

Brief Lifestyle Counselling

The logo for SIPS (Alcohol Screening & Brief Intervention Trailblazers) is located in the bottom right corner. It features the letters "SIPS" in a large, bold, blue sans-serif font. Below the letters, the full name "Alcohol Screening & Brief Intervention Trailblazers" is written in a smaller, white sans-serif font. The logo is set against a white rectangular background.

SIPS

Alcohol Screening & Brief Intervention Trailblazers

Behaviour Change

- Why don't you believe someone when they say they are never drinking again?
- What behaviour change work do you currently do?
- Does anything worry you about this type of work?

What is Brief Lifestyle Counselling?

- **Brief Lifestyle Counselling is one of a family of Brief Interventions.**
- **Aims to give the patient an opportunity to recognise their motivations for reducing their alcohol use to recommended levels and enhances their confidence of succeeding.**

BLC is a 6 Step Process

1. Introduction
2. A typical day
3. Information Exchange
4. Importance & Confidence
5. Pros & Cons
6. Strategies

Principles of Brief Lifestyle Counselling

- Express empathy.
- Build a strong rapport.
- People must decide for themselves to change.
- Emphasise Change talk
- Actively encourage the person to voice the benefits of behaviour change.
- You or the intervention has not failed if the patient does not agree to change.

It is important not to assume:

- This person should change
- This person wants to change
- The person's health is their motivation
- Now is the right time for change
- The clinician is the expert
- Confrontation is beneficial

Common TRAPS!

- Question and answer trap
- Confrontation – denial trap
- The expert trap
- The labelling trap
- The premature focus trap
- The blaming trap

Introduction

- **Establish rapport: a good rapport is essential to this process.**
- **Introduce yourself, discuss confidentiality and give a brief explanation of session eg..**

“Thank you for coming in today. Following on from the alcohol screening and advice you’ve recently had, we have asked you to come in to discuss your drinking a little further, and explore if you would like to make any lifestyle changes in relation to this. We have about twenty minutes, shall we start?”

A Typical Drinking Day

- Open the session
- Gain an understanding of the clients situation
- Listen for cues

“Tell me about a typical drinking day in your life, so I can understand what happens?”

Information Exchange

- To provide clarity and answer questions that patient may have
- To build upon motivation

“You recently received some brief advice relating to your drinking, do you have any questions regarding that information?”

Importance & Confidence

- Encourage self-motivational statements/change talk, and reveal reasons why the client may want to change.
- Enhance the patients' understanding of barriers to reduce their alcohol use and ways to overcome barriers

“If 0 is not important and 10 is very important, how important is it for you to reduce your drinking behaviour”

“Can you explain why you have given yourself this number? Why didn't you give yourself a lower number? What could you do move yourself up the scale?”

Pros & Cons

- To give the patient an opportunity to explore the good things and not so good things that may come from reducing their drinking.

“What concerns do you have about reducing your drinking?”

“What are the good things that may come from reducing your drinking?”

Strategies

- Not all patients will be willing to make change.
- When looking at strategies make sure the patient is coming up with the ideas. You can prompt them but do not do this for them.
- These questions look at goal setting, triggers, (re)lapse prevention and support systems.

Referral

A list of relevant services can be found on the back of the PIL. We have chosen sites that take self referrals and in most cases a self referral should be the appropriate course of action.

BLC Skills Checklist

- Establish Rapport.
- Be Curious and ask patient to fill in gaps – do not investigate problems. Use Reflective Listening.
- Encourage the patient to say exactly how they feel. Affirm and Summarise so the patient knows they have been heard.
- Adopt an open posture. Sit back and relax.
- Slower pace, faster progress. Time to think is good.
- Check who is talking most – you're doing ok if you are talking less than 50% of the time.
- Use open ended questions; keep them short and simple, not double-barrelled.
- Use empathic listening statements
- Watch labelling language.

Demonstration Role Plays



Support & Supervision

- **Actor training** – as part of the training, you will be asked to practice BLC with an actor, who will visit the practice at a prearranged time.
- **An Alcohol Health Worker** will support you in the delivery of Brief Lifestyle Counselling.
- **Contact** ____ by telephone on _____ or email at _____ if you any questions arise.