Partnering for Change: Motivational Interviewing Strategies for Inpatients, A Unique Approach

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Objectives

- Definition of Patient Centered Interviewing.

- Discuss Using the “Spirit Of Motivational Interviewing” to reach patients.

- Discuss how to reach patients using the Transtheoretical Model to engage patients, set goals and elicit behavioral change.

- Use of tools and other strategies to facilitate behavior change.
Who We Are

- Largest academic community hospital in PA
- Largest Level 1 Trauma Center in region
- Certified Comprehensive Stroke Center
- Employees – 11,967
- Medical Staff – 1,193
- Nurses – 2,334

- Magnet Hospital
- 173,678 ED visits
- 54,056 admissions
- 981 acute care beds
- 3 hospital campuses
- Revenues over $2 Billion
Learning to Listen

You: Mr. Bill, how have you been doing with taking your diabetes medicine - metformin?
Learning to Listen

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Bill: Fine, OK, no problems.
Learning to Listen

**You:** Mr. Bill, how have you been doing with taking your diabetes medicine - metformin?

**Bill:** Fine, OK, no problems.

**You:** Well, none of us ever takes every pill we’re supposed to take. We all miss some. How often do you miss them?
Learning to Listen

You: Mr. Bill, how have you been doing with taking your diabetes medicine - metformin?

Bill: Fine, OK, no problems.

You: Well, none of us ever takes every pill we’re supposed to take. We all miss some. How often do you miss them?

Bill: Oh, hardly any. Maybe the evening pill; that’s hard to remember sometimes.
Learning to Listen

You: Mr. Bill, how have you been doing with taking your diabetes medicine - metformin?

Bill: Fine, OK, no problems.

You: Well, none of us ever takes every pill we’re supposed to take. We all miss some. How often do you miss them?

Bill: Oh, hardly any. Maybe the evening pill; that’s hard to remember sometimes.

You: So how often?
Learning to Listen

**Bill:** Oh, maybe one or two per week.
Bill: Oh, maybe one or two per week.

You: You miss one or two per week?
Bill: Oh, maybe one or two per week.
You: You miss one or two per week?
Bill: No, I only take one or two per week. But the morning pills I get most of the time. I only miss a couple.
You: (thought bubble) yikes! I only have 5 more minutes with this guy and he’s on 3 other meds!
Motivational Interviewing

A person centered goal directed counseling method for helping people to change by working through ambivalence.

Ambivalence is a normal step towards change which occurs in the contemplation stage.

People can remain in ambivalence for a long time.
Motivational Interviewing

It Works

Negative Practice
Persuasion Exercise

Practice Exercise 1

http://www.motivationalinterview.org/Documents/TNT_Manual_Nov_08.pdf p.68
1. Explain **why** the person should make this change

2. Give at least 3 **benefits** for making change

3. Tell person **how** they can make change

4. Emphasize **how important** it is for them, include **negative** consequences of not doing it

5. **Tell** and persuade person to do it

*If you encounter resistance repeat the above emphatically*
What motivational interviewing is not

Learning to Listen

Verbal

Non verbal = *stop talking*
Learning to Listen

OARS

Open Question
Learning to Listen

OARS

Open Question

Affirmation
Learning to Listen

OARS

Open Question

Affirmation

Reflection
Learning to Listen

OARS

Practice Exercise 2
People may forget what you said
People may forget what you did
But people never forget how you made them feel

Maya Angelou
Using the ‘Spirit of Motivational Interviewing’ to assess where your clients are *today*.

**MI = Guiding more than directing**

Dancing more than wrestling

Listening at least as much as telling

Rollnick, S., Miller, W., Butler, C. *Motivational Interviewing in Health Care*. 2008
Learning to Listen

Collaborative

Evocative

Honoring Patient Autonomy

Rollnick, S., Miller, W., Butler, C. Motivational Interviewing in Health Care. 2008
Four Guiding Principles

R: Resist the Righting Reflex
Four Guiding Principles

R: Resist the Righting Reflex

U: Understand your patient’s motivations
Four Guiding Principles

R: Resist the Righting Reflex
U: Understand your patient’s motivations
L: Listen to your Patient
Four Guiding Principles

R: Resist the Righting Reflex
U: Understand your patient’s motivations
L: Listen to your Patient
E: Empower Your Patient

Rollnick, S., Miller, W., Butler, C. *Motivational Interviewing in Health Care*. 2008
Behavior Change Interventions

Understanding Behavior change interventions are useful in looking at lifestyle modification for long-term disease management.

Readiness to make change, identifying barriers to change and assisting patients to identify and possibly anticipate signs of relapse ultimately improves patient satisfaction and decreases the health care professional’s frustration during the change process.
Behavior Change Interventions

How do we as diabetes educators help the inpatient make changes necessary for health improvement?
Behavior Change Interventions

Helping the inpatient to modify their lifestyle is necessary for the successful management of diabetes.
Understanding Change

- Change occurs gradually
- Determined action occurs gradually
- Relapses are inevitable and are part of achieving lifelong change
Precontemplation – Client Status

- Not thinking about change
- May be resigned
- Feeling of no control
- Denial/Defensive
Precontemplation – Your Interventions

- Establish rapport
- Listen
- Encourage client to talk about life goals
- Ask permission to raise the issue in the future
Precontemplation – Client Status

- Weighing benefits and costs of behavior
- Ambivalence
- Willing to talk
Precontemplation – Your Interventions

- Ambivalence is good
- Use MI skills
- Increase discrepancy between current status and desired goal
- Ask questions
Precontemplation – Your Interventions

- Discuss pros and cons of targeted behavior
- Use Confidence Rating and Importance Rating Scales
Assists patients in expressing their **own**

- Reasons
- Commitment
- Intention
- Willingness
- Plan
- Barriers
Change Talk
Explore Ambivalence
Plan
Develop Confidence
Small changes are fine
How important is it to you to change this behavior?

1 10

How confident are you that you will be able to change this behavior?

1 10

Ask What and Why Questions

Case Study Interventions

- Assess patient’s Readiness to Learn
- Employ Motivational Interviewing Skills
- Utilize Confidence and Importance Rating scales
- Develop Critical Thinking Skills
Case Study #1

- 17 year old female
- DM 1
- h/o Bipolar Disorder
- Admitted to ICU in DKA
- Consultation states “nonadherance”
- Sedated at initial encounter

Mother is very receptive to the diabetes educator’s visit and states: “I don’t know what to do, my daughter won’t let me help her with her diabetes. This is the 3rd time in 3 months that she has DKA”.
Case Study #2

- 77 year old male: admitted with dizziness and mental status changes
- h/o DM 2
- A1c 6.1%
- Lives alone
- Home meds: Metformin 1000 mg BID, Glimepiride 4mg daily
- Scheduled for cardiac catheterization in the morning

“I am trying to lose weight and have not been eating much, I don’t eat regularly and have been feeling dizzy.”

His daughter is concerned and “wants to learn more about hypoglycemia.”
Interactive Tool

Finding My Way
Finding My Way

Name: ___________________________ Date: ________________

One way I want to improve my health is:
________________________________________________________

This week:
When I will do it _______________________________________
How I will do it ________________________________________
Where I will do it _______________________________________
How often I will do it ____________________________________

What might get in the way?
______________________________________________________

What can I do about it?
______________________________________________________

This is how sure I am that I will be able to do this:


A PASSION FOR BETTER MEDICINE™

Lehigh Valley Health Network
One way I want to improve my health is:

This week:
When I will do it
How I will do it
Where I will do it
How often I will do it
What might get in the way?

What can I do about it?

This is how sure I am that I will be able to do this:

Finding My Way

Name: _______________ Date: 6/3/13

One way I want to improve my health is: _______________ 

Diet, Insulin management, sugar plan goal

This week:
When I will do it ______ NOW ______
How I will do it ______ as ordered ______
Where I will do it ______ everywhere ______
How often I will do it ______ as prescribed ______
What might get in the way? ______ new onset learning curve ______
What can I do about it? ______ ongoing education ______

This is how sure I am that I will be able to do this:

Not Sure → A Little Sure → Somewhat Sure → Pretty Sure → Very Sure

Finding My Way

Name: ____________________ Date: 5/9/13

One way I want to improve my health is: ___________ getting my sugars under control ________

This week:
When I will do it: ___________ now and on-going ________
How I will do it: ___________ walking more, watching my diet ________
Where I will do it: ___________ home ________
How often I will do it: ___________ walk 3x/week, watch diet ________

What might get in the way? ___________ Dialysis days ________

What can I do about it? ___________ Exercise using a bike ________

This is how sure I am that I will be able to do this:

Finding My Way

Name: ____________________ Date: 7/1/2013

One way I want to improve my health is:

Eat better and test my sugar more often

This week:

When I will do it ____________________

When I return home

How I will do it ____________________

Learn more about diabetes

Where I will do it ____________________

Go to outpatient class

How often I will do it ____________________

Everyday

What might get in the way?

____________________________

not anything

What can I do about it?

____________________________

Test my sugar, follow diet, classes

This is how sure I am that I will be able to do this:

[Circle] Not Sure A Little Sure Somewhat Sure Pretty Sure Very Sure


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610-402-CARE LVHN.org
Finding My Way
Name: [redacted] Date: 7/6/13

One way I want to improve my health is:

[Blank Line]

Test my blood sugar

This week:

When I will do it in the morning and bedtime
How I will do it use my new meter, poke finger
Where I will do it in my bathroom
How often I will do it 5 days every week

What might get in the way?

Forgetting, tired, work

What can I do about it?

Put a note on my mirror, remember my kids

This is how sure I am that I will be able to do this:

[Not Sure] [A Little Sure] [Somewhat Sure] [Pretty Sure] [Very Sure]
Finding My Way Demonstration

Practice Exercise 3

Listener role

- Ask simple questions- then *listen*.
- *Why* would you want to make this change?
- If you decide to make this change, *how* might you do it?
- What are the 3 best *reasons* to do it?
- *Try* importance readiness ruler.

Then give back a short summary of what you have heard.
Case Study #3

- 67 year old male
- DM 2
- 4 days post CABG
- Pre op A1c 8.4%
- New to insulin injection with Basal/Bolus regimen with ISF and carb counting

“I am confused as to how much insulin I have to take and when I have to take it. I want to do the right thing. I have so many things I have to deal with besides my diabetes.”
Case Study #4

- 56 year old male with newly diagnosed uncontrolled Type 2 diabetes, osteomyelitis of right foot
- A1c >12%
- Extremely receptive to learning all of the “survival skills” relating to diabetes education, including drawing and injecting of insulin.

“I have concerns about being able to afford my diabetes supplies and follow up with physician appointments.”

“I also want to go to diabetes education classes after I am discharged.”
“Change Is Disturbing When It Is Done To Us.

Change Is Exhilarating When It Is Done By Us.”

Rosebush Kantor
Harvard Business School
References


References


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References

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