

Lessons Learned and Motivational Interviewing Resources for Individualized Care in DSMES Programs

LESSONS LEARNED

1. It can be difficult to allow the patient to guide your discussion and identify behavior change goals when you know what they need to learn and should be doing. But instead of focusing on your own agenda and curriculum, sit back and ask them what they want to focus on and learn.
2. Don't take it personally when a patient isn't ready to make a change. They are the ones managing their condition within the context of their own life, and even individuals with the best of intentions can experience burnout.
3. MI techniques are particularly helpful in a group setting. Using prompts and questions facilitates conversations and solutions among the participants. If group participants come up with solutions or ideas themselves, they buy into it more.
4. It's not easy to listen to a recording of yourself. It was a shock for most of the educators in our practice but in the end proved to be extremely helpful. The recordings actually distance you from the content of your discussion with the patient and allow you to be more objective when evaluating it.
5. Don't be afraid to try something new. We get stuck in our routines, and thinking out of the box is scary. But in the end, it may help shake you up and improve the care you provide to your patients.

MOTIVATIONAL INTERVIEWING RESOURCES

- [Motivationalinterviewing.org](http://motivationalinterviewing.org)
- BECCI Form:
<https://motivationalinterviewing.org/sites/default/files/BECCIForm.pdf>
- Motivational Interviewing and Diabetes:
What Is It, How Is It Used, and Does It Work?:
<http://spectrum.diabetesjournals.org/content/19/1/5>
- Motivational Interviewing Part 2: An Overview of Skills and Challenging Clinical Encounters:
<http://spectrum.diabetesjournals.org/content/24/4/231>