



Center for Care Innovations
Addiction Treatment Starts Here
MAT Nurses Forum 2021

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Forum Format

- Please turn on your Cameras if you have one
- Go to gallery view and unmute your microphones – a forum is a discussion.
- Intros – Enter your Name, Clinic and MAT Role in the chat
- 12:00 -12:35 – Topic. Case. Discussion prompts.
- 12:35 – Essentials for Addiction Nurses – Motivational Interviewing
- 12:40 – Pop Quiz (with clues). Lunchtime Drawing!



Identifying High Risk and Defining Harm Reduction

- High Risk patients present with multiple safety concerns and immediate care needs. We look for overdose risks, social stability, reported history, drug combining, untreated mental health issues.
- Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

Edward

Edward 30 yo male patient, divorced with 2 children, requests admission to our MAT program. Referred by the local hospital Bridge program where patient was admitted for severe asthma episode. Patient left hospital Against Medical Advice last night. Pt states multiple attempts at MAT programs always followed by relapses. Patient reports smoking methamphetamine and heroin daily. Last use heroin was 2 hours ago. Patient also reports “snorting” alprazolam, whenever available, unclear about frequency and quantity. Patient says he self-treats withdrawal episodes with buprenorphine/naloxone which he obtains from a cousin who is in a MAT program in town. He says he has never been able to take buprenorphine/naloxone as prescribed. Patient reports he can stay at his newly sober mother’s home if he is in a MAT program. Patient also states he has been diagnosed with Bipolar and was once prescribed medications which he never picked up. Also states he was placed on a 72-hour hold (5150) ‘about a year ago’ because he felt suicidal. Denies SA Adverse Childhood Experiences (ACEs) score is 7/10.

Today’s Point of Care UDS shows POS for AMP, BUP, BZO, MET, OPI THC.



Discussion Prompts

- Identify the high-risk behavior in this patient
- Name some contributing factors that increase this patient's risk.
- What are Harm Reduction steps we can take?
- What do we need to discuss with this patient first?
- Identify some strengths in this patient – how would you build on the strengths?

Essentials for Addiction Nurses (trainings, certifications, etc.)

Motivational Interviewing

- **Motivational Interviewing is at the most essential of addiction languages.**
- The Paradox of Change: when a person feels *accepted* for who they are and what they do – no matter how unhealthy – it allows them the *freedom* to consider change rather than needing to defend against it.
- Motivational Interviewing is a way of helping people find *their own reasons* for change.
- Empathy – to accurately understand the client’s meaning and then the ability to reflect that accurate understanding back to the client.

Motivational Interviewing Fundamentals and Links

Interviewer's tools:

- Validation, kindness, body language/ tone, listening, asking questions – use your OARS, acceptance, respect, sensitivity and humor.
- OARS: Open ended questions, Affirmation, Reflective Listening, Summarizing
- <http://berg-smithtraining.com/> My favorite MI trainer.
- <https://store.samhsa.gov/product/TIP-35-Enhancing-Motivation-for-Change-in-Substance-Use-Disorder-Treatment/PEP19-02-01-003> You can download this excellent guide.



Pop Quiz & Lunch time Drawing

- Quiz: Name 2 of the OARS we use in Motivational Interviewing. Write your answers in chat.



Coming Next Month: Treatments for Co-occurring Substances – Alcohol and Stimulants

- Wednesday Nov. 3 12:00 -12:45