Learning about and using therapeutic communication skills in Specialist Community Public Health Nursing: students’ views of an innovative curriculum development.

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With thanks to Dr Sue Peckover, Hayley Chauhdry, Lucy Kirkham and Janet McAleavy
Background to the study

• We are family health nurses (SCPHNs) and are committed to improving outcomes for children, young people and families.

• Our curriculum at Sheffield Hallam University is innovative and needs led.

• We have a skills based module which teaches therapeutic communication skills with a focus on Motivational Interviewing (Miller and Rollnick, 2013).

• Our research study was designed to show the impact of this module on student consultations with clients.
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

Themes

- Changing Approach
- Skills and Techniques
- Education and Learning
- Use in Practice
- Time
Changing approach

• ‘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'.

• 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

• '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 ... that was just completely client led'.

• ‘you might not think you’ve achieved anything because it’s not what you want and where you want to get, but actually it’s where they want to get'.

• ‘that initial open question I think is the thing that I have learnt from and it guides where your conversation goes and I do find that really useful’
Education and Learning

• 'but once you’ve got more theory and practice under your belt it did change how I did things. I just used it more and how I ask questions is 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'.
Use in Practice

• 'I think I use it at every contact, I think that’s 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'.

• 'I think you reflect more as well on the visit. I think you sort of, well, it does with me anyway, I think I go away and I do reflect a lot more on what’s been said and think about it after the visit as well'.
Time

• ‘It’s a long term thing and we don’t get to see the clients enough sometimes to evaluate it ourselves’

• ‘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, that’s true.’

• ‘I think as students we’re going to get the opportunity to do what we want when we want, visit wise, and I know personally from my personal point of view I’m not going to have a massive caseload, so I feel that maybe this 10 weeks’ consolidation might not be a true reflection of what I’m going to be able to do when I qualify’
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 curriculums.

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


• Braun V and Clarke V.(2006) Using thematic analysis in psychology, Qualitative Research in Psychology 3:2, 77-101