



Assessment

Validation of the one pass measure for motivational interviewing competence

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ABSTRACT

Objective: This paper examines the psychometric properties of the OnePass coding system: a new, user-friendly tool for evaluating practitioner competence in motivational interviewing (MI). We provide data on reliability and validity with the current gold-standard: Motivational Interviewing Treatment Integrity tool (MITI).

Methods: We compared scores from 27 videotaped MI sessions performed by student counselors trained in MI and simulated patients using both OnePass and MITI, with three different raters for each tool. Reliability was estimated using intra-class coefficients (ICCs), and validity was assessed using Pearson's *r*.

Results: OnePass had high levels of inter-rater reliability with 19/23 items found from substantial to almost perfect agreement. Taking the pair of scores with the highest inter-rater reliability on the MITI, the concurrent validity between the two measures ranged from moderate to high. Validity was highest for evocation, autonomy, direction and empathy.

Conclusion: OnePass appears to have good inter-rater reliability while capturing similar dimensions of MI as the MITI. Despite the moderate concurrent validity with the MITI, the OnePass shows promise in evaluating both traditional and novel interpretations of MI.

Practice implications: OnePass may be a useful tool for developing and improving practitioner competence in MI where access to MITI coders is limited.

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1. Introduction

A key part of intervention research is being able to definitively assess that the intervention has been implemented as planned. For drug trials or surgical interventions, the presence (or absence) of the intervention is relatively straightforward, but for behavior change counseling, the assessment of fidelity is more complex [1].

Motivational interviewing (MI) is a widely-used intervention across health contexts. It is a person-centered, directive method of talking about change, which uses specific techniques such as open questions and reflective listening [2]. First described in the early 1980s as an approach to dealing with problem drinkers [3], and with the results of over 300 clinical trials published to date across health settings, the rapid dissemination of motivational

interviewing (MI) has led to increased need for practical, reliable, and valid measures of competence and fidelity [4–7].

Numerous MI fidelity measures have been developed to assess MI [8–10,11]. While all have assessed some psychometric properties, they are not comprehensively validated, and most have not been validated against the most popular fidelity tool. This widely-used measure is the Motivational Interviewing Treatment Integrity (MITI) system. The MITI codes specific behavioral skills by counting the absolute number of questions and reflections heard within a 20-min segment of a clinical encounter, as well as evaluating subjective “global” measures of MI (such as how far the counselor fosters autonomy in the patient and demonstrates empathy) on a 5-point scale [12].

This paper seeks to evaluate the OnePass, a recent addition to the spectrum of coding tools, providing an assessment of both reliability and concurrent validity with the MITI.

The OnePass is a 23-item, one-page measure that was developed to address practicalities of coding MI in a range of settings, and to allow increased specificity at the higher end of MI competence as a 7-point scale is used rather than a 5-point scale as

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in MITI. As the application of MI continues to expand and variations of the original model are developed, there is a need for instruments that can capture the nuances of these adaptations [13,14]. The OnePass meets this need as it can be used with a model of MI [14] that includes somewhat novel conceptualization of key MI strategies such as action reflections [15] as well as a three phase model (explore, guide, choose) [14] of MI counseling that differs from other iterations of MI.

This paper describes the psychometric properties of the OnePass tool. Specific aims were to:

- (1) Evaluate the inter-rater reliability of OnePass and compare inter-rater reliability to the MITI based on the same sample of counseling encounters and,
- (2) Assess concurrent validity of the OnePass with the MITI serving as the criterion 'gold standard'.

1.1. MITI

The Motivational Interviewing Treatment Integrity rating system (MITI) rates MI counselors by coding 20 min of a clinical encounter, ideally chosen at random from the full session but avoiding the opening 5 min as this tends to follow conversational conventions such as introductions and explanations of a session [12]. MITI is currently viewed as the gold standard of MI fidelity, with translations in multiple languages [16] and having served as the coding system in many large-scale studies such as project MATCH [17] and EMMEE [12]. From 2012, it has been used to code counseling samples from prospective members of the Motivational Interviewing Network of Trainers as part of their application to become new members.

Initial training in the MITI system requires around 40 h of orientation to the tool and practice samples. Additional time is required to address project-specific adaptations, and coders typically spend time benchmarking within their teams to calibrate their scores.

1.2. OnePass

OnePass was developed by author KR and FM as a user-friendly MI fidelity assessment and supervision tool that could be easily adapted to different models of MI and clinical contexts. Using 23 questions assessed on a 7-point scale, OnePass uses intuitive language that can be easily understood by non-MI practitioners; each item is framed as a simple question from the stem 'How effectively did the counselor...'. Whole questions include 'How effectively did the counselor set the session agenda?', 'elicit importance', 'elicit confidence' and 'provide a menu of options' (for full list see Table 5). The authors believed that these simple items

would connect with newly-trained practitioners, and be more specific to coders. Additional benefits of the OnePass are that it requires less coding training, and can accommodate emerging models of how MI is conceptually executed. The OnePass requires raters to listen to a clinical encounter only once before providing the one-sheet feedback; the name is in contrast to the multiple reviews of the same recording or 'passes' that earlier coding systems required.

Unlike the MITI, OnePass only includes impressionistic ratings rather than counts of particular MI-consistent behaviors, and rather than computing exact ratios of open to closed questions and simple to complex reflections based on these counts, the rater provides a subjective classification of ratios achieved. Additionally, OnePass includes several 'if applicable' items that may be omitted if not included in the MI adaptation used or not applicable to the encounter being coded. An overview of the features of the MITI and the OnePass is shown in Table 1.

Ethics approval was obtained from the University of Michigan Institutional Review Board.

2. Methods

2.1. Participants and MI training

All students enrolled in a graduate level 15 week (45 h) course in MI from the University of Michigan were invited to participate in this study, and all 27 gave written consent. Students were predominantly graduate students of Public Health although the course was open to other faculty and departments. Two of the participants were medical doctors, but most did not have prior experience in patient counseling. Participants were 92% female and 88% spoke English as a first language.

The course was delivered from January–May 2011 in weekly 3-h workshops by KR, utilizing a range of pedagogical methods including didactic lecture elements, video excerpts, readings, real play, role-play and live 'real' demonstration. Around 1/3 of all class time was devoted to student practice activities, starting with skill-focused 'drills' such as formulating reflections, open questions and identifying change talk [18], before students moved on to opportunities for more lengthy real-play scenarios with their classmates. Following each larger activity, opportunities were provided for students to debrief their experiences of being the client as well as being the counselor. Throughout the course, students received individual feedback on performance from the instructor.

All students were required, around week 15, to counsel a standardized patient as part of the course requirements. Unlike some clinical contexts, the requirement was only to complete the counseling encounter, rather than to achieve a required level of skill or grade. Each encounter was videotaped and students were

Table 1
MITI and OnePass comparison at a glance.

	MITI	OnePass
Development	Based on the Motivational Interviewing Skills Code, which comprehensively evaluated both practitioner and patient	To reflect novel adaptations of MI To reduce training time and cost while still assessing fidelity
Items	• 5 'Global' scores (evocation, collaboration, autonomy, direction, empathy) • 7 Behavior counts (MI consistent and inconsistent, closed or open questions, simple or complex reflections, and giving information)	23 Items on a 7-point scale • 19 Questions and • Four ratios
Coder training	• Usually 40 h dedicated training plus practice MI 'tapes' for benchmarking • Regular benchmarking for quality control • Coders often trained in MI counseling	• Reading through training manual (examples of typical statements that could accompany each level) • Coders usually undergone basic MI training (16 h)

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