

Open Questions Practice Sheet

Convert the closed questions below to open ones. Remember there are many possible responses. Be creative. Come up with at least three open questions for each example. You want your questions to *elicit* what the patient knows, wants, believes, thinks, and feels. It is usually wise to avoid asking *why* questions, as they tend to have an accusatory or demanding tone, and thus put people on the defensive.

How many times have you used meth in the past six months?

Is there some reason you can't check your blood sugar twice a day?

You know your smoking puts your kids at risk for getting asthma? Right?

Write at least three open questions for each of the four processes that one would likely ask when having a conversation about change.

ENGAGING

FOCUSING

EVOKING

PLANNING

Forming Affirmations

1. Think of a friend, relative, client, or patient that you know. Write down the various strengths, virtues, and positive qualities you see in this person.

2. Now provide several affirmations that you might offer to this person related to particular strengths or qualities that you identified. Affirmations are statements that commonly begin with *you*. For example:

- That took a lot of courage to...
- You're a very resourceful person.
- You showed a lot of patience when...
- You put in many hours of hard work to achieve...

Affirmations are more effective when they are specific. State them in a positive manner and ensure that you are being genuine.

3. Repeat the previous two steps with different people in mind. Consider choosing someone you find particularly challenging to be around.

Example:

Trudy smokes two packs of cigarettes a day. She knows it isn't good for her and is fed up with people reminding her of it. Over time, she has come to realize that her smoking has moved from a social habit to a harmful addiction. She feels guilty about her smoking and tries to hide it from her family. At some point, she will stop, but just not yet. With everything else going on in her life, this is one area she feels is her own.

Strengths:

- Independent, doesn't let others unduly influence her.
- Aware of changes in her behavior and is bothered by it.
- Wants to be more healthy

Affirmation:

You are somebody who makes up her own mind. You're aware of the negative effects of smoking and when you're ready to make a change you'll do what's needed to be successful.

Adapted from Rosengren, DB. (2009). Building Motivational Interviewing Skills: A Practitioner Workbook

Forming Reflections

Overview: In groups of 3-6, practice forming and responding with reflective statements to what a Speaker says. Choose from the activities below, or make up your own.

1. A designated Speaker begins talking about a topic (favorite activity, person who inspires them, decision they're facing, challenging situation, dilemma, other) for 30-45 seconds. In turns, each person in the circle responds with a reflective statement choosing different reflection stems listed below. After several rounds, repeat the activity with another Speaker.

2. As in #1, a designated Speaker begins talking about a topic. This time the person to the left of the Speaker responds with a reflective statement using one of the stems below. The Speaker responds briefly to that statement and then the next person in the circle forms a reflection based on what the Speaker just said. After several rounds, repeat the activity with another Speaker.

Sounds like...	Your concern is that...
You're saying that...	Your fear is that...
You're feeling like...	It seems that...
Almost as if...	You're not terribly excited about...
It's like...	You're not much concerned about...
It feels like...	This really...
For you, it's a matter of...	You feel so...
From your point of view...	It's really important to you that...
As you see it...	You're not really...
You...	You feel as though...
You're wondering	What I heard you say was...
You really ...	(Others)
You believe...	

Stems list adapted from Community Care of North Carolina MI Resource Guide

Directive Reflecting

Read the sentence stem and write down (or speak aloud) at least three different responses to each item. Each should emphasize a different aspect of the statement. Here is an example.

It's been fun, but something has got to give. I just can't go on like this anymore.

- You've enjoyed yourself.
- You're worried about what might happen.
- It's time for a change.

I know I could do some things differently, but if she would just back off, then the situation would be a whole lot less tense; then these things wouldn't happen.

I've been depressed lately. I keep trying things other than drinking to help myself feel better, but nothing seems to work, except having a couple of drinks.

So, I'm not too worried, but it's been over a year since I've had an HIV test.

I know I'm not perfect, but why do they have to always tell me what to do. I'm not 3!

I probably should, but I don't use condoms. It's not my thing.

I might have a problem, but who are you to be giving me advice. What do you know about drugs? I bet you've never even smoked a joint!

I don't think I have a drinking problem. It's just that my partner is overly sensitive because her dad was an alcoholic.

Forming Summaries

Overview: In circles of 3-6, practice forming collecting, linking, and transitional summaries.

- Have a Speaker and Interviewer engage in 3-5 minute MI conversation. Then,
1. Have a person in the circle (other than the Interviewer) provide a *collecting* summary followed by a brief response from the Speaker about the general accuracy of the summary.
 2. A second person in the circle then offers a *linking* summary followed by a brief response from the Speaker.
 3. A third person then provides a *transitional* summary followed by a brief response from the Speaker.
 4. Debrief
 5. Repeat the exercise with a different Speaker and Interviewer engaging in a 3-5 minute conversation.

Basic Framework for Offering Summaries

1. Begin with statement indicating you are making a summary
2. Give summary of selected content
3. End with an invitation for the Speaker to respond – e.g. *What would you add to that? What did I miss?*

Types of Summaries

Collecting summaries pull together in one basket various change talk statements that the person has mentioned.

Linking summaries connect what the individual has said with a relevant statement or idea that came up in a prior conversation.

Transitional summaries are used as a wrap-up at the end of a conversation, or at a point of transition in the conversation. In all three cases, emphasis is placed on shining a light on the persons change talk.

Rowing with OARS (with Observers)

Purpose: Interviewers practice how to use OARS strategically to move toward a particular change goal.

Overview: Once one is comfortable using OARS in a nondirective manner, the next task is to learn how to use selective questions, affirmations, reflections and summaries to evoke change talk.

Guidelines: Work in groups of four: One speaker, one interviewer, and two observers at a time. The speaker's topic is "One thing in my life (or about myself) that I would like to change..." This instruction is to start with a topic about which the person already has some desire to change, and therefore soliciting change talk should be both easier and natural.

The interviewer's task is to use OARS to evoke change talk (e.g. desire, ability, reasons, need, important, confidence, and commitment to change). It may be useful to discuss beforehand various methods for eliciting change talk or have a menu from which to choose (see Methods for Evoking Change Talk below). The interviewer should refrain from giving advice, and stick to the OARS, being careful to offer more reflections than questions.

One observer uses an OARS sheet and records occurrences of each of these responses. The usual procedure is to make hash marks next to O, A, R, and S as these occur, and also to write down what the observer regarded to be particularly good examples of each.

The second observer listens for change talk from the speaker. You can assign this coder to work in various ways, such as (1) simple counting of change talk statements, (2) placing hash marks in D A R N and C categories, (3) writing down particularly good examples of change talk, (4) rating the strength of change talk, (5) also tracking sustain talk, or (6) also noting what the interviewer did right before each change talk statement.

The interviewer may pause at any point in the conversation to consult with the observers.

Allow the conversation to proceed for about 8-10 minutes, and then give a 2-minute warning at which time the interviewer should offer a bouquet summary of the speaker's change talk and ask what the speaker might add to that.

Debrief the exercise by 1) having the interviewer talk about what he/she did well and one thing to improve upon, 2) having the speaker tell the interviewer all the things the interviewer did well, and one suggestion for improvement, and 3) have the observers report what they observed using their coding sheets to summarize their observations, and mention particularly good examples that they noted.

Methods for Evoking Change Talk

Asking evocative questions

What worries you about your current situation?

Why would you want to make this change?

How might you go about it, in order to succeed?

Using the importance ruler (also use regarding person's confidence to change)

On a scale of 0 to 10, how important is it for you to make this change? Tell me about being at ___ compared to (several numbers lower)? What would it take to move from ___ to (next highest number)? And how I might I help you with that?

0	1	2	3	4	5	6	7	8	9	10
Not at all important									Extremely important	

Exploring extremes – *What concerns you absolutely most about ___? What are the very best results you could imagine if you made a change?*

Looking back – *What were things like before you began drinking more frequently?*

Looking forward – *How would you like things to be different in the future regarding _____?*

Exploring goals and values – *What's most important to you in life? What are the rules you'd say you live by? How does drinking fit with your personal goals?*

Notes: This is quite a complex exercise, and benefits from the trainer/facilitator circulating, observing, and coaching. The exercise can be repeated if desired, so that each participant gets to play each role.

Adapted from David Rosengren and Bill Miller

Change Talk Quiz

Modified from Moyers & Martin, 2005

Instructions: Underline any parts of the client statements below that sound like change talk, including the less obvious statements that only hint at change. This is not an exact science so don't be concerned about being right or wrong.

- | | |
|----|---|
| 1 | Interviewer: Tell me about your drinking. |
| 2 | Client: Well, I just love the way it makes me feel. It makes me feel great. I can't really imagine a day without that feeling. |
| 3 | I: A day without alcohol would be difficult. |
| 4 | C: Yeah, I don't think I could cope. I mean, I get really stressed by my work, and I need a few drinks to calm down. |
| 5 | I: So you use alcohol to deal with stress. |
| 6 | C: Yeah, I don't think I'll ever quit drinking. I really don't want to quit and I mean, what would be the point? |
| 7 | I: You don't see any reason to quit. |
| 8 | C: Yeah, I tell you, just this week I bought a pack of beers from around the world, and I started drinking a different one each day, to start the evening out each night. |
| 9 | I: What, if anything, do you not like about alcohol? |
| 10 | C: Well certainly, it costs a lot of money. I mean, I'm sure I could spend the money in better ways. |
| 11 | I: The money is an issue for you. Is there anything else you don't like about it? |
| 12 | C: Yeah, the way I feel when I wake up. I still feel pretty groggy all day at work. I would like to feel a little more clear-headed. |
| 13 | I: The grogginess affects your work. |
| 14 | C: Well, certainly I'm a little more short-tempered than I might be. I really gotta get a handle on that. I mean, I'm a salesperson, so if I'm not patient with the idiots who call up wanting something, then I lose the sale. |
| 15 | I: So, alcohol has affected your ability to do your job. |
| 16 | C: Yeah, I guess so. |
| 17 | I: So, on a scale from 0-10, with 0 being not at all motivated, and 10 being extremely motivated, how motivated would you say you are to cut down or quit drinking? |
| 18 | C: I'd say a 2. |
| 19 | I: So, why not a 0? Why not the lowest possible motivation? |
| 20 | C: Well, I really want to feel better at work. And, I need to make more sales, which means I need to drink less. And things would certainly be better financially if I wasn't spending so much money on alcohol. In fact, I'd say I'm more around a 3 than a 2. I just don't think I can do it, you know. I don't think I can cut down. |
| 21 | I: So, I'm really hearing two things. You want to cut down, you need to cut down and you have reasons to cut down, but you're not sure that you will be able to cut down? |
| 22 | C: Yeah, I'm afraid it might be too hard. |
| 23 | I: It sounds like drinking has been part of your life for a long time. |

- 24 C: Since I was fourteen. My friends and I used to shoplift it from the Quickie Mart down the street. We got caught a few times, but we just kept doing it. Then after high school, I had a friend at work that would buy it for me, but only if I paid and he got half of the booze. That was hard because I was spending almost all my paycheck just to get half the booze.
- 25 I: So it cost quite a bit back then. How about now? You mentioned the money before.
- 26 C: I'd say I spend way too much on it these days. But, I gotta have that buzz after work, like I said.
- 27 I: Without it you'd be too wound up to function.
- 28 C: Well, I don't know about function. I'd function OK, I guess, I just wouldn't be as happy.
- 29 I: What other things do you like to do?
- 30 C: I like to watch TV, hang out with my friends, but they all drink too. And I like to go see movies.
- 31 I: And you're not drinking when you see movies.
- 32 C: No, a movie is usually distracting enough that I can go without until I get home. I suppose I could go see a movie every night! I think I'll try that. Two hours without drinking is like 4 less beers a night.
- 33 I: And cheaper than 4 beers, I would imagine.
- 34 C: Not when you drink like I do. I get the cheapest beer possible, because I drink so much of it. A movie costs \$10 these days, but 4 beers only costs me like 2 bucks.
- 35 I: So, seeing a movie wouldn't really help financially, but you would probably feel better the next day.
- 36 C: Yeah, and I would probably be more patient on the phone with customers, which might mean more sales. That would help financially. I get paid on commission.
- 37 I: Are there periods in your life when you didn't drink?
- 38 C: Yes, once I quit for a couple of weeks.
- 39 I: It wasn't something you wanted to keep doing.
- 40 C: Well, I was more productive, but the stress was terrible. I started to exercise, and that helped.
- 41 I: So, you were able to quit for two weeks, and exercise helped reduce the stress that you felt from work.
- 42 C: Yep. You know, I bet I could do that again. I could exercise.
- 43 I: So, it sounds like you have two plans in mind, to go to a movie each night and to exercise to relieve stress. Do you think you could do both?
- 44 C: I don't see why not. It might even help me to eventually quit.

Instructions: After underlining all of the change talk, go back and note in the odd-numbered squares which of the O-A-R-S the interviewer uses. Notice how they are used to both *elicit* and *respond* to change talk throughout the conversation.

Snatching Change Talk from the Jaws of Ambivalence

Adapted from Bill Miller & Terri Moyers

Instructions:

I. Underline the **change talk (desire, ability, reason, need or commitment)** in statements 1-10.

II. Form triads: Client, Listener 1, Listener 2

- Client reads entire statement of ambivalence. Listener 1 responds to change talk with reflective statement. Client responds with more change talk.
- Listener 2 responds to new change talk with reflective statement. Client responds with even more change talk. (Rotate roles and go to next statement.)

Example: I really don't want to stop smoking, but I know that I should. I've tried before and it's really hard.

Options: A. You really don't want to quit. B. It's pretty clear to you that you ought to quit. C. You're not sure if you can quit. (Option B is the reflection that reinforces the change talk.)

- 1 I don't drink any more than most people I know. Sure, I sometimes feel a little foggy the next day, but it wears off quick. It's no big deal.
- 2 Sure, I want my kids back, and I want to be a good mother, but the court's making it impossible. There's no way I can do all those things they're making me do.
- 3 I wasn't doing anything wrong! I just went along for the ride, and I didn't know they were going to grab that lady's purse. Now they're saying that I violated my probation. I guess it's not smart to be cruising around at 2 in the morning but it happened so fast, there was nothing I could do about it. I didn't break any laws, and I'm not going back to jail for this.
- 4 It's such a hassle to take those pills. I'm supposed to remember to take them 4 times a day and half the time I don't even have them with me. I guess there's a good reason for it, but it's just not possible for me.
- 5 Last time I tried to quit smoking, I was really bad to be around for 5 days. I was just going off on everybody. But, then, after that I was pretty cool and then after 2 weeks, I was able to be cool all the time. But, I can't be losing my cool with people for 5 days you know. In my situation, if I go off on the wrong people, it could be bad man, real bad.
- 6 Sometimes, doing my rituals makes me want to scream. But, then I think, if I didn't have my OCD, I'd probably be a lot less conscientious. I think my OCD is part of what makes me a good person.
- 7 Hey, I can't go inpatient. If I've got to go someplace, why can't I go to AA or something? If I go inpatient for 28 days, I'm going to lose my job, plus a lot of other bad stuff. You understand what I'm saying.
- 8 When you take that first hit man, there's no feeling like it. At that moment, you just don't care about all the bad stuff drugs do to your life; it's just this amazing rush and nothing else matters.
- 9 Yeah, I was going to night classes. I went every day, did my homework and I admit, I was feeling good about that. But, it's gotten just too hard, you know, it's causing me to be tired at work, and even though my wife says she's for me finishing, I can tell she is getting tired of having the extra burden with the kids and all. Man, I would like to have that certificate, though.
- 10 I have no time to go to counseling. I really hate that I'm so much more impatient with my kids than I used to be because I'm so miserable. But, I can't leave them alone. I don't trust anyone else to take care of them the way I do.

Change Plan Worksheet

Once an individual is ready to take action towards making a change, it can be useful to use this worksheet as a guide to strengthen commitment and determine next steps.

A goal I have is to:

My most important reasons to make this change are:

Some things that could get in the way:

Personal strengths I can draw upon:

The next steps I plan to take and when:

1)

2)

3)

Other people who could help me:

Person

Possible way(s) to help

I'll know my plan is working if/when:

What I will do if the plan isn't working:

Four Processes In the Round

Set-up

1. Practice in groups of approximately 4-8.
2. Have the group come up with a client scenario to practice MI skills through the four processes of Engaging, Focusing, Evoking, and Planning. Use less challenging scenarios for groups who are newer to MI, and more challenging ones for groups with more advanced skills. Choose someone, perhaps the person who identified the scenario, to take on the client role.
3. Explain that the group will go around the circle and take turns using the core interviewing skills of MI (OARS) to move through each of the four processes. Before each process, the group will first discuss possible ways to approach that process, and then debrief what happened after each process is completed. It may also be useful in the midst of practice to pause for brief discussion, feedback or coaching.

Exercise example

After briefly discussing how we might proceed in Engaging with this "client," the person to the left of the "client" begins the conversation and starts with Engaging. The aim is to go for a few exchanges (using more reflections than questions) before passing it on to the next person to the left (a clock-wise movement around the circle). Several people continue practicing Engaging until the trainer/facilitator calls time and the group then debriefs.

This structure is followed for each of the remaining processes of Focusing, Evoking, and Planning. During each process practice, the trainer/facilitator allows the flow to continue, or may choose to briefly stop action and coach in the moment, or may allow the group to briefly discuss a question that emerges, or someone may offer a suggestion they have for how someone might proceed.

The trainer/facilitator keeps an eye on the clock and moves things along to ensure all participants have an opportunity to practice.

Adapted from and with thanks to Sandy Downey

MI Conversation Exercise

Instructions: Consider doing this exercise with a learning partner. Have one person read the client’s part and one read the health coach’s part. Initially read through the entire conversation to make it “come alive.” Then go back and discuss your observations and respond to the prompts in Column B.

Key: **CL** is “client;” **HC** is “health coach.” Assume that introductions have been made and the conversation is starting. Read the conversation in Column A and in Column B write your observations focusing on:

- **Type of client speech:** is it sustain or change talk or a mix of both
- **Method(s)** used by the health coach from OARS+E and any specific type of method from the skills list: there may be more than one used in the exchange, reflection, open question, affirmation, summary, exchanging information, etc.
- What **MI process** is represented: Engaging, Focusing, Evoking, Planning
- Identify the **type of summary** (gathering, linking or transitional) when instructed: *gathering* or collecting information offered by the client; *linking* different topics explored to shine a new light on the subject; and *transitional*, usually accompanied by a key question, which moves the conversation from one process to the next
- Comment on how the client’s **change talk** is acknowledged and invited where you notice it.

A. Conversation	B. Observation
HC: What are your main concerns today?	Method(s):
CL: My doctor said I needed to focus on my stress, that the way I do or do not handle it is causing me health problems.	
HC: It was more of your doctor’s idea for you to be here than yours.	Method(s):
CL: Well, I would not be here otherwise, but I don’t think it is a bad idea.	
HC: You have some concerns yourself.	Method(s):
CL: I’m 55 years old, work at a high stress job where I see others my age or younger getting laid off. I work lots of hours to make sure they see me as productive. This keeps me pretty tense and I guess my doctor thinks my high blood pressure stays up because of this and how I do or do not handle the stress.	
HC: You mentioned that earlier. Tell me what goes on with you and stress.	Method(s):
CL: I guess I am like a lot of people I know. I don’t take time	

<p>for lunch, just eat something fast, like a slice of pizza; I drink coffee or some kind of caffeine all day. Once I leave work and get home, I have a few drinks at night and just sit on the sofa and watch TV until bedtime and then I don't sleep well. Then I get up and do it all again. I often work on at least one day on the weekend and the other day, I just sit around, drink some beer and watch sports on TV.</p>	
<p>HC: A very tiring, vicious cycle of your life where you are never quite off duty, never relaxed. You do things during the day to keep going and then just collapse at home. And your doctor has concerns about your blood pressure as well.</p>	<p>Type of summary:</p>
<p>CL: You got it right! At this rate I may not even make it to retirement. I might have a heart attack or stroke before they can even lay me off!</p>	
<p>HC: This is serious from your point of view. What concerns you the most?</p>	<p>Method(s):</p>
<p>CL: Well, my own father died when he was 59 from a heart attack; he had high blood pressure, never took any time to relax, and he worked himself into the grave.</p>	
<p>HC: You can see yourself on the same path and that really has your attention.</p>	<p>Method(s):</p>
<p>CL: Right! I don't want that to happen to me but I don't have a clue what to do. Like you said, I am in a cycle here and just keep doing the same thing. I'm gaining weight, and I feel tired all the time.</p>	
<p>HC: And it seems like even more than what is going on with you that has you thinking about it; also what you saw happen to your father has you concerned. You want to avoid the same outcome and are not sure yet where to start.</p>	<p>Type of summary:</p>
<p>CL: When Dr. Jones told me it is time to get serious, to come talk to you, I guess I was a little relieved, that he was saying I didn't have to just let this happen, that maybe it's not inevitable.</p>	
<p>HC: You recognize it is time to do something. You are taking responsibility and are hopeful we can figure out something that would be helpful.</p> <p>Let me see if I understand thus far, you want to be healthier</p>	<p>What is the process thus far?</p> <p>Method(s):</p>

<p>and reduce stress, and the way you have been handling the stress from your job hasn't been helping much, you feel even worse. You mentioned being concerned about your food choices, sitting around, not getting adequate exercise and drinking each evening.</p> <p>Where do you think we should start?</p>	<p>Type of summary?</p> <p>What process is next with this question?</p> <p>Why does the health coach ask the client, rather than decide or become directive?</p> <p>What way of responding could have created discord?</p>
<p>CL: My doctor thinks I should make a change in how much I drink, kind of a shock to me.</p>	
<p>HC: You were surprised. What is your understanding about why he is focusing on alcohol?</p>	<p>Method(s):</p> <p>How is client's change talk acknowledged or invited?</p>
<p>CL: This is what he told me: alcohol can raise blood pressure, disrupt sleep, and cause weight gain. He said if I did better with how much I drink, that might help. Now he didn't say I am an alcoholic and I don't think I am, just that some changes would help me in a lot of ways.</p>	<p>Type of client speech:</p>
<p>HC: You don't want to be labeled and at the same time, you are paying attention to what your doctor said.</p>	<p>What specific kind of reflection is this?</p> <p>How could discord have been created?</p>
<p>CL: I like drinking but I don't want to make things worse for myself.</p>	<p>Type of client speech:</p>
<p>HC: You feel two ways about this, not wanting to give up a pleasure and also not wanting to risk your health.</p>	<p>What process is starting now?</p> <p>How is client's change talk acknowledged or invited?</p>
<p>CL: Drinking helps me relax, unwind so if I don't do that as much, what will I do?</p>	<p>Type of client speech:</p>
<p>HC: You don't want to be left with no way to unwind, since</p>	<p>Method(s):</p>

your life is pretty stressful. If you were considering changing how you use alcohol and looking at some other ways to relax, what are some ideas you have?	How is client's change talk acknowledged or invited?
CL: In the past I exercised and that helped in lots of ways: weight, stress, even sleep. I just stopped when this job became so stressful. I got so worried about being laid off at my age that I just let myself go.	Type of client speech:
HC: Not losing your job is an important priority and you are a serious worker. You have used exercise in the past to reduce stress; tell me what you did and how that worked for you.	Method(s):
CL: After work, I had several things I could do in the past. I used to enjoy tennis, going on a vigorous walk, riding my bike in the neighborhood, or even a yoga class every now and then.	Type of client speech:
HC: Quite a variety! If you were considering anything now, what might you want to do?	Method(s): How is client's change talk acknowledged or invited?
CL: I guess getting back to any of those but it seems very hard to think about.	Type of client speech:
HC: What gets in the way, outside of the worry about the job security?	Method(s):
CL: I think just starting back; it has become so easy to go home, open a beer or make a drink and turn on the television.	Type of client speech:
HC: Easy to slide into habits that are not so good, you've got accustomed to it and at the same time you are recognizing that this might be a time to consider what has worked for you in the past. Let me see if I have it right, the conversation with your doctor got your attention, you are concerned about your health and how the way you handle stress is not helping you, that you don't want to end up like your father and are starting to look at the patterns you have developed with drinking and enjoying the sofa and TV after work. Where do you think you are in being ready to plan on some changes?	Method(s): Type of summary: Moving into what process? How could discord have been created?

Thanks to Cathy Cole and Ali Hall for this exercise.

Observer Sheet: Four Processes of MI

Listen for how the interviewer guides the flow of the conversation among the four processes. Write examples of what the interviewer says and does within each process.

Four Processes of MI	Examples of what interviewer says and does
Engaging <i>Providing warm welcome, establishing safety and trust, demonstrating genuine interest, offering hopeful presence</i>	
Focusing <i>Clarifying a particular goal or direction for change to explore further</i>	
Evoking <i>Eliciting the person's own motivation for change, exploring ambivalence, drawing out desire, reasons, need, ability, commitment to change; asking about importance and confidence to change</i>	
Planning <i>Developing a specific change plan that the person is willing to implement</i>	

Observer Sheet: OARS+I

As you hear examples of the interviewer's use of the OARS+I skills, place a hash mark in that row and write down examples of each. Also note any roadblocks you might hear.

Interviewer Responses		Count	Examples
Questions	<i>Open</i>		
	<i>Closed</i>		
Affirmations			
Reflective Statements	<i>Simple</i>		
	<i>Complex</i>		
Summaries			
Providing Information and Suggestions <i>with permission</i>			
Roadblocks - <i>advising, confronting, teaching</i>			

Observer Sheet: Change Talk

Listen for examples of the five kinds of client change talk. As you hear them, place a hash mark in the appropriate row. Write down examples of each type of change talk you hear.

Change Talk Type	Count	Examples
Desire <i>Want, wish, would like to</i>		
Ability <i>Can, could, would be able to</i>		
Reasons <i>Specific arguments or reasons to change</i>		
Need <i>Urgency, important to, have to (without stating specific reasons)</i>		
Commitment <i>Will, plan to, intend to, going to, willing, ready</i>		

MI Self-Appraisal

As the interviewer, I...	<i>0- not at all</i>	<i>5- extremely well</i>
1. Provided a safe, welcoming presence with my words and actions. <i>Example:</i>	0	5
2. Engaged with and showed genuine interest in the person, e.g., what she or he enjoys, needs, values. <i>Example:</i>	0	5
3. Found out and clarified what the person wanted to focus on currently. <i>Example:</i>	0	5
4. Helped explore both sides of the person's dilemma , e.g., what's working and what's not; upsides and downsides. <i>Example:</i>	0	5
5. Avoided trying to "fix" the problem or <i>get</i> the person to change by advising, confronting, warning, or teaching. <i>Example:</i>	0	5
6. Elicited what might be some possible reasons to change, <i>if</i> the person were to decide to change. <i>Example:</i>	0	5
7. Learned about possible ways that he or she might go about making this change. <i>Example:</i>	0	5
8. Asked how important it is at this time for the person to make this change. <i>Example:</i>	0	5
9. Asked how confident she or he feels to be <i>able</i> to make this change. <i>Example:</i>	0	5
10. Inquired about what steps , if any, the person might take next. <i>Example:</i>	0	5
11. Asked permission before providing information or suggestions . <i>Example:</i>	0	5
12. Used the core skills of MI (open questions, affirmations, reflective listening, summaries) throughout the conversation.	0	5
13. Consistently demonstrated the spirit of MI:		
> <i>Partnership</i>	0	5
> <i>Acceptance</i>	0	5
> <i>Compassion</i>	0	5
> <i>Evocation</i>	0	5