Motivational Interviewing in Pediatric Dentistry

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April 26-27, 2019
Intro
A thoughtful beginning
My strengths/virtues
Stepping on the scale
Change in the first person
A Feedback Framework

First, ask for other’s opinion!

Ask permission to share

What went well, fine tuning opportunities

Show gratitude
What is MI?
Motivational interviewing (MI) is a person-centered, guiding method of communication and counseling to elicit and strengthen motivation for change.
“The strategies involved in motivational interviewing are more persuasive and supportive and argumentative and are designed for the patient's intrinsic motivation.”
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Shared Decision Making

- Patient
- Goal
- Care Team
What is the matter with you?
What is the matter with you?

What matters to you?
Why MI?
What do people want from their dentist?
What do people want from their dentist?

Patients wanted help taking control of their own oral health
Social Determinants of Health

- Health Behaviors: 30%
- Social and Economic Factors: 40%
- Physical Environment: 10%
- Clinical Care: 10%
- Genes and Biology: 10%
What does the evidence say?
Information → Increased knowledge
Information → Increased knowledge

Increased knowledge ≠ Engagement and participation

“If you want to be happy, practice compassion. If you want others to be happy, practice compassion.”

-Dali Lama XIV
The Spirit Of MI
The Spirit of MI

- Partnership
- Compassion
- Autonomy
- Evocation
Engaging
How do you currently go about engaging your patients?
What questions are patients asking related to engagement?
What traps can we fall into that promote disengagement?
What promotes engagement?
What promotes engagement?

Desires or goals
Importance
Positivity
Expectations
Hope
What promotes engagement?

**Setting the table**
- Name
- Role
- Time
- Agenda
- Ask permission
Our Daily Flow

In partners, set the table (name, role, time, agenda, permission)

Ask an engaging question

LISTEN!
A parallel challenge
Evoking
A few questions...
Reflective Listening Statements
“It’s hard to remember to brush my son’s teeth because I’m so busy.”
“My baby cries at night unless I give him the bottle with milk. I’m exhausted. I know I shouldn’t, but I’m at the end of my rope.”
“I’m sorry I missed our appointment. I wanted to come, but my boss said I couldn’t miss work again.”
“I can do it (brush twice a day), but it’s more about getting her to be chill while I do it. I want to figure out how to make it a fun activity instead of her being really upset.”
In the Moment
“You are a midwife, assisting at someone else’s birth. Facilitate what is happening rather than what you think ought to be happening. If you must take the lead, lead so that the mother is helped, yet still free and in charge. When the baby is born, the mother will rightly say, “We did it ourselves!”

-Tao Te Ching
Mind Energizer
What other skills help us engage with and hear from patients?

- Open Ended Questions
- Affirmations
- Reflective listening statements
- Summarizations
Open Ended Questions
Finding the rhythm

Set the table (name, role, time, agenda, permission)

Start with open ended question

Continue with reflection/question rhythm
Finding the rhythm
Affirmations
Summarizations
In the Moment
What is change talk?
What is sustain talk?
“My baby cries at night unless I give him the bottle with milk. I’m exhausted. I know I shouldn’t, but I’m at the end of my rope.”
“I’m sorry I missed our appointment. I wanted to come, but my boss said I couldn’t miss work again.”
“I can do it (brush twice a day), but it’s more about getting her to be chill while I do it. I want to figure out how to make it a fun activity instead of her being really upset.”
“I can’t bring my daughter in during the afternoon. Do you have any morning appointments?”
How can we respond to change talk?
“My baby cries at night unless I give him the bottle with milk. I’m exhausted. I know I shouldn’t, but I’m at the end of my rope.”
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“I don’t see motivational interviewing as the solution; I see motivational interviewing as a powerful ingredient in the fuel that drives good practice. And it’s good practice that we are after.”

-Stephen Rollnick
Stepping Into the Pool

Set the table (name, role, time, agenda, permission)

Put on CAPE, use OARS, respond to change talk, stay curious!

Use Page 4 to determine direction of conversation (Engage, Evoke)
Day 1 - Fin

See you tomorrow at 8:00am!
A thoughtful beginning
Let’s review...

What is MI?
Why MI?
The Spirit of MI

The Processes
The Core Skills
Change Talk
Complex Reflections
Types of Complex Reflections

- Feeling
- Amplified
- Double Sided
- Continuing the Paragraph
- Metaphor
“I wish her teeth were healthier. It’s just been so hard since I got sick.”
“I’d take the bottle away from her but she runs the household. It’s chaos when she doesn’t get what she wants.”
“I used to floss regularly. But then I saw that news about the lack of evidence for flossing so I’m much lazier about it now.”
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Change is directional, change is deep
In the Moment
Caries Risk Assessment → Caries Risk Conversation
Only Four

1. “Tell me about how you take care of your teeth at home?”
2. “We know fluoride is one of the best ways to help make teeth strong. A lot of people might get fluoride through their toothpaste or even tap water depending on where you live. I wonder if you could tell me about any places you might be getting from?”
3. “Tell me about what you eat and drink during a normal day.”
4. “What’s your experience at the dentist been like?”
Towards a true SMG
Our Daily Flow

In partners, set the table (name, role, time, agenda, permission)

Help set SMG

Ask permission to follow up
Dental visits every ___ months

Family receives dental treatment

Eat healthy snacks (nuts and cheese)

Brush with fluoride toothpaste at least 2 times daily

Use Clinpro 5000, MI Paste or ReminPro daily

Limit juice, soda and sports drinks to mealtime

Use fluoride mouthwash nightly

Chew sugarless gum

Drink tap water (containing fluoride)

Floss

Use xylitol

Leave toothpaste foam in mouth at bedtime
Evoking Change Talk
Evoking the Direction

Think about goal you have for 2019
Set the table (name, role, time, agenda, permission)
“What concerns do you about accomplishing the goal you have set for yourself?”
Use your OARS and CAPE to continue the conversation
Evoking the Direction

Think about goal you have for 2019

Set the table (name, role, time, agenda, permission)

“What excites you about accomplishing the goal you have set for yourself?”

Use your OARS and CAPE to continue the conversation
Evoking the Direction
10 Strategies for Evoking Change Talk
“Our tendency is to run away from the painful realities or to try to change them as soon as possible. But cure without care makes us into rulers, controllers, manipulators, and prevents a real community from taking shape. Cure without care makes us preoccupied with quick changes, impatient and unwilling to share each other’s burden. And so cure can often become offending instead of liberating.”

-Henri Nouwen
Explore-Offer-Explore (EOE)
Explore What do they know?
Offer Share information
Explore What do they think?
Our Daily Flow

“I wonder if we could talk about sealants for a few minutes. What do you know about sealants?”

Affirm, Reflect, EOE
Evidence-based clinical practice guideline for the use of pit-and-fissure sealants:
A Report of the American Dental Association and the American Academy of Pediatric Dentistry

Summary of Clinical Recommendations on the Use of Pit-and-fissure Sealants in the Occlusal Surfaces of Primary and Permanent Molars in Children and Adolescents

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Quality of the Evidence</th>
<th>Strength of Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>The sealant guideline panel recommends the use of sealants compared to non-use in permanent molars with both sound occlusal surfaces and non-cavitated occlusal caries lesions in children and adolescents.</td>
<td>Moderate</td>
<td>Strong</td>
</tr>
<tr>
<td>The sealant guideline panel suggests the use of sealants compared to fluoride varnishes in permanent molars with both occlusal sound surfaces and non-cavitated occlusal caries lesions in children and adolescents.</td>
<td>Low</td>
<td>Conditional</td>
</tr>
<tr>
<td>The panel was unable to determine superiority of one type of sealant over another due to the very low quality of evidence for comparative studies. The panel recommends that any of the materials evaluated (e.g. resin-based sealants, resin-modified glass ionomer sealants, glass ionomer cements, and polyacid-modified resin sealants in no particular order) can be used for application in permanent molars with both occlusal sound surfaces and non-cavitated occlusal caries lesions in children and adolescents.</td>
<td>Very Low</td>
<td>Conditional</td>
</tr>
</tbody>
</table>

If 100 Children Do Not Receive Sealants
- 50 children will have caries
- 50 children will not have caries

If 100 Children Do Receive Sealants
- 12 children will have caries
- 88 children will not have caries due to sealant application

76% REDUCTION IN CARIES

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Sustain Talk → Change Talk
Diving Into The Deep End
Putting it All Together

Set the table (name, role, time, agenda, permission)

Put on CAPE, use OARS, respond to change talk, share information, stay curious!

Caries Risk Conversation towards SMG
“Do not depend on the hope of results. You may have to face the fact that your work will be apparently worthless and even achieve no result at all, if not perhaps results opposite to what you expect. As you get used to this idea, you start more and more to concentrate not on the results, but on the value, the rightness, the truth of the work itself. You gradually struggle less and less for an idea and more and more for specific people. In the end, it is the reality of personal relationship that saves everything.”

-Thomas Merton
Putting it All Together

Set the table (name, role, time, agenda, permission)

Put on CAPE, use OARS, respond to change talk, share information, stay curious!

Use Page 4 to determine direction of conversation (Engage, Focus, Evoke, Plan)
Putting it All Together
A Thoughtful (True) Beginning
Stepping on the scale
Resources
Thank you!

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