

## MOTIVATIONAL INTERVIEWING

DATE & TIME:

May 20 & June 17, 2015  
(ATTENDANCE FOR BOTH DATES IS MANDATORY)

8:30 AM – 3:30 PM

*All registration is completed on the Learning Net prior to the training. Sign-in begins 30 minutes prior to the training time. All participants must arrive during the sign-in period. Late arrivals will not be admitted.*

PLACE:

Pacific Clinics Training Institute-Wilson Auditorium  
2471 E. Walnut Street  
Pasadena, CA 91107

PARKING:

Free parking on Lot B & C- (located two blocks from Pacific Clinics Training Institute) Approximate parking address: 261 Del Rey Ave.  
Pasadena, CA 91107

**NOTE:** Participants are required to carry a caseload of adult consumers in order to attend this training.

The purpose of the training is to teach participants the theoretical and conceptual makeup of Motivational Interviewing. The stages of change and the four principles of Motivational Interviewing will be reviewed. Participants will gain familiarity with opening strategies designed to elicit “change talk” from the consumer who presents in the early stage of change. The Adherence and Competence Feedback Form will be reviewed. This form is used to evaluate the skill level of participants to apply the technique. A discussion about cultural relevance and modification of the technique to address the consumer’s cultural perspective will be discussed utilizing participants’ caseload examples.

**TARGET AUDIENCE:** Adult DMH Providers and DMH Contracted staff only

**OBJECTIVES:**

**As a result of attending this training, participants should be able to:**

1. Identify the theoretical and conceptual makeup of Motivational Interviewing.
2. Name the four principles of Motivational Interviewing.
3. Apply opening strategies to elicit “change talk” in consumers.
4. Explain how Motivational Interviewing promotes recovery.
5. Discuss how individuals of various cultural and ethnic backgrounds may respond to the motivational intervention.
6. Design a Motivational Interviewing session using all the Motivational Interviewing tools.
7. Utilize a consumer’s “change talk” to support their recovery process.
8. Formulate Level I, II and III reflections and demonstrate when to use them.
9. Rate a session using the Adherence and Competence Feedback Form.

**CONDUCTED BY:**

Ahndrea Weiner, M.S., LMFT, LPCC Matrix Institute

**COORDINATED BY:**

Marcela Barajas, LCSW  
Email: [mbarajas@dmh.lacounty.gov](mailto:mbarajas@dmh.lacounty.gov)

**DEADLINE:**

When maximum capacity is reached

**CONTINUING EDUCATION:**

12 Hours CEU for BBS, BRN, and CAADAC  
CE’s for Psychologists

**COST**

NONE

DMH Employees register at:  
<http://learningnet.lacounty.gov>

Contract Providers complete  
attached training application

Cultural Competency  Pre-licensure  Law and Ethics  Clinical Supervision  General



# County of Los Angeles Department of Mental Health

## NON-DMH STAFF TRAINING APPLICATION FORM



**Please Print or Type**

**Instructions**

Each individual must complete a separate application form for each training he/she wishes to attend. Please complete the application in full. Applications will not be processed with incomplete or inaccurate information. Notification of registration confirmation for a training will be provided by the training coordinator. Unless otherwise specified, walk-in registrations will not be admitted.

For trainings, sign-in begins 30 minutes prior to the training time. All participants must arrive during the sign-in period. Late arrivals will not be permitted.

*This form is not to be used for LPS Designation Training. The LPS Application is available at [lacdmh.lacounty.gov/training&workforce.html](http://lacdmh.lacounty.gov/training&workforce.html).*

Training Title (as in DMH bulletin): <b>Motivational Interviewing</b>			
Date(s): <b>5/20 &amp; 6/17/15</b>		Training Coordinator: <b>Marcela Barajas</b>	
County Employee Number <i>(non-county employees supply the last four digits of the SSN)</i>			
Name			
Program, Service or Agency			
Job Title			
Address			
City			Zip Code
Telephone		Email	
<b>License or Credential Number(s)</b> (complete as many as applicable)			
CAADAC	LCSW	LPT	LVN
MD	MFT	Psychologist	RN
Supervisor's Approval (Applications will not be processed if not signed by supervisor)		For processing, please return Application to: <b>County of Los Angeles – DMH</b> <b>Program Support Bureau – WET</b> <b>695 S. Vermont Ave., 15<sup>th</sup> Floor</b> <b>Los Angeles, CA 90005</b>  <b>Fax: (213) 252-8775</b> <b>Phone: (213) 251-6857</b> <b>Email: <a href="mailto:mbarajas@dmh.lacounty.gov">mbarajas@dmh.lacounty.gov</a></b> (When faxing, there is no need to use a cover sheet)	
Print Supervisor Name			
Supervisor's Signature			