

PCIC TRAINING

Session 2: 9th January, 2019

WIFI

Network: ChildAdvocates_Guest

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CONTENT FROM YESTERDAY

- Cognitive model
- Values
- Engagement in behavioural change
- Evaluation!
 - Please go to www.isurvey.soton.ac.uk/24653
 - Password is PCIC



FACILITATING CHANGE

- What gets in the way of changing behaviors?
 - Who is responsible for behavior change?
 - What are some of the assumptions we make about change?

CHANGE...

Think about a behavior change that you have been failing to make!

For example:

- Eating 5 portions of fruit & vegetables per day
- Decorating a room in your house
- Going to an evening class
- Drinking less tea and coffee
- Staying in touch with old friends who you don't often see
- Increasing your daily exercise
- Stopping smoking
- Spending more time with your partner / children / friends / dog / on your own.
- Getting your work things ready the night before, rather than running around in the morning!

(Tip: Choose a behavior that occurs [or you would like to occur] quite frequently)

AN EXERCISE

- Person A – *Advisee*; person B *Advisor*
- **Advisee:** start by saying: “I’ve been thinking about trying to ...[your example],” then just respond as feels natural
- **Advisor:** Its your job to MAKE this person change

Make sure that you:

- Advise on what to do – “I think you should...”
- Be stern about pointing out the problems that not changing will bring, and effusive about the benefits of change
- Shoot down any resistance in flames
- Don’t take any nonsense, this person needs to change and change now!
- DON’T bother with questions

FEEDBACK ON THE EXERCISE

- What happened?
 - Advisee
 - Advisor

ANOTHER EXERCISE - EXPLORING

- Person A – *Listener*; person B - *Consulter*
- **Consulter:** Start by saying: “I’ve been thinking about trying to ... [your example],” then just respond as feels natural
- **Listener:** Your job is to explore and understand this person’s difficulties with change – not to encourage change

Make sure that you:

- Don’t advise, persuade, confront
- Don’t see your job as making them change
- Do explore your consultee’s experience with open questions, reflect talk of possible change
- Do listen actively, reflect, try to understand your consulter

FEEDBACK ON THE EXERCISE

- What happened?
 - Consulter
 - Listener

DID THE EXERCISE FIT WITH THE RESEARCH?

Miller, Benefield & Tonigan (1993)

- Two sessions offered to problem drinkers
- Either “directive-confrontational” or “person centered” therapist style

Results

- A directive-confrontational style led to...
 - more client resistance and...
 - worse outcome a year later

.... “a single therapist behavior was predictive of 1-year outcome such that the more the therapist confronted, the more the client drank”

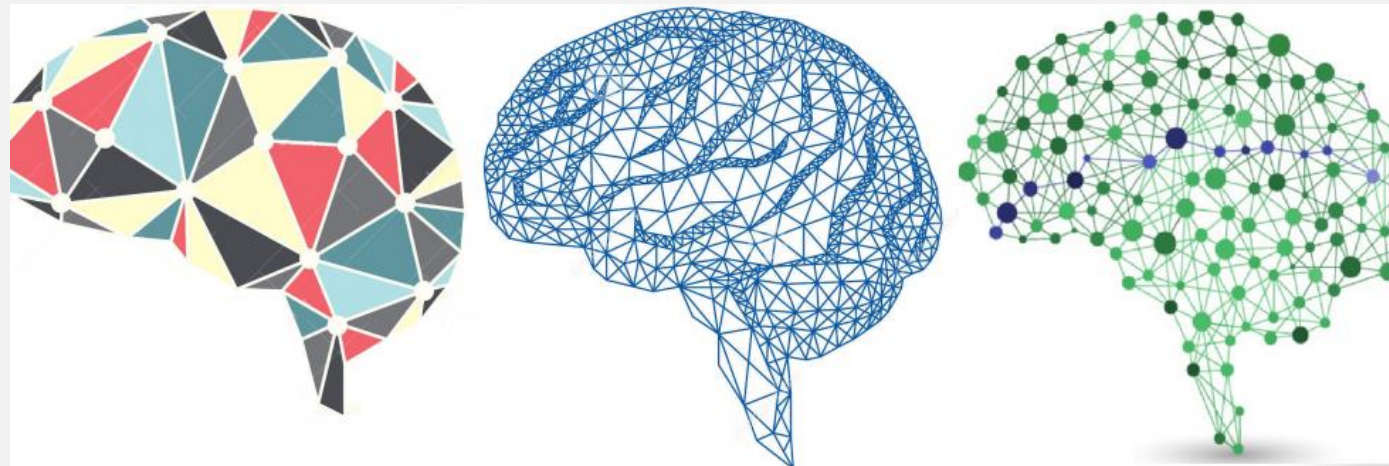
PROCESS OF CHANGE FOR TODAY

WHAT WILL CHANGE FOR STAFF?
WHAT ARE THE BARRIERS TO CHANGE?



WHAT WILL CHANGE AS A RESULT OF TRAINING? COGNITIVE CHANGE

- Information
- Knowledge (how to do something)
- Attitudes (beliefs about something)



BEHAVIOURAL CHANGE

- Skills acquired
 - Questioning
 - Responding
 - Formulating



DOING STUFF TO ENABLE DEEP LEARNING

- PPT to enable information, increase in knowledge
- Link behaviours to knowledge to enable deep learning
- Experiential learning enables meaning to be attached to information
- Discussion essential in this process
 - Talking to someone else about experience and meaning

LEARNING CYCLES

- Skills acquired through practice and reflection
- Learning cycle enables discussion of experience to generalise knowledge and practice resulting new behaviours

Concrete Experience

(doing / having an experience)



Active

Experimentation

(planning / trying out what you have learned)

Reflective

Observation

(reviewing / reflecting on the experience)



Abstract

Conceptualisation

(concluding / learning from the experience)

MORNING: CLINICAL PRACTICE WITH EMR

Functions:

- To increase familiarity with the values components with the EMR
 - Note: not the whole EMR!
- To increase familiarity with extracting case information useful to the values process
- Formulating that information in terms of values using the EMR

AFTERNOON: CLINICAL PRACTICE WITH EMR

Functions:

- To increase practical familiarity with eliciting values and logging in the EMR
- To practice questioning and responding to maximise effectiveness of values conversations
- To increase familiarity with using values to facilitate change conversations
 - Elicit goals in the service of values

VIGNETTE I: JOHN

PROCESS: STAGE I

1. Read the biographical information on John.
2. Add to the relevant information on the EMR

Questions for feedback

1. What information do you need to complete the care plan components?
2. What questions would you ask to gather that information?

FEEDBACK?

JOHN: VALUES INFORMATION

Values

- John values his relationship with his children, particularly his son.
- Would like more contact with his daughter but she doesn't want to see him too often due to his drinking. He feels guilty and shameful about his drinking and the effect it had on his children.
- Values work to some degree but can't imagine how he'd get back to it
- He values friendship; he has a few close friends who he has known for many years and who are similarly marginalised in terms of income, housing etc. Most do not drink as much as John and none binge drink

Goals

- John would like to stop binge drinking, but not to be sober. He imagines that he could sustain one or two days a week drinking no more than four pints with friends.
- He would like to improve his health so that he does not have to spend time recovering from blood sugar abnormalities and hospital procedures.
- He quite enjoys spending time in hospital being cared for, but does not like the procedures he undergoes. Pain is distressing; drinking can reduce it. He finds thinking about his relationship losses distressing which can also lead to bingeing.

PROCESS: STAGE 2

- Complete the EMR with the information gathered

FEEDBACK

- What was difficult about the task? How did you resolve it?
- How did you isolate the information that was useful to the process?

AFTERNOON: CLINICAL PRACTICE WITH EMR

Functions:

- To increase practical familiarity with eliciting values and logging in the EMR
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PROCESS: OVERALL

- In groups of three, identify:
 - Patient
 - Provider
 - Observer
- There are three stages, so please swap roles to ensure that all members have an opportunity to take each role.

PROCESS: OVERALL

- **Patient:** Use the information provided to create a case. Don't make it too difficult for your provider!
- **Provider:** Make use of the skills discussed yesterday and the EMR to elicit:
 - 1) biographical information;
 - 2) values
 - 3) behaviours and goals in the services of those values
- **Observer:** Ensure strict timekeeping – 10 minutes. Help the provider if requested. Note what was done well and what could be improved.

STAGE I: BIOGRAPHICAL INFORMATION

STAGE 2: VALUES INFORMATION

STAGE 2: GOALS AND BEHAVIOURS

OVERALL FEEDBACK

- What was difficult about the exercise?
- What did you learn from your observer?
- What did you learn about the process as a whole?

REFLECTIVE PRACTICE

“Those of us who do things for others without deepening our own self-understanding...will have nothing to offer”

Thomas Merton, 1971

SELF-REFLECTION: WRITING AS TOOL

- Aims of reflective writing:
 - Record experiences
 - Increase thinking skills
 - Form of self-expression
- Write in a journal about your experiences with clients
- Do it when it suits you
- 10-15 minutes of writing—not much!



SELF-REFLECTION: WRITING AS TOOL

- Steps in Reflective Writing:

1. Reflecting

- Focus on event
- Write freely and try not to judge what you write

2. Analyse

- What has happened?
- What assumptions am I making (about myself or others)?
- What does this show about my beliefs?
- What are some other ways of looking at this?

3. Action

- What action could I take?
- What can I learn from this?
- How might I respond if it happens again?

COMMITMENT

- Write down one thing that you have taken from the training
- Write down one thing that you are going to do differently
- Write down one thing on which you will need further support, and how you may obtain that support

PCIC TRAINING

End