Wisconsin Community Forensic Services Motivational Interviewing Implementation Project: Client Outcome Evaluation Report

February 2025



The purpose of this report is to describe evaluation of the Motivational Interviewing Implementation Project in statewide community forensic programs (the Conditional Release Program, Opening Avenues to Reentry Success, the Supervised Release Program, and Outpatient Competency Restoration Program) managed by the Wisconsin Department of Health Services. This project represents an ongoing multiyear effort to guide and support four contracted agencies to implement motivational interviewing into case management services. The evaluation was designed, planned, and conducted by the University of Wisconsin Population Health Institute (UWPHI) in coordination with the Wisconsin Department of Health Services (DHS) and contracted agency teams during 2024 (see **Appendix**). The report begins with a brief project overview. Next, the multi-component evaluation method is described, then results are presented. Finally, key findings are discussed and recommendations for project improvement are made.

Project overview

Since 2017, DHS has partnered with contracted case management agencies to implement motivational interviewing (MI) into routine services with fidelity—that is, delivering MI as it is intended to be delivered. MI promotes client motivation for positive behavior change through relational and technical elements of practice.¹ Decades of

Motivational interviewing is a well-established evidencebased practice comprising relational and technical elements for effective change conversations. research have established MI as an evidence-based practice^{2,3} with particular effectiveness for addressing the challenges faced by community forensic clients.^{4,5} However, it is only through implementation that clients can experience the anticipated benefits of MI. Using an implementation model to guide the project,^{6,7} DHS and agency teams have resourced and developed several

implementation "drivers" to support case manager MI implementation. Drivers comprise system- and agency-level infrastructure such as initial training, ongoing coaching, fidelity review of case manager MI practice samples with supportive feedback, using data to guide improvements, and leadership. As presented in **Table 1**, a logic model hypothesizes the relationships between DHS and agency team driver development (inputs), case manager MI fidelity and integration into routine services (outputs), and positive client experiences (expected outcomes).

Table 1. MI implementation project logic model.

Table 1. 141 Implementation project logic model.			
INPUTS →	OUTPUTS →	EXPECTED OUTCOMES	
 Investments of time, focus, expertise, and resources by DHS and agency MI teams to develop implementation drivers. Following initial training, agency MI coaches provide monthly coaching to case manager colleagues. Agency MI coaches provide quarterly fidelity reviews and supportive feedback to case managers, followed by case manager improvement goals and planning. Regular collection, analysis, and reporting of data for DHS and agency teams for project improvement. 	 Case managers demonstrate MI fidelity. Case managers integrate MI into routine case management services. 	 Clients experience good working relationships with case managers. Through enhanced motivation, clients actively engage services and achieve recovery goals. Successful program completion. 	

Prior evaluation of this implementation project showed team development of implementation drivers (inputs) resulted in case manager learning and achievement of MI fidelity (outputs).⁸ The current evaluation builds upon those results to examine the relationships between case manager MI fidelity (output) and positive client experiences (expected outcomes). Understanding how project outputs relate to outcomes is important for assessing return on investment and for guiding project improvements.

Method

The evaluation comprised four components: client evaluation of MI using a standardized survey; focus groups to further explore client experiences of MI; statistical analysis of case manager MI fidelity results; and statistical analysis of selected program outcomes. Each evaluation component is described below.

Client Evaluation of Motivational Interviewing (CEMI)

The Client Evaluation of Motivational Interviewing (CEMI) was used to evaluate client experiences of MI. Developed by Madson and colleagues, 9,10,11,12 the CEMI is the most widely used instrument to evaluate client experiences in MI research. As presented in **Table 2**, the instrument comprised 11 items examining relational and technical elements of MI. The CEMI was administered by case managers via a Qualtrics electronic survey during a 6-week period (July to August 2024) and all were asked to administer one CEMI to each client during this period. Clients responded to each CEMI item using a 1-5 response scale (1=Not at All, 2=A Little, 3=Sometimes, 4=A Great Deal, 5=Always) to report the extent to which MI was experienced in the most recent meeting. Higher scores on the CEMI represented more MI-consistent case manager behaviors. Because CEMI research has shown client-provider demographic backgrounds influence client evaluation of MI,¹⁰ demographic information (age, gender, race/ethnicity) was collected from clients and separately from case managers via brief electronic survey. For race/ethnicity, respondents were able to select more than one category and for all items a "prefer not to answer" option was also available. Demographic information was coded for whether age, gender, and race/ethnicity was a match between the client and their case manager. Age was coded as a match if the client-case manager were within five years of each other. In the few cases that clients and case managers selected more than one racial category, the non-White category was used for the purpose of matching. The final question on the CEMI survey asked clients to indicate interest in focus group participation to further discuss experiences in case management services. Clients who responded yes were directed to provide contact information through a separate link to ensure confidentiality of CEMI results.

Table 2. The client evaluation of MI comprised 11 items to examine case manager use of relational and technical elements of the practice.

Client Evaluation of MI Item	CEMI Subscale
*Make you talk about something you didn't want to discuss.	
*Argued with you to change your behavior.	Relational
*Tell you what to do.	
*Act as an authority on your life.	
Help you to talk about changing your behavior.	
Help you discuss your need to change your behavior.	
Help you discuss the pros and cons of your behavior.	
Help you feel hopeful about changing your behavior.	Technical
Act as a partner in your behavior change.	
Help you recognize the need to change your behavior.	
Help you feel confident in your ability to change your behavior.	

Note. Asterisk (*) indicates item was reversed scored.

Focus groups

Focus groups followed administration of the CEMI to better understand client experiences with MI in case management services. Thirty-eight clients indicated interest in participation following completion of the CEMI. Of this group, 32 clients were eligible

Focus groups followed the survey to better understand client experiences with MI in case management services.

to participate (Supervised Release Program clients were not eligible due to program restrictions). To maximize accessible participation, UWPHI offered several focus group times (morning, afternoon, evening) and formats (virtual, call-in). UWPHI also offered a \$30 gift card to incentivize participation. Evaluators provided virtual

(Zoom) and call-in information to DHS who then worked with contracted agency leadership to follow up with interested clients. Of the 32 clients recruited, eight clients (25%) participated. Three virtual focus groups were facilitated by UWPHI. Although an hour was allotted for each group, duration ranged from 26 to 51 minutes. Group size ranged from two to four participants. UWPHI used a protocol to standardize focus group facilitation. Each group began with purpose of the evaluation, how findings would be used, and informed consent was obtained. Discussion questions followed a summary of key CEMI results and clients were asked to elaborate on their experiences and perspectives. Each focus group was recorded and transcribed, then three UWPHI evaluators independently reviewed the transcripts. Key themes of client experiences were identified based on an inductive coding schema and conventions of grounded theory guided the analysis. Recordings were stored in a secure folder and deleted upon completion of analysis.

Case manager MI fidelity assessment

Assessment of case manager MI fidelity occurred as a key implementation driver in the project.^{6,7,8} Regularly assessing fidelity is critical because it ensures case managers can deliver MI as intended so clients can benefit.⁷ To assess fidelity, case managers submitted guarterly audio recorded samples of MI practice (~10 minutes) for review by an assigned coach. Coaches were peers among their case manager colleagues and trained to use the Motivational Interviewing Treatment Integrity (MITI) fidelity assessment instrument. 13,14 Consistent with the practice of MI,1 the MITI assessed relational (global ratings of partnership and empathy) and technical elements of MI (global ratings of cultivating change talk and softening sustain talk) as well as case manager skills. To assess skills, coaches counted and categorized each case manager utterance into mutually exclusive categories of questions, reflective listening statements (simple vs. complex), and MI adherent behaviors (affirmation, seeking collaboration, support autonomy) as well as "non-adherent" behaviors (persuasion, confrontation). Fidelity reviews generated six MITI measures with corresponding fidelity standards^{13,15} (see **Table 5** in Results section). DHS certified case managers in MI when all MITI measures were demonstrated at or above fidelity standards in two consecutive quarters. During state fiscal year 2024, case managers collectively completed 185 fidelity reviews with their MI coach. Results were documented in an Excel spreadsheet and were analyzed as part of the outcome evaluation.

Program outcome

Program outcome was based on carefully collected discharge data for the Conditional Release Program and Opening Avenues to Reentry Success during State Fiscal Year 2024. Completed by case managers or their supervisor using a standardized electronic survey created by DHS, the dataset included client demographic information, an initial adverse childhood experiences survey score, index offense, mental health diagnoses, duration of program participation, number of custodies that occurred during program involvement, frequency of MI sessions delivered during the discharge process, and discharge status. Rate of client successful program completion was the key outcome measure in this evaluation. Successful program completion is a particularly important outcome because it means public safety and client recovery goals were achieved. MI was expected to contribute to successful program completion. Each client's discharge status was coded as either 0 (unsuccessful) or 1 (successful), thus creating a measure of successful program completion from 0% to 100%.

Results

Results of this multicomponent evaluation are now considered. Datasets from Qualtrics and Excel spreadsheets were de-identified from any client information, integrated, and imported into statistical software for analysis. Results are reported in terms of number (N) of case managers or clients, average or mean (M), and inferential statistics (example: analysis of variance [ANOVA], regression [R], correlation [r]). Inferential statistics were useful to examine possible differences between groups. A statistically significant difference was assessed when the probability (p) of results due to chance was less than or equal to 5 in 100 (that is, p \leq .05). Results are presented regarding the client evaluation, case manager MI fidelity, client reflections in focus groups, and program outcomes.

Client evaluation: overall results

The CEMI was completed by 242 clients and administered by 59 case managers. Reversed scored items were recoded into the same direction as other items. As shown

in **Table 3**, average CEMI relational items were higher (M = 4.38) than average technical items (M = 3.71). The total CEMI average score (M = 3.96) corresponded to "a great deal" response on the 1-5 scale.

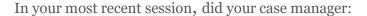
Overall, clients reported experiencing a great deal of motivational interviewing.

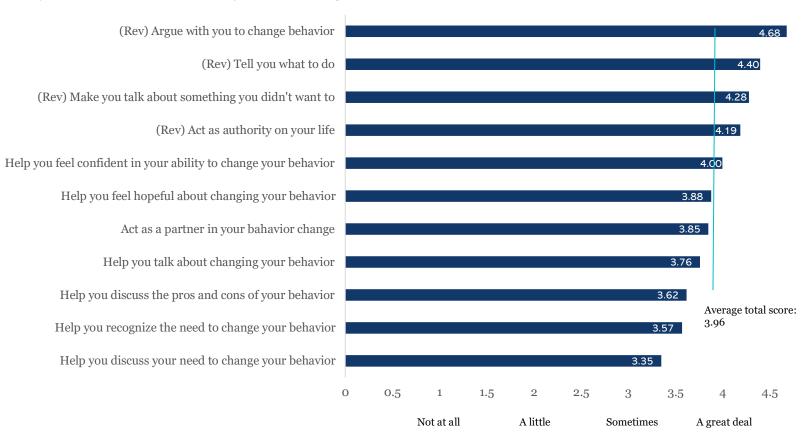
Table 3. Results of the client evaluation by subscale.

CEMI	Average	Standard Deviation	Range of Responses
Relational Subscale (4 items)	4.38	0.85	1.00 - 5.00
Technical Subscale (7 items)	3.71	1.10	1.00 - 5.00
Total CEMI Score	3.96	0.69	2.18 - 5.00

The discrepancy in client evaluation of case manager relational and technical MI is clearly seen in **Figure 1** where the vertical line represents the average total CEMI score. To the right of the line (above average) were relational items. Clients reported case managers refrained from arguing for behavior change (M = 4.68), telling them what to do (M = 4.40), making them discuss something they didn't want to (M = 4.28), or acting as an authority (M = 4.19). Refraining from these behaviors is essential to the relational foundation of MI. 1 To the left of the line (at or below average) were technical items. Clients reported being helped to feel confident in behavior change (M = 4.00), feeling hopeful about behavior change (M = 3.88), and that case managers were partners in change (M = 3.85). Further below average, clients reported case managers helped them to recognize the need for behavior change (M = 3.57) and helped discuss the need for behavior change (M = 3.35).

Figure 1. Clients rated relational MI higher than technical MI. "Rev" means item was reversed scored.





Client evaluation: agency results

Client evaluation happened in all contracted agencies allowing examination of possible differences in client experience of MI. One agency (LSS) had three geographical units and one unit (LSS-SC) was not included in this analysis to ensure confidentiality of the one client respondent. CEMI results by agency are presented in **Table 4**. Similar to the overall CEMI results, average results for relational MI was relatively high across agencies (Ms ranged 4.22 to 4.57) and there were no significant differences. However, average results for technical MI were lower and one agency had a significantly lower average score compared to other agencies. Interestingly, this agency had just entered the MI Implementation Project at the start of the evaluation, thus creating a natural control group from which to compare CEMI results. Results showed that, on average, clients reported significantly lower technical scores for case managers from the new agency (JP; M = 2.81) compared to case managers from agencies long involved in the project (ACC, LSS, WCS; Ms ranged 3.76 to 3.89). A similar pattern was seen in agency average total CEMI results.

Table 4. Client evaluation of MI was mostly similar across agencies.

Agency	CEMI Average Results		
	Relational Subscale	Technical Subscale	Total
ACC (N = 42)	4.34	3.78	3.98
LSS-N (N = 51)	4.26	3.89	4.02
LSS-W $(N = 30)$	4.42	3.76	4.00
WCS (N = 100)	4.22	3.76	4.00
JP (N = 18)	4.57	2.81*	3.45**

Note. Significantly lower score compared to other agencies: *p < .05, **p < .06.

Client evaluation: demographic matching results

Client and case manager demographics (age, gender, race/ethnicity) were examined for the CEMI. There was no significant difference in CEMI results for client and case manager match on gender (N = 190) or age range (N = 163). However, there were significant differences in CEMI scores when clients and case managers had a racial/ethnicity match (N = 187). Clients reported significantly higher (p < .01) average relational scores when there was a racial/ethnicity match (M = 4.47) compared to when there was no match (M = 4.08). A similar pattern was seen for total average CEMI results such that clients reported significantly higher (p < .03) results when there was a racial/ethnicity match (M = 4.05) compared to when there was no match (M = 3.81). This matching effect was explored during the focus groups. Clients shared that a lack of racial/ethnic identity match did not impact the relationship with their case manager—as long as the case manager was respectful and supportive. Some clients even expressed appreciation for having a case manager without racial/ethnic match because difference offered fresh perspectives and insights.

Case manager MI fidelity

The large dataset of 185 case manager fidelity reviews were prepared for analysis in two ways. First, because each fidelity review resulted in a MITI score of 0 (no measures at fidelity) to 6 (all measures at fidelity), each fidelity review was coded for a single aggregate MITI score. For the purpose of this evaluation, case manager MITI scores were benchmarked to **advanced** fidelity standards, not basic fidelity standards. Based on the aggregate MITI score, three levels of advanced MI fidelity were created: low fidelity (ranging 0.0 - 2.4), moderate fidelity (ranging 2.5 - 4.0), or high fidelity (ranging 4.0 - 6.0). Analysis of variance (ANOVA) showed these levels to be distinct

from one another (p < .001) such that low fidelity case managers had significantly lower aggregate MITI scores (M = 1.8, n = 12) compared to moderate fidelity case managers (M = 3.1, n = 28), and moderate fidelity case managers had significantly lower aggregate MITI scores compared to high-fidelity case managers (M = 4.7, n = 10.00)

There were three distinct levels of advanced MI fidelity among case managers: low, moderate, and high.

21). Level of case manager advanced MI fidelity was used for several analyses reported below. The second way case manager fidelity results were prepared for analysis was by examining the most recent results (June 2024) because these were closest in time to

the client evaluation (July-August 2024). As presented in **Table 5**, average case manager MITI scores in the June 2024 practice samples was 3.6 (0-6 scale). Case managers (N = 45), on average, exceeded advanced fidelity standards on two MITI measures (percentage complex reflection, number MI adherent behaviors), however, fell short on other MITI measures.

Table 5. Case manager average MITI results for June 2024 practice samples.

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Motivational Interviewing Treatment Integrity (MITI) Measure		Advanced Fidelity Standard ^{13,15}	Average Results, June 2024 Fidelity Review (N = 45)	
1.	Average Relational Global Ratings (partnership and empathy; 1-5 scale)	≥ 4.0	3.7	
2.	Average Technical Global Ratings (cultivating change talk and softening sustain talk; 1-5 scale)	≥ 4.0	3.4	
3.	Percentage of Complex Reflection	≥ 50%	56%*	
4.	Ratio of Reflections to Questions	≥ 2.0	1.4	
5.	Number of MI Adherent Behaviors (affirmation, seeking collaboration, support autonomy)	≥ 2.0	2.8*	
6.	Number of Non-Adherent Behaviors (persuade, confront)	= 0.0	0.3	
	MITI Summary Score (0-6)	= 6.0	3.6	

Note. Asterisk (*) denotes result exceeded advanced fidelity standard.

Fidelity results for June 2024 were significantly differentiated by level of advanced fidelity (p < .001) such that low fidelity case managers showed significantly lower MITI scores in this practice sample (M = 1.7, n = 9) compared to moderate fidelity case managers (M = 3.7, n = 24), and moderate fidelity case managers showed significantly lower MITI scores compared to high-fidelity case managers (M = 4.7, n = 12). Furthermore, levels of case manager fidelity significantly differentiated (p < .001) those who were DHS certified in MI: low fidelity case managers had no certification in MI (M = 0%) and moderate fidelity case managers had a significantly lower rate of certification (M = 21%) compared to high-fidelity case managers (M = 58%).

Case manager MI fidelity and length of employment

Analyses examined the relationships between case manager MI fidelity and length of employment in community forensic services. Average length of employment for 61 case managers (over 90% of the workforce as of June 2024) was 3.7 years (median = 3.0 years). There were three distinct groups of case managers by length of employment: new case managers (range zero - two years, M = 1.1, n = 23); experienced case managers (range three - five years, M = 3.6, n = 25); and seasoned case managers (six or more years, M = 8.2, M = 13). As seen in **Table 6**, average aggregate MITI score for advanced MI differentiated case managers by length of employment (p < .02) such that new case managers had significantly lower average MITI scores (M = 2.9) compared to experienced (M = 3.6) or seasoned (M = 4.0) case managers. A similar pattern was seen regarding DHS MI certification such that new case managers were MI

certified, on average, at a significantly lower rate (M = 9%) compared to experienced (M = 40%) or seasoned (M = 56%) case managers.

Table 6. As a proxy for time spent in this implementation project, case manager length

of employment showed a significant MI learning effect.

Case Manager Length of Employment in Community Forensics	Average Length of Employment (Years)	Average Aggregate MITI Score for Advanced MI (0-6 scale)	Percentage of Case Managers Certified in MI
New case managers (n = 23)	1.1	2.9	9%
Experienced case managers (n = 25)	3.6	3.6	40%
Seasoned case managers (n = 13)	8.2	4.0	56%

Case manager MI fidelity and client CEMI results

The next set of analyses examined the relationship between case manager MI fidelity and client CEMI results. Based on the project logic model (**Table 1**), case manager MI

Case manager level of MI fidelity showed a significant effect on client experience of the relationship and this effect was enhanced when there was a client-case manager racial/ethnicity match.

fidelity was expected to directly influence positive client experiences. Sixty-one case managers had fidelity data from state fiscal year 2024 and 39 of these case managers (64%) had CEMI data completed by at least one client. Analysis showed case manager level of fidelity had a significant effect (p < .05) on CEMI relational scores such that clients working with high-fidelity case managers had, on average, higher CEMI relational scores (M = 4.62) compared to

moderate fidelity (M = 4.37) or low fidelity (M = 3.93) case managers. There were no significant differences by case manager level of fidelity for CEMI technical or total scores. (These results appear to be representative of the community forensics case management workforce because there were no differences in MITI fidelity results between case managers who did and case managers who did not collect client CEMI data.) Also, there was no correlation between case managers MITI relational and technical global scores and the client CEMI relational and technical scores, respectively. Finally, there was no significant relationship (R = .169, p = .25) between case manager length of employment and client CEMI results.

Client reflections from focus groups

Consistent with the CEMI results reported above, client participants across three focus groups (FG1, FG2, FG3) emphasized the importance and value of their case managers' relational skills. Case managers were described as encouraging, supportive, caring, trustworthy, respectful, and open-minded. Over time in services, clients reported building comfort and trust through their case managers' active listening and genuine engagement.

It took a minute for me to sit back and realize she was helping me. But I wasn't fully engaging in her help. . . I was an impatient person. I've always had trouble asking for help. I was always used to doing things on my own. And now it's recognizing that I do need help. That's encouraging because that's what they're there for. (FG1)

Taking time to engage with skillful listening comprises the relational foundation of MI. Clients valued the guidance and accountability provided through the case management services. Insight was provided into how case managers use technical elements of MI for behavior change conversations.

Clients also discussed how case managers played an important role in exploring ambivalence about change, co-creating change plans, and offer ongoing encouragement and support.

- She was an appropriate authority figure. She was not going to scold you, she was not going to make you feel bad. She was going to help you out every step of the way, to the point where, if you are struggling, she would console with you and get you back on track. But she also worked with you to come up with a plan to keep yourself away from people who are going to be dangerous situations. (FG1)
- **66** My case worker, she helps sees the pros and cons of it. When I do something wrong, she says write down pros and cons if you get in trouble and when you do something or want to do something, write down if you get in trouble and if you don't get in trouble, see which one comes up the most helps a lot in changing my mind on doing things. (FG3)

Clients expressed pride and gratitude for accomplishing personal growth and positive changes. Much of this was attributed to the support provided by their case manager and to being able to have useful change conversations as part of services. and to being able to have useful change conversations as part of services.

- **1** I've changed my behavior to be something that I'm enjoying. I'm happy with the person I'm turning into. . . I tell my case worker every time that the change that I'm doing right now I feel is beneficial, not only for me but also for the people I come into contact with. (FG1)
- For me, motivation that she does most is anytime I go to do something that's against the rules, she explains to me, you know, do I want to be back to where I was in the mental hospital or do I want to stay out? (FG3)

The final theme that emerged from the client reflections was how comprehensive and supportive case management services have been. Case managers offered tailored supports (taking clients fishing, dining out), logistical supports (providing transportation, assisting with job searches, identifying resources to prevent recidivism, help with

budgeting), advocacy (advocating against revocation), and emotional support (helping with the loss of a parent).

She's been working hard to help me get a job. I just spoke with someone from (lumber) company on the phone and was talking about my past experiences and they are looking to setup a job interview, and my case manager helped with that. (FG2)

Across the three focus groups, there was consensus among clients that their experiences in community forensics case management services felt distinct and more positive compared to experiences in other parts of the system. Clients also emphasized the usefulness of case manager responsiveness and availability during times of need.

Program outcome

Program outcome was analyzed to examine the extent to which MI and other factors contributed to client successful program completion. Based on the project logic model (**Table 1**), case manager MI fidelity was expected to result in client successful program completion. Client discharge data from Conditional Release Program and Opening Avenues to Reentry Success programs (N = 225 clients) were analyzed for State Fiscal Year 2024 (July 1, 2023, through June 30, 2024). Of note: these clients were not the clients who completed the CEMI in July and August 2024. There were several findings:

- Overall rate of successful program completion was 45.8%. There was no difference (p = .16) in successful completion for clients participating in the Conditional Release Program (M = 51.7%, n = 87 clients) or Opening Avenues to Reentry Success (M = 42.0%, n = 138 clients) programs. Also, there was no difference in rate of successful discharge between contracted agencies (p = .24). Although average rates of successful program completion did show a trend in the expected direction for new (M = 35.2%), experienced (M = 44.6%), and seasoned (M = 51.8%) case managers, it was not at a level of statistical significance (p = .47). Client characteristics (gender, age range, race/ethnicity) also did not predict rate of successful program completion.
- There was no significant relationship between case managers' current client CEMI results (relational, technical, or total) and past client rate of successful program completion. Also, there was no significant relationship between rate of successful program completion and case manager

Case manager MI—as independently measured by coaches and clients—did not exert influence on clients' successful program discharge.

- MI fidelity level, separate MITI relational and technical scores, or case manager MI certification status. In sum, assessment of case manager MI by clients (CEMIs) and coaches (MITI fidelity reviews) did not appear to exert any influence on rate of client successful program completion in the Conditional Release Programs and Opening Avenues to Reentry Success Programs.
- The only measure examined that did show a significant effect was case manager self-reported use of MI during the discharge process. As part of the DHS discharge survey, case managers documented frequency of MI use as a proactive intervention

leading up to discharge. Analysis showed a robust effect (p < .001) such that case managers who reported infrequent use of MI (zero - two times, n = 82) had, on average, a significantly lower rate of successful program completion (M = 25.6%) compared to case managers who reported moderately frequent (three - four times, n = 30; M = 53.3%) or frequent (five or more times, n = 113; M = 58.4%) use of MI.

As a proxy for successful program completion, number of client custodies during
program involvement was examined. Here, too, there were no significant effects for
case manager MI fidelity level, MI certification status, or length of employment.
Also, there were no significant correlations between number of custodies and client
characteristics such as gender, age range, race/ethnicity, initial ACE score, and
number of days of program participation. However, there was a significant negative
correlation (r = -.352, p < .001) such that as number of client custodies decreased,
rate of successful program completion increased.

Discussion

With the outstanding participation of 242 clients completing the client evaluation of MI administered by 59 case managers with supports from agency teams (see **Appendix**), this evaluation examined hypothesized relationships between case manager MI fidelity (output) and client experiences (expected outcomes) as described in the MI implementation project logic model (see **Table 1**). There were several key findings:

• Case managers are getting good at MI. Although MI is a relatively simple practice, it is not easy to learn to fidelity standards. Case managers have diligently engaged ongoing learning in this project with implementation inputs of monthly

Case managers, with support of their MI coaches, have engaged an ongoing learning process resulting in MI fidelity.

coaching, quarterly fidelity reviews with feedback, and other agency supports. Results showed experienced and seasoned case managers achieved significantly higher rates of advanced MI fidelity and DHS MI certification compared to new case managers (see **Table 6**). Further evidence of case manager learning came from an unexpected natural experiment. Case

managers employed by an agency just entering the project and new to learning MI provided a control group from which to compare case managers in agencies long-involved in the project. Results showed case managers in the control group had significantly lower CEMI technical scores compared to the other case managers (see **Table 4**). Project inputs are clearly resulting in case manager learning outputs and this finding is consistent with an earlier project evaluation.⁸

Clients experienced relational elements of MI. Across all contracted agencies, clients reported experiencing a great deal of MI during meetings with case managers, particularly MI relational elements (see Table 3). Case manager MI relational elements included partnership, expression of empathy, frequent listening, and affirmation of client strengths. In the focus groups, clients further elaborated on the productive working relationships experienced with their case managers. A particularly interesting finding from the CEMI analysis was when there was a client-

case manager racial/ethnicity match, clients reported experiencing more relational MI compared to when there was no match. This finding is consistent with a prior CEMI study¹⁰ and underscores the importance of agencies hiring and retaining racial diverse case managers.

- Clients perceived high-fidelity case managers somewhat differently than
 moderate or low fidelity case managers. Clients of high-fidelity case managers
 had significantly higher CEMI relational scores compared to moderate or low fidelity
 case managers lending further support to how case manager MI fidelity (output)
 linked to positive client experiences (expected outcome). Yet, there were no
 differences between case manager level of fidelity and CEMI technical results which
 suggests clients may be more atuned to the relational dynamics in case
 management sevices than to qualities of behavior change conversations.
- Clients experienced technical elements of MI, but less so than relational elements. Because technical elements of change conversations are essential to the practice of MI,¹ an important output of learning is case managers possessing technical MI skills such as bringing up the topic of behavior change, addressing client ambivalence about change, and guiding the change conversation. As seen in Figure 1, clients evaluated all CEMI technical items at or below the total average. This finding mirrored coach MITI fidelity review results which showed that case managers' average technical global ratings were lower than average relational global ratings (see Table 5).
- Few factors contributed to clients' successful program completion.

 Successful program completion was the key outcome measure in this evaluation.

 While not exhaustive, many factors were examined to understand potential

Case manager self-reported use of MI at discharge showed a significant effect on successful program completion, but this finding should be viewed with caution.

predictors and correlates of successful completion. Client characteristics, initial adverse childhood experience score, and duration of time in program did not predict successful discharge. Furthermore, case manager MI—as independently assessed by clients (CEMI) and coaches (MITI)—was not

associated with successful program completion. This finding was inconsistent with the hypothesis that case manager MI fidelity would result in client successful program completion (see project logic model, **Table 1**). Although case manager self-reported use of MI during the discharge process did show a significant effect on successful program completion, self-report is not a strong measure of MI and this finding should be view with some caution. Successful program outcome may be related to factors not examined in this evalution (such as client stability or mental health status) and even though the number of custodies were found to be inversely correlated with successful completion, the complex factors leading to such events were not considered.

There were several limitations in this evaluation. Because of limited time and resources, the evaluation only offered snapshots of case manager MI fidelity, client experiences, and program outcomes. These variables did not overlap in the same time frame. For example, case manager fidelity was based on practice samples collected during the state fiscal year ending June 30, 2024, but the client evaluation of MI was administered in July and August 2024; program outcome was assessed retrospectively for clients discharged during the past fiscal year but only current clients completed the evaluation of MI. The lack of overlapping time frames likely created excess "noise" making "signal" finding difficult. To compensate for this limitation, focus groups were intended highlight and amplify client experiences but, unfortunately, few clients participated. Another limitation was case manager fidelity. In general, case manager technical skills were lower than relational skills. Also, the 12 case managers identified as high-fidelity practitioners showed only an average of 4.7 out of 6.0 (78%) MITI measures, thus this skill ceiling may have diminished the ability to statistically detect beneficial effects of MI on client experiences and outcomes. Finally, the key outcome was successful program discharge, however, because the measure lacked standardized, objective criteria its reliability is questionable.

Recommendations

Despite limitations, this evaluation clearly showed MI offers contracted agencies and their case managers a practical, feasible, and acceptable practice to enhance the relational foundation of services while increasing the quality of change conversations with clients. Moreover, results illustrate how a state agency can directly support and guide implementation of an evidence-based practice. While delivery of case management services in community forensics have shown remarkable success, the point of implementing MI is to achieve "better results" through a "cycle of excellence." Based on evaluation results, the following is recommended:

- DHS and agency teams should continue learning the nuances of the implementation model that guides the project^{6,7} with attention to the relationships between inputs, outputs, and expected outcomes as described in the project logic model (**Table 1**).
- Agencies should continue providing regular MI coaching to all case managers to support ongoing learning. For agencies and units new to this implementation project, DHS should increase supports to the agency teams for developing the coaching service for developing new coach competencies.
- Agency coaches should focus more time and attention on case manager development of MI technical skills. These skills include: bringing up the topic of behavior change (focusing process), recognizing client change talk, cultivating client change talk, and softening client sustain talk (evoking process).¹ Coaches should ensure that each case manager is working toward a specific skill goal and that direct support for goal achievement is incorporated into coaching sessions.
- Relatedly, the DHS and agency MI teams along with coaches should develop guidelines, tools, and supports for how case managers can more fully integrate MI into routine change conversations with clients.

- Because case managers are increasingly learning MI, coaches should incorporate feedback into fidelity reviews that compare a case manager's MITI results with **advanced** fidelity benchmarks, then set a skill goal accordingly.
- Because certification in MI meaningfully distinguished case manager level of fidelity, DHS should continue to certify case managers as recognition of outstanding learning achievement.
- Contracted agencies human resources departments should consider reviewing and revising recruitment and hiring protocols to maximize hiring of racially/ethnically diverse and qualified case managers for providing services to the diverse client population of community forensic services.

References

- 1. Miller, W. R., & Rollnick, S. (2023). *Motivational interviewing: Helping people change and grow* (4th ed.). New York, NY: The Guilford Press.
- 2. Miller, W. R. (September 2024). *Controlled trials involving motivational interviewing* [compiled citations]. Access from https://acrobat.adobe.com/id/urn:aaid:sc:us:5af7ffbd-6b03-4822-a1b3-2d4dcf88738d
- 3. Miller, W. R. (2017). *Systematic and meta-analyses of research on motivational interviewing* [annotated bibliography]. Access from https://www.motivationalinterviewing.org/sites/default/files/mi_research_reviews_2017.pdf
- 4. Arkowitz, H., Miller, W. R., & Rollnick, S. (Eds.). (2015). *Motivational interviewing in the treatment of psychological problems* (2nd ed.). New York, NY: The Guilford Press.
- 5. Stinson, J. D., & Clark, M. D. (2017). *Motivational interviewing with offenders: Engagement, rehabilitation, and reentry.* New York, NY: The Guilford Press.
- 6. National Implementation Research Network. *Overview of the active implementation frameworks*. Accessed from https://implementation.fpg.unc.edu/wp-content/uploads/Active-Implementation-Overview.pdf
- 7. Fixsen, D. L., Blase, K. A., & Van Dyke, M. K. (2019). *Implementation practice & science*. Chapel Hill, NC: Active Implementation Research Network.
- 8. Wisconsin Department of Health Services (2021). *Motivational interviewing implementation project in community forensics: Report for state fiscal year 2020* [technical report, P-02994]. Madison, WI: Wisconsin Department of Health Services. Access from https://www.dhs.wisconsin.gov/publications/p02994.pdf
- 9. Madson, M. B., Bullock, E. E., Speed, A. C., & Hodges, S. A. (2009). Development of the client evaluation of motivational interviewing. *Motivational Interviewing Network of Trainers Bulletin, 15(1),* 6-8.
- Madson, M. B., Mohn, R. S., Schumacher, J. A., & Landry, A. (2014). Measuring client experiences of motivational interviewing during a lifestyle intervention. *Measurement and Evaluation in Counseling* and Development, 48, 140-151. Access from http://mec.saqepub.com/content/early/2014/07/31/0748175614544687
- 11. Madson, M. B., Mohn, R., Zuckoff, A., Schumacher, J. A., Kogan, J., Hutchison, S., Magee, E., & Stein, B. (2013). Measuring client perceptions of motivational interviewing: Factor analysis of the Client Evaluation of Motivational Interviewing Scale. *Journal of Substance Abuse Treatment, 44*, 330-335
- 12. Madson, M. B., Villarosa, M. C, Schumacher, J. A & Mohn, R. S. (2016). Evaluating the validity of the Client Evaluation of Motivational Interviewing scale in a brief motivational intervention for college student drinkers. *Journal of Substance Abuse Treatment*, *65*, 51-57.
- 13. Moyers, T. B., Manuel, J. K., & Ernst, D. (June 2015). *Motivational Interviewing Treatment Integrity coding manual 4.2.1*. University of New Mexico, Center on Alcoholism, Substance Abuse, and Addiction. Access from https://www.motivationalinterviewing.org/sites/default/files/miti4.2.pdf
- 14. Moyers, T. B., Rowell, L. N., Manuel, J. K., Ernst, D., & Houck, J. M. (2016). The Motivational Interviewing Treatment Integrity code (MITI 4): Rationale, preliminary reliability and validity. *Journal of Substance Abuse Treatment, 65*, 36-42.
- 15. Miller, W. R., & Rollnick, S. (2013, p. 400). *Motivational interviewing: Helping people change* (3rd ed.). New York, NY: The Guilford Press.
- 16. Van Dyke, M. K., & Naoom, S. F. (2016). The critical role of state agencies in the age of evidence-based approaches: The challenge of new expectations. *Journal of Evidence-Informed Social Work,* 13(1), 45-58.
- 17. Office of the Secretary Reentry Unit (2023). *Becky Young Recidivism Reduction Annual Report, Fiscal Year 2023*. Opening Avenues to Reentry Success outcomes (pp. 10-12). Madison, WI: Wisconsin Department of Corrections. Access from https://doc.wi.qov/Documents/AboutDOC/Reentry/BY%20Report%20FY23%20FINAL.pdf
- 18. Miller, S. D., Hubble, M. A., & Chow, D. (2020). *Better results: Using deliberate practice to improve therapeutic effectiveness.* Washington, DC: American Psychological Association.
- 19. Rousmaniere, T., Goodyear, R. K., Miller, S. D., & Wampold, B. E. (Eds.). (2017). *The cycle of excellence: Using deliberate practice to improve supervision and training*. Hoboken, NJ: WILEY Blackwell.

Appendix

Evaluation of the Wisconsin Community Forensic Services MI Implementation Project was made possible by many people across several teams. Particular appreciation goes to MI coaches, case managers, and program participants for providing the respective inputs, outputs, and results of this project.

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