



Putting new therapeutic communication skills into public health nursing practice: the student experience

Pat Day and Gayle Hazelby

Senior lecturers in Primary Care Nursing

**Sheffield
Hallam
University**

The rationale for the study

- The main causes of morbidity and mortality in the UK can be attributed to lifestyle-related challenges to health.
- We have the fattest population in Western Europe (Organisation for Economic Co-operation and Development [OECD], 2017) and 16.1% of adults still smoke (OECD, 2017).
- In 2015/2016 there were 1.1 million hospital admissions where an alcohol-related disease, injury or condition was the primary reason for admission or a secondary diagnosis (NHS Digital, 2017b).
- Since 2012 the proportion of adults with probable mental ill health has increased from 15% to 19%. This increase is particularly apparent among young men aged between 16 and 34, and young women aged between 16 and 24 (NHS Digital, 2017a).

Addressing family health need

- Traditional methods of giving advice about changing health behaviour have proved ineffective.
- Evidence based psychological approaches to consultations are recommended by the National Institute for Health and Care Excellence [NICE] (2014) to promote client autonomy and enable behaviour change.
- The evidence base for effective interventions in behaviour change is increasing.
- Motivational interviewing [MI] has been shown to be effective in all of the risk-taking behaviours (Miller and Rollnick, 2013).
- There are NICE guidelines and Cochrane reviews which support its use for:
 - exercise and healthy eating (obesity),
 - smoking,
 - alcohol and substance misuse
 - mental health

(Lai et al, 2010; Smedslund et al, 2011; Lindson-Hawley, 2015).

Background to the study

- While the emphasis in recent British government policy is on early intervention and prevention of ill health, little progress has been made towards achieving this (ONS, 2016).
- To address these challenges to health, Specialist Community Public Health Nursing [SCPHN] students at Sheffield Hallam University [SHU] undertake a specialist module in which they are taught consultation skills in behaviour change and motivational interviewing.
- The module is very structured within an experiential teaching framework.
- Role plays, case studies and client stories are generated from practice to convey real life experience.
- Our research study was designed to show the impact of this module on student consultations with clients (Day et al, 2018).

Research methodology

- Research was conducted in 2017 into the impact of the module's teaching methods on practice through 2 focus groups with 5 or 6 students in each.
- The focus groups were held 6 months after the completion of the module, facilitated by staff separate from the teaching team.
- Facilitators aimed to generate discussion (Barbour 2007) and examine students' views and perspectives about engaging with clients and utilising behaviour change skills in practice.
- Transcribed and anonymised data was analysed using a thematic approach (Braun and Clarke 2006).
- The study received university ethical approval.

Behaviour change research



Changing approach



- In the focus groups participants identified how behaviour change education had changed their practice.
 - 'I feel like I approached that differently to how I would have a few years ago'.
 - 'If you're just doing a one-off session you're then sort of thinking like, shut up, let them talk, it's about them'
 - 'I think I can still give that information, but not in a way that I sound like I'm criticising someone'.
- The conversational nature of consultations was also discussed
 - '... it did change how I did things ... how I ask questions ... it's more a conversation and more open than just throwing questions at people, so it's not a tick box exercise when you go and do a visit.'
- This change included a recognition of the importance of building relationships with clients and working collaboratively on client goals rather than telling people what to do.
 - 'You've got to try and get their perspective and not try and put what you feel is needed on them and again, just trying to let it be more client-led I think is what I try to do.'
 - 'I think it's developed my own practice. It just improved it a lot from noticing more and then the little clues that clients are giving, you try and develop that relationship'.

Skills and techniques

- A range of behaviour change skills and techniques were being used by participants. There was a change in the type and number of questions they used with a shift towards asking fewer questions and using more open ended questions.
- Listening—and also the need to be quiet—were identified as key skills they had learned to use in consultations with clients.
 - 'I spent a good hour at the one consultation after doing it and I only asked two questions, so the power of silence came out as well, so I asked, what would you like to talk about today, and then I asked, what else would you like to talk about today, and it was almost the entire consultation and that was just completely client led.'
- Participants also described how interactions were more client-focused, but directional not directive.
 - '... you know what you're talking about and how you need to go around, how you need to get to where you want, ... but also following the client's way of thinking as well, rather than going in with your own strict list of what you need to talk about, you go in with what they want to talk about but you still get to the same place, I think.'
- Another shift in focus identified by participants was the need during consultations to ask clients for permission to suggest a solution or provide advice.

Education and learning

- The value of having focused learning about behaviour change skills was identified.
 - '... having the understanding of the theory behind it makes you be able to use it more in practice, so you can see where you can use it and how useful it would be to your families and the people that you're working with.'
- The balance between learning new behaviour change skills and practicing these with clients was also discussed with many students describing how their confidence and competence increased with use.
 - '... it's practice I think. I think you need a lot of practice. It's not something that comes easily all the time'.



Use in practice

- There were many examples of behaviour change skills being used in practice. Health visitor students described using such skills during ante-natal contacts, and in discussions about topics such as breastfeeding, behaviour problems, parenting and low mood.
 - 'I think I use it at every contact, I think that the basis of my practice is using that. You can use it from antenatal contact, talking about, I don't know, diet, breastfeeding. I think it is a very useful tool to have'.
- School nurses talked about using behaviour change skills when working with teenagers.
 - 'I've used it quite a bit and we, as part of our role as a school nurse we do health sessions, so we have consultations with teenagers so independent of their parents or carers and sometimes we invite them because an issue has been brought to our attention ... and I've found it really useful in that scenario.'

Time



- The time consuming nature of using behaviour change skills with clients was identified as a key challenge.
 - '... it's sort of like it's a slow burner sometimes and that's a bit frustrating, because as a nurse then you're very, like we've said before, most of us have come from a solution focused model. Originally it was a very medical, this is what's wrong, this is what we're going to do, this is going to make it better, then we've gone a little bit more patient/client centred and then this is almost another step forward, but it doesn't, it sometimes can be the slower process, which is potentially frustrating because of the time pressures that we work under.'
- Others pointed to the importance of relationship building and the time required to achieve this
 - 'I think to develop the true therapeutic relationship with clients to facilitate behaviour change, it does take a long, long time and it isn't a standard core contact, something you can do with core contacts.'

The findings

- The inclusion of a behaviour change skills-based module in the first semester of the SCPHN course has resulted in self-reported changes in approaches to consultations by students.
- The findings have confirmed the importance of relationship building with clients.
- In this study SCPHN students recognised the power imbalance with clients and saw MI as a way of addressing this barrier.
- Use of MI has become part of the students' philosophy of care and transcended beyond the checklists and tasks of everyday work.

Recommendations

- This was a small study. A larger study is required to confirm the findings.
- Further research is needed to show sustainable change.
- Based on this study we believe that Motivational Interviewing should underpin all health and social care curricula.

'.....because it could change someone's life, but also by teaching the students you can sort of change the NHS from within! '

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