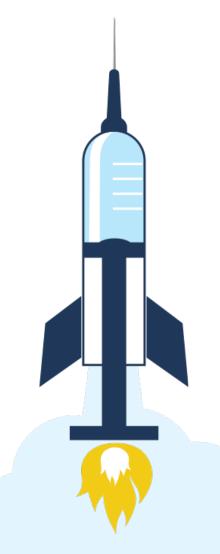
Using Motivational Interviewing to Increase COVID-19 Vaccinations: Practical Application

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PROGRAM MANAGER

Stacy Hull is a Licensed Professional Counselor and holds a certification as a Master Addiction Counselor. Stacy has worked in outpatient and residential settings providing mental health and substance use treatment to adults and children. These experiences help Stacy to excel at Alliant.

Additionally, Stacy has more than 25 years of clinical experience in service delivery and administrative leadership in the public behavioral health sector. At Alliant, Stacy has worked with physicians, hospitals, long-term care facilities, community coalitions and inpatient psychiatric facilities to improve behavioral health outcomes. Currently, Stacy is the program manager on Alliant's work with the National COVID-19 Resiliency Network, an initiative designed to mitigate the impact of COVID -19 on populations disproportionally impacted by the pandemic.

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

– Maya Angelou

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Agenda

01

Define Motivational Interviewing

02

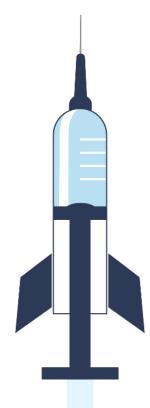
Recognize Change Talk



Understand the OARS in Motivational Interviewing



Understand interviewing skills and strategies



Motivational Interviewing

- Developed by William Miller and Stephen Rollnick
- Proven effective for: weight loss, anxiety, depression, physical health conditions and vaccine hesitancy
- World Health Organization (WHO) defines vaccine hesitancy, as the "delay in acceptance or refusal of vaccines, despite availability of vaccine services"



What Motivational Interviewing Is NOT

It is not.....

Mysterious

A technique

A way of tricking people into doing what you want them to do

A solution for all of life's difficulties



What Is Motivational Interviewing

Motivational Interviewing is a "way of being" or a way of engaging a person that will help him or her find personal reasons to make a positive behavior change or a decision.





Why Do We Need MI?

It doesn't matter what reasons we give people as to why they should change or how much we want them to, lasting change is more likely to occur when they discover their own reasons and determination to change.





Change Talk

Change talk, in general, refers to the patient's statements about their **desire**, **ability**, **reasons** and **need** for change.





D.A.R.N. – **C.A.T.**

Desire: Questions usually include words such as want, wish and like.

Example questions:

How would you *like* for things to change?

What is your wish for your family regarding the vaccine?

Ability: Questions usually include what a patient *can* do, is *able* to do or *could* do.

Example questions:

If you did decide to take the vaccine, when *could* you schedule your appointment?

When do you think you might be *able* to take the vaccine?

Reasons: Questions usually have *specific reasons* why a patient may consider the behavioral change.

Example questions:

What are some **benefits** of being vaccinated?

What's the *downside* of not being vaccinated against COVID-19?

Need: Questions usually have an *urgency* for change to happen.

Example questions:

How **serious** is it for you to get vaccinated?



The O.A.R.S. Model: Essential Communication Skills

The O.A.R.S. Model includes four basic skills:

O = Open-ended Questions

A = Affirmations

R = Reflective Listening

S = Summarizing



Purpose of the **O.A.R.S**. Model

- Common language
- Checklist
- Intentionality



Open-Ended Questions

- Learn about the patient's feelings, thoughts and beliefs
- Help the patient make an informed decision
- Allow the patient to do most of the talking

Example:

"I understand you have some concerns about the COVID-19 vaccines. Can you tell me about them?"

As opposed to:

"Are you concerned about getting vaccinated?"



Affirmations

- Emphasize the patient's strengths, abilities and positive qualities
- Demonstrate empathy
- Most effective when a specific behavior or quality is highlighted and often include "you"
- Different from praise or encouragements

Example:

"You have been consistent with taking all of your vaccinations in the past. Are you ready to take the COVID-19 booster?"

Instead of:

"You are so smart, and you know taking the booster is what's best for you."



Reflective Listening

- Prevent misunderstanding
- Demonstrate to the patient that you are listening and trying to understand his/her point of view
- Offer the patient an opportunity to "hear" his/her own words and feelings reflected back

Types of Reflective Listening

- 1. Repeating or rephrasing (repeat back close to the patient's words).
- 2. Reflection of feelings (reflect what the emotions of the patient). A format for reflecting feelings: "You're feeling _____ because ____."
- 3. Reflecting behavior (state observation about the patient's behavior). A format for reflecting behavior: "I noticed you just _____." "What are you thinking?" or "What are you feeling right now?"
- 4. Rolling with resistance (accept the client's perception).
- 5. Reframing (allow the patient to examine his/her perception in a new way). A format of reframing: "Have you ever considered what would happen if you did _____?"



Summarizing

- Paraphrasing
- Combination of reflections



Types of Summarizing

- A collective summary—"So let's go over what we have talked about so far."
- A linking summary—" Earlier you said you wanted to take the vaccine. Maybe now we can talk about scheduling the appointment."
- A transitional summary—"So you will make an appointment for your vaccine today?"



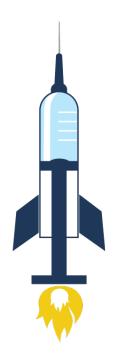
Can You Hear the Change Talk?





Vignette 1

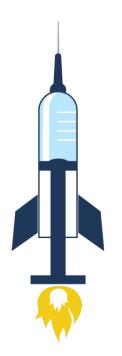
A staff member working in a long-term care facility is discussing the COVID-19 vaccine with a resident who believes the vaccines were created too fast and will take vitamins instead.





Vignette 2

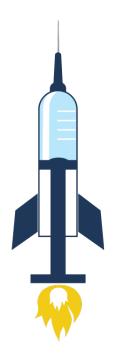
A resident at a long-term care facility is upset because her son will not give permission for her to take the COVID-19 vaccine.





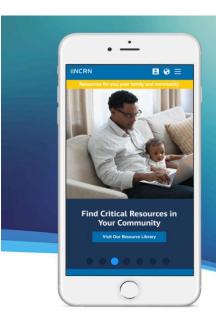
Vignette 3

A staff member at a long-term care facility is calling a family member for approval to administer the COVID-19 vaccine to her mother.





Resources



MOCEHOUSE SINCRN ALLIANT HEALTH SOLUTIONS

National COVID-19 Resiliency Network (NCRN)

Find COVID-19 Information & Resources in Your Community





The National COVID-19 Resiliency Network is a national initiative designed to mitigate the impact of COVID-19 within communities disproportionately impacted by the pandemic. NCRN has created mobile apps, a national call center and maintains a webpage to help communities quickly locate COVID-19 related information, services and resources.



Download the App!







TESTING LOCATIONS · MEDICAL FACILITIES

VACCINATION LOCATIONS · MENTAL HEALTH

PHARMACIES · COMMUNITY ORGANIZATIONS

CLINICAL TRIALS · COVID-19 RISK AREAS

https://ncrn.msm.edu

National COVID-19 Resiliency
Multilingual Call Center
1-877-904-5097
Operators are available between 9 a.m. - 9 p.m. Monday - Friday

This material was prepared by <u>Alliant Health Solutions</u>, a strategic partner in Morehouse School of Medicine's National COVID-19 Resiliency Network (NCRN). The funding was made possible through a grant from the US Department of Health and Human Services Office of Minority Health. The National COVID-19 Resiliency Network logo are service marks of Morehouse School of Medicine.







Alliant is a strategic partner with the National COVID-19 Resiliency Network. This network is made up to mitigate the impact of COVID-19 on priority populations.

For more information and resources go to:

https://quality.allianthealth.org/topic/ncrn/

https://quality.allianthealth.org/

https://ncrn.msm.edu/



Contact Information



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Questions?







Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services





Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



Chronic Disease Self-Management

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



Quality of Care Transitions

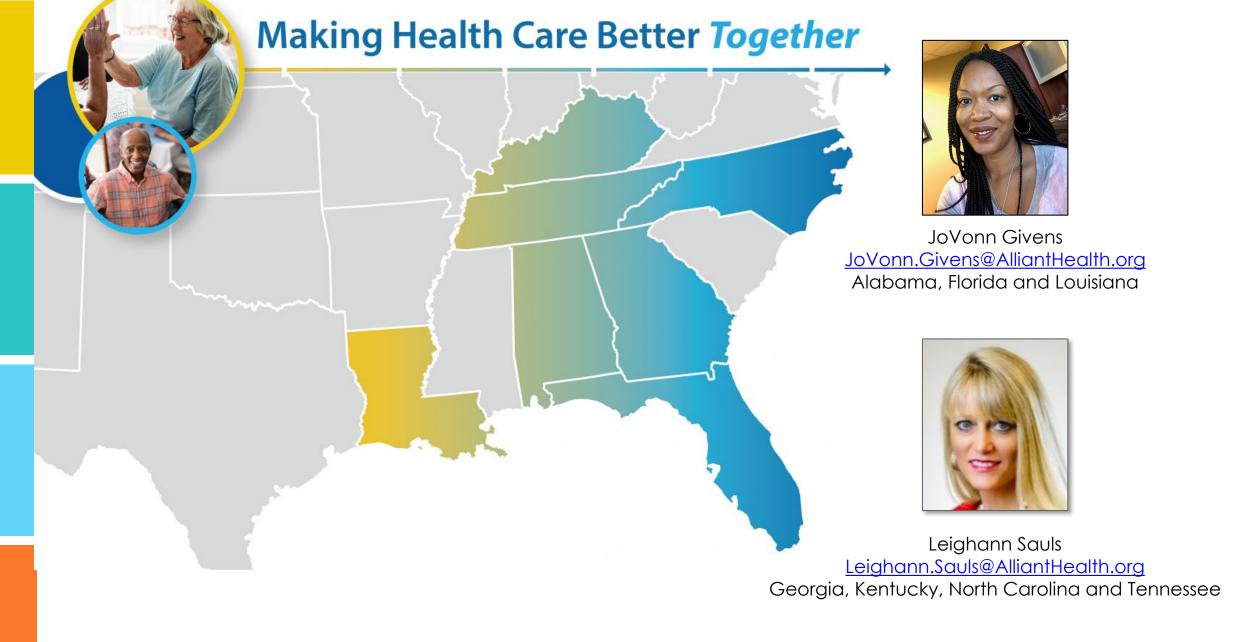
- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events



Nursing Home Quality

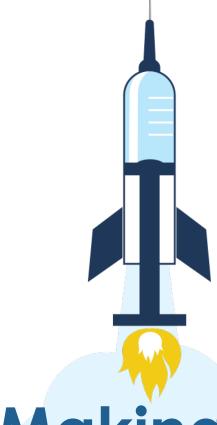
- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents





Program Directors















This material was prepared by Alliant Health Solutions, a Quality Innovation Network – Quality Improvement Organization (QIN – QIO) and Hospital Quality Improvement Contractor (HQIC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS.

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