</td>
</tr>
<tr>
<td>Number of cigarettes/day</td>
<td>190</td>
<td>1.32</td>
<td>0.099 (-0.25 to 2.88)</td>
</tr>
<tr>
<td>Blood alcohol content (mg%)</td>
<td>278</td>
<td>72.92</td>
<td>0.0001 (46.80 to 99.04)</td>
</tr>
<tr>
<td>Standard ethanol content (units)</td>
<td>648</td>
<td>14.64</td>
<td>0.0001 (13.73 to 15.55)</td>
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(Rubak et al., 2005)
“The review has shown that motivational interviewing can be effective even in brief encounters of only 15 minutes and that more than one encounter with a patient increases the likelihood of effect.”

(Rubak et al., 2005)
Active ingredients of MI

1. Clinician Expression of Empathy
   • Listening and understanding the patient’s perspective

2. Patient Expression of Change Talk
   • The patient’s own reasons for change
Clinical Empathy

• To understand a patient’s emotional state and perspective

• To communicate that understanding to the patient
Active ingredients of MI

1. Clinician Expression of Empathy
   • Listening and understanding the patient’s perspective

2. Patient Expression of Change Talk
   • The patient’s own reasons for change
Why should the patient change?  
How should the patient change?
Why should the patient change?  
How should the patient change?

What are the patient’s answers to these questions?
The Righting Reflex

Directing
Providing information, instruction, and advice

Guiding

Following
Seeking to understand and refraining from inserting own material
Change talk vs Sustain talk

• Sustain talk
  • Reasons for not making the change, reasons why making the change is hard

• Change talk
  • Reasons for making the change, solutions to problems

• We are more likely to believe something or engage in an action if we say it ourselves.
Change Talk: DARN-CAT

- Desire
- Ability
- Reasons
- Need
- Commitment
- Activation
- Taking steps
Change Talk: DARN-CAT

- **Desire**
  - Ability
  - Reasons
  - Need
  - Commitment
  - Activation
  - Taking steps

- I wish things were different.
- I am hoping things will get better.
- I want to stop drinking alcohol.
- I wish I could lose weight.
- I would like to take my medication.
Change Talk: DARN-CAT

• Desire
• Ability
  • Reasons
  • Need
  • Commitment
  • Activation
  • Taking steps
• I know what I have to do – I just need to do it.
• I was able to eat healthier in the past.
• I can exercise sometimes.
• I could reduce my drinking.
• I am able to manage my anger.
Change Talk: DARN-CAT

- Desire
- Ability

**Reasons**
- Need
- Commitment
- Activation
- Taking steps

- Maybe I would have more energy if I was in better health.
- I want to see my children.
- I would be able to sleep better.
- I would be better able to take care of my family.
Change Talk: DARN-CAT

- Desire
- Ability
- Reasons

**Need**
- Commitment
- Activation
- Taking steps

- I need to take care of my health.
- My blood sugar cannot stay at these levels.
- I must do something about this.
- I cannot keep living like this.
Change Talk: DARN-CAT

- Desire
- Ability
- Reasons
- Need

**Commitment**

- Activation
- Taking steps

- I am going to remember to take my medication this week.
- I promise to keep the appointment.
- I will work on these changes to my diet.
Change Talk: DARN-CAT

• Desire
• Ability
• Reasons
• Need
• Commitment

• Activation
  • Taking steps

• I am going to the pharmacy when I leave here to pick up my medication.
• I am going to talk to my family about these changes when I get home.
Change Talk: DARN-CAT

• Desire
• Ability
• Reasons
• Need
• Commitment
• Activation

• **Taking steps**

• I took my medication every day this week.
• I talked to my family about my health.
The structure of MI: OARS

• Open-ended questions
  • Answer is not a “yes” or “no”

• Affirmations
  • Statements of appreciation, highlighting strengths, patient-focused

• Reflective Responses
  • Building hypotheses vs. making judgements

• Summary Statements
  • Like reflections, but adding complexity; bringing in the different levels

(Rosengren, 2009)
References


