

Motivational Interviewing and the Life Cycle

Preceptor Module Five

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Session Five Outline

- Review Motivational Interviewing
- Learn about Fear Management
- Review Life Cycle Issues
- Clinical Scenarios

How will you teach these topics to your staff and trainees ?

Motivational Interviewing

Review core principles, their meaning, and related actions:

- Engage
- Focus (Guide)
- Evoke
- Plan

Motivational Interviewing

- In order to effectively engage, focus, evoke, and plan, the following skills are useful:
(OARS)
 - Asking Open-ended questions
 - Using Affirmations
 - Forming Reflective statements
 - Providing Summaries

Motivational Interviewing

- Motivational Interviewing is described in detail in two of the Medical Assistant Training Modules:
 - Basic Session Six: Motivational Interviewing
 - Advanced Session One: Motivational Interviewing

Several websites and resources are also listed.

Fear Management

For many people, it is fear that prevents them from taking the “next step.”

- One principle is that, “Out of our fear, we tend to create our fear.”
- The next step in Fear Management is to look at the fear itself—to give it shape, size, and color—then work with the person to shed light on their fear in order to make it smaller and more manageable. Discuss examples.

Four Drawings- based on Hilda Dail's work

- When you are working with someone to help them change a behavior, there may be fears, concerns, and ambivalence.
- Hilda Dail, in her book *The Lotus and the Pool*, suggests making four simple drawings that may help identify the obstacle and how to overcome it.



Four Drawings- based on Hilda Dail's work

Drawing One:

Where you are (The Present)

Drawing Two:

Where you would like to be (The Future)

Drawing Three:

The Obstacle

Drawing Four:

What it will take to overcome the obstacle

REVIEWING LIFE CYCLE ISSUES

Review the following life cycle issues which may be of particular difficulty for staff:

- Working with teens to help them change behavior and/or act responsibly
- Working with women, especially with postpartum depression
- Working with the elderly and their families—issues of autonomy, falls, polypharmacy, depression, dementia

REVIEWING LIFE CYCLE ISSUES

- Working with the dying and their families—helping them to complete unfinished business
- Working with a person who may be suicidal
- Working with people who abuse drugs
- Working with the very obese
- Working with a family who has lost a child
- Working with a family who has a child or family member with a severe disability
- Working with individuals and families with serious mental illness, including schizophrenia

CLINICAL SCENARIOS

The best scenarios are those that you bring up yourself, but if cases are needed, the following can be used:

- A teenager comes in for treatment of an STD
- An elderly person comes in regularly for her appointments but frequently takes her medication incorrectly
- A dying woman wants to be able to talk to her children about her illness but they refuse to talk to her, saying that she will be fine

Unfinished Business

- It is often hard for family members to know how to be with someone who is dying
- Often the person who is dying would like to talk with their family about their feelings or issues and the family is reluctant
- Unfinished business can include:
 - An elderly person sharing their wishes
 - A young adult telling their dying parent that they are grateful or talking about unresolved issues
 - Grandparents or parents wanting to say goodbye but not knowing how

Unfinished Business

- Sometimes there are unresolved emotional issues that need to be addressed
- Sometimes people don't know what to say or are afraid that if they talk, they will cry
- People who are ill or dying may have limited energy but still need and value opportunities for meaning and purpose
 - Example: An elderly grandmother knew she wouldn't live to get to know her grandchildren when they were older. She wrote letters to each of her grandchildren, one letter for each year of their life until they were eighteen. She arranged with her daughter to have the letters mailed to her grandchildren each year for the next eighteen years.

Interviews or Videos with Elderly and/or Dying Family Members

Learning about the history of a family member and creating future memories, with videos of structured interviews can be very meaningful.

Sometimes families need help with how to broach this topic. One way to introduce this topic is to say:

“One of these days you will no longer be with of us. We do not know if that day will be a long time from now, or sooner, but in the meantime, with your permission, we would like to seize this moment.”

Dementia

- When a family member develops dementia, it can be very difficult for the family.
- They may not know how to be with their family member.
- One principle is to remain “in the moment” with the family member
 - Look at the sunset with them, and comment on its beauty
 - Listen to music together that the person loved, or sing together
 - Go for a walk and comment on how nice it is to walk together
- Maximizing the number of enjoyable, peaceful moments can be very satisfying
- Do not be concerned if the person doesn't remember the experience a few moments later

Dementia

- When working with a person with dementia, it is important that when staff must touch them, they do so with gentleness, tenderness, and caring
- Caregivers need respite and support
- It is important to have an honest conversation with the family discussing that the person they love is no longer fully there
- Caring for a person with dementia or Alzheimer's is often an ongoing process of grieving
- Early in their illness, the person with dementia is experiencing this as well, and may often become depressed as they realize what they are losing or are about to lose

Obesity

- It can be challenging to work with the very obese patient
- There may be prejudice on the part on the part of staff towards the very obese
- You may want to explore this issue with staff
- Research shows that obese women are less likely to be sent for Pap Smears or Mammograms
- Obese people often they have low self-esteem and may feel trapped in their bodies
- Often, obese people are blamed for not losing weight
- For many obese people, they have struggled with losing weight throughout their entire life
- It is essential to treat the very obese patient with courtesy and respect

Ageism

Many elderly people face ageism when seeking medical care. Ageism is prejudice against the elderly. It is seen:

- When a mentally sound individual is treated as if they have dementia
- When a person is fired from a job, or not hired simply because of their age

Topics

- Motivational Interviewing
- Life Cycle Issues
- Practice Teaching:
Role-play a situation in which you are coaching MAs how to help a challenging patient with one of the life cycle or clinical issues that we have discussed

Summary for Preceptor

- Review Motivational Interviewing
- Review Life Cycle Issues
- Reflection
- Next Steps
- Clinical Scenarios
- Topics