SMALL GROUP SESSION 12B
November 8th or November 10th

Motivational Interviewing Role-plays

Readings: The Medical Interview, Chapter 16
Review lecture notes – “Motivating Behavior Change I and II.”

Prepare by:

- Dressing professionally
- Preparing your oral presentation from your patient interview last week, including a presentation on your research.
- Preparing a write-up of the patient’s history.

Brief Outline:

Section 1: Touch Base - (20 minutes)
Section 2: Motivational Interviewing Role-plays - (60 minutes)
Section 3: Discuss Motivational Interviewing Role-plays – (30 minutes)
Section 4: Present hospital interviews from last session - (30 minutes)
Section 5: Evaluate session - (10 minutes)

Preparation for session 13:

Readings: Review any lecture or text materials you believe will help you improve your interviewing and communication skills.

Prepare by: Dressing professionally

Completing your presentation (if you are one of the three who will be presenting next session). This will be worth 15 points. Your presentation should take about 15 minutes, with 5 minutes of this time devoted to discussion.
Section 1. Touch base (30 minutes)

Discuss opinions about motivational interviewing as an approach to behavior change. Compare some of the approaches outlined in Chapter 16 to those outlined by Drs. Peterson and Waters.

Section 2. Motivational Interviewing Standardized Patient Interviews (60 minutes)

Goal
- To practice approaching a patient about behavior change in an open and non-judgmental manner.
- To gain a better understanding of the difficulty and complexity of behavior change.

Objectives
- To maintain an open and curious approach to interviewing a “patient” about a behavior change
- To learn about the use of open-ended questions, reflection, agenda setting, exploration of ambivalence and limiting resistance in a Motivational Interview
- To learn about some of your own attitudes and beliefs about changing behavior.

Logistics
- You will receive a schedule as to when your Standardized patient will arrive
- The standardized patient will play three different patients.
- Students will interview in groups of two. They should “tag-team” this interview. Each group of two students will interview one of the patients portrayed by the SP.
- Other group members will observe. The enclosed observation guide will help to focus feedback.
- Use the “time-out/time-in” technique as necessary.
- Take some time after each interview to give feedback and discuss the interview.

Section 3. Discuss Standardized Patient Interviews (30 minutes)

Take time to review how this exercise went for the group. Discuss the Motivational Interviewing Role-plays. Did students encounter common difficulties? Was it difficult to not give advice? This is an advanced interviewing skill, and we do not expect students to be proficient. What reactions did students have to attempting to apply principles of motivational interviewing while either interviewing or observing? Group members should also reflect on their own
attempts to change some type of behavior (eg, increasing exercises, lowering weight, changing study habits, etc.). How well does the Stages of Change model reflect your own experience? How would you have responded to a motivational interviewing approach to changing behavior?

Section 4. Presentation of hospital interviews (30 minutes)

Each student should present their patient from last week in a formal case presentation format, including the HPI, PMHx and psychosocial history. The presentation should also include a discussion of the research based on their patient’s illness.

Students should also turn in their written history

Section 5. Evaluate Session (10 minutes)

Focus your evaluation this week on group discussion. Do group members feel comfortable sharing their opinions, even if they differ from others? What could the group and individual members do to improve participation by all members of the group?

Also, decide which students will be presenting their research presentation during sessions 13 and 15 (3 students in each session). Be sure students have a topic picked out today, if they have not picked one out already.

Research presentation preparation: During sessions 13-15, each student will give a research presentation which will be worth 15 points toward your mid-semester grade. The presentation will be a focused talk on some aspect of advanced interviewing and humanism – specifically, physician-patient relationships and/or communication. Examples include:

- patient-centered interviewing (evidence/clinical application, etc)
- motivating behavior change
- complementary and alternative medicine
- cultural competency
- chronic illness
- narratives in medicine
- death and dying
- palliative care
- sexuality
- spirituality
- substance abuse

Your presentation should last approximately ten minutes. It can be an oral presentation; you need not use power point or slides.

Your presentation should also:
- include specific objectives
- be clear and organized
- include a handout (1 or at most 2 pages) with a few references
Motivational Interviewing Scoring Tool

<table>
<thead>
<tr>
<th>Behaviors</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of open ended questions</td>
<td></td>
</tr>
<tr>
<td>Number of closed ended questions</td>
<td></td>
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<tr>
<td>Number of reflections</td>
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</tbody>
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Describe how the interviewer explored ambivalence with the patient.

How much resistance did the interviewer encounter during this interview?

What did the interviewer do that elicited resistance?

What did the interviewer do that decreased/limited resistance?

Aim for:
50% of questions being open ended.
Reflect twice for each question asked.
Mentor Notes

Introduction

• The primary goal of this exercise is not to gather information, but to interact with a “patient” in an open, curious way about an important health behavior.
• Some important components of a brief, motivational interview include:
  Establish rapport through open-ended questions and reflection.
  Establish agenda – address patient’s concern about health behavior, or ask permission to discuss topic.
  Assess readiness to change – raise ambivalence.

Case 1

Patient is in pre-contemplative stage.
Possible strategies –
Ask for permission to discuss smoking.
Ask about patient’s view of link between asthma and smoking.
Ask about previous period of abstinence – what was good/bad about it?
Ask if patient would like to hear any information about likely effects of smoking on asthma.
Important to acknowledge stressful job, and patient’s perceived benefits of smoking.
Assess readiness to change – how important is it to stop smoking now?
  How confident is patient in thinking they could stop smoking now?
Ask what would make patient think it would be more important to stop smoking.
Raise link between current difficulties and smoking, ask patient to respond to that.

Case 2

Patient is in contemplative stage.
Possible strategies –
Elicit patient’s perspective on drinking.
Assess readiness – importance/confidence (this patient is “moderate” on importance, likely fairly high in confidence. What would make him more likely to think that cutting down on drinking is more important for him? Ex. you say you rate the importance of cutting down on your drinking a 5. What would make you say it is a 7? Or why isn’t it a 2 or 3? – It’s somewhat important to you, why?
Ask patient to identify pro’s and con’s of cutting down on drinking.

Case 3

Patient is in preparation stage – decided to change, now getting ready to change.
Promote self-motivation – What has made you decide to change? Why do you think you can change? Summarize patient’s reasons for change.
Assess confidence and importance – confidence here is low – explore previous attempts to lose weight; what worked, what did not.
Ask patient to be specific: What (behavior) has to change? How do you plan to do that?
Focus should be on getting patient to come up with ideas and helping them solve problems. Negotiate a start date and specific, limited (behavioral) goals for change.