



The next 1.5 hours

Content

Learning and competence in MI

The effects of learning programmes in organisations

Brinkerhoff's 2 points in designing learning programmes:

Design learning as a process and engage managers

An example of a case

Your cases – how can you apply the two tools

A little take-away

What is competence and learning in MI?

Competence in MI is a *specific* behaviour:

For instance:

- Overall MI spirit rating
- % and MI consistent behaviour
- Reflection: question ratio
- % open questions
- % complex reflections
- % of talk time
- (Coding systems: MITI, MISC, the MIA-STEP evaluation)

Miller & Moyers eight stages in learning MI

- 1. Spirit of MI
- 2. OARS: client-centered counseling skills
- 3. Recognizing change talk
- 4. Eliciting and strengthening change talk
- 5. Rolling with resistance
- 6. Developing a change plan
- 7. Consolidating commitment
- 8. Integrate and blend MI with other interventions

We also know the best way of boosting learning:

Miller, Yahne, Moyers, Martinez and Pirritano 2004 study:

A randomized trial of methods to help clinicians learn MI

Conclusion: coaching and feedback increases posttraining proficiency (after 4 months the workshop only group showed only marginal gains – only the WFC group showed significantly better client responses compared with baseline)

Walters, Matson, Baer and Ziedonis 2005 study:

Effectiveness of Workshop Training of Psychosocial Treatments in Addiction: a Systematic Review

Conclusion: Workshop training often helps to develop competence in skills, but this competence starts to decay soon unless there is some systematic post-training support, supervision or training Bennett, Moore, Vaughan, Rouse, Gibbins, Thomas, James and Gower 2007 study:

Strengthening Motivational Interviewing skills following training: A randomised trial of workplace-based reflective practice

Conclusion: Those receiving the workplace-based intervention (a 12 week follow up) significantly improved their competence in terms of clinically significant measures of competence.

Motivational Interviewing is simple but not easy...



Process

In groups of 2

Think back over the last year. In your work as a trainer how often have you run the following training programmes (roughly speaking):

Less than a day : %

One day WS : %

2 day WS : %

3 day WS : %

WFC : %

Unfortunately learning programmes in MI often amount to no more than a stand-alone 2-day WS

Delivering stand alone 1-, 2- or 3-day training formats in MI seems to be pretty normal:

Madson, Loignon and Lane 2008 study:

Training in MI:

a systematic review

7 studies involved less than 8 hours of training (1 only 20 minutes),

16 studies involved 9-16 hours of training

Only 1 study involved more than 24 hours of training

A quick glance at our homepage (motivationalinterview.org) and the training announced from September-December:

1-day workshops: 5

2-day workshops: 11

2-day plus coaching: 2

3-day workshops: 4

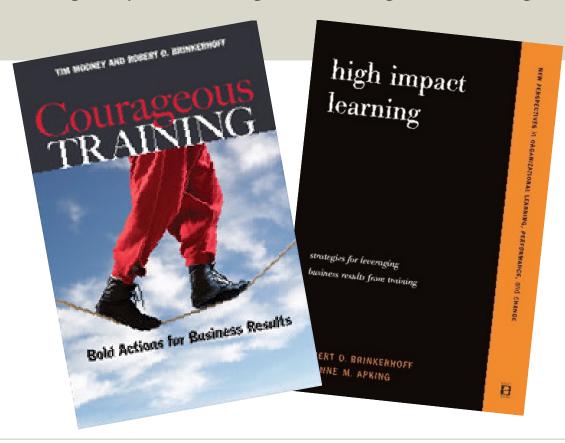
More than 3 days: 1 (online course)

"Training workshops in themselves are ineffective and do not lead to long term changes in clinical skill" (Fixsen et. al. 2005)

Robert Brinkerhoff



Professor Robert Brinkerhoff, Michigan University, is an internationally recognized expert in training evaluation and effectiveness. He is the author of the books *High impact learning* and *Courageous training*.



Brinkerhoff's studies of the effect of learning programmes

Challenges of the training leader

Robert Brinkerhoff's study of employment and the effect of learning in training programmes showed that:

- 15% did not employ or did not try to employ the new learning
- 70% tried to some extent, but encountered problems and soon after reverted to old methods
- 15% employed the new learning and achieved specific and valuable results

NB:

Too many organisations derive too little value from their intensive training initiatives. This is due to a lack of focus on the training initiatives, which are decoupled from the organisation's overall strategic focus, and a lack of involvement of relevant stakeholders.

Source: Robert O. Brinkerhoff and Timothy Mooney: Courageous Training (2008)

Brinkerhoff's studies of the effect of learning programmes

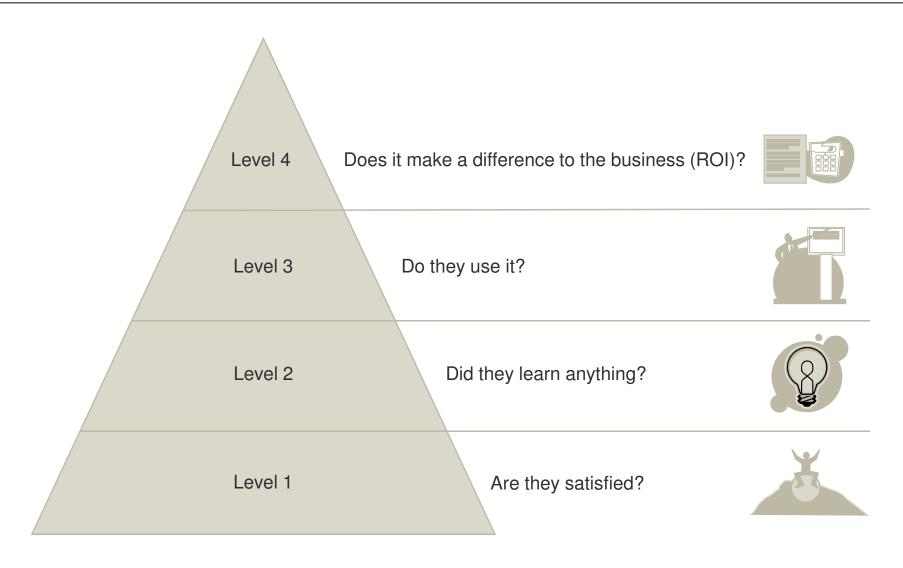
Solid research base

Four years' intensive work with a large number of companies and the results of their training initiatives, including:

- Development of the Courageous Training Model and Courageous Training Code
- Testing the models in practice in several public and private companies in e.g. the healthcare sector, high technology, financial sector, sales and service companies
- Case studies and user groups which have helped develop the Courageous Training approach through their practical experience

Source: Robert O. Brinkerhoff and Timothy Mooney: Courageous Training (2008)

Donald Kirkpatrick's 4 levels of evaluation



Evaluation of training programmes – the 4 levels, Donald Kirkpatrick

Levels:

- Reaction (Did they like it?)
- Learning (Did they learn it?)
- Behaviour (Did they use it?)
- Result (Did it make a difference?)

Elaboration of levels:

- Level 1: The type of evaluation we perform through forms, satisfaction surveys.
- Level 2: This level includes pre- and post-evaluations of attitudes, knowledge and/or behaviour.
- Level 3: Prior to the training programme, the special behaviour to be observable after the training is defined, along with behavioural metrics.
- Level 4: How do we know that the training leads to results for the business; where is it measurable? Question: What behaviours do the participants need to acquire order to create results or effects for the organisation?

ASTD survey on employment of the four levels among 1,500 companies

- Level 1: 91% of the companies evaluate by employing level 1
- Level 2: 37% employ level 2
- Level 3: 16% employ level 3
- Level 4: 9% employ level 4



Main message:

Stop evaluating the training – evaluate how competent the company is at employing the training to achieve results!



Brinkerhoff's solution: Design learning not as an event but as a process

Before training (40%)

Create motivation, focus, alignment and intentionality

- Purpose/goal of the training
- Preparation of case, reflection assignment, read article, interview colleague/client
- Mobilise managers and include them in the design phase through Impact map/learning contracts

During training (20%)

Provide quality learning interventions and tools

- Incorporate adult learning practices into the design of the workshop
- Skills focus feedback
- Case specific training
- Design training for easy transfer

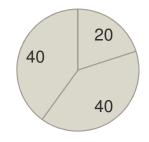
After training (40%)

Support performance improvement and implementation

- Follow-up and home assignments, participate in a colleague's meeting, supervision, and feedback, learning groups, create systems to capture and share learning
- Review impact map/learning contract with manager



The trainer should be the 'conductor' controlling the entire process before, during and after the training programme and getting all stakeholders to interact in perfect harmony.



Results

Source: Robert O. Brinkerhoff & Timothy Mooney (2008). Courageous Training

Process

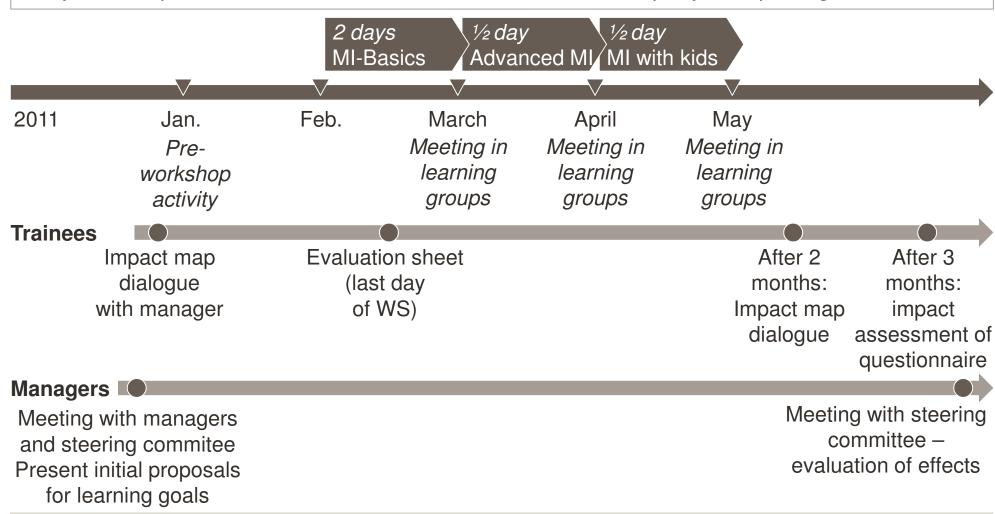
In groups of 2

Look at one of your upcoming training events. What ideas do you have for activities before and after the modules? The ideas should support learning from the modules and ensure that participants retain/increase their learning.

Please note your ideas on the coloured sheets.

Project: 'Early outreach to overweight children'

Project aim: To give municipal staff resources for motivating families and children to adopt a healthier lifestyle. Participants: 150 health visitors in 10 teams. Client: municipality of Copenhagen



Impact map: establish a clear 'Line of Sight' (connects the training, the job behaviours and the specific results through a learning dialogue)

The object of creating an Impact Map is to create focus and well-defined goals for the learning you aim to achieve as part of your participation in the training programme. It helps you to crystallise your ideas of how you will be able to apply what you learn from the training in your everyday work and sharpens your focus and intentionality.

To arrive at a clear focus and goal for the learning you want to achieve, before module 1, it is important that you:

- Complete your personal Impact Map
- Have a 1:1 pre-learning dialogue with your immediate superior where you work through your personal Impact Map

Guide to completing your personal Impact Map

- 1. Complete your personal Impact Map. Start where it makes most sense for you (order is not important)
- 2. Focus on the critical path from your personal learning to the organisational impact to be achieved from your participation in the training programme.
- 3. Check the connection between the different elements. There should be a transparent logic in every direction in the map.
 - a) From left to right: does A complement B?
 - b) From right to left: is B contingent on A?

Your personal Impact Map provides the basis for drawing up your personal action plan during and after the training programme. You will be given an introduction to this later in the programme.

Guide to the pre-learning dialogue with your immediate superior

Start at the end!

Use the questions below to focus the dialogue:

- 1. What organisational goals does our department contribute towards achieving?
- 2. Which of the department's goals does my own job contribute towards achieving?
- 3. In what areas am I looking to improve? (And how do I know if I have succeeded?)
- 4. How will I apply what I have learned from the training programme in my everyday work? (make your answer as tangible and specific as possible)
- 5. What are the key competencies, skills, knowledge and attitudes I need to acquire from this training programme?

At the end of the meeting you (and your manager!) should have arrived at a clear understanding of what you need to learn, how you will be applying what you learn and how this will contribute to the department and the organisation.



Personal Impact Map

Name: Training :							
Learning	Performance		Effect (company)				
Learning outcomes	Critical on-the-job actions	Key results	Business unit goals	Company goals			
What are the key competencies, skills, knowledge and attitudes I need to acquire from this training programme?	How will I apply what I have learned from the training programme in my job? In what way? In what situations?	What areas am I looking to improve on? And how do I know if I have succeeded?	Which of my achievements contribute(s) to the department's goals?	What organisational goal(s) does our department contribute towards achieving?			
Key actions to be remembered for my personal action plan (not mandatory):							
Any supportive measures from my manager (not mandatory):							

Personal Impact Map - example

Name: Gregers Rosdahl (alcohol treatment centre)
Training: Motivational Interviewing training programme

Learning	Performance		Effect (company)	
Learning outcomes	Critical on-the-job actions	Key results	Business unit goals	Company goals
What are the key competencies, skills, knowledge and attitudes I need to acquire from this training programme?	How will I apply what I have learned from the training programme in my job? In what way? In what situations?	What areas am I looking to improve on? And how do I know if I have succeeded?	Which of my achievements contribute(s) to the department's goals?	What organisational goal(s) does our department contribute towards achieving?
Ability to use MI and build motivation on the telephone with potential new clients	Using MI on the telephone with potential new clients	Potential clients experience increased motivation	More clients from the telephone calls call back or show up	More clients from telephone calls (+10%)
Knowledge of procedures for new clients	Using MI in group formats	Participants in MI groups feel more motivated to participate and change behavior	Participants in the MI groups experience greater motivation for change and dropout rates decreases	Fewer clients with relapse (-10%)
Ability to use MI in group formats Ability to use MI with families	Using MI with families	More families stay in therapy for longer	Reduced dropout rates from family therapy	Clients with reduced intake after 3 months (-10%)
, iomity to doc in man idining		iongo.	is	Dropout rates reduced by 10%

Key actions to remember for my personal action plan (not mandatory):

Always put open questions to the potential new clients over the phone. E.g. "what would you like to achieve from the treatment?"; "What changes have you noticed over the past 3 months in relation to your use of alcohol?"

Remember to ask clients after every session: "what is the most important insight you have gained from this session?"

Remember to use reflective listening skills at least once after an open question: a trick to secure reflective listening: 'so you feel like...'

Any supportive measures from my manager:

Supervision every 2 months



Process

2&2 - choose one of you

Fill out the impact map for one of your trainees in one of the trainings you are doing now or are doing soon – what might the impact map look like for this trainee?

Just do one line...