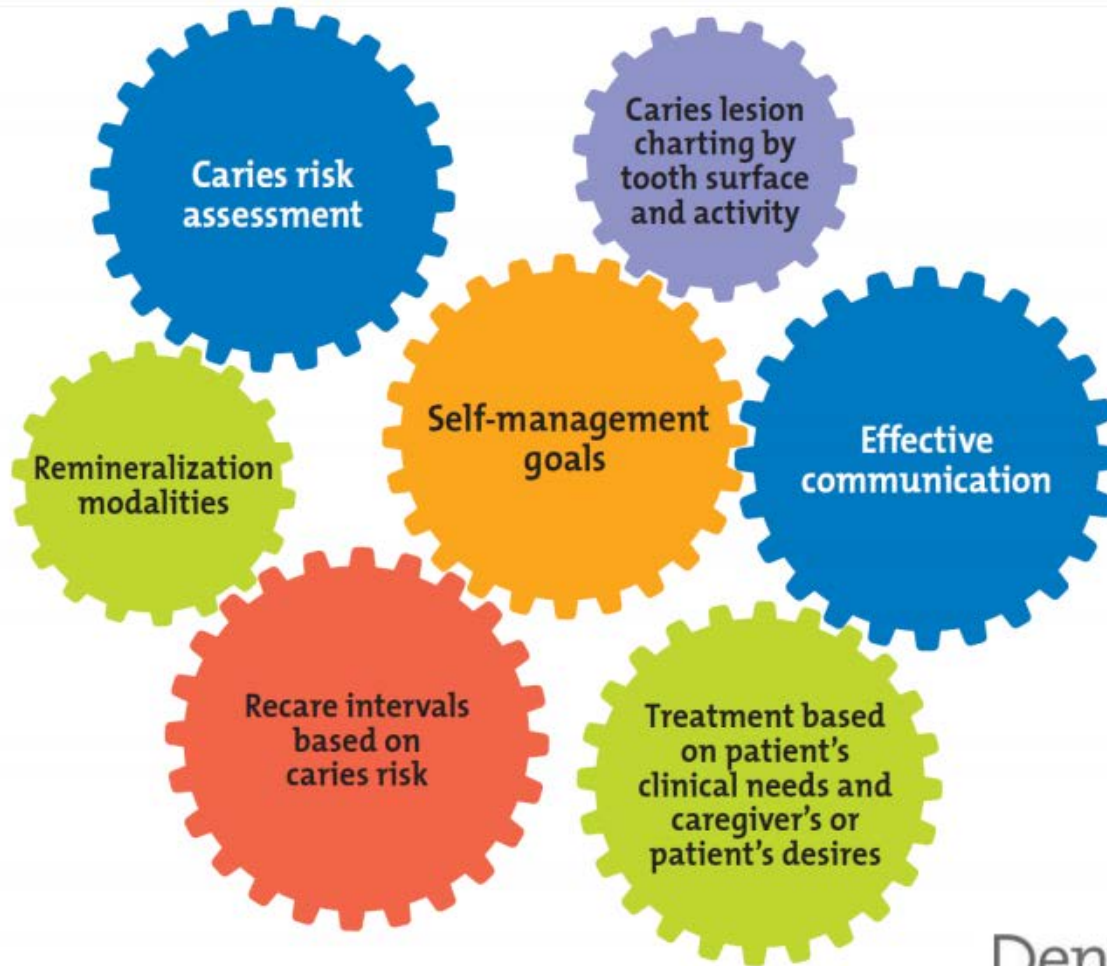


Motivational Interviewing

Clinical Connection Summit
Thursday, November 5, 2015
Workshop Session

Dr. Sam Wakim
Chief Dental Officer
Zufall Health Center

Disease Management (DM)



Group Exercise:

- Teams of 3
- Patient doesn't want to go to the dentist.
 - Patient
 - Provider
 - Observer
- Debrief
 - Summarize & Reflect





Provider is the expert.



Provider tells the patient what to do.



**Patient does not listen to the provider.
PROBLEM!!!**

Provide and patient partner in working on a common goal.



Patient is the expert on his/her own life.



Patient brings ideas to the table and makes a change.

What is Motivational Interviewing?

Motivational interviewing is a collaborative conversation to strengthen a person's own motivation for and commitment to change.

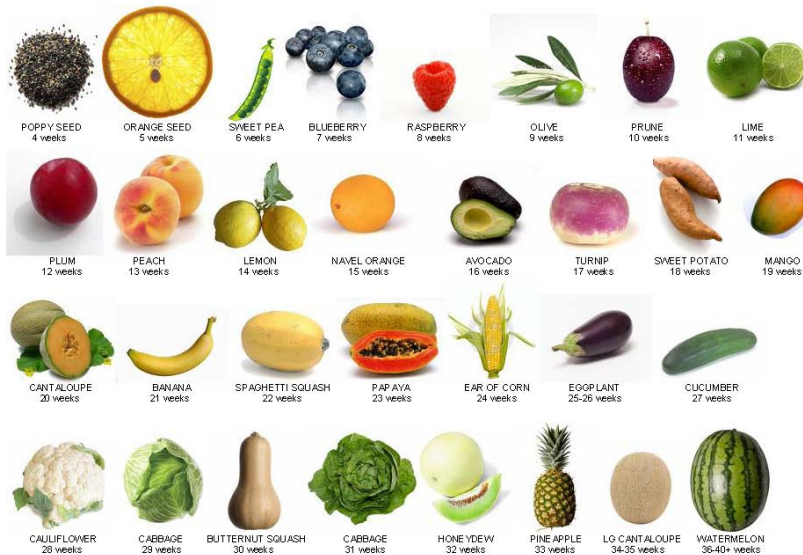


Miller & Rollnick

Motivational Interviewing: Helping People
Change, 3 ed, 2013

Why MI in Dentistry?

- Dental Health is Behavioral Health
- Dental Healing is Self-Healing





SELF-MANAGEMENT GOALS FOR PATIENTS AGE 6-20

Patient's Name: _____ Age: _____

Dental visits every ____ months

Family receives dental treatment

Healthy snacks (nuts and cheese)

Brush with fluoride toothpaste at least 2 times daily

Remineralize daily

Limit juice, soda and sports drinks to mealtime

Use fluoride mouthwash nightly

Chew sugarless gum

Drink tap water (containing fluoride)

Floss

Use xylitol

IMPORTANT:
Leave toothpaste foam in mouth at bedtime

Self-management goals: 1) _____
2) _____

On a scale of 1-10, how confident are you that you can accomplish the goals? 1 2 3 4 5 6 7 8 9 10

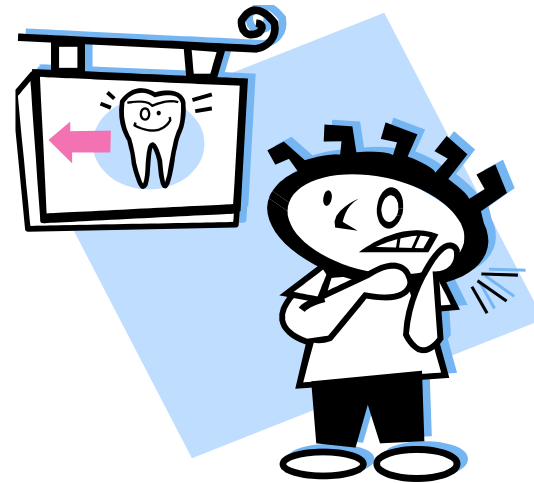
Signature _____ Date _____

Practitioner signature _____ Date _____

Shouldn't people change their behavior when they know how important it is to change?

You would think

- that a toothache, facial swelling, bad breath, and losing teeth would be enough to motivate a patient to brush, floss and go to the dentist.



Change is hard ...

- Often **not** because of lack of information or denial
- Often because of Ambivalence

Ambivalence: wanting or not wanting a change or wanting incompatible things at the same time.



Ambivalence

(unsure about a change)

Ambivalence → Anxiety → Procrastination

(avoid the anxiety of having to make a decision about the change or take action)



Top Reasons Why Adults Don't go to the Dentist

1. 40.2% Cost



2. 32.7% Do not need dental care



3. 14.1% Do not have time



Underlying concepts: Spirit of MI



- Partnership: Work collaboratively and avoid the “expert” role.



- Acceptance: Respecting the client’s autonomy, potential, strengths and perspective.



- Compassion: Keep the client’s best interest in mind.

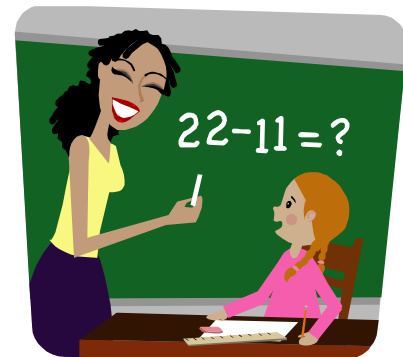
- Evocation: The best ideas come from the client.



Exercise #2

My favorite teacher ...

- What makes that teacher your favorite?
- How did you relate/interact?
- What difference or impact on your life did that teacher make?



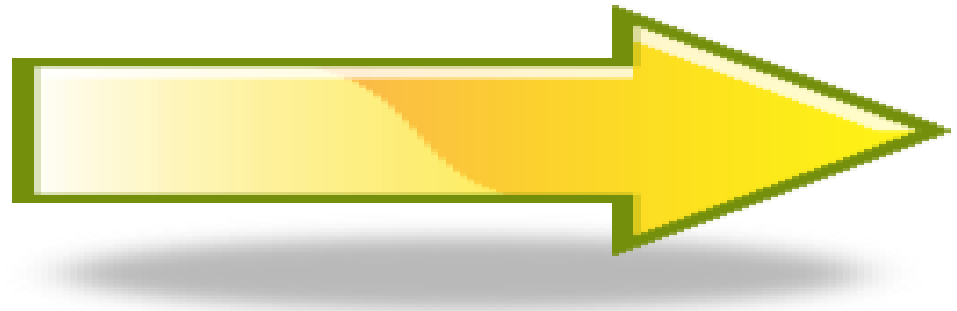
Informing in the MI way



- Ask permission
- Find out what the patient already knows
- Tailor your information to meet the needs of the patient
- Pause: provide time and space for the patient to think about and respond to the information
- Acknowledge that the patient is the expert on his/her own life
- Encourage the patient to use the information in the way that suits them best

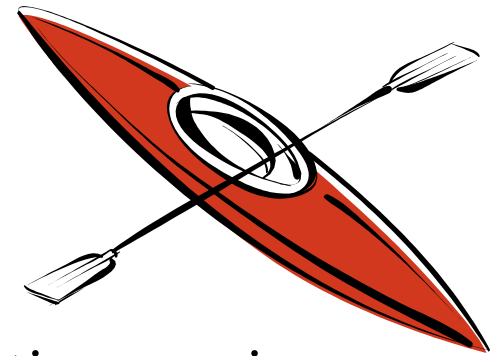
Four processes of MI

- Engaging
- Focusing
- Evoking
- Planning



-----Time----->

Core Skills: OARS



- Open-ended questions to keep the conversation moving forward and encourage self-exploration
- Affirming the patient's strengths, efforts, character and worth
- Reflective listening to stay focused on the patient and convey understanding and empathy
- Summarizing to provide the big picture and to transition

Engaging

It is the process of establishing a trusting and mutually respectful collaborative relationship.

You have to engage your client before you focus on a topic or behavior to change.



Engaging vs. Dis-Engaging

OARS

- Feeling welcome
 - Feeling supported
 - Feeling understood
 - Feeling comfortable
 - Feeling hopeful
 - Having mutual goals
- Assessing
 - Questioning
 - Telling
 - Overpowering
 - Labeling

Open Ended Questions



- "How can I help you?"
- "Tell me what you know about cavities"
- "Would you tell me how you take care of your teeth?"
- "How would you like things to be different with your teeth?"
- "What are the positive things and what are the less good things about your teeth?"
- "What have you tried before?"
- "What do you want to do next?"
- "What will you lose if you go to the dentist?"

Open Ended Questions



- "Can't you see what not going to the dentist is doing to you?"
"In what ways is not getting dental care affecting you?"
- "Aren't you concerned about your teeth?"
"How would you feel if your teeth were healthier?"
- "Are you thinking about changing your diet?"
"What are your thoughts about changing your diet?"
- "Do you feel you have a problem with your gums?"
"What problems has your gum disease caused you?"

Now try ...



Make the following closed questions into open questions.

- Can't you see that your bad teeth are affecting your heart?
- Do you agree that it would be a good idea for you to go to the dentist?
- So you are here because you are concerned about your teeth, correct?
- Are you in pain?
- It says here your main problem is bad breath. Is it?
- Do you want to go to an oral surgeon?
- Don't you want to move to get a new denture?

** (There is a general idea that we should also avoid "why" questions because they can tend to promote defensiveness.)

Affirmation to strengthen self-efficacy

- Self-efficacy – a Key part of Motivational Interviewing
 - People's beliefs about their capabilities to perform specific behaviors and their ability to exercise influence over events that affect their lives. Self-efficacy beliefs determine how people feel, think, motivate themselves and behave.
 - Albert Bandura



Affirmation

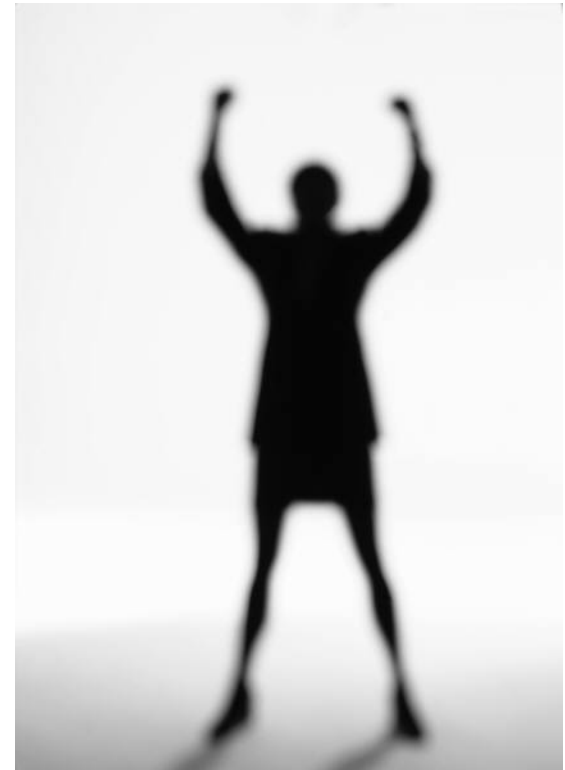
Affirmations and Validation

- Affirmation is not about the clinician agreeing, praising or approving but rather seeing the client's strengths, skills, and insights and reinforcing them.
- In MI you want to strategically anchor (make firm, drive home, reinforce) positive or prosocial internal strengths, values, beliefs, thoughts or behaviors.
- An affirmation is a validation that supports self-efficacy.

Affirmation

Positive statements about the patient's:

- Attempts
- Achievements
- Accomplishments



Affirmation



- This is hard work you are doing.
- You care a lot about your children's teeth.
- You were successful in keeping your dental appointments in the past.
- It took a lot of courage of you coming in today knowing you are so afraid of the dentist.

Affirmations

Commenting positively on an attribute

- *You're a strong person, a real survivor.*

A statement of appreciation

- *I appreciate your openness and honesty today.*

Focus on something positive the person is doing

- *You're working really hard to control your anger.*

A compliment

- *It's really powerful that you came in today, given how you were feeling.*

An expression of hope, caring, or support

- *I hope this weekend goes well for you; you have a great plan!*

Now try ...

- How would you Affirm the Wicked Witch of the West?



Reflections



1. Simple

Repeating, rephrasing; staying close to the content

2. Complex

Paraphrasing, adding meaning or emphasis

3. Empathic

Emphasizing the emotional aspect of communication

Examples of Reflective Listening

- It sounds like ...
- What I hear you saying ...
- I get the sense that ...
- So on the one hand it sounds like ... And on the other hand
.....
- It seems as if ...
- It feels as though ...

Reflections

- I don't think I have a cavity.
 - It sounds like you're not sure about the diagnosis.
- I don't like having bad breath and holes in my teeth.
 - What I hear you saying is that bad breath and holes in you teeth are a couple of things you'd like to change.
- I've been this way for so long, it's just who I am.
 - I get the sense that all of this seems normal to you.

Now try ...

Complex Reflection



- So on the one hand it sounds like ... And on the other hand
- It seems as if ...
- It feels as though ...

I know I have holes in my teeth but I'm not going to the dentist because I don't like pain.

My parents had dentures and I know that I will eventually get dentures too.

I have no pain and I don't feel the need to go to the dentist.

Summary

- A long reflection of more than one patient statement.
- Can be used to strategically used to guide the patient toward healthy behavior change by selectively summarizing the patient's own reasons for change.
- An opportunity to select salient points for the purpose of later focusing the discussion.

Summary

- I don't want to stop drinking soda.
- I like the taste.
- I'd have to find another beverage to drink with meals.
- But I'm worried about tooth erosion.
- I know the sugar could also cause cavities.



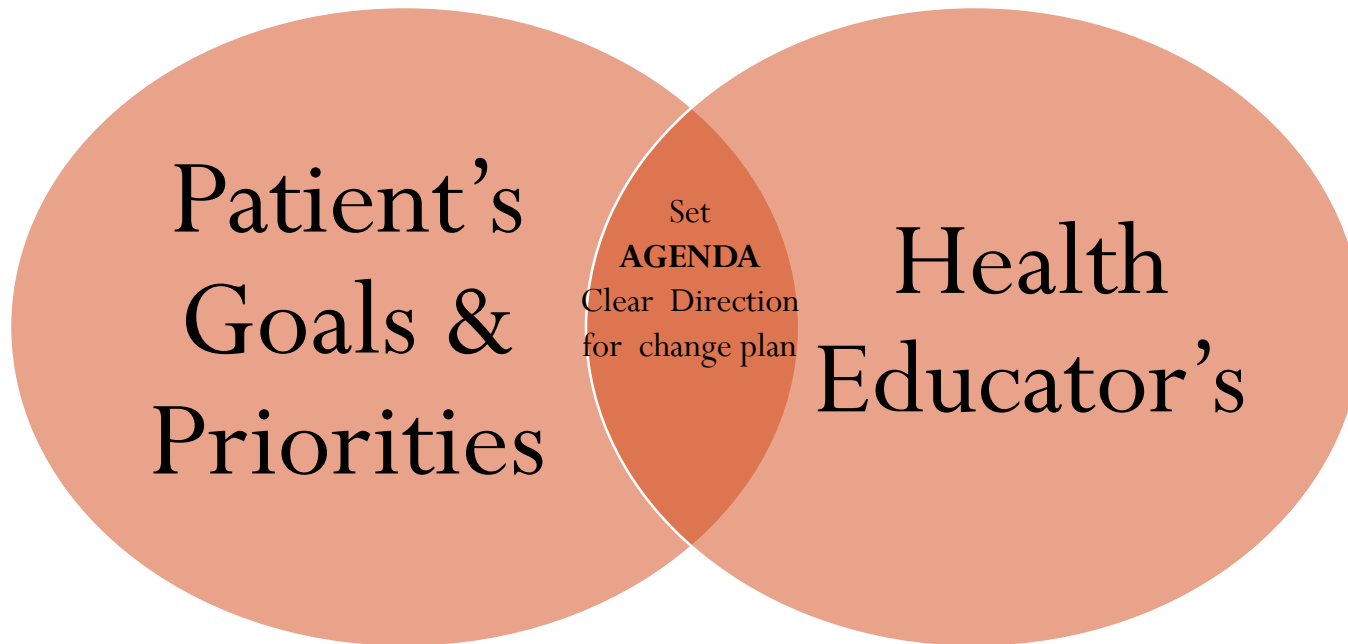
Summary:

If I understand you correctly, you've been thinking about no longer drinking soda. There is a down side that you'd have to find something else to drink. You also think another beverage would be healthier for your teeth.

Focusing

An ongoing process of seeking and maintaining direction

You have to focus on a topic before you could evoke motivation.



Focusing on Change ...

- The clinician influences the conversation by choosing:
 - What to reflect
 - What type of questions to ask
 - When to ask for elaboration
 - When to “ignore” or redirect focus

- Can you tell me more about your home care routine?



Focusing the Conversation on Change



- PATIENT: I know I have to get a lot done for my son this month, we have to do some back to school shopping, I have to make sure we buy supplies for school, get his teeth checked and sign up for afterschool activities.
- Clarifying the focus may be the first goal
 - “What I thought we’d do today is explore what, if any changes you’d like to make to improve your child’s teeth. I’d like to hear what makes your child’s health important to you and what your oral health goals are for your child”

Focusing the Conversation on Change



- PATIENT: You know Doc, I would like to see my teeth get better but I wouldn't know where to begin
 - Negotiate an agenda based menu options

Evoking

We need to evoke motivation before we could do any planning.

Evoke a patient's own motivation for change (own reasons for change)

Elicit change talk (patient speech that favors movement in the direction of change).

The more a patient engages in change talk, the more they argue for change, the more likely it is they will change their behavior.

Important to avoid steering too far or too fast in a particular direction and the
Righting Reflex

How the client talks about the change is important to the outcome

Look out for ...

Change Talk:

- **D**ESIRE to change (want, like, wish...)
- **A**BILITY to change (can, could...)
- **R**EASONS to change (if...then)
- **N**EED to change (need, have to, got to)
- **C**OMMITMENT to change (intend, decide, promise ...)
- **A**CTIVATION (willing, ready, preparing...)
- **T**AKING **S**TEPS to change (started, tried...)



Open Questions to Elicit Change Talk

Use Open Questions to elicit statements about some change that your client is thinking about making:

D: Why do you want to make this change?

A: How might you be able to do it?

What might get in the way? (identify barriers, ventilate Sustain talk)

R: What is one good reason for making the change?

N: Why do you feel that you need to change?

C: What do you intend to do?

A: What are you ready or willing to do?

T: What have you already done?



Planning



Develop a specific change plan that the patient agrees to and is willing to implement.

Evoked rather than prescribed: Ways the patients sees in making the change successfully based on their own argument for this change.

S - Specific

M - Measurable

A - Achievable

R - Relevant

T - Timed

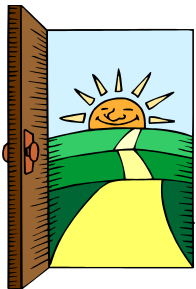


Planning in the MI way



- Avoiding prescribing the treatment or providing “the plan”
- Patient-centered problem solving, solution generating, and plan evaluation
- Building patient commitment and confidence in the plan
- Treating the plan as an experiment

Is there anything you would like to do for your health in the next week or two?



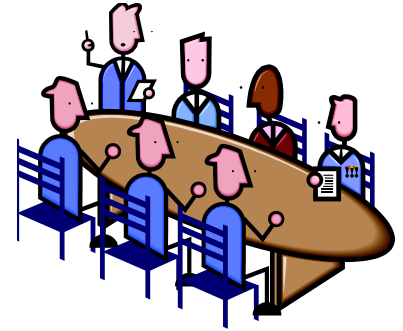
Sample ECC Interaction...

- Tell me what you know about baby teeth
- You are really concerned about your baby's teeth and worked hard to make time for this appointment.
- It must be hard to see your child with holes in the teeth
- What changes would you like to do to improve your child's teeth?
- These are some things we talk about with parents to better their children's teeth. Which would you interested in exploring?
- How do you see yourself limiting the amount of sugar drinks your child has every day?
- Is there anything you would like to do for your child in the next two weeks?
- How do you think you'll do that?
- Could you let me know how you are doing next time?

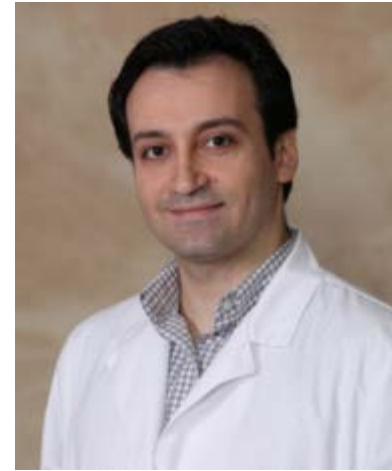
Practice MI

One person will be the speaker

- Talk for three minutes about "Something I'm thinking of doing for my health and feel two ways about is ..."
- One person will be the HB Change Agent
- Use your OARS and elicit Change Talk
Observers will use the MI Tracking Sheets
- Classify and Count the statements of the HB Change Agent at your table



Questions?



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