

Summary

Title	Strengthening and Promoting Interpersonal Relationships through Motivational Interviewing Training (SPIRIT)
Objectives	To describe experiences of mental health practitioners using Motivational Interviewing (MI) with individuals presenting in mental health crisis.
Methodology	Descriptive design using qualitative method
Methods	Focus groups with mental health practitioners working in mental Health Liaison (MHLT) and mental Health Home Treatment (HTT) Teams
Number of subjects	28 mental health practitioners from Mental Health Liaison and Home Treatment Teams
Subject selection criteria/method	Mental health practitioners working in MHLT or HTT who have attended a two day course on Motivational Interviewing training.

Introduction

Motivational Interviewing (MI) is a counselling approach with fundamental principles and methodologies that have been applied and tested in various health care settings with research findings demonstrating efficacy.

MI is now established as evidence based practice in many areas of health care provision from primary care to substance misuse and can be used to support any area of behaviour or lifestyle change or dilemmas faced by individuals.

The method differs from more “coercive” or externally driven methods for motivating change as it does not impose change but rather supports change as coming from within the individual which can be influenced by their environment and own values.

It is grounded in a respectful stance with a focus on building rapport in the initial stages of engagement. It is a collaborative person centered approach based on partnership, honours autonomy rather than expert - recipient roles. It holds many parallels with the Recovery ethos and the recovery star.

The Adult Mental Health Directorate aims to integrate a Motivational Interviewing approach within all services and evaluate the programme which, if positive results are found, could be replicated within other Oxleas services where staff deal with health behaviour change. This work is in collaboration with Greenwich University and Oxleas NHS Foundation Trust Institute of Integrated Care

Evidence base for use of MI in brief interactions

Expanding MI to the treatment of major mental health problems is appealing as it assists in addressing key clinical issues such as ambivalence and lack of engagement (Westra et al, 2011). MI has also been shown to be effective in short interactions (Hettema et al, 2005) and can be used in conjunction or as a prelude to other treatments and therapies (Flynn, 2011). This infers suitability of MI practice to acute mental health services where client interactions are more likely to be brief. MI skills such as open ended questions, reflective listening and use of affirmations and summaries can assist mental health staff to ensure clients feel listened to and that their views are respected. These are valuable tools and skills when working in challenging environments and support the development of therapeutic nurse client interactions, which are essential to establishing safe and trusting relationships, and fundamental to mental health nursing as they lay the foundation for all future interventions (Reynolds 2008).

The nature of working with individuals presenting in mental health crisis is often complex and difficult. It is vital that clients feel listened to and fully understood, and that the practitioner has the opportunity to maximise on the time they spend with the client in a positive way. A review of MI use in mental health services found MI is most commonly practiced in an adapted manner (Arkowitz et al, 2008). This offers practitioners flexibility in their approach to MI and the opportunity to use the core skills and techniques of MI even when a 'pure' MI approach may be difficult to achieve.

There is some existing research evidence on the use of MI by nurses in emergency departments in the USA. Baumann (2012) stated that the use of MI with people going through an emergency helps them become aware of issues of ambivalence that may have been preventing them making changes in their life. He also suggests MI can help emergency nurses to better understand their patients and use strategies and techniques to help individuals make positive changes.

Research has also been undertaken to explore nurses' experience of using MI skills and techniques. Brobeck et al (2011) conducted a qualitative study describing the experience of using MI for health promotion by nurses in primary health care. The

nurses in the study described MI as a demanding intervention requiring practice and focus, but found it beneficial in clarifying the nursing role within health promotion. It was also reported to be beneficial to the nurse client relationship by increasing understanding of the client's circumstances leading to an increased empathy and respect for clients.

Currently there is a lack of evidence available in the research literature about the use or experience of practitioners using Motivational Interviewing with individuals in mental health crisis. This research proposal is to conduct qualitative research exploring the experiences of mental health practitioners using MI when working with individuals in mental health crisis.

Description

This study will explore the experiences of mental health practitioners working in mental health liaison and home treatment teams in the use of Motivational Interviewing with individuals presenting in mental health crisis.

Research question

How do mental health practitioners working in mental health liaison and home treatment teams experience using Motivational Interviewing with individuals presenting in mental health crisis?

Methodology

A qualitative approach (grounded theory) will be utilised.

Research Design

1. Semi structured focus groups for mental health liaison practitioners and practitioners from home treatment teams

Analysis

1. Transcribe and conduct coding and qualitative thematic analysis of focus group data
2. Review analysis of emerging themes

References

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