



Challenges Implementing MI in Practice

Dr. Lynn M. Klima DNP, APRN, CNE, ANP-BC

Objective

Problem-solve potential challenges of applying motivational interviewing to engage patients and promote behavioral change.

Looking Through a New Lens

Standard Approach	Self-Management Support Approach
<ul style="list-style-type: none">• Focused on fixing the problem	<ul style="list-style-type: none">• Focused on the patient's concerns and perspectives
<ul style="list-style-type: none">• Paternalistic relationship	<ul style="list-style-type: none">• Egalitarian partnership
<ul style="list-style-type: none">• Confront, warn, persuade	<ul style="list-style-type: none">• Emphasizes personal choice
<ul style="list-style-type: none">• Ambivalence means that the patient is in denial	<ul style="list-style-type: none">• Ambivalence is a normal part of the change process
<ul style="list-style-type: none">• Goals are prescribed	<ul style="list-style-type: none">• Goals are collectively developed

How ready are you to start using MI?

Are you ready????





Discussion

- Let's talk about potential challenges based on your practice/experience– what are your concerns? what do you anticipate?

White Board Activity

- What are the challenges you anticipate?

Common Challenges: Clinician Traps to Success

- It takes too much time..... Time trap
- There is already a lot to cover in the visit
- MI is too complicated
- I am an expert clinician– why do I need to change?
- Persuasion
- I'm not confident in how to use it– it doesn't come naturally



There is strong evidence that MI enhances healthcare conversations... that doesn't make it any easier to adopt!

This helps us understand our patients better than ever
– change is hard, even if ultimately it is positive

Therapeutic Communication

Common Traps

- Being the expert
- Question- Answer Trap
- Confrontation- Denial Trap
- Persuasion Trap
- Wandering Trap
- Bias and Stereotyping and Passing Judgement

Self-Reflection is Important Here!

White Board Activity

- What are some strategies to increase your Readiness? Confidence?

Prepared Patient AND Prepared Team

- Identify tools that could be helpful to your pre-visit
 - Example: Bubble Mapping
 - Forms in the portal
 - Pre-calls to the patient
- Appropriate amount of time for the visit.
- Location! Location! Location!



Setting the tone, the MI way:

“My name is _____, and I am here/calling today because the doctor suggested we speak...”

Is now an OK time to chat?

Even though the doctor suggested we speak today, I am most interested in discussing your concerns...

What would you like to discuss today?

I know you don't feel well today...

How can I make this conversation as easy as possible?

What can I do to be the most helpful to you as we chat?

What do you hope to take away from our discussion today?

What lifestyle-related topics would YOU like to discuss today?

Cold Calling

Setting the tone, the MI way:

Prescheduled

*“My name is _____, and my goal as your **Care Manager** is to do whatever I can to help you...”*

**What brings you in to my
(virtual) office today?**

**Even though the doctor suggested we speak
today, I am most interested in your
concerns...**

What would you like to discuss today?

**What's on your agenda for
our meeting today?**

**What do you hope to take away
from today's discussion?**

**What can I do to be the
most helpful to you?**

Choosing a Path

- ❖ A way to inform the patient about the available time for a session
- ❖ A way to integrate “required” components in addition to patient concerns
- ❖ A way to find a focus for the session when the topic is broad

“We have 15 minutes to talk today, and there are some things that Dr. Jones would really like us to discuss. Would you mind if we focused on her agenda for the first 5 minutes so that we can spend the last 10 minutes on yours?”

Bubble Sheet for Agenda Mapping

What would you like to focus on?

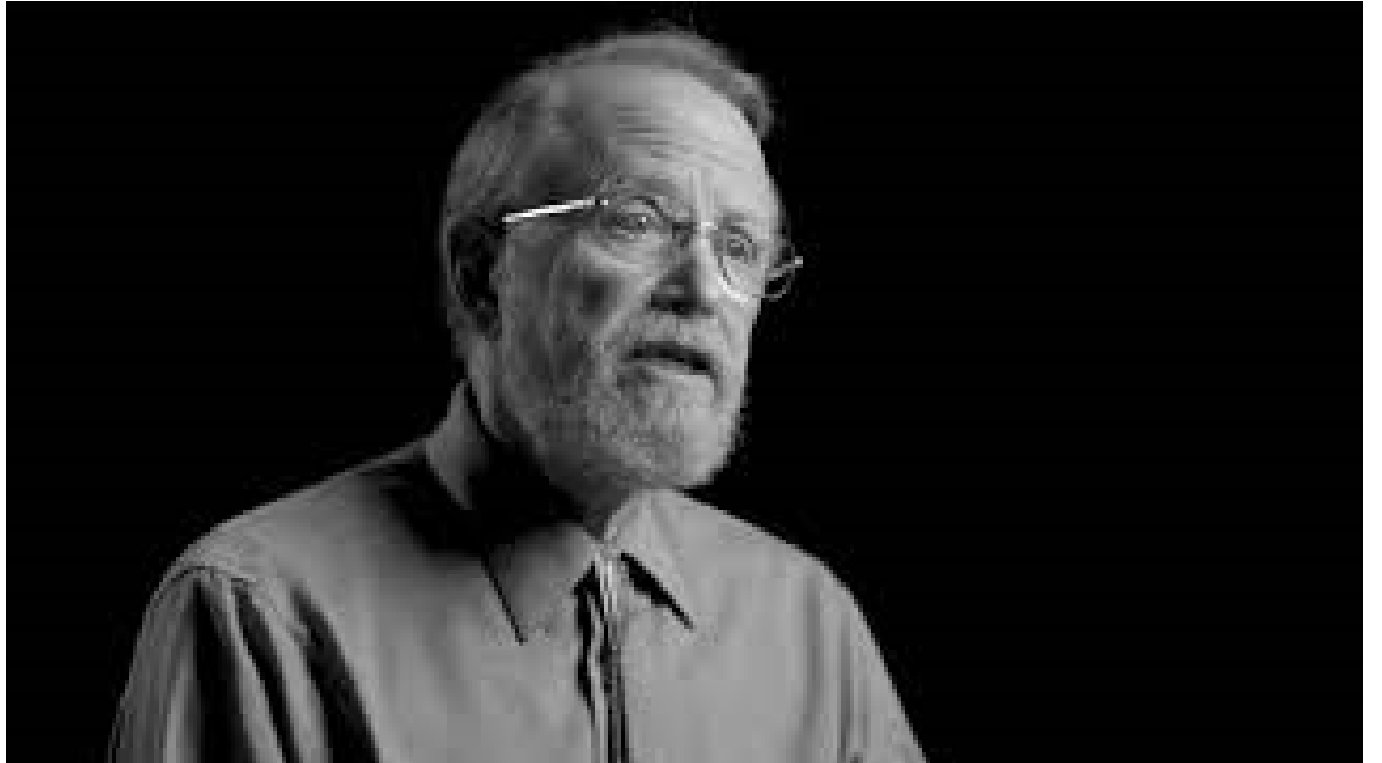


Key Take Away:

Patients can be influenced by MI in a matter of minutes!

As Dr. Bill Miller would say, “you don’t have time NOT to use MI!”

Evidence to suggest MI could help in a single session:



Increasing Confidence:

- ❑ When in doubt, be compassionately curious!
- ❑ Start small
- ❑ Find a well-practiced mentor for support
- ❑ Keep learning, continue training and practicing
 - MINT website
 - MICMT webinars
 - MICMT PE Coaching
 - Form a group with other like-minded people looking to improve, aiming to meet on a consistent basis

Increasing Confidence:

- ❑ Explore your own motivations to change the way you practice
- ❑ Set a SMART goal as driven by that motivation
 - “I will ask at least 2 open questions during initial assessments by spending time outside of patient care transforming my favorite closed questions in to open questions so that I can remember to ask them when speaking to patients.”



Discussion

- Let's talk about potential challenges you may encounter with patients– what are your concerns? what do you anticipate?

White Board Activity

- What challenges do you anticipate with patient engagement?

Common Challenges: Patient Focused

- Recognizing ambivalence or discord
- Patient readiness/confidence
- Patient Considerations
 - Health Literacy/Cultural Considerations/ Depression
- Patient age/gender
- Patient/Clinician differences



“MI with someone is like entering their home. One should enter with respect, interest and kindness, affirm what is good, and refrain from providing unsolicited advice (like rearranging their furniture).”

- An Alaskan elder reflecting on an MI workshop with Steve Berg-Smith

White Board Activity

- What are some strategies to recognize and eliminate challenges to patient engagement?

Patient Centered Approach to Support SM:

- ❑ Patients are the experts in themselves
- ❑ Be curious and explore their thoughts *FIRST*
- ❑ Manage common provider traps:
 - Expert Trap –
“I have all the answers”
 - Persuasion Trap
“I am here to convince you/direct you.”
 - Time Trap
“We need to set a goal, so I need to hurry up to get to that.”
 - Wandering Trap
“I will listen and follow you wherever, even if it does not relate at all.”

Patient Centered Approach to Support SM

Explain your role using age/stage appropriate language

- Spirit of non-judgment, acceptance, patient and family centered

Involve the child when appropriate

- Use PE strategies with parents, always

Start small, using curiosity

“How could you eat more vegetables if you wanted to do that?”

AFFIRM strengths (kid-friendly options ex. kind, brave, creative)

Separate adolescent from parent for some of session

- Adolescents are actively constructing their identity, and it is when they are asserting greater independence from parents

Patient Centered Approach to Support SM

- ❑ MI can help promote better management of Social Determinants of Health
- ❑ MI has been shown to help trauma survivors, and can even improve medication adherence in individuals with psychotic disorders
- ❑ Emerging evidence is showing that Tailored Motivational Interviewing is helpful specifically for LGBTQIA+ and Black, Indigenous, People of Color (BIPOC) populations
 - Emphasize autonomy by reinforcing and promoting personal choice consistently/throughout each interaction
 - Clarify your role as a guide
 - Use the word “YOU” more often than “WE” or “I” while talking
 - Steer clear of “must” or “should” statements
- ❑ MI has been validated in many cultures, including collectivist cultures

“This won’t
work with my
non-compliant
patients.”



Let's Watch.....



Masterful video showing use of MI in conversation with someone labeled as "difficult"



The “non-compliant patient”!





Discussion

- **Discuss the complicated/complex patient that is resistant to change.**
- **Thoughts on the video?**
- **What are some strategies that you would incorporate?**

Considerations:

Be compassionate with yourself

- Accepting the unacceptable may sometimes feel impossible
- Recognizing the patient may not be ready
- Recognizing discord- resisting the urge to push, threaten or persuade- don't flex your muscle!

Self Reflection on your approach

Are there underlying barriers- stress, depression, anxiety?



Potential Solutions:

- ❑ Consider if the patient is ready for the change?
 - Accepting they are not ready
- ❑ Breathe in patience, breathe out judgmental attitudes and assumptions

Masterful video showing use of MI in conversation with someone labeled as "difficult"





Summary

There is strong evidence that MI enhances healthcare conversations... that doesn't make it any easier to adopt!

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Discussion

**What are your goals to strengthen your use of MI in practice?
What are your concerns?**

How ready are you to start using MI?

Are you ready????

