




SKILLS

CONSULTATION SKILLS

Brief intervention and motivational interviewing

The capacity for GPs to effectively use health education to promote health and wellbeing, and facilitate behaviour change, are core skills of both the RACGP and ACRRM training curricula. Effective health education involves the provision of accurate, timely, evidence-based, quality health information to patients, taking into account sociocultural factors and their level of health literacy. 'Health education' is recorded as one of the 25 most frequent reasons for encounter in Australian general practice. Two core skills for effective delivery of health education are brief intervention (BI) and motivational interviewing (MI). Developing registrar skills in the delivery of health education is therefore an important area for GP supervisors to dedicate teaching time.

<p>TEACHING AND LEARNING AREAS</p> 	<ul style="list-style-type: none"> • Patients in high risk groups who are most likely to benefit from health promotion e.g. newborns, adolescents, elderly, pre-pregnancy, LGBTI, CALD • Barriers to health promotion • Assessment of health literacy • Harm minimisation • How to undertake brief intervention - 5As approach and the Behavioural stage of change model • How to undertake motivational interviewing • Sources of reliable health information 						
<p>PRE-SESSION ACTIVITIES</p>	<ul style="list-style-type: none"> • Read the introduction to the RACGP Red Book 						
<p>ACTIVITIES</p>	<ul style="list-style-type: none"> • Health promotion through BI and MI are best taught through role play • Undertake activities over page 						
<p>TEACHING TIPS AND TRAPS</p> 	<ul style="list-style-type: none"> • GPs are ideally placed to offer health promotion messages and BI due to their longitudinal relationships with patients and ability to tailor information • Low health literacy is common in the Australian population and is associated with higher risk behaviours • BI has been found to be successful in promoting healthy behaviour in relation to a range of lifestyle factors - smoking, alcohol, physical activity and nutrition • The effectiveness of BI and health education can be enhanced by simple language, images, diagrams and regular review • A useful question that can assess readiness to change is 'How do you feel about your smoking/alcohol etc?' • The goal of MI is to increase intrinsic motivation rather than to impose it externally • There is evidence that an authoritative and paternalistic style can be counterproductive to motivating behaviour change 						
<p>RESOURCES</p> 	<table border="1"> <tr> <td data-bbox="325 1792 430 1890">Read</td> <td data-bbox="430 1792 1492 1890"> <ul style="list-style-type: none"> • RACGP SNAP Guidelines • 2018 Australian Prescriber article Brief interventions for alcohol and other drug use </td> </tr> <tr> <td data-bbox="325 1890 430 1980">Listen</td> <td data-bbox="430 1890 1492 1980"> <ul style="list-style-type: none"> • Cochrane podcast Which talking therapies work for people who use drugs and also have alcohol problems? </td> </tr> <tr> <td data-bbox="325 1980 430 2078">Watch</td> <td data-bbox="430 1980 1492 2078"> <ul style="list-style-type: none"> • Adolescent Drug and Alcohol Use - 11 minute video RACGP • Heart Foundation Motivational Interviewing video 17 mins </td> </tr> </table>	Read	<ul style="list-style-type: none"> • RACGP SNAP Guidelines • 2018 Australian Prescriber article Brief interventions for alcohol and other drug use 	Listen	<ul style="list-style-type: none"> • Cochrane podcast Which talking therapies work for people who use drugs and also have alcohol problems? 	Watch	<ul style="list-style-type: none"> • Adolescent Drug and Alcohol Use - 11 minute video RACGP • Heart Foundation Motivational Interviewing video 17 mins
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<p>FOLLOW UP AND EXTENSION ACTIVITIES</p>	<ul style="list-style-type: none"> • Undertake the insight e-learning modules on Screening and brief intervention and Motivational interviewing 						

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Activity

BRIEF INTERVENTION ROLE PLAY

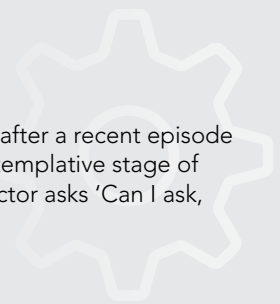
1. Watch and critique the Quit [brief intervention role play](#) together (ask/advise/help model)
2. Then role play the following case with the registrar. Registrar to undertake brief intervention using the ask/advise/help model, or the 5 A's model from the [RACGP SNAP guidelines](#)

ROLE PLAY SCENARIO

Instructions for supervisor

You are Pat, a 25-year-old university student, and you have presented for a medical certificate after a recent episode of diarrhoea. You smoke about 15 cigarettes per day, more around exams. You are in the contemplative stage of the 'cycle of change' but your partner smokes and you are not particularly motivated. Your doctor asks 'Can I ask, how do you feel about your smoking?'

Ad lib as required.



3. Review the chapter on smoking in the [RACGP SNAP guidelines](#)

The 5As framework for preventative care	
Ask	<ul style="list-style-type: none"> • identify patients with risk factors
Assess	<ul style="list-style-type: none"> • level of risk factor and its relevance to the individual in terms of health • readiness to change • health literacy
Advise/ agree	<ul style="list-style-type: none"> • provide written information • brief advice and motivational interviewing • negotiate goals and targets (including a lifestyle prescription)
Assist	<ul style="list-style-type: none"> • develop a risk factor management plan that may include lifestyle education tailored to the individual (eg. based on severity of risk factors, comorbidities) and pharmacotherapies • support for self-monitoring
Arrange	<ul style="list-style-type: none"> • referral to allied health services or community prog

Adapted from the RACGP SNAP guidelines

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Activity

MOTIVATIONAL INTERVIEWING ROLE PLAY

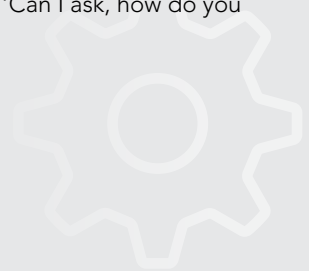
1. Watch and critique the [Heart Foundation motivational interviewing video and role play](#) together
2. Then role play the following case with the registrar. Registrar to undertake motivational interviewing using the OARS model (see next page)
3. Review the section on OARS in AFP 2012 article [Motivational interviewing techniques Facilitating behaviour change in the general practice setting](#)

ROLE PLAY SCENARIO

Instructions for supervisor

You are Frankie, a 41-year-old accountant, and you have been recalled for your recent blood test results. Your BSL is 6.2 and your lipids are elevated. Your weight is 99kg and BMI 32.1. You have always been 'heavy' and have struggled to lose weight. You have put on at least 5kg over the past few years since your children were born. You are motivated but struggle to know how you will find the time to exercise. Your doctor asks 'Can I ask, how do you feel about your weight?'

Ad lib as required.



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OARS: The basic skills of motivational interviewing

Ask Open-ended questions*

- The patient does most of the talking
- Gives the practitioner the opportunity to learn more about what the patient cares about (eg. their values and goals)

Example

I understand you have some concerns about your drinking. Can you tell me about them?

Versus

Are you concerned about your drinking?

Make Affirmations

- Can take the form of compliments or statements of appreciation and understanding
- Helps build rapport and validate and support the patient during the process of change
- Most effective when the patient's strengths and efforts for change are noticed and affirmed

Example

I appreciate that it took a lot of courage for you to discuss your drinking with me today You appear to have a lot of resourcefulness to have coped with these difficulties for the past few years Thank you for hanging in there with me. I appreciate this is not easy for you to hear

Use Reflections*

- Involves rephrasing a statement to capture the implicit meaning and feeling of a patient's statement
- Encourages continual personal exploration and helps people understand their motivations more fully
- Can be used to amplify or reinforce desire for change

Example

You enjoy the effects of alcohol in terms of how it helps you unwind after a stressful day at work and helps you interact with friends without being too self-conscious. But you are beginning to worry about the impact drinking is having on your health. In fact, until recently you weren't too worried about how much you drank because you thought you had it under control. Then you found out your health has been affected and your partner said a few things that have made you doubt that alcohol is helping you at all

Use Summarising

- Links discussions and 'checks in' with the patient
- Ensure mutual understanding of the discussion so far
- Point out discrepancies between the person's current situation and future goals
- Demonstrates listening and understand the patient's perspective

Example

If it is okay with you, just let me check that I understand everything that we've been discussing so far. You have been worrying about how much you've been drinking in recent months because you recognise that you have experienced some health issues associated with your alcohol intake, and you've had some feedback from your partner that she isn't happy with how much you're drinking. But the few times you've tried to stop drinking have not been easy, and you are worried that you can't stop. How am I doing?

* A general rule-of-thumb in MI practice is to ask an open-ended question, followed by 2-3 reflections

From [AFP 2012 article Motivational interviewing techniques Facilitating behaviour change in the general practice setting](#)