



# A Glaucoma-Specific Brief Motivational Interviewing Training Program for Ophthalmology Para-professionals: Assessment of Feasibility and Initial Patient Impact

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## PURPOSE

To test the feasibility of, fidelity to, and impact of a brief, glaucoma-specific motivational interviewing (MI) training program for ophthalmic para-professionals.

## Background: Motivational Interviewing

MI engages patients by strengthening a person's own motivation and commitment to change a health behavior<sup>1</sup>

MI is known to be successful approach to increasing adherence across a wide range of chronic disease<sup>2</sup>

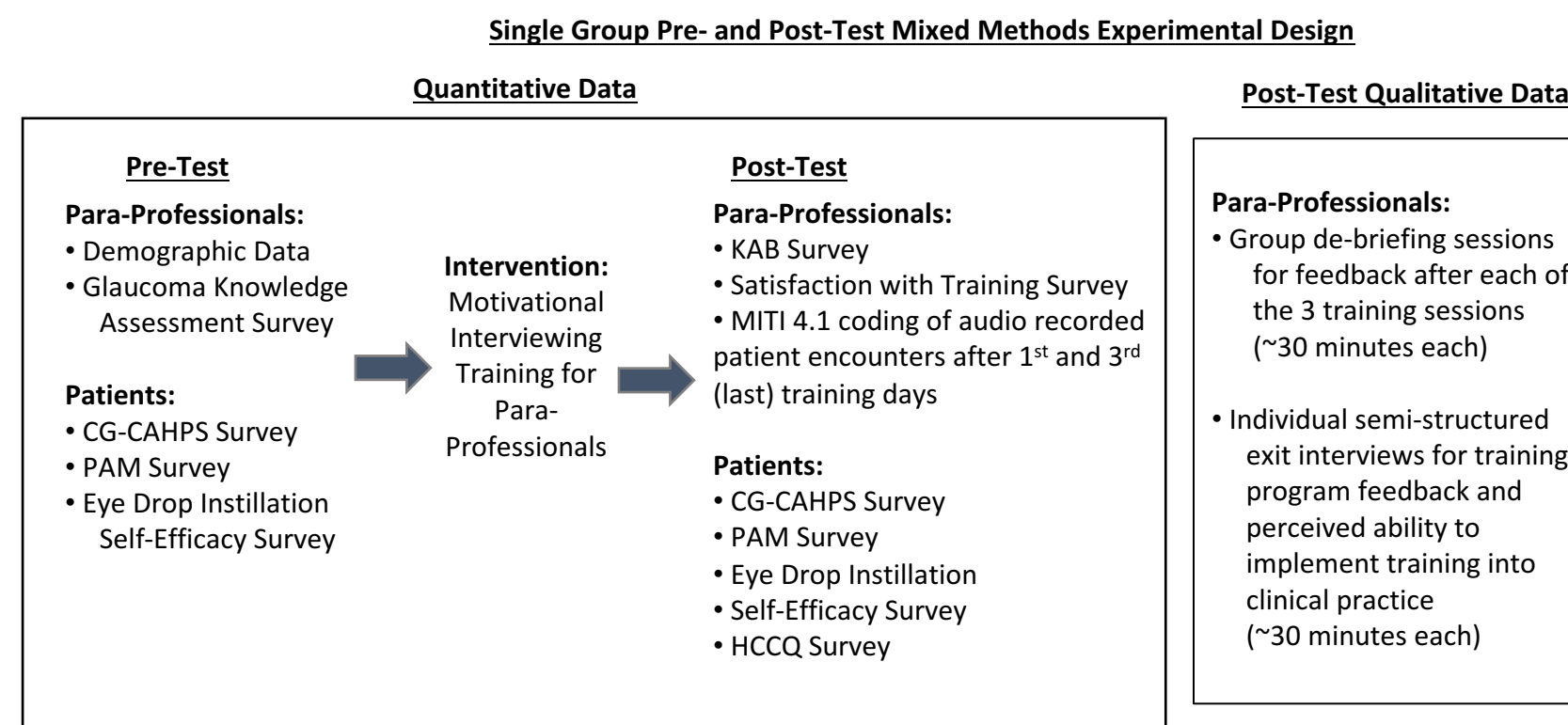
Five core skills to MI<sup>3</sup>

- Asking open-ended questions
- Affirming
- Reflecting
- Summarizing
- Obtaining permission to provide information and advice

Empathy is a key component of MI

## METHODS

Figure 1. Mixed Methods Experimental Design



CG-CAHPS, Clinician and Group Survey of the Consumer Assessment of Healthcare Providers and Systems; PAM, Patient Activation Scale; HCCQ, Health Care Climate Questionnaire; KAB, Motivational Interviewing Knowledge, Attitudes and Behavior Questionnaire; MITI, Motivational Interviewing Treatment Integrity Coding Manual

Table 1. Definitions and Proficiency Thresholds for MITI 4.1 (18) Scores Utilized

Summary Score	Definition	Fair Proficiency	Proficient
<b>Relational Component</b>	How well the counselor demonstrates	4/5 on a Likert scale	5/5 on a Likert scale
	1) <i>Partnership</i> in which they do not assume the role of the expert but rather encourage power sharing in the interaction so that the patient's contributions influence the course of the discussion and		
	2) <i>Empathy</i> in which the counselor demonstrates a deep understanding of the patient's perspective and situation.		
<b>Percent Complex Reflections</b>	While <i>simple reflections</i> convey an understanding of what the patient says, <i>complex reflections</i> add meaning to what the patient has said.	40%	50%
<b>Reflection: Question</b>	Number of all <i>reflective</i> statements compared to number of total questions asked.	1:1	2:1

## RESULTS

Table 2. Comparison of Motivational Interviewing Treatment Integrity (MITI) Coding scores during practice sessions after the first and third (final) training sessions

	Post Training #1 (n=7)		Post Training #3 (n=7)		Change (n=7)		P-value
	Mean (SD)	Min, Max	Mean (SD)	Min, Max	Mean (SD)	Min, Max	
<b>MITI Coder 1</b>							
<b>Relational</b>	2.1 (0.7)	1.0, 3.0	3.2 (0.4)	2.5, 3.5	1.1 (0.7)	0.0, 2.0	0.03
<b># Simple Reflections</b>	2.1 (1.8)	0.0, 4.0	2.3 (1.0)	1.0, 4.0	0.1 (2.6)	-3.0, 4.0	1.00
<b># Complex Reflection</b>	0.7 (0.8)	0.0, 2.0	1.9 (1.2)	0.0, 4.0	1.1 (1.2)	-1.0, 2.0	0.09
<b>% Complex Reflections</b>	28% (37%)	0%, 100%	39% (18%)	0%, 50%	11% (40%)	-50%, 50%	0.5
<b>% Reflections</b>	16% (11%)	0%, 28%	35% (19%)	8%, 62%	19% (26%)	-19%, 55%	0.1
<b>MITI Coder 2</b>							
<b>Relational</b>	2.0 (1.0)	1.0, 3.5	3.4 (0.4)	2.5, 3.5	1.4 (1.0)	0.0, 2.5	0.03
<b># Simple Reflections</b>	2.7 (3.0)	0.0, 7.0	2.3 (1.1)	1.0, 4.0	-0.4 (3.7)	-6.0, 3.0	0.8
<b># Complex Reflection</b>	1.0 (1.2)	0.0, 3.0	1.7 (1.0)	0.0, 3.0	0.7 (1.3)	-1.0, 2.0	0.3
<b>% Complex Reflections</b>	32% (40%)	0%, 100%	39% (21%)	0%, 67%	10% (44%)	-50%, 54%	0.7
<b>% Reflections</b>	16% (15%)	0%, 40%	38% (19%)	11%, 63%	22% (29%)	-19%, 63%	0.1

SD, Standard Deviation; MITI, Motivational Interviewing Treatment Integrity

Table 3. Joint Display: Themes from Staff Rated Above and Below the Mean for Autonomy Supportiveness (measured by HCCQ)

	Below Mean HCCQ Score (Theme, Illustrative quote)	Above Mean HCCQ Score (Theme, Illustrative quote)
<b>Demonstrating MI Spirit</b>	Classified patients as "difficult," demonstrating that they were wrestling with patients over behavior change instead of rolling with resistance: "A lot of times, it's hard to get information on a patient" though other times "that other [patient] was easy"	Worked to make all patients feel comfortable and acknowledged the importance of rapport: "patients are getting a lot out of the way that we're talking to them and making them feel comfortable" and "if the patient does not feel comfortable with you, they are not going to take what you say seriously"
<b>Demonstrating MI Techniques</b>	Asking more closed-ended questions: "Do you every have trouble with aim? I actually asked that directly"	Using affirmations: "you might not be getting them in seven days but you have got them in six days and that's awesome..."

Table 4. Baseline characteristics of the glaucoma patient sample (n=81)

Continuous Variables	n	Mean (SD)	Min, Max	Median
Age (years)	81	70.6 (13.0)	20.0, 95.0	71.0
Better Eye Presenting LogMAR	81	0.11 (0.24)	-0.12, 1.60	0.00
Worse Eye Presenting LogMAR	81	0.32 (0.34)	-0.12, 1.60	0.18
CG-CAHPS Score	79	2.9 (0.3)	1.3, 3.0	3.0
PAM 10 Score	80	67.0 (14.0)	40.9, 100.0	65.8
EDISE Score	81	2.7 (0.3)	2.0, 3.0	2.8
<b>Categorical Variables</b>	Frequency (Percent)			
<b>Sex</b>				
Male			40 (49.4)	
Female			41 (50.6)	
<b>Race</b>				
White			66 (82.5)	
Black			7 (8.8)	
Asian			6 (7.5)	
Other			1 (1.3)	
<b>Glaucoma Severity</b>				
Mild			7 (11.9)	
Moderate			13 (22.0)	
Severe			39 (66.1)	
<b>Visit Type</b>				
New Patient			4 (4.9)	

SD, Standard Deviation; CG-CAHPS, Clinician and Group Survey of the Consumer Assessment of Healthcare Providers and Systems; PAM, Patient Activation Measure; EDISE, Eye Drop Installation Self-Efficacy

Table 5. Descriptive statistics on patient outcomes, pre- and post-intervention

Score	N	Pre-MI Intervention		Post-MI Intervention		Change		P-value*
		Mean (SD)	Min, Max	Mean (SD)	Min, Max	Mean (SD)	Min, Max	
Full Patient Sample (n=81)								
CG-CAHPS score	78	2.9 (0.3)	1.3, 3.0	2.9 (0.2)	1.8, 3.0	0.07 (0.35)	-0.50, 1.75	0.08
PAM 10 Score	79	66.9 (14.1)	40.9, 100.0	66.5 (14.0)	42.9, 100.0	-0.46 (11.6)	-37.4, 34.1	0.7
EDISE score	81	2.7 (0.3)	2.0, 3.0	2.7 (0.3)	2.0, 3.0	0.02 (0.30)	1.0, 0.8	0.5
Patients who rated their para-profession above average for autonomy support (n=39)								
CG-CAHPS score	39	2.8 (0.4)	1.3, 3.0	3.0 (0.1)	2.5, 3.0	0.13 (0.39)	-0.5, 1.75	0.04
PAM 10 Score	38	67.0 (14.4)	40.9, 100.0	66.0 (12.8)	42.9, 100.0	-0.92 (10.4)	-27.7, 19.5	0.6
EDISE score	39	2.7 (0.3)	2.0, 3.0	2.7 (0.3)	2.0, 3.0	0.02 (0.29)	-1.0, 0.5	0.7

MI, Motivational Interviewing; SD, Standard Deviation; Min, Minimum; Max, Maximum; CG-CAHPS, Clinician and Group Survey of the Consumer Assessment of Healthcare Providers and Systems; PAM, Patient Activation Measure; EDISE, Eye Drop Installation Self-Efficacy

## CONCLUSIONS

- Training ophthalmic para-professional staff in brief, glaucoma-specific MI techniques is feasible and we have created a standardized training process.
- Patient satisfaction with staff communication increased after the training (p=0.04) among patients who rated their staff above the mean for providing autonomy supportive care.
- Implementing MI counseling into clinical practice will require dedicated time in clinic.

## REFERENCES

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