Brief Motivational Intervention

for COVID-19 & Influenza Vaccination

MI Vacuna

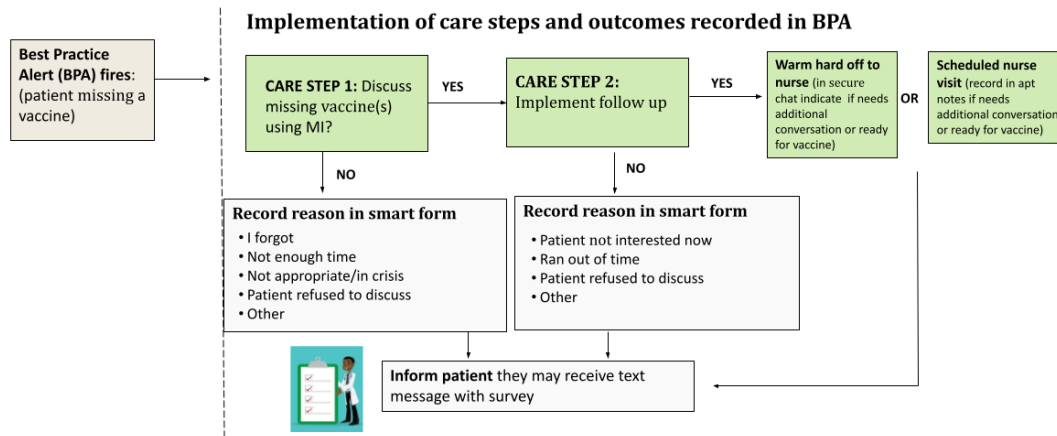Motivational Interviewing for Vaccine Uptake in Latinx Adults

Intervención Motivacional Breve

para la vacunación contra la COVID-19 y la gripe

MI Vacuna

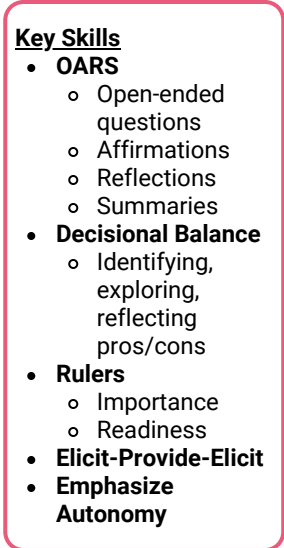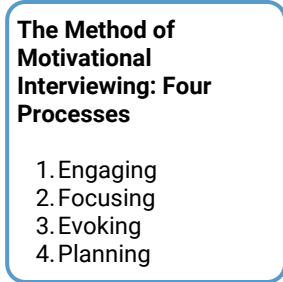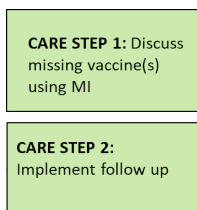Motivational Interviewing for Vaccine Uptake in Latinx Adults

Introduction

This manual serves as a resource describing when and how to implement the MI Vacuna intervention.

Referencing the MI Vacuna workflow diagram below, this manual will focus on Care Step 1 (pages 4-21) and Care Step 2 (pages 22-26)

Implementation of care steps and outcomes recorded in BPA

Best Practice Alert (BPA) fires: (patient missing a vaccine)

→ **CARE STEP 1:** Discuss missing vaccine(s) using MI? —YES→ **CARE STEP 2:** Implement follow up —YES→ **Warm hard off to nurse** (in secure chat indicate if needs additional conversation or ready for vaccine) **OR** **Scheduled nurse visit** (record in apt notes if needs additional conversation or ready for vaccine)

NO ↓ (CARE STEP 1)
Record reason in smart form
- I forgot
- Not enough time
- Not appropriate/in crisis
- Patient refused to discuss
- Other

NO ↓ (CARE STEP 2)
Record reason in smart form
- Patient not interested now
- Ran out of time
- Patient refused to discuss
- Other

Inform patient they may receive text message with survey

Care Steps & MI Concepts

Throughout this manual, we will reference the two Care Steps, four processes of motivational interviewing, as well as the key skills that cut across these processes on the right side of each page.

CARE STEP 1: Discuss missing vaccine(s) using MI

CARE STEP 2: Implement follow up

The Method of Motivational Interviewing: Four Processes

1. Engaging
2. Focusing
3. Evoking
4. Planning

Key Skills
- **OARS**
  - Open-ended questions
  - Affirmations
  - Reflections
  - Summaries
- **Decisional Balance**
  - Identifying, exploring, reflecting pros/cons
- **Rulers**
  - Importance
  - Readiness
- **Elicit-Provide-Elicit**
- **Emphasize Autonomy**

Identifying Eligible Patient

Before implementing the intervention, your first step will be to ensure that the patient is eligible.

Behavioral Health patients meeting the following criteria are eligible for the MI Vacuna motivational interviewing intervention:

- Have a behavioral health office or telehealth visit (excluding warm hand offs [WHOs] and hospital follow-ups) AND
- Are missing a COVID-19 dose AND/OR
- Are missing annual flu shot

However, you will only need to record visit outcomes (pg. 18) for patients who identify as having Latinx ethnicity.

How can you tell if a patient is not up-to-date on their COVID-19 vaccine dosage or flu shot?

1. Log into Epic
2. Open "Provider Schedule"
3. Select patient
4. Open the patient's chart

Identifying Eligible Patients

5. In the patient's chart, navigate to the patient's sidebar/storyboard (outlined here in green)

All patient charts feature a sidebar/storyboard which summarizes relevant patient information and care directives.

Identifying Eligible Patient

6. In the patient sidebar/storyboard locate and click on the down arrow (circled in red) to scroll down
7. Stop scrolling when you see "CARE GAPS"

Identifying Eligible Patient

8. Hover over "CARE GAPS" (circled in red) with your cursor or click on the term to open the "Care Gaps" chart subsection
9. In the "Overdue" Care Gaps list look for "COVID-19 Vaccine" (circled in green) and/or "Influenza Vaccine" (circled in blue)
10. If either of these is listed, you can move forward with the MI conversation

Initiating the Intervention

At the appropriate point, shift the conversation to vaccination.
Once rapport has been established in your counseling session, the first MI step is to shift the conversation to vaccination at an appropriate point in the session (i.e., when the goals of the therapy session have been met).

Engaging

- "If it is OK with you, I would like to shift our conversation to talk about vaccination. I can see that you (state the patient's vaccination status for both vaccines; e.g., "have had the flu vaccine this year but haven't received the COVID vaccine"). A lot of patients have questions about vaccines. We want to give patients multiple opportunities to get answers to their questions."

Open questions, reflecting

- "Si le parece bien, me gustaría cambiar un poquito de tema- y hablar sobre la vacunación. Puedo ver en su historial médico que (insert their vax status, for example- "ya se puso la vacuna contra la gripe, pero todavía no tiene la vacuna contra el COVID"). Como quizás ya sabe, muchos de nuestros pacientes tienen preguntas sobre las vacunas, y queremos darles a todos- la oportunidad de obtener más información y respuestas a sus preguntas."

If the patient is missing both vaccines, focus on the COVID-19 first and then discuss the flu vaccine using the tips at the end of this document. If the patient is only missing the flu vaccine, replace "COVID-19" with "flu".

Emphasize confidentiality and autonomy of decision to get a vaccine.

Emphasizing Autonomy

- "My main job is to listen to you, not to tell you what to do. I'm not here to try and make you get the COVID-19 vaccine. What I'd like to do is to try my best to understand your situation, and then help you consider if you might want to get the COVID vaccine. If you decide you'd like to do so, I can help you with that. But that's totally up to you, not me or anyone else. The only person who can decide this is you. Remember that it is fine to disagree with me, and that our relationship won't change if you do. How does that sound to you?"

- "Mi responsabilidad principal es estar aquí para escucharlo/a- no para decirle lo que tiene que hacer ni mucho menos. Me gustaría entender mejor su situación y su punto de vista en cuanto a las vacunas, y luego quizá ayudarle- si está de acuerdo- a considerar si le gustaría obtener la vacuna contra el COVID. Si decide que le gustaría vacunarse, yo le puedo ayudar- pero recuerde que es una decisión totalmente suya, y de nadie más. La única persona que puede decidir es usted, y recuerde que no hay ningún problema si decide no hacerlo, ya que nuestra relación no cambiara si eso sucede. ¿Qué le parece lo que le acabo de decir?"

Initiating the Intervention (cont.)

- "I want to remind you that this conversation is completely confidential, and I will not be sharing any information from our conversation to anyone without your permission."

- "También le quiero recordar que esta conversación es completamente confidencial- como todas nuestras sesiones- y no voy a repetir o compartir con nadie más lo que usted me diga, sin su permiso."

Focusing

Ask about their perceptions of COVID vaccine.
- "Is it okay with you if we start by talking about your thoughts about the COVID vaccine?

- Me encantaría empezar con este tema preguntándole, ¿Qué es lo que piensa, o que le viene a la mente/opina sobre la vacuna del COVID?"

Ask about their general thoughts and feelings about getting the COVID vaccine, as well as their knowledge about the vaccine that may be preventing them from getting it. Do not fight against any inaccurate preconceived notions with them – instead, listen to them and validate their concerns. You can ask permission to give accurate information later in the session, once more trust has been built.

("Tengo información que podría compartir con usted, pero solo si usted así lo quiere- ¿que le parece?")

Open questions, reflecting

01 Assess Motivation to Get COVID-19 Vaccine

Evoking

Identify the pros and cons of getting the COVID vaccine.

Cons
- "What would the not-so-good things be about getting the COVID vaccine?"
- "What worries you about getting it?"
- "What makes you not want to get it?
- "What else?" Ask again until they say nothing else.

Pros
- "What would the good things be about getting the COVID vaccine?"
- "What makes you want to get it? Tell me about the part of you that thinks it would be a good idea."
- "What else?" Ask again until they say nothing else.

Decisional balance, Pro-Con Exploration

Cons
- "¿Cuáles serían las cosas no tan buenas relacionadas con ponerse la vacuna del COVID?"
- "¿Qué le preocupa?"
- "¿Hay algo que le haga no querer/prevenga ponerse esta vacuna?"
- "¿Algo más? ¿Alguna otra cosa que no le lata/no le parezca bien/no le guste sobre la vacuna COVID?"

Pros
- "¿Cuáles serían las ventajas, o lo bueno de ponerse la vacuna?"
- "¿Hay algo que le haga querer/considerar/ o le haga pensar en ponérsela? Cuénteme sobre la parte de usted/de su persona, que piensa que ponerse la vacuna del COVID sería una buena idea."
- "¿Qué más? ¿Alguna otra cosa positiva o ventaja que usted ve en ponerse la vacuna?"

Ask them to go into specific detail on each reason and give you examples. For instance:

Reflecting

- If they say, "I'm afraid it's going to hurt me" ask, "What are you worried it will do?" or "Tell me more about why you think it will be hurtful?"
- Por ejemplo… Si dicen, "Me da miedo porque creo que la vacuna me va a lastimar/causar daño…" pregunta, "¿Qué cree que va a pasar? ¿Qué le da miedo o le preocupa? Dígame un poco más sobre porque cree que le hará daño…"

- If they say, "Even though I'm not sure it would work, it could be good if it did" ask, "What would be good if it did work?" or "Why would it be good for you to protect yourself in this way?"
- Si dicen, "Aunque no se si funcione la vacuna, si sería bueno que funcione…", pregunta, "¿Qué sería bueno, si la vacuna funcionara? o- ¿Por qué sería bueno que se protegiera de esta manera?"

- Ask "What else?" again until they say nothing else.
- "¿Algo más?"

Assess Motivation to Get COVID-19 Vaccine (cont.)

Other questions you can ask:
- "What do you think would happen if you don't get the COVID vaccine?"
- "¿Qué cree usted que pasaría si no se pone la vacuna del COVID?/si no se vacuna contra COVID?" Otra manera de preguntar lo mismo, "¿Qué cree que pasaría si no se vacuna?"

- "What do your family and friends think about the COVID vaccine?"
- "¿Qué opinan su familia y sus amigos sobre la vacuna?"

- How do they affect your decision about getting the COVID vaccine?"
- "¿Usted creé que lo que piensan estas personas afecta de alguna manera su decisión sobre ponerse la vacuna?"

Explore and reflect their thoughts and feelings about this and see how this may weigh into their decisional balance.

Evoking

Open questions, reflecting

Summarize pros and cons. Use double-sided reflection to highlight ambivalence and discrepancy.
- "Did I leave anything out?"
- "¿Me falto algo? ¿Hay algo más que le gustaría contarme sobre el tema de la vacuna?"

Summarizing

Note to interventionist: This will be where you see a patient's ambivalence about getting the COVID vaccine. Sum up these points with the patient: Are they still on the fence about getting the vaccine? Is fear or lack of trust getting in the way of them being able to make the decision to get it?
- "What would it take for you to decide to get the COVID vaccine at this very moment?"
- "Qué necesitaría para tomar la decisión de vacunarse contra COVID en este momento/ahora/ahorita mismo?"

MI Vacuna
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02 Assess and Enhance Readiness to Get the COVID-19 Vaccine

Assess readiness: "How ready are you to get the COVID vaccine at this moment?"

- Have them rate from 0 to 10 how ready they are to get the COVID vaccine. Reflect on the percentage they gave and then ask why they gave themselves such a high score (e.g., "why a 7 and not a 5?), even if it is on the lower end. Remember, you want them to start talking about their reasons for getting vaccinated, <u>not</u> reasons for not getting vaccinated.
- "¿Cuán listo esta para vacunarse/ponerse la vacuna en este momento?" Have them rate from 0 to 10- how ready they are to get the COVID vaccine. "En una escala del 1 al 10 – donde un 10 significa que esta super listo/a para vacunarse, en qué punto está usted, para decidir vacunarse?" Reflect on the number they gave and then ask why they gave themselves such a high score (e.g., "por qué un 7 y no un 5?), even if it is on the lower end. Remember, you want them to start talking about their reasons for getting vaccinated, not reasons for not getting vaccinated.

Readiness Ruler

Evoking

Open questions, reflecting

Enhance readiness: "What would it take for you to get to a 10 rating?"

- Have them talk about what it would take for them to get to 10, and if these things are addressable and feasible, ask permission to offer information or other services or resources that may help them tip the scale.
- "¿Qué necesitaría para llegar hasta un 10? ¿Cómo cambiaria de un 7 a un 10?

Emphasize autonomy and consider/take next steps.

- "What you decide to do is completely up to you. Only you can decide when you're ready to get the COVID vaccine. What are you thinking you want to do?"
- "Recuerde, que a decisión es completamente suya. Solamente usted puede decidir si está listo/a para- ponerse la vacuna contra el COVID/para vacunarse contra COVID. Entonces, qué le gustaría hacer?"

Emphasizing Autonomy

End with:

- "Thank you for having this conversation with me and for trusting me with your care."
- "Gracias por hablar conmigo sobre sobre la vacuna, y por confiar en mí."

Affirming

03 Integrate the Flu Vaccine into the Discussion

"So we have talked about the COVID vaccine, what about the flu vaccine?"
"Bueno, hemos hablado sobre la vacuna contra el COVID, que opina sobre la vacuna contra la gripe?"

If the patient is willing now to get the COVID vaccine, ask about their readiness to get the flu vaccine at the same time.

- **If they are not ready**, briefly proceed through the following: solicit the patient's viewpoint on annual flu vaccination, the pros and cons of annual vaccination, their readiness to get the flu vaccine, what it would take to be ready if not 100% ready and then enhance their readiness with resources and appropriate information as needed.

Focusing

Open questions, reflecting

04 Information Points to Include in the Conversation

COVID/ flu are preventable through vaccination.

- Particularly important to prevent severe disease, and reduces the transmission of disease to others.

- Flu vaccine prevents millions of illnesses and flu-related doctor's visits each year. For example, during 2019-2020, flu vaccination prevented an estimated 7.5 million influenza illnesses, 3.7 million influenza-associated medical visits, 105,000 influenza-associated hospitalizations, and 6,300 influenza-associated deaths.

- A 2017 study showed that flu vaccination reduced deaths, intensive care unit (ICU) admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients.

COVID y la Gripe se pueden prevenir con la vacunación.

- Las vacunas son particularmente importantes para prevenir enfermedades, y reducir la transmisión de enfermedades a otras personas.

- La vacuna contra la gripe previene millones de enfermedades y visitas al medico relacionadas con la gripe. Por ejemplo, durante los años 2019 a 2020, la vacuna contra la gripe previno un número estimado de 7.5 millones de casos/enfermedades, 3.7 millones de visitas médicas relacionadas con la gripe, 105,000 hospitalizaciones conectadas a la gripe, y 6,300 fallecimientos causados por la gripe.

- En una investigación del 2017, se demostró que la vacuna contra la gripe disminuyo el número de fallecimientos, admisiones al centro de cuidado intensivo (ICU), el tiempo de estadía de los pacientes en el ICU, y en general, la duración de la estadía de los pacientes hospitalizados a causa de la gripe.

Evoking

Elicit-Provide-Elicit

04 Information Points to Include in the Conversation (cont.)

Vaccines are effective.

- All COVID-19 vaccines currently available in the United States are effective at preventing COVID-19 as seen in clinical trial settings, and reduce the risk of COVID-19 and its potentially severe complications.

- There is increasing evidence that COVID-19 vaccines also provide protection against COVID-19 infections without symptoms (asymptomatic infections). COVID-19 vaccination can reduce the spread of disease overall, helping protect people around you.

- Recent studies show that flu vaccination reduces the risk of flu illness by between 40% and 60% among the overall population during seasons when most circulating flu viruses are well-matched to the flu vaccine.

It is important to get the flu vaccine every year, and all doses of the COVID-19.

- Everyone 6 months of age and older should get annual flu vaccine by the end of October.

- The seasonal flu vaccine protects against the influenza viruses that research indicates will be most common during the upcoming season.

Es importante obtener la vacuna/vacunarse cada año contra la gripe y recibir/obtener todas las dosis de la vacuna del COVID-19.

- Todas las personas de 6 meses de edad o más, deberían obtener la vacuna anual contra la gripe antes del fines del mes de octubre.

- La vacuna contra la gripe protege contra los virus de influenza/gripe que las investigaciones indican será la más común durante la próxima temporada/temporada que viene/época que viene.

Evoking

15

04 Information Points to Include in the Conversation (cont.)

Evoking

Side effects of these vaccines are common and brief.

- The COVID and flu vaccines can have similar side effects, such as:
    - Soreness, redness, or swelling at the injection site
    - Flu-like symptoms such as fever, headache, chills, muscle aches, or fatigue.
    - The CDC and FDA monitor a public reporting system to look for patterns in adverse events that are documented there.

Los efectos secundarios son muy comunes (mucha gente siente estos efectos secundarios) y son cortos/super cortos. Los efectos no duran mucho tiempo (los efectos secundarios desaparecen en unos días).

- Las vacunas contra el COVID y la gripe tienen efectos secundarios similares, cómo por ejemplo:
    - Dolor, enrojecimiento, o hinchazón en el lugar de la inyección (el brazo)
    - Síntomas parecidos a la gripe incluyen: jaquecas, escalofríos dolores musculares, o fatiga, (fiebre- fever- not included but I'm adding it from my experience)
    - La CDC y FDA (El centro para el control y la prevención de enfermedades) y (La Administración de Alimentos y Medicamentos) monitorean un sistema público de reporte (donde la gente reporta síntomas más largos o fuera de lo común- I added where people report longer lasting or unexpected symptoms)- para encontrar/descubrir patrones de experiencias negativas después de obtener las vacunas.

05 Notes on Building Trust & Assessing Adherence to Cultural Values

Determine Latinx patients' adherence to cultural values. Because rapport is an important prerequisite to effective MI, and because Latinxs are very diverse and therefore vary in their endorsement of cultural values, it is important to assess Latinx patients' degree of adherence to cultural values at the beginning of the counseling session.

Respeto: To establish rapport with Latinx patients who adhere to the cultural value of r*espeto*(1), which emphasizes deference to authority, it is important that clinicians ask patients how they wish to be called before starting the session. Indicators of *respeto* often include the use of titles such as *Don*, *Doña*, *Señor*, *Señora* and the formal pronoun of *Usted* rather than the informal Tú (2).

It is recommended that clinicians use the pronoun *Usted* when addressing patients(2) and assess with patients what title they would like to use:
- "Antes de que comencemos, dígame por favor cómo le gustaría que le llamara, Don, Doña, Señor, Señora?"

Personalismo, or striving to maintain harmonious relationships by avoiding expressing disagreement directly(3), is another cultural value that Latinx patients may possess. To assess patients adhere to this value, and how they express disagreement, clinicians may use the following questions:
- "¿Qué le ayuda a sentirse cómoda/o cuando conoce a alguien por primera vez?"
- "Cómo maneja usted el conflicto o expresa cuando no está de acuerdo con algo?"(2).

Confianza, which can be understood as the cross-cultural construct of trust, is essential to establish rapport with Latinx patients. Añez and colleagues(2) recommend using the following questions to empower Latinx patients to develop the therapeutic relationship:
- "Entiendo que para algunas personas es muy importante tener confianza. ¿Qué tan importante es para usted?"
- "¿Qué se necesita para que usted entre en confianza con alguien?"

06 Recording Care Step 1 Results in the SmartForm

After you have implemented the motivational interviewing intervention, you will be expected to document visit outcomes for **Latinx patients only.**

To locate and fill out this SmartForm for eligible Latinx patients:

1. Open the patient's chart
2. Navigate to "Plan" tab in the patient's chart (outlined in green)

06 Recording Care Step 1 Results in the SmartForm

3. Click on the "BestPractice" subsection (outlined in green), or scroll to the bottom of the page until you reach it

06 Recording Care Step 1 Results in the SmartForm

4. In the "BestPractice" section, scroll down to "Other" (circled in green)
5. Find "Mi Vacuna Grant Smartform" (outlined in red)
6. Click on "Mi Vacuna Grant Smartform" link to open form

06 Recording Care Step 1 Results in the SmartForm

7. In the SmartForm, document whether or not Care Step 1 was implemented.

Record whether or not you implemented each step.

If you **did NOT** implement a step, **select reason**

07 Implement follow up

After implementing MI (Care Step 1) and recording that in the "Mi Vacuna Grant SmartForm", move to Care Step 2 which is to implement follow up.

There are a number of options here depending on whether the visit is in-person or virtual and whether the patient would like to receive a vaccine now, schedule a vaccine appointment or speak with a nurse for additional information about a vaccine before making a decision.

Virtual visits: For virtual visits, it is not possible to do a warm hand off to a nurse to provide a vaccine immediately following the clinical session.

- **If the patient would like to receive a vaccine or they have medical questions**, schedule a vaccine appointment/nurse visit.

  Go to "Appts" and click "Book It"
    - Department: SE Primary Care [323]
    - Visit Type: Nurse Visit [124]
    - Provider: SE FAM MED NURSE [2022] And/Or SE FLU CLINIC [2083]
    - Appt Notes: Flu or COVID Vaccine - MI VACUNA study; also state if MI is needed to further discuss vaccine hesitancy or if they are ready for the vaccine

07 Implement follow up

In-person visits:

- **If they want to get vaccinated or have medical questions**, do a "warm hand off" to a nurse on duty. Secure chat the "SE Nurses" RN group that a patient needs a vaccine. State in the chat if the patient is ready for a vaccine or if MI is needed. An RN will respond with their name and connect with you to take the patient in real time.

- **If a nurse is not available** at the time the patient agrees to a warm handoff, they can be given the option to wait (typically ~10 minutes), OR you can schedule a nurse visit for the patient to speak with a nurse
    - Go to "Appts" and click "Make Appt." [Follow the same steps as above]

- **If they want to get vaccinated or have medical questions**, but do not have time now, schedule a vaccination appointment with the patient.
    - Go to "Appts" and click "Make Appt." [Follow the same steps as above]

08 Recording Care Step 2 Results in the SmartForm

If you answered "Yes, I discussed missing vaccines using MI", complete the latter portion of the SmartForm to document actions for care step 2.

Pt Needs COVID-I primary series1/primary series 2/Booster or Needs Influenza

Did you use MI to discuss missing vaccines with client? (Select One)
- No, I did not discuss missing vaccines
- Yes, I discussed missing vaccines using MI

Did you implement a follow-up after using MI? (If so, select one)
- Warm hand off to nurse [state in secure chat if MI needed or ready for vaccine]
- Scheduled nursing appointment [state in apt notes if MI is needed or ready for vaccine]
- No follow up implemented
- Other (add comment)

If no follow up, why not?
- Patient not interested in vaccine at this time
- Ran out of time
- Patient refused to discuss
- Other (add comment)

✓ Accept   ✗ Cancel

Select the appropriate outcome after discussing vaccines using MI.

If **NO follow up** implemented, select reason

09 Post-visit Survey

1.The survey is sent (starting Oct 2023) via text message to BH patients at South End following a BH visit if the BPA was fired (i.e., they were missing a vaccine)

2. The survey includes approximately 15 questions.
   The questions assess:
   a. If vaccines were discussed during the BH visit
   b. Patient attitudes about the COVID-19 and influenza vaccines
   c. If the patient received a vaccine in the past week or intend to receive a vaccine

3. BH patients at East Boston Family Medicine and Adult Medicine will receive an abbreviated survey via text message

Sample Questions from the survey:

INSTRUCTIONS: Below is a list of statements about the COVID-19 vaccine and the flu shot. Please read each statement and rate whether or not you agree with it.

3. Please respond to each statement	Do you agree?		
a. The COVID vaccine is necessary	Yes	No	Don't know
b. The COVID vaccine is important	Yes	No	Don't know
c. The COVID vaccine is safe	Yes	No	Don't know
d. The COVID vaccine is effective	Yes	No	Don't know
e. The COVID vaccine is convenient	Yes	No	Don't know
f. The COVID vaccine is affordable	Yes	No	Don't know

4. Please respond to each statement	Do you agree?		
a. The flu shot is necessary	Yes	No	Don't know
b. The flu shot is important	Yes	No	Don't know
c. The flu shot is safe	Yes	No	Don't know
d. The flu shot is effective	Yes	No	Don't know
e. The flu shot is convenient	Yes	No	Don't know
f. The flu shot is affordable	Yes	No	Don't know

- Patients will be entered into a raffle to win a small gift card if they complete the survey.
- Completing the survey is completely voluntary.
- Specific information, such as vaccination status, from the patient's medical record will be linked with the survey responses.

De-identified survey and EHR data will be shared with the researchers at Boston College and Harvard School of Public Health. The research team will use this information to test if the MI Vacuna intervention reduced vaccine hesitancy and increased COVID and flu vaccination rates

COLLABORATION | EVOCATION | AUTONOMY

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