Adopt a definition of excellent nursing care management as “the development of care goals which take into consideration all elements of the individual patient condition”

- Explore feasibility of nurse care managers to detach from goals based on disease
- Incorporate addictive and psychological issues into medical care outcomes is needed

Learnings
Document the findings to provide care managers with direction on developing best practices and evidence-based protocols related to goal setting and the use of Motivational Interviewing (MI)

- To evaluate the impact that Care Managers have had on reducing the health risk score of high risk adult Medicaid patients
- To determine the effectiveness of MI to help patients achieve their health care goals

Care Managers worked with high risk, adult patients between January 2015 and December 2016 to determine best approaches to risk reduction and engagement in self-care using Motivational Interviewing (MI)

Motivational Interviewing
Has been defined as being able to:
- Increase patient-centered communication
- Use a patient-centered counseling approach to help change behavior
- Explore and address ambivalence related to necessary changes to decrease morbidity of chronic diseases

A hybrid of face-to-face and telephonic outreach are used with the patient population in this project

Methods

<table>
<thead>
<tr>
<th>Goal Setting Using Motivational Interviewing in a High-Risk Care Managed Patient Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kerensa F. Vinson, MSN, RN; Janine H. Blezien, BSN, RN; Lola Coke, PhD, RN; Ingrid Forsberg, DNP, FNP-BC</td>
</tr>
</tbody>
</table>

**Population**

- Medicaid Population
  - 4466 of 10,000 adult Medicaid patients in the electronic medical record database

- Asthma/COPD
  - 1180 of 5466 patients with Asthma/COPD

- Total High Risk & Asthma/COPD
  - 100 of 1180 patients are high-risk patients with Asthma/COPD
  - High Risk = patients who have had hospitalization for chronic illness in 6 months, or 6 of 11 social, psychological, or substance abuse indicators
  - 81 of those 100 patients in project criteria

**Conclusions**

Goals noted on the chart focused on one single issue for change with several suggestions on ways to achieve the goal but there was no evidence of goal progression with the use of MI

- Patients with multiple diagnosis - of which Asthma is one of them - do not get an Asthma goal because other issues are more pressing

**Background**

These correlations show there is little relationship between the number of Hospitalizations and Phone calls, nor the ER visits and Phone calls.

<table>
<thead>
<tr>
<th>Correlation</th>
<th>Phone Encounters</th>
<th>In Person Encounters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitalizations</td>
<td>0.19</td>
<td>0.22</td>
</tr>
<tr>
<td>ER Visits</td>
<td>0.20</td>
<td>0.21</td>
</tr>
</tbody>
</table>

MI was not clearly identified as having any impact on the engagement of patients in health care goals. The electronic medical record of patients sampled did not clearly identify when the COPD/Asthma patients moved to a lower risk stratification in the two year period

Patients who are at high risk for frequent destabilizing influences, on their physical and psychological functioning, were unable to demonstrate any changes in their goal identification and achievement

This may be due to medical complexities:
- Psychological issues with over 70% of the patients having depression, bi-polar or other mental health diagnosis
- Substance abuse including smoking
- Unstable housing, limited financial resources

**Next Steps**

Adopt a definition of excellent nursing care management as “the development of care goals which take into consideration all elements of the individual patient condition”

- Explore feasibility of nurse care managers to detach from goals based on disease
- Incorporate addictive and psychological issues into medical care outcomes is needed