

Innovative Training Application Uses Virtual Patient to Introduce Doctors to the Spirit of Motivational Interviewing

Motivational Interviewing (MI) is a proven approach for encouraging patients towards positive change, and the Blending Initiative—a joint project of the National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMSHA)—seeks to expand the adoption of MI by practitioners. SIMmersion announces a partnership with Medscape and Synergy Enterprises to create an engaging virtual introduction to the spirit of MI for primary care physicians.

Columbia, MD (PRWEB) March 27, 2014 -- A patient confesses that he's been struggling with drugs for years, but is finally ready to make a change. One doctor says, "Here's what you should do." Another doctor asks, "What do you think you'll do?"

According to three decades of research on <u>Motivational Interviewing</u> (MI), an innovative approach practitioners can use to encourage behavior change, the second doctor is much more likely to help the patient devise a plan, stick to it, and feel like a participant in a collaborative relationship.

"A simple principle that emerged from our earliest discussions," writes William Miller, Ph.D, one of the cofounders of MI, "was to have the client, not the counselor, voice the reasons for change." This approach builds the motivation of patients to work for change, and has a profound effect on retention in treatment and positive outcomes across a practice.

<u>SIMmersion</u>, in collaboration with <u>Medscape</u> and <u>Synergy Enterprises</u>, will use its PeopleSim technology to create a training application allowing primary care physicians to explore how an MI-inspired approach could work in their practice while engaging in role-plays with a realistic virtual patient.

MI has been proven effective across the spectrum of healthcare disciplines, but adoption is relatively low. This lack of widespread use drew the attention of the <u>Blending Initiative</u>, a collaboration between the National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMSHA) to accelerate the dissemination of research-based treatment methods into clinical practice. The Blending Initiative wanted a system that would allow users to get hands-on practice with MI in a virtual setting, which made SIMmersion a prime choice for a contract.

"We're excited to participate in this project," says Laura Humm, COO of SIMmersion. "We've been integrating the spirit of MI into all of our physician training systems since 2007. Alcohol Screening and Brief Intervention with Christy Johnson, Prescription Drug and Pain Management with Tom Kramer, and Prevention of Childhood Obesity with Kelly Robinson all have reflective listening, collaborative relationship building, and support for autonomy interwoven into the scripts. But this is particularly exciting for us, because we get to make the spirit of MI the focus of the training. Because users will be focusing just on MI, they'll be able to learn tools like identifying and responding to change talk. Hopefully, they'll see that it's effective and that patients like it, so they'll seek out more training."

SIMmersion's contribution to the product will be a role-play conversation with a virtual patient who reveals that he is using cocaine. Since primary care physicians have ongoing relationships with their patients, even brief



interventions can have lasting effects on the choices patients make. The conversation will demonstrate to users how effective a collaborative, MI-inspired approach with patients can be.

The PeopleSim conversation engine that powers SIMmersion's characters will make the virtual patient's personality change from play to play, giving an array of experiences and increasing the replay value. Dynamic pathways through the conversation let users dig deeper with questions, change topics freely, and even backtrack on their way through the conversation, just like a real encounter with a patient. The patient's level of engagement with users will change dynamically based on what users say. A collaborative style will encourage openness and participation, while a directive style will make the patient more reserved and passive. Feedback from the character's dialogue and an on-screen coach will let users learn from missteps in real-time, and a comprehensive after-action review will allow them to see details of their performance and ways to improve in the future.

What patients appreciate about MI, writes Stephen Rollnick, PhD, the other co-founder of MI, is having "a little space with a professional who lets you wonder aloud what change might be like, and who enjoys with you the easy feeling when you make some progress." With this training system, SIMmersion and its partners can give healthcare practitioners an engaging introduction to the spirit of motivational interviewing, and the helpful, easy feeling it can impart to patients across the healthcare system.

About SIMmersion

SIMmersion's mission is to train communication skills faster and more effectively by combining the world's most realistic simulated experiences with highly interactive training content and extensive user feedback. For more information, visit www.simmersion.com. Free trial systems available at the Training Center, www.simmersion.com/training.



Contact Information
Dale Olsen
SIMmersion
http://www.SIMmersion.com
+1 4432832504

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