

An Introduction to Motivational Interviewing

Where: SEAHEC (Pelican Classroom)
2511 Delaney Avenue
Wilmington NC 28403

August 3 & 4
October 4 & 5
December 1 & 2

Time: 9:00am – 4:30pm (Registration: 8:30am)

About the Workshop

Motivational Interviewing (MI) is a client-centered and directive clinical style used to aid in the resolution of ambivalence and increase intrinsic motivation to change. Its strong empirical base has enabled this style to be recognized as an empirically validated best-practice intervention for a variety of clinical issues. The purpose of this workshop is to introduce the participant to the underlying philosophy, basic skills, and beginning interventions used in MI. **This workshop meets the 13 hour requirement set by NC Division MH/DD/SAS.**

Objectives: By the end of the workshop participants will be able to:

1. Define MI and its guiding principles
2. Recognize the basic strategies of MI
3. Discuss the elements of Phase I and Phase II of MI
4. Demonstrate MI-consistent strategies for managing resistance
5. Describe the concept of change talk and be able to recognize client change talk during a video exercise.
6. Explain 4 MI-consistent Interventions

Target Audience: All Mental Health Professionals

Faculty: Richard L. Ogle, Ph.D., University of North Carolina Wilmington Psychology Department and MINT Certified trainer

Agenda: August 3

8:30 Registration
9:00 Introduction and background of MI
10:30 Break
10:45 Background continued
11:15 MI Defined
12:00 Lunch – provided
12:30 MI Basic Skills
2:00 Break
2:15 Basic skills continued
4:00 Video exercise
4:30 Adjourn

August 4

8:45 Sign-in
9:00 Phases of MI
10:30 Break
10:45 Working with client resistance
12:00 Lunch – provided
12:30 Understanding & recognizing change talk
2:00 Break
2:15 Structured interventions
3:30 Practice
4:30 Adjourn

Credit:

- 13 Contact Hours (includes CEUs for Social Workers and Licensed Professional Counselors)
- Category A NC Psychology Credit: This program will provide 13 contact hours of (Category A) continuing education for North Carolina Psychologists. No partial credit will be given.
- National Board for Certified Counselors Credit (NBCC) 13 hours: SEAHEC is recognized by the National Board for Certified Counselors to offer continuing Education for National Certified Counselors. We adhere to NBCC Continuing Education Guidelines (Provider #5597).
- Application has been made to the NCSAPPB for 13 hours Substance Abuse Specific credit.

REGISTRATION INFORMATION

The registration fee is \$120 which includes the cost of credit, instruction, lunch and program materials. PLEASE NOTE: SEAHEC requires payment at time of registration. You may pay by cash, check, or credit card. If you cannot attend, you must notify us in writing at least two (2) business days prior to the program. You have 3 options: Send a substitute; receive a voucher for the full registration fee, which can be used for future programs up to one year from the program date; or receive a refund minus 30% administrative fee. If you register, do not cancel and do not attend, there is no refund.

Complete the registration form entirely and mail it with your payment to:
SEAHEC, ATTN: Registration, 2511 Delaney Ave, Wilmington NC 28403
Or fax the form with credit card information to 910-667-9343

THE SEC RATE OF \$120 IS NOT AVAILABLE FOR ONLINE REGISTRATION

REGISTRATION FORM

An Introduction to Motivational Interviewing

Choose (X) the date you want to attend:

August 3 & 4, 2010	M30809
October 4 & 5, 2010	M30811
December 1 & 2, 2010	M30813

REGISTRATION FEE FOR SEC PROVIDERS ONLY: \$120
(This rate is not available for Online Registration)

Name: _____ SS# (last 4 digits) _____

Degree (RN, BS, etc.) _____ Occupation: _____

Home Phone: _____ Office Phone: _____ Ext _____

Send program information to () Home () Office

Office email: _____ Home email: _____

Send email to () Office () Home

Workplace: _____

Title/Department: _____

Work Address: _____

City: _____ State: _____ Zip code: _____ Work County: _____

Home Address: _____

City: _____ State: _____ Zip code: _____ Home County: _____

Please check the appropriate box:

Payment by check made payable to SEAHEC _____ Bill my VISA _____ MasterCard _____

Account number _____ Expiration date: _____

3 digit security code on back of card _____

Signature: _____

Print name as shown on card: _____

Address on card if different from above _____
