

Motivational Interviewing and Brief Action Planning for Smoking Cessation in Primary Care

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Part III: NYACP Webinars on Smoking Cessation and Treatment

Disclosures

Susan Lane, MD – none

Steven Cole, MD

Online course in Brief Action Planning available for a fee:

Comprehensive Motivational Interventions, LLC

www.ComprehensiveMI.com

Acknowledgements

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www.ComprehensiveMI.com

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Major Topics Today

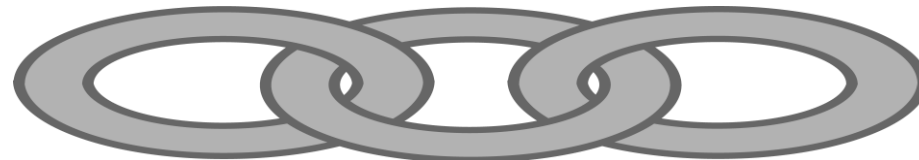
Brief Action
Planning



Spirit of MI



Change Talk



Overview of Webinar – Interactive

We Encourage Your Participation

- Background for development of webinar
- Evidence for use of MI in smoking cessation
- Video – Case of Mr. Smith – Introduction to MI and BAP
- Questions for clarification; requests regarding webinar
- Brief Action Planning (BAP)
- Spirit of Motivational Interviewing (MI) and Change Talk
- Video of BAP in a chronic smoker with little interest in change
- Questions/Comments/General Discussion

Introduction:

“Mr. Smith and Smoking Cessation:”

Does this sound familiar to you?

Video 1 (10 min)

- Prepared by Damara Gutnick, MD, a practicing internist & colleague contributing to our approach to use of MI
- First minute provides brief discussion of the “Spirit of MI,” “Brief Action Planning,” and “Change Talk,” all of which we will discuss throughout this webinar
- Real case of a chronic smoker who is not interested in changing

<https://www.youtube.com/watch?v=0z65EppMfHk>

Objectives

At the conclusion of this program, participants will be able to:

1. Describe the four elements of the Spirit of Motivational Interviewing (MI)
2. Describe the 6 core competencies of Brief Action Planning (BAP)
3. Explain the relationship of MI and BAP and the patients for whom MI and BAP are likely to be most appropriate
4. Apply some of the core skills of BAP with their patients who smoke and/or have other risky health behaviors.

Recall Stages of Change

- Precontemplation – not thinking about or ready for change
- Contemplation – thinking about change (ambivalent)
- Preparation – ready for change
- Action – making change
- Maintenance – maintaining change

Counseling: Not Ready to Quit (Precontemplation/Contemplation)

- Consider Following Spirit and Using Principles of Motivational Interviewing and/or Brief Action Planning
- USPSTF, Ann Intern Med. 2015; 163:622-34
- “Motivational Interviewing is a collaborative conversation to strengthen a person’s own motivation for and commitment to change”
- Miller & Rollnick, Motivational Interviewing, 3rd ed., 2013
- “Brief Action Planning is a self-management support tool and technique based on the principles and practice of Motivational Interviewing”
- Gutnick et al, Journal of Clinic Outcomes Management, 2014

USPSTF recommendation

The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop smoking tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)-approved pharmacotherapy for cessation to adults who use tobacco.

("A" recommendation)

Behavioral interventions for smoking cessation



Behavioral and Pharmacotherapy Interventions for Tobacco Smoking Cessation in Adults, Including Pregnant Women: Clinical Summary

Population	Nonpregnant adults age ≥18 y	Pregnant adults age ≥18 y	Pregnant adults age ≥18 y	All adults age ≥18 y
Recommendation	Provide pharmacotherapy and behavioral interventions for cessation. Grade: A	Provide behavioral interventions for cessation. Grade: A	Pharmacotherapy interventions: No recommendation. Grade: I statement	ENDS: No recommendation. Grade: I statement
Assessment	The 5 A's framework is a useful strategy for engaging patients in smoking cessation discussions. The "5 A's" include: 1) Asking every patient about tobacco use, 2) Advising them to quit, 3) Assessing their willingness to quit, 4) Assisting them with quitting, and 5) Arranging follow-up.			
Behavioral Counseling Interventions	Behavioral interventions alone (in-person behavioral support and counseling, telephone counseling, and self-help materials) or combined with pharmacotherapy substantially improve achievement of tobacco cessation.	Behavioral interventions substantially improve achievement of tobacco smoking abstinence, increase infant birthweight, and reduce risk for preterm birth.		

Content of effective behavioral interventions for tobacco cessation - USPSTF

Effective counseling interventions provide social support and training in practical problem-solving skills

- Training in problem-solving skills includes helping persons who smoke to recognize situations that increase their risk for smoking, develop coping skills to overcome common barriers to quitting, and **develop a plan to quit**
- Basic information about smoking and successful quitting should also be provided
- Complementary practices that improve cessation rates include **motivational interviewing, assessing readiness to change**, and offer more intensive counseling or referrals

Any questions for clarification?
Or requests regarding plan for webinar?

Change

- Most think about making changes
- Write short statement of what you are considering changing (but which you have not already started)
- Confidential if you choose

Demonstration



Reflections on Real-Play Demonstration

What is Brief Action Planning (BAP)?

- highly structured
- patient centered
- stepped care
- evidence informed

self management support tool and technique based on the principles and practice of Motivational Interviewing (MI).

What is Brief Action Planning (BAP)?

- alternate definition: “Application” of MI
- alternate definition: “Brief” MI
- adaptation of “5A’s”

Brief Action Planning: 6 core competencies

1. Question 1 : Reflects “Spirit” of MI

- a) Patient Centered – *“evocation”*
- b) Collaborative – *“partnership”*
- c) Respectful – *“acceptance”* - supports patient autonomy, patient has the right to change or not to change
- d) compassion

“Is there anything you would like to do for your health in the next week or two?”

Brief Action Planning: 6 core competencies

SMART Behavioral Plan

2. SMART planning:

S specific

M measurable

A achievable

R relevant

T timed

For example:

• What? (Do you plan to do) When? How much? How many times a week?

For how long? When do you want to start? Etc.

• Until clinician and patient have developed, collaboratively, a specific, SMART plan

Brief Action Planning: 6 core competencies

3. Elicit commitment statement

Elicit a Commitment Statement

Would you mind telling me back your plan, so I can be sure we're on the same page?

Brief Action Planning: 6 core competencies

4. Inquire about confidence level

“How confident or sure do you feel about carrying out your plan
(on a scale from 0 to 10)?”

Brief Action Planning: 6 core competencies

5. Arrange accountability

“Would you like to set a specific time to check in about your plan to see how things have been going?”

Follow-up

6. Follow-up builds confidence.

So, how did it go with your plan?



Early follow-up improves outcomes

Regular contact over time is better than 1x intervention.

Follow-up builds a trusting relationship

“Is there anything you would like to do for your health in the next week or two?”

SMART Behavioral Plan

Elicit a Commitment Statement

“How confident or sure do you feel about carrying out your plan (on a scale from 0 to 10)?”

“Would you like to set a specific time to check in about your plan to see how things have been going?”

Follow-up

What is Motivational Interviewing (MI)?

“Motivational interviewing is a collaborative conversation style to strengthen a person’s own motivation and commitment to change.”

Miller & Rollnick

Motivational Interviewing: Helping People Change, 3 ed, 2013

Motivational Interviewing: Core Skills (OARS)

O open-ended questions

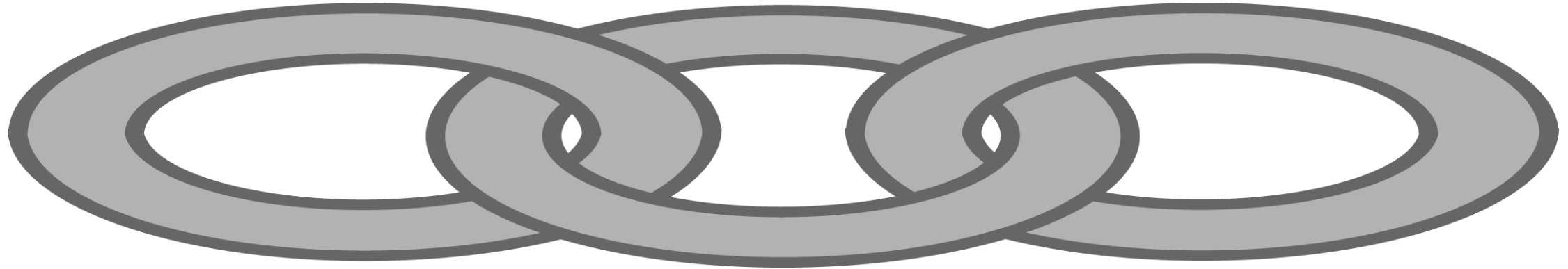
A affirmation

R reflection

S summary



Change Talk



Clinicians can
learn to evoke
change talk



More change
talk occurs



Increased change talk
is linked to better
outcomes

Miller & Rollnick
Motivational Interviewing: Helping People Change, 3 ed, 2013

Preparatory Change Talk: DARN

DESIRE to change (want, like, wish...)

ABILITY to change (can, could...)

REASONS to change (if...then)

NEED to change (need, have to, got to)



Mobilizing Change Talk: CATS

COMMITMENT to change (intend, decide, promise...)

ACTIVATION (willing, ready, preparing...)

TAKING **S**TEPS to change (started, tried...)



Video Demonstration

BAP in a chronic smoker

video 2 – “Responding To Emotions”

Discussion

Resources

<https://www.youtube.com/watch?v=w0n-f6qyG54>

<https://www.youtube.com/watch?v=262CjvURVn0>

www.CentreCMI.ca

- BAP Flow Sheet
- BAP Guide

(Downloadable at above website, along with many other BAP Resources)

www.ComprehensiveMI.com