

BAP Core Competencies

Practicum Four: Introduction to BAP-MI Motivational Interviewing for Efficiency in Healthcare

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Disclosure

The BAP Professional Network (www.BAPPN.org) is a nonprofit organization, 501c(3), with a mission to advance the development, study, and dissemination of Brief Action Planning (BAP) and its pragmatic integration with Motivational Interviewing (BAP-MI) across healthcare education, practice, and research. BAPPN offers online self-directed courses on BAP and BAP-MI for a fee.



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 - www.CentreCMI.ca

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Summer Course: BAP Core Competencies

Online Self-Directed Program + 4 Practicums

Goals	Online Course	Practicum
5 Foundational Skills (with Spirit of MI)	Modules 1 & 2	One
3 Stepped-Care Skills	Module 3 & 4	Two
Reaching Competency (Using BAP Checklist & MITI Partnership Scale)	Module 5	Three
“A Taste of BAP-MI” (Advanced Skills)	Modules 6 & 7	Four

Our hopes

At the end of this Practicum,

You will feel enthusiastic about learning more about BAP-MI for clinical care and training.

Agenda: Practicum Four

- | | |
|---|--------|
| 1. Introduction & Overview | 05 min |
| 2. Discussion: BAP-MI (Readings & Videos) | 10 min |
| 3. Introduction and Overview of BAP-MI | 30 min |
| 4. A “Taste” of BAP-MI: Exercise | 30 min |
| 5. Summary, Conclusion, Next Steps? | 15 min |

Readings and Videos on BAP-MI



Comments? Questions?

**For Your Patients/Clients
with Persistent Unhealthy Behaviors**

Who are Not Ready for Change with BAP alone

Consider BAP-MI

**Let's Watch/Review
Two Short Videos:**

Observations/Discussion?



Module 2:
Responding to Emotions
Mr. Vanguard

Watch For Clinician's Use of...

1. Reflections

A. Cognitive – clinician repeats back what a patient has said
(or what may be deeper meaning)

B. Emotional - clinician repeats back what a patient has said
they feel (or what may be deeper feeling
“expressing empathy”/ “accurate empathy”)

Watch For Clinician's...

2. Transition to BAP

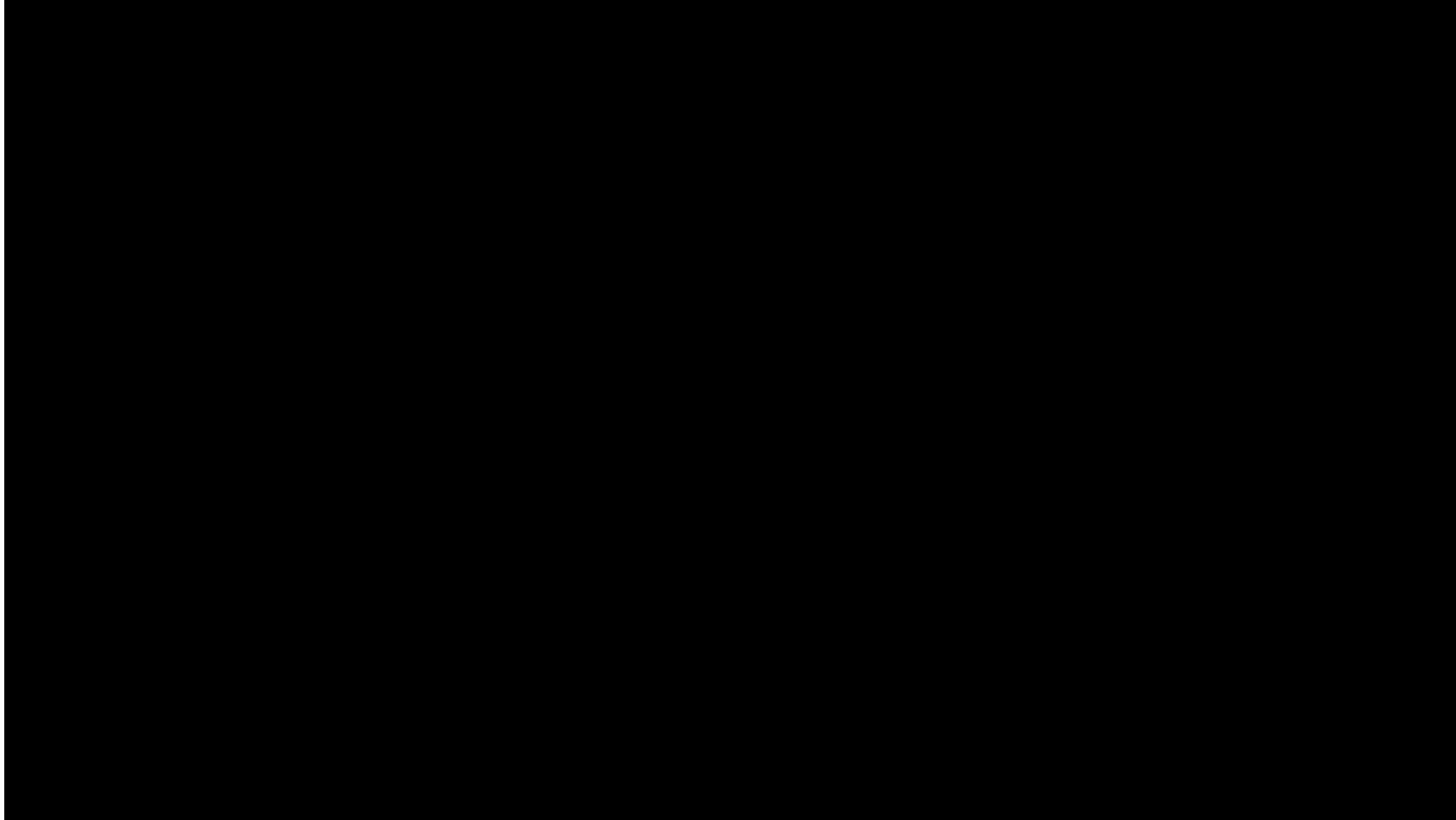
(Context-Specific Version of Question One)

A. When?

B. How?

C. Why?

Mr. Vanguard



<https://www.youtube.com/watch?v=Oplrhu53Ga4&t=10s>

BAP-MI: Reflections and BAP Probe?



What?

Why?

When?

Ambivalence

Common and "Normal"
In Context of Persistent Unhealthy Behaviors



BAP-MI: Linguistic Dynamics of Ambivalence

Sustain Talk

Sustain talk is the person's arguments against change.



Change Talk

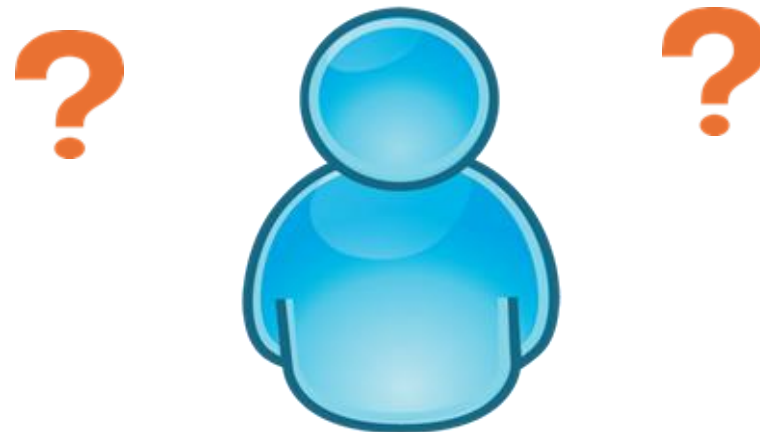
Change talk is the person's arguments for change

BAP-MI: Linguistic Dynamics of Ambivalence

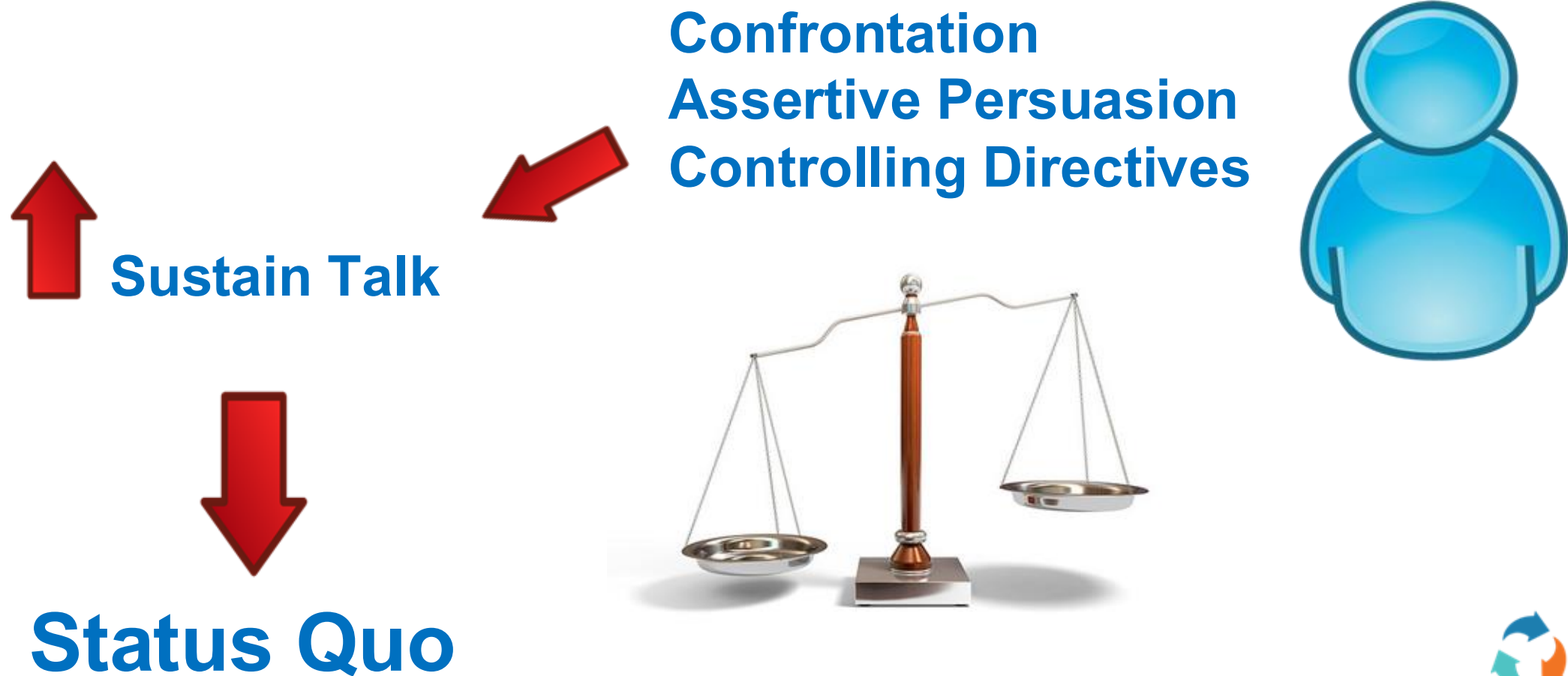
Sustain Talk



Change Talk



BAP-MI: Linguistic Dynamics of Ambivalence



BAP-MI: Linguistic Dynamics of Ambivalence

Sustain Talk



Change Talk



BAP-MI: Linguistic Dynamics of Ambivalence



Empathic & Strategic Reflections
Strategic Affirmations
Strategic Autonomy Support



Change Talk



Probe: BAP Q1

BAP



Change



BAP-MI



What?

- *Empathic reflections*
- *Affirmation*
- *Autonomy Support*
- *BAP probe – Question One*

Why?

- *Emotional Distress*
- *Discord*

When? (was BAP introduced)

- *When "sufficient" change talk emerged*

**Let's Watch Another Short Video:
Observations/Discussion?**

Mr. Stabler

**BAP-MI For Lifestyle Modification
In a Patient with Uncontrolled Hypertension**

Watch For Clinician's Use of...

1. Reflections

- A. Cognitive – clinician repeats back what a patient has said
(or what may be deeper meaning)
- B. Emotional - clinician repeats back what a patient has said
they feel (or what may be deeper feeling
“expressing empathy”/ “accurate empathy”)

2. Evocation (“cultivating change talk”)

- A. Double-sided and amplified reflections
- B. Importance ruler

Watch For Clinician's...

3. Transition to BAP

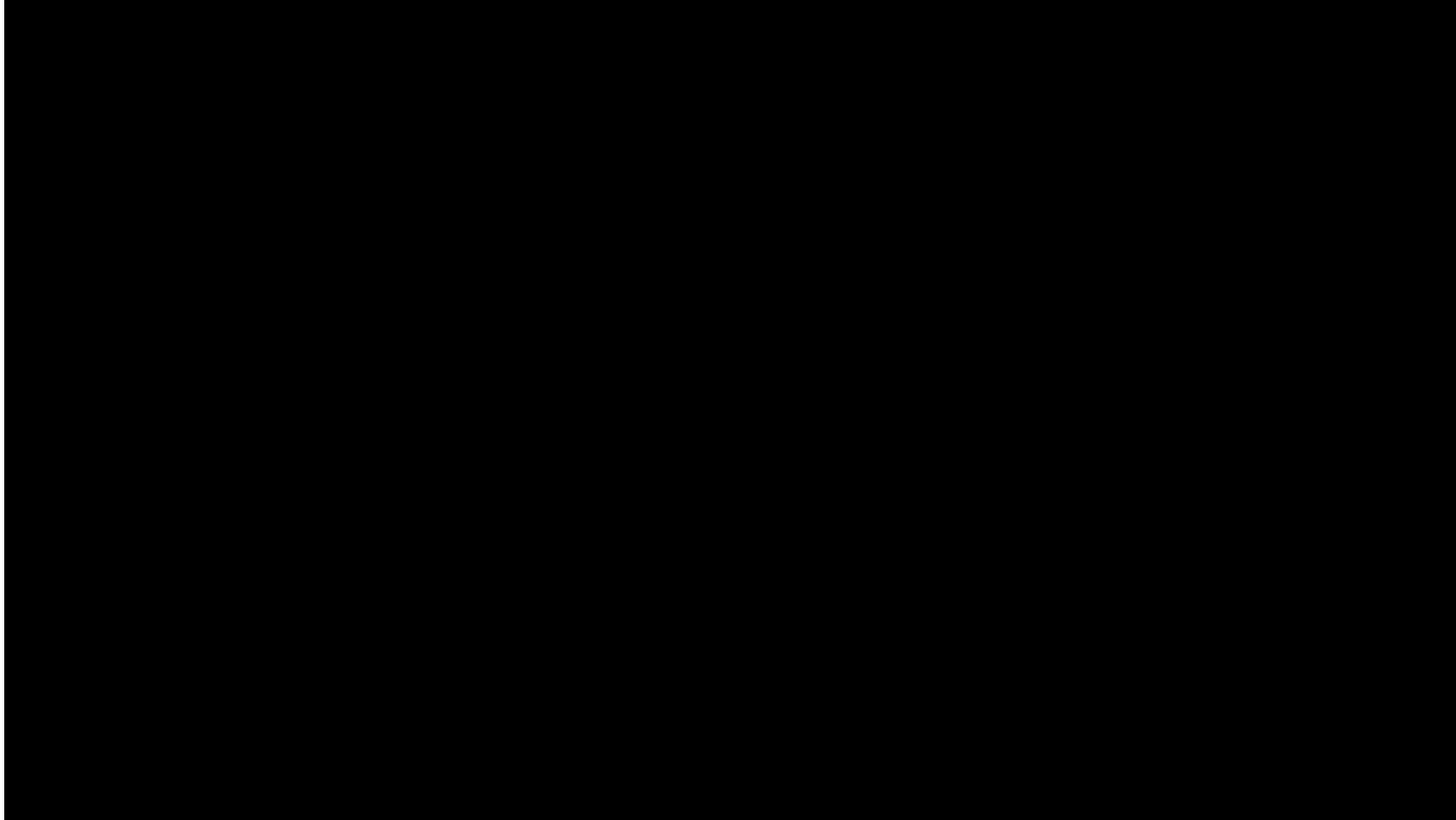
(Context-Specific Version of Question One)

A. When?

B. How?

C. Why?

Mr. Stabler



<https://www.youtube.com/watch?v=an08oPVGcUw>

BAP-MI



**BAP-MI For Lifestyle Modification
In a Patient with Uncontrolled Hypertension**

What?

Why?

When?

BAP-MI



BAP-MI For Lifestyle Modification In a Patient with Uncontrolled Hypertension

What?

- Empathic reflections
- Affirmation
- Autonomy Support
- Cultivate Change Talk (Evocation)
- BAP probe – Question One

Why?

- Emotional Distress
- Discord
- Sustain Talk & Little Change Talk

When? (was BAP introduced)

- When "sufficient" change talk emerged

BAP-MI: Linguistic Dynamics of Ambivalence



Strategic Empathic Reflections
Strategic Affirmations
Strategic Autonomy Support

Strategic Cultivating Change Talk



Change Talk



Probe: BAP Q1



BAP



Change



What is the relationship of BAP to MI?

Consider Two Metaphors/Symbols:

BAP ≈ Bookends

MI ≈ Books

BAP as a Roadmap into and through Planning

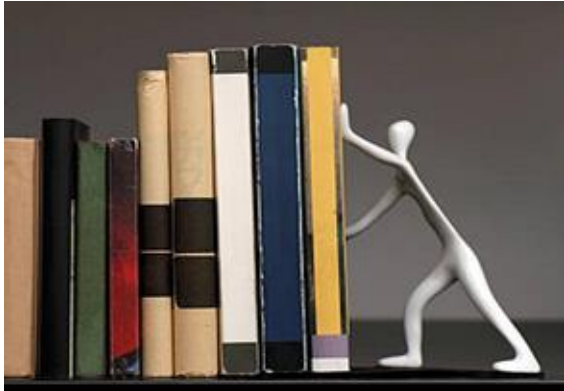


MI-consistent, with the Spirit of MI (partnership) and In the context of a good “working relationship” for patients who are ready/nearly ready for change.

BAP as a Roadmap into and through Planning



BAP as a Roadmap into and through Planning



BAP-MI: Summary

3 Ways that BAP “Bookends” Behavior Change Conversations....+/- MI

For patients
ready or “nearly
ready” for action
planning...

BAP is often sufficient.



Ambivalence I
For patients with
emotional
distress ...

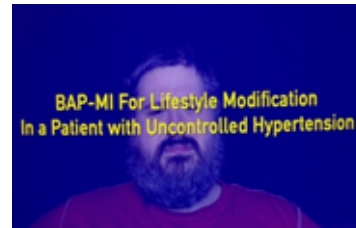
Question 1 of BAP (“A”) may uncover a need for empathy (“relational” skills) which may generate sufficient “change talk” to return to BAP (“Z”).



Ambivalence I & II
For patients with
distress &
ambivalence...

Clinicians begin with MI using both relational & technical skills (CCT, SST) to generate sufficient change talk for BAP (bookend).

Mr. Stabler



Mr. Dowd

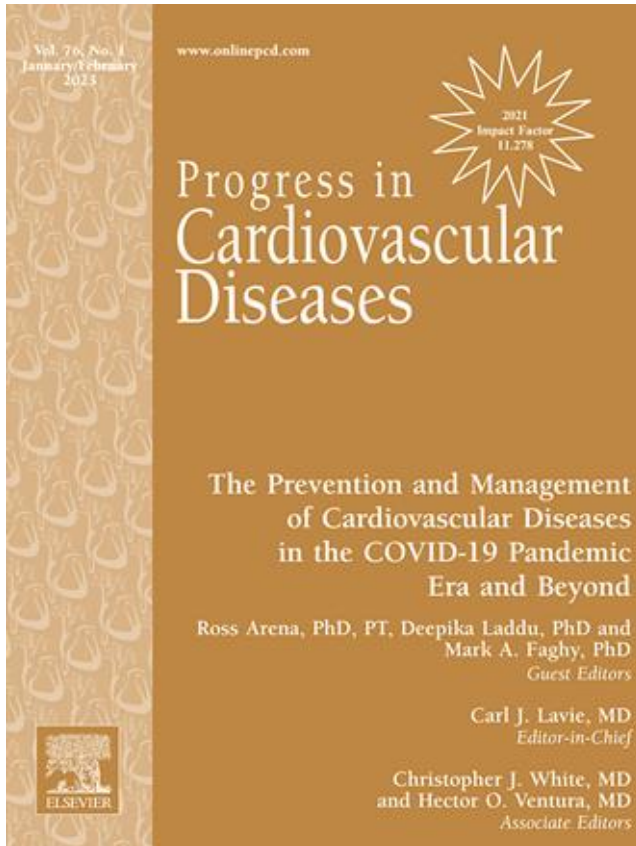


II. What is BAP-MI?

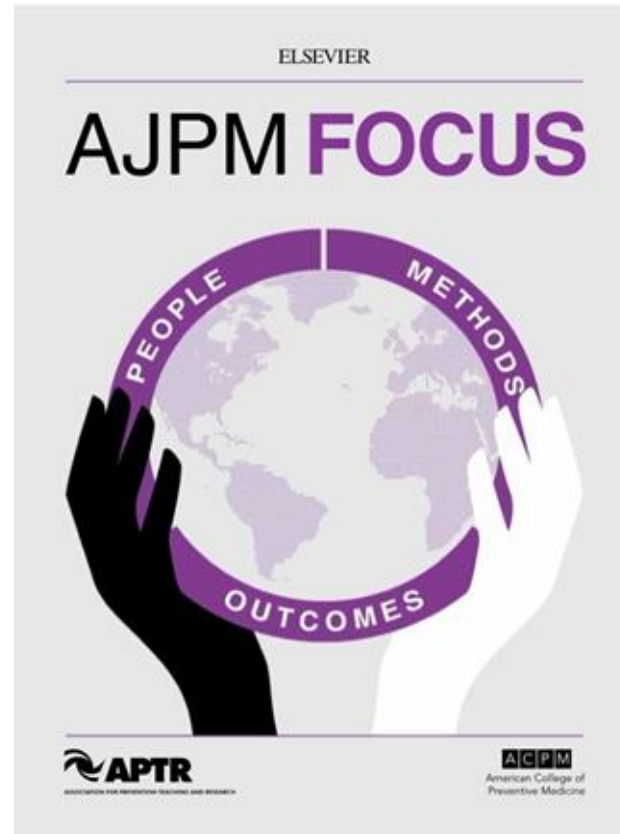
BAP-MI is a stepped-care integration of evidence-informed skills from Brief Action Planning (BAP) and Motivational Interviewing (MI) to support patient self-management and facilitate health behavior change.

BAP-MI is particularly relevant for patients who do not make action plans with BAP alone, who typically have persistent unhealthy behaviors and ambivalence about change.

In the practice of BAP-MI (and/or MI), the 8 core competencies of BAP function as an evidence-based roadmap into and through Planning.



Using motivational interviewing and brief action planning for adopting and maintaining positive health behaviors, March-April 2023.



BAP- MI: A Novel Stepped-Care Integration of Brief Action Planning and Motivational Interviewing to Optimize Outcomes, September 2023

“BAP and MI are two evidence-based approaches which can be used separately or together to support patient self-management and health behavior change.”



Download Handout: A “Taste” of BAP-MI

A “Taste” of BAP-MI

6/30/24

A “Taste” of BAP-MI

- Write short statement of something that is important to you, that you are considering changing (but which you have not already started)
 - Lifestyle
 - Interpersonal
 - Personal (e.g. well-being)
- This will be the content for real-play exercise

1

Is there some change in your life that you've been thinking about, that is important to you, but you have not (yet) begun making that change?

Use 1-2 reflection(s) to clarify meaning or feelings

2

Why is this change important to you?

Use 1-2 reflections to clarify meaning/feelings

How will your life be better if you make this change?

Use 1-2 reflections to clarify meaning/feelings

How might you go about it, in order to succeed?

Use 1-2 reflections to clarify meaning/feelings

3

Would you like to go ahead and make a plan.... ?



4

A “Taste” of BAP-MI

- Write short statement of something that is important to you, that you are considering changing (but which you have not already started)
 - Lifestyle
 - Interpersonal
 - Personal (e.g. well-being)
- This will be the content for real-play exercise (something you can share in break-out)

“TASTE OF BAP-MI”

(Break-Out Groups of 2 or Program-Specific Grouping)

- Brief introductions
- Real-Play (“clinician,” “patient/client”)
 - Clinician asks **4 questions**, followed with **1-2 reflection** (s) (“attentive listening”)
 - Then, probe readiness with **Question One of BAP (context-specific)** & continue with BAP if appropriate
 - De-brief
 - Switch roles as time allows and/or work collaboratively in one exercise

1. Is there some change in your life that you've been thinking about, that is important to you, that you'd like to do, but you haven't begun making that change?

Use 1-2 reflection(s) to clarify meaning or feelings

2. Why is this change important to you?

Use 1-2 reflections to clarify meaning/feelings

3. How will your life be better if you make this change?

Use 1-2 reflections to clarify meaning/feelings

4. How might you go about it, in order to succeed?

Use 1-2 reflections to clarify meaning/feelings

Would you like to go ahead and make a plan about?



* Revised from Cole, Gutnick, Davis, & Reims: “Brief Action Planning Flow Chart,” 2016

Break-Out (20-30 minutes)

Return to Full Workshop



Observations? Discussion?

Models of Implementation: 20+ Years

- Developed (\approx 2002) as a self-management support tool for chronic illness (diabetes, cardiac) in the “Chronic Care Model”
- Healthcare teams (“healthcare transformation”)
 - care managers, nurses, physicians, SW, psychologists, OT, PT, etc
- **Versatile** and **Pragmatic**
 - Useful across wide-range of clinical expertise and disciplines for patients at varying levels of readiness for change

Models of Implementation: >10 Academic/University Health Systems

- Northport VA/Stony Brook – Health Psychology, Prev Med & Internal Med Residents
- UC San Diego - Preventive & Lifestyle Medicine Residents
- University of North Carolina - Addiction Medicine Fellows
- Zucker SOM at Hofstra/Northwell – medical students
- UCLA – medical students
- Emory/Grady – Psychiatry ACT teams
- George Washington SOM – medical students

Summary, Conclusion, Next Steps?

Email Us
questions/comments/feedback
scole@BAPprofessionalNetwork.org

