PROTOTYPES Spirit of MI Protocol that Encourages Early Engagement and Continuation in Treatment

Following is a protocol that utilizes Motivational Interviewing-like questions for staff to use with new clients, by eliciting client feedback about what is the most important thing s/he wants to receive in treatment and developing a plan with the client to assure that the need will be met, beginning during the first few days in treatment.

The protocol includes the following:

- A. Questions/Statements <u>During First Contact</u>, documenting answers in client's chart (listed below)
- B. Reinforcement Questions <u>During First (Intake/Assessment) Appointment</u>, documenting answers in client's chart (listed below).
- C. Check that protocol was followed by looking in client's chart to check for answers to questions.

A. Questions/Statements During First Contact: (Document answers in client's chart.)

1) What are your most important treatment needs?

Examples of responses include:

- anger management
- · dealing with my depression
- parenting issues / be a good mother
- not knowing how to set boundaries
- to learn how to trust people
- · reunite with son
- domestic violence
- getting to know myself
- complete parole/probation
- learn to be self sufficient
- staying sober
- relapse prevention

2) Explain who will help meet those needs, providing names and promising to introduce them to these people during the first appointment.

Examples include:

- Drug and Alcohol Counselor
- Mental Health Therapist
- Vocational Specialist
- Medical Staff
- Parenting Center
- Big Sister/Junior Big Sister/Peers
- Group Therapy

3) Provide realistic expectations about when their needs will be met.

Examples include:

- Within the week
- By the end of the month
- Within 3 6 months
- By the end of the program

4) What can we do to make sure you attend all of your scheduled treatment?

Examples of responses for clients entering a residential program include:

Give me reminders

- Make sure I am up
- Be supportive
- Provide schedule
- · Let me know a day ahead of time

Examples of responses for clients entering an outpatient program include:

- Reorganize my work schedule
- Get a ride
- Be nice
- Remind me a day before appointment
- Help me with transportation
- · Get bus schedule
- Make groups interesting

5) What can you do to make sure you attend all of your scheduled treatment?

Examples of responses for clients entering a residential program include:

- Remember where I came from
- Don't socialize with negative people
- Give it a chance
- Involve myself
- Be honest with myself
- Commit
- Take responsibility
- Do the work
- Suit up and show up
- Focus on getting kids back
- Talk to my counselor about things bothering me
- Open my mind and heart
- avoid petty things
- · Keep busy and productive
- Just go
- Make a note
- Don't give up
- Set alarm clock
- Remember what is my priority
- Look forward to going home
- · Listen, read, digest info

Examples of responses for clients entering an outpatient program include:

- Remain focused on appointments
- Keep vehicle running
- Reorganize work schedule
- Remind myself with a note
- Have for sure transportation
- Attend after 3 pm

B. Reinforcement Questions <u>During First (Intake/Assessment) Appointment</u> (Document answers in client's chart.)

- 1) What are your most important treatment needs? Review from first contact; find out if anything has changed.
- 2) Introduce to the people who will help meet those needs.

3) What are the reasons you would be most likely to leave treatment early?

Examples of responses include:

- If my step-daughter's illness (cancer) deteriorates
- Inability to stay safe
- If someone gave me a housing voucher
- Getting mad / short tension span
- Death in family
- Being disrespected
- Emergency with children
- If I don't see growth in myself
- Being emotionally attacked
- If court told me I couldn't have my children
- Not having my medication

4) What can you do to make sure you remain in treatment, even when you are tempted to leave?

Examples of responses include:

- Know that I can trust my family members to help me with issues
- Know that I must tell someone when I feel like hurting myself
- Wait it out if I get angry
- Talk to my Yolanda (therapist)
- Pray ask for strength not to leave
- Remember my kids are at risk
- Remember that I will be homeless
- Know that I will relapse if I leave
- Talk to my counselor
- Draw pictures
- Go against my own judgment
- Get refills before medication runs out

IMPLEMENTATION:

- 1) Two days of Motivational Interviewing training
- 2) Modeling and Supervision by Change Leader
- 3) Role play and Rehearsal with Intake Staff
- 4) Observation during phone screenings
- 5) M.I. summary sheet filled out for each client
- 6) M.I. summary sheet given to:
 - > Client
 - Counselor for client
 - > Change Leader
 - > Intake Department Deputy Director
 - Placed in chart

RESULTS:

Using spirit of MI protocol at first contact:

Residential No-Shows

- 32.9% average February April 2005
- 6.25% POST- M.I. MEAN
- 26.65% decrease in no-shows

Outpatient No-Shows

- 36% average October December 2004
- 10.08% POST- M.I. MEAN Jan.-Dec. 2005
- 25.92% decrease in no-shows

Repeating spirit of MI reinforcement questions at first appointment: Residential Continuation through 1st week of treatment

- 80.62% average February July 2005
- 96% POST M.I. August 2005
- 13.38% increase in continuation