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Refer to guidance notes for completion of each section of the specification.

Module Code:	PHY406
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Module Title:	Motivational Interviewing (MI): An Introduction for qualified healthcare practitioners and medics
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Level:	4	Credit Value:	20
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Cost Centre(s):	GAPT	JACS3 code:	B160
		HECoS code:	

Faculty	Social And Life Sciences	Module Leader:	Maddy Nicholson
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Scheduled learning and teaching hours	17 hrs
Placement tutor support	0hrs
Supervised learning eg practical classes, workshops	14 hrs
Project supervision (level 6 projects and dissertation modules only)	0 hrs
Total contact hours	31 hrs
Placement / work based learning	
Guided independent study	169 hrs
Module duration (total hours)	200 hrs

Programme(s) in which to be offered (not including exit awards)	Core	Option
N/A	<input type="checkbox"/>	<input type="checkbox"/>

Pre-requisites
Registered health care practitioners or medics, Completed Level 6

Office use only	
Initial approval: 26/02/2020	Version no: 1
With effect from: 01/04/2020	
Date and details of revision:	Version no:

Module Aims

The module aims to introduce registered health and social care practitioners including AHP's, nurses and doctors to MI in healthcare. The student will be able to employ a range of skills in MI whilst embracing the mind-set and position of MI. The student will reflect on how MI may be applied in their own clinical practice.

Module Learning Outcomes - at the end of this module, students will be able to

1	Identify how, why and when motivational interviewing can be employed in clinical practice.
2	Identify the principles and utilise the 'spirit/mind-set' of motivational interviewing including compassion, acceptance, partnership, and respect.
3	Demonstrate and explain the importance of listening with empathy, resisting the righting reflex, dancing with discord and providing information in a way that engenders minimal resistance.
4	Demonstrate the micro skills of motivational interviewing including open questions, affirmations, reflections and summaries.
5	Reflect on how MI can be used in clinical practice and how it might be applied to their area of practice.

Employability Skills The Wrexham Glyndŵr Graduate	I = included in module content A = included in module assessment N/A = not applicable
<i>Guidance: complete the matrix to indicate which of the following are included in the module content and/or assessment in alignment with the matrix provided in the programme specification.</i>	
CORE ATTRIBUTES	
Engaged	I
Creative	I
Enterprising	I
Ethical	I
KEY ATTITUDES	
Commitment	I
Curiosity	I
Resilient	I
Confidence	I
Adaptability	I
PRACTICAL SKILLSETS	
Digital fluency	I
Organisation	I
Leadership and team working	I
Critical thinking	I

Emotional intelligence	1
Communication	1
Derogations	
N/A	

Assessment:			
Indicative Assessment Tasks:			
<ol style="list-style-type: none"> 1. Simulation. Students will observe a video of actors as patients who are ambivalent about changing a behaviour. Students will be assessed on their providing written answers in a workbook. 2. Students will complete a reflective piece on what they learned on the course, what surprised them and what they would like to know more about. They would include how they intend to use MI in clinical practice, what their ideas are, about support that would help in further learning MI and what changes in the work environment would help them to implement MI. They would also reflect on a case example where they used at least one of the micro-skills of MI with a patient who was ambivalent about making a behaviour change. 			
Assessment number	Learning Outcomes to be met	Type of assessment	Weighting (%)
1	2,3,4	Simulation	60%
2	1,5	Reflective Practice	40% (1500 words)

Learning and Teaching Strategies:
<p>Use of real play to allow for deeper experiencing of MI by emotive learning.</p> <p>Modelling the mind-set of MI to allow for experiencing MI and MI spirit.</p> <p>Use of role play to practise micro skills.</p> <p>Use of technology such as YouTube videos, Padlet, Menti.com and Wordcloud to enhance learning engagement by gradually introducing group work, making learners feel comfortable to practise and interact.</p> <p>Individual reflection, small group work, large group discussion.</p>

Syllabus outline:
<p>The syllabus is designed to develop an appreciation of MI and allow students to experience the mind-set and skills used in the practise of MI. Students will explore why, how and when MI might be used and put the skills into immediate practise.</p> <p>Students will engage in discussions about their own experiences working with service users who are ambivalent about behaviour change and will reflect on the use of MI in clinical scenarios.</p> <p>Students will participate in real play, role play, creating an immersive and interactive supportive learning environment. Students will receive clear, respectful and actionable feedback on their skills.</p>

The first day will consist of introducing students to the module and to reflective practise models.

There will then be a week break for Easter.

The second day will take place two weeks later and introduce MI, including the spirit and micro skills.

A week later the third day will commence and will develop students' practise of the micro skills and spirit and formative feedback will be provided.

There will then be a three week break for students to practice MI in their own contexts.

The fourth day will consist of discussions around the use of MI in practice and a summative assessment by simulation.

There will then be a two week break for students to begin to write a reflective piece on what they learned and how they have applied MI in practice.

The final half day is kept for group tutorials.

Two weeks later there is submission of a reflective piece (1500 words).

Indicative Bibliography:

Essential reading

Rollnick, S and Miller, B (2012) *Motivational Interviewing, Third Edition : Helping People Change*.

Other indicative reading

Alperstein, D and Sharpe, L (2016) The Efficacy of Motivational Interviewing in Adults with Chronic Pain: A Meta-Analysis and Systematic Review, *The Journal of Pain* (4):393-403.

Ang, D., Kesavalu, R., Lydon, J. R., Lane, K. A., & Bigatti, S. (2007). Exercise-based motivational interviewing for female patients with fibromyalgia: A case series. *Clinical Rheumatology*, 26(11), 1843-1849.

Brinson et al. (2014) Buddy-motivational interviewing (buddy-MI) to Increase Physical Activity in Community Settings: Results of a Pragmatic Randomised Controlled Trial, *Motivational Interviewing: Training, Research, Implementation, Practice*, Vol. 1 No. 3.

Bull and Milton (2010) A process evaluation of a “physical activity pathway” in the primary care setting, *BMC Public Health*, 10: 463.

Davies and Wilkinson (2018) Conducting Quality Consultations, *The Faculty of Pain Medicine of the Royal College of Anaesthetists*, Appendices 9, 12.

Deci and Ryan (2012) Self-determination theory in health care and its relations to motivational interviewing: a few comments, *International Journal of Behavioral Nutrition and Physical Activity*, 9:24.

Freudenthal, J. J., & Bowen, D. M. (2010). Motivational interviewing to decrease parental risk-related behaviors for early childhood caries. *Journal of Dental Hygiene*, 84(1), 29-34.

Ingersoll, K and Wagner, C (2012) *Motivational Interviewing in Groups (Applications of Motivational Interviewing)* 1st Edition, Kindle Edition.

Kreman, R., Yates, B. C., Agrawal, S., Fiandt, K., Briner, W., & Shurmur, S. (2006). The effects of motivational interviewing on physiological outcomes. *Applied Nursing Research*, 19(3), 167-170.

Linden, A., Butterworth, S. W., & Prochaska, J. O. (2010). Motivational interviewing-based health coaching as a chronic care intervention. *Journal of Evaluation in Clinical Practice*, 16(1), 166-174.

McKenzie, K J, Pierce, D, Gunn, J M (2018) Guiding patients through complexity Motivational interviewing for patients with multimorbidity, *AJGP*, VOL. 47, No. 1–2, Jan–Feb 2018.

Okuyemi, K. S., James, A. S., Mayo, M. S., Nollen, N., Catley, D., Choi, W. S., & Ahluwalia, J. S. (2007). Pathways to health: A cluster randomized trial of nicotine gum and motivational interviewing for smoking cessation in low-income housing. *Health Education and Behavior*, 34(1), 43-54.

Rollnick, S (2008) *Motivational Interviewing in Health Care: Helping Patients Change Behaviour*.

Teeter, B.S. & Kavookjian, J. (2014). Telephone-based motivational interviewing for medication adherence: A systematic review. *Translational Behavioural Medicine*, 4, 372-381.

Vong, S K et al. (2011) Motivational Enhancement Therapy in Addition to Physical Therapy Improves Motivational Factors and Treatment Outcomes in People With Low Back Pain: A Randomized Controlled Trial, *Arch Phys Med Rehabil*, Vol 92.

Woollard, J., Burke, V., Beilin, L. J., Verheijden, M., & Bulsara, M. K. (2003). Effects of a general practice-based intervention on diet, body mass index and blood lipids in patients at cardiovascular risk. *Journal of Cardiovascular Risk*, 10 (1), 31-40.