

Stage-Matched Interventions in Substance Use



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Primary Behavioral Health
INTEGRATED CARE
Training Academy

Webinar Reminders

1. Everyone is muted.

- Press *7 to unmute and *6 to re-mute yourself.

2. Remember to chat in questions!

3. Webinar is being recorded and will be sent out via email and posted to the program page.

4. Please give us your feedback by completing a 2-question poll

Objectives

1. Identify strategies to engage people in addiction care
2. Learn approaches to working with patients who have not expressed interest in MAT in order to enhance motivation and facilitate care coordination
3. Discuss strategies for increasing motivation for behavioral intervention in patients who are initially motivated for addiction medicine only



Assessing Severity of Use

- Clarifying confidentiality
- Using normalizing language
 - *“Many people find it difficult to deal with traumatic events like that without drinking or using. For you, has that been part of the picture?”*
- Ask with the assumption of use
 - *“How much alcohol do you drink a day?”*
 - *“When’s the last time you took a pain pill, nerve pill that were not your own?”*



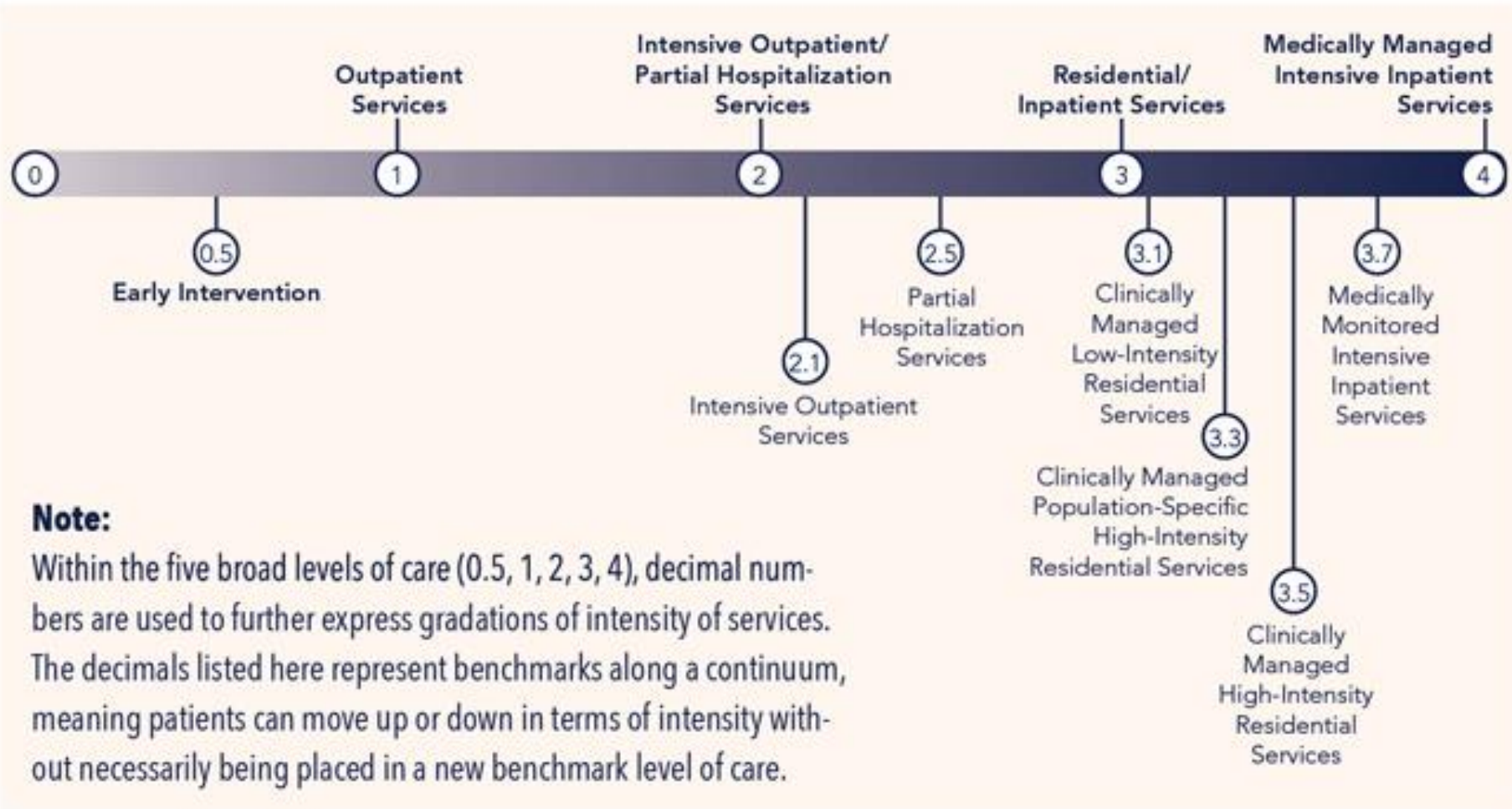
ASAM Criteria

A holistic look at addiction, particularly with regard to treatment planning:

- Acute Intoxication and/or Withdrawal Potential
- Biomedical Conditions and Complications
- Emotional, Behavioral, or Cognitive Conditions and Complications
- *Readiness to Change*
- Relapse, Continued Use, or Continued Problem Potential
- Recovery/Living Environment



ASAM Levels of Care



Assessing Motivation

“On a scale of 1-10 (10 being the most), how important is it to you to decrease your [substance] use?”



Stages of Change

- Anticontemplation
- Precontemplation
- Contemplation
- Preparation
- Action
- Maintenance

Prochaska and DiClemente (1983)





Severity

Severity and motivation are separate constructs that vary independent of one another.

Motivation

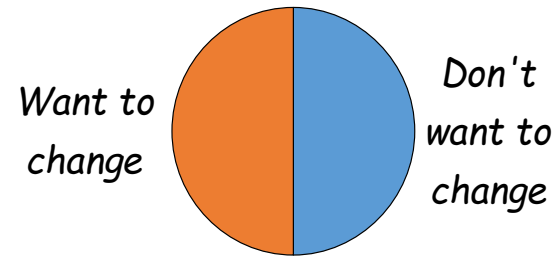


Enhancing Engagement

- Provider's empathy is significant predictor of treatment outcome
 - Mismatch can occur between intent and our language/non-verbals
- Engagement is the initial target of treatment
 - Use a collaborative style, patient's language
- Align treatment with patient's values
- Emphasize personal choice through language
- Elicit-Provide-Elicit



Ambivalence is Expected



- **Change talk** is patient language that strengthens personal motivation and commitment to specific goal
- **Sustain talk** is patient language that protects the status quo; sign of not matching patient's stage of change



Evoking Change Talk

On a scale of 1-10, how important is it for you to change your drinking?



- *Elicit motivation/strengths –*
“What makes you say 6 rather than, say, a 3?”
- *Identify barriers to change –*
“What would bring that number to an 8?”



Engagement and Healthcare Burden

- Convenient pairing of visits to increase engagement
- Approach care in phases
 - Discuss model of care and expectations early
 - Fluidly adjust treatment plan in response to changes in the severity of symptoms and motivation
 - “Resistance” to behavioral health at the 1st visit is not indicative of long-term “resistance” to behavioral health



Stage Matched Interventions: Anticontemplation

Readiness to Change Stages	Brief Interventions
Anticontemplation “I resent your assertion that I have a problem.”	<ul style="list-style-type: none">• Stop, don’t push.• Convey readiness to help in the future. “I respect that you don’t want to talk about __ today. I’d like to partner with you to improve all aspects of your health. Maybe we could talk about __ at another time.”



Stage Matched Interventions: Precontemplation

Readiness to Change Stages	Brief Interventions
Precontemplation “I don’t have a problem.”	<ul style="list-style-type: none">• Don’t push.• Ask permission and build awareness by providing personalized information. “Would it be okay if I told you why I am concerned about your ___?” “I worry that your ____ is...”



Stage Matched Interventions: Contemplation

Readiness to Change Stages	Brief Interventions
Contemplation “I know I have a problem, but I have no interest in changing at this time.”	<ul style="list-style-type: none">• Don’t push too hard.• Encourage the patient to talk about his/her perception of the problem and discuss the potential benefits of changing. “Would you tell me why you think your __ is a problem?” “If you decided you wanted to, can you think of potential benefits of changing?”



Stage Matched Interventions: Preparation

Readiness to Change Stages

Preparation

“I’d like to change soon, but need some help determining how to begin.”

Brief Interventions

- Reinforce desire to change.
“Excellent, we’d like to partner with you to make changes in your ____.”
- Problem-solve barriers and identify small action steps.
“Are there things that are getting in the way of you starting to make changes?”
“Patients often find that ___, ___, or ___ are helpful first steps. Would you like to try one of these options?”



Stage Matched Interventions: Action

Readiness to Change Stages	Brief Interventions
Action “I’m starting to make changes, but need help to continue to make progress.”	<ul style="list-style-type: none">• Reinforce any progress thus far.• Problem-solve barriers and refine action plan. “Are there things that are getting in the way of you making more progress?” “What have you already tried (or considered trying)?” “What has been most helpful so far?”

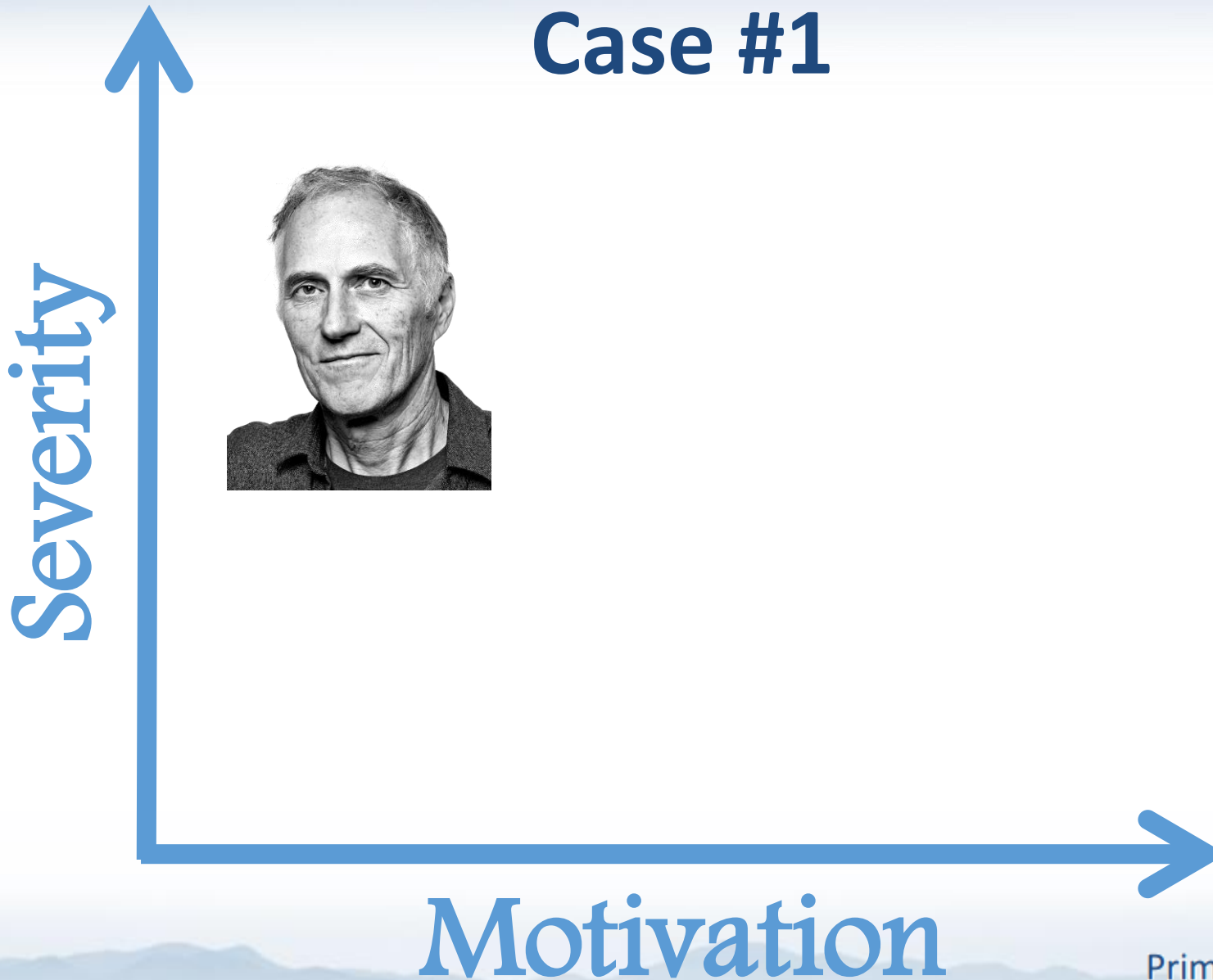


Stage Matched Interventions: Maintenance

Readiness to Change Stages	Brief Interventions
<p data-bbox="242 578 593 628">Maintenance</p> <p data-bbox="45 728 794 935">“I’ve made changes and am stable, but need help to stay that way.”</p>	<ul data-bbox="853 578 2497 1085" style="list-style-type: none"><li data-bbox="853 578 1834 635">• Reinforce maintenance of progress.<li data-bbox="853 649 2497 1085">• Identify successful strategies and problem-solve ways to continue to employ these. “Can you identify strategies that have helped you manage your __ successfully?” “Can you identify any barriers to continuing these strategies to manage your __?”



Case #1



Case #2



Severity

Motivation



Case #3

Severity



Motivation



Questions?



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Your feedback is needed!

- Please complete our 2-question poll.
- If you have any additional comments or suggestions, please fill out our post-session evaluation: <https://www.tfaforms.com/4775736>
- We value your feedback and will use it to help design future ATSH webinars. Thank you!



Upcoming CCI Webinars



- *Using Technology to Implement MAT in Primary Care* January 31, 12 – 1pm. Katherine Fitzgerald, DO from Heywood Hospital in Massachusetts will lead this webinar. Dr. Fitzgerald will explain how technology can improve patient engagement, increase adherence to treatment plans and reduce program dropouts. [Register here](#).
- *ATSH:PC Data Webinar*: February 28, 12 – 1pm. Dr. Mark McGovern, ATSH Program Evaluator, will provide an overview analysis of data from the capability assessments and quarterly program measures. Two participating teams from the ATSH:PC cohort will share their experiences behind their data. [Register here](#).