

A Taste of Motivational Interviewing

Who is the Training For?

Physiotherapists and physiotherapy students who are interested in refining their skills for engaging patients in treatment and encouraging meaningful health behaviour change.

Background

The success of physiotherapy is often influenced by the extent to which patients engage with it and adhere to the specific exercises and lifestyle changes that are recommended. However, this usually requires a high degree of effort and motivation on the part of the patient and poor adherence is a common problem.

A key task for physiotherapists therefore, is enhancing motivation for behaviour change. Traditional approaches to encouraging behaviour change involve the provision of 'expert advice'. The assumption is that patients lack insight into their condition and don't know what or how to change. Whilst advice giving can be helpful, not all patients are ready, willing or confident in their ability to change. As a consequence, attempts to educate or advise, however well-intentioned, can result in unproductive dialogue which is frustrating for all concerned.¹

An alternative approach that can work well in helping patients to change behaviour is called motivational interviewing (MI). MI has been defined as a collaborative conversation to strengthen a person's own motivation for and commitment to change. MI rests on a foundation of patient-centred counselling skills to provide the conditions of support that are conducive to change, and seeks to *selectively* elicit and reinforce the patient's own arguments and reasons for modifying their behaviour.¹

Meta analyses of MI across behaviours and problem areas have shown it can be an effective and efficient method.^{2,3} Patients also make better use of treatment after MI; when it is used as an adjunct to other clinical interventions, attendance, engagement and long-term patient outcomes all tend to improve.^{3,4} Like many other clinical skills that physiotherapists use, MI is not simple to learn. Experience and research have shown that following an initial workshop, clinicians leave with enough skill and confidence to try MI in their work, but normally, additional follow-up coaching and individualised feedback on practice is required to become competent.⁴

Overall aim

A one-day interactive workshop designed to introduce participants to the spirit and processes involved in MI, explore the potential of MI within the contexts they work and ascertain interest in learning more. The emphasis is trying out the skills within a safe and supportive learning environment. There are plenty of opportunities to discuss how the approach may be used to address common clinical challenges.

Learning methods

- Short lectures
- Video analysis
- Experiential exercises
- Discussion

Flexible timetable

- 9.00. Introduction to day; aims, objectives and spirit
- 9.15 The dilemma of change. Overview of the philosophy of motivational interviewing (brief lecture). Comparing approaches to motivating people (exercises and plenary)
- 11.00 Break
- 11.20 Spirit and processes of motivational interviewing (mini lecture plus video or demo) Engaging: the relational foundation of motivational interviewing (mini lecture plus exercises)
- 13.00 Lunch
- 14.00 Examples of direction in MI: recognising, eliciting and reinforcing change talk (mini lectures demonstration and exercises)
- 15.15 Break
- 15.30 Responding to arguments against change (mini lecture, demonstration and exercise). Sharing information
- 16.00 Learning motivational interviewing and wrap up (discussion).
- 16.30 Finish

The focus of the day is on learning what motivational interviewing is, what it is not and how it might fit within the contexts that people work. A variety of learning methods are employed but the emphasis is on learning through doing - practical exercises followed by reflection and discussion.

Facilitator

Dr Robert Shannon PhD CPsychol is a Lecturer within the School of Health Sciences at the University of Southampton. Rob is a Chartered Psychologist who has a background in exercise and health behaviour. The focus of his teaching and research is motivating patients to initiate and maintain helpful health behaviour change. Rob's PhD, explored the feasibility of motivational interviewing as an adjunct to pulmonary rehabilitation with an emphasis on the processes involved skill development. Rob is a member of the Motivational Interviewing Network of Trainers and has trained a number of clinical teams to integrate motivational interviewing-based interactions within routine practice.

References

1. Miller WR and Rollnick S (2013) *Motivational interviewing: Helping people change* (3rd Edition). New York: Guilford Press

2. Frost H, Campbell P, Maxwell M, O'Carroll RE, Dombrowski SU, Williams B, Cheyne H, Coles E and Pollock A (2018) Effectiveness of motivational interviewing on adult behaviour change in health and social care settings: A systematic review of reviews. *PloS One* 13(10): e0204890-e0204890

3. Lundahl B, Moleni T, Burke BL, Butters R, Tollefson D, Butler C and Rollnick S (2013) Motivational interviewing in medical care settings: A systematic review and meta-analysis of randomized controlled trials. *Patient Education and Counseling* 93(2): 157-168

4. Schwalbe CS, Oh HY and Zweben A (2014) Sustaining motivational interviewing: A meta-analysis of training studies. *Addiction* 109(8): 1287-94

Information for venues:

The cost for the participant will be: £120 for MACP members £150 for non-members This is the cost for 2021 and will be reviewed annually.

There is one free space available to whoever organises the course locally. In addition, one further free space will be offered if more than 20 delegates book onto the course. If a venue fee is incurred the minimum number of people required to run the course may increase. The minimum number of delegates required to qualify for an additional free place may also increase.

The course requires a minimum of 18 bookings to enable the MACP to cover expenses and will be cancelled 6 weeks prior to the commencement of the course if this number has not been reached.

If the course requires air travel for the lecturers the prices quoted / number of bookings required will need to be adjusted to reflect the additional costs.

What the MACP Provides:

- Tutor for delivering the course:
- Pays the accommodation for the tutor
- Pays tutor's travel
- Administers the course, taking all bookings and sending all applicants pre-course information
- £3 per person / day to cover refreshments (tea/coffee/biscuits etc).
- Advertising on MACP website and social media sites, MACP newsletters
- One copy of a flyer that you may use to circulate and advertise the course
- A list of names of those who have booked prior to the course for registration.
- CPD certificates (online)

You will need to provide:

• A large room with moveable seating with enough space for 28 participants to split into pairs with enough space between to so each pair is not disturbed by others.

- AV equipment (data projector), plus access to plugs as workbooks are electronic
- Provide us with local information re directions how to get to venue, parking, local accommodation list

• Someone to work on local promotion (including SoMe) to help to ensure that at 6 weeks before the course, the minimum numbers of places are booked onto the course.

• Someone on the on the day to deal with local venue organization (AV, putting up signs, providing refreshments, information about where to get lunch, registering delegates, locking up, this may also include picking up or dropping off tutors from their hotel; taking pictures on the day for SoMe)

• Refreshments as appropriate (to be reimbursed by MACP on production of original receipts – up to £3 per day per person)

Learning Outcome		Delivery Methods	MSK CCF [^]	IFOMPT Dimension of OMT [#]
1.	Describe the fundamental spirit and processes of MI	Experiential exercises, guided reflection and mini-lecture	Domain A: C1. Communication C2. Person-centred care Domain C: C6. Prevention and lifestyle interventions C7. Self-management and behaviour change	Dimension 1: Learning outcomes 3 and 4 Dimension 4: Learning outcomes 1 and 3
2.	Provide opportunities	Mini-lecture, skills building exercises with	Domain A: C1. Communication	Dimension 1: Learning outcome 4

	to practise empathic counselling skills	guided reflection	C2. Person-centred care Domain B: C3. History-taking Domain C: C7. Self-management and behaviour change	Dimension 4: Learning outcome 3 Dimension 7: Learning outcome 1
3.	To understand and practise some of the directive aspects of MI for evoking and reinforcing the patient's own motivation for behaviour change	Mini-lecture, skills building exercises with and guided reflection, facilitated discussion	Domain A: C1. Communication C2. Person-centred care Domain C: C6. Prevention and lifestyle interventions C7. Self-management and behaviour change	Dimension 1: Learning outcome 4 Dimension 4: Learning outcome 1 Dimension 7: Learning outcome 1
4.	To understand and practise a motivational interviewing consistent way of sharing information	Mini-lecture and facilitated discussion	Domain A: C1. Communication C2. Person-centred care Domain C: C6. Prevention and lifestyle interventions C7. Self-management and behaviour change C11. Rehabilitative interventions. C12. Interventions and care planning	Dimension 7: Learning outcomes 3 and 4
5.	To understand and practice an MI style for meeting "sustain talk" and "discord"	Mini-lecture, skills building exercises with and guided reflection, facilitated discussion	Domain A: C1. Communication C2. Person-centred care Domain C: C6. Prevention and lifestyle interventions C7. Self-management and behaviour change	Dimension 1: Learning outcome 4 Dimension 4: Learning outcome 3 Dimension 7: Learning outcome 1
6.	Describe the patient language cues that provide continued feedback and enable continuous learning in practice.	Mini lecture	Domain A: C1. Communication C2. Person-centred care Domain C: C6. Prevention and lifestyle interventions C7. Self-management and behaviour change	Dimension 4: Learning outcomes 1 and 3