

Community mental health tobacco treatment training

Training guide: Module 6

## **Engaging patients with SMI who smoke in treatment**

## Module 6

### Engaging patients with SMI who smoke in treatment

#### Importance:

- Advisors should be comfortable using effective communication to have a meaningful conversation with smokers could increase engagement and encourage behaviour change.
- It can be particularly important for practitioners to feel confident in their ability to have a productive conversation with SMI clients who are not interested or ambivalent about being able to quit smoking.

#### Purpose:

- Review techniques for building rapport during initial tobacco treatment consultations.
- Be aware of techniques for addressing motivation to quit and ambivalence among smokers not ready to quit or with low confidence in their ability to quit.

#### Process:

- Group discussion
- Small group work
- Film clip

#### Resources:

- PowerPoint presentation
- Film clip (embedded into slide)
- Handout 2: Pre-quit patient statements

#### Presenter's notes

Presenter's notes are found in the notes view of the PowerPoint slides. The presenter's notes provide a suggested method for presenting training content and identify where course activities occur. The sources for information and data presented are also included in the presenter's notes.

## Activity: Applying skills to practice (Virtual delivery instructions)

<p><b>Resources:</b></p> <p>Option 1: Breakout rooms, Handout 2: Patient statements</p> <p>Option 2: Trainer facilitated group discussion</p>
<p><b>Breakout room numbers and duration (optional):</b> 3 participants per group; 10 minutes</p>
<p><b>Duration:</b> 30 minutes</p>
<p><b>Method:</b></p> <p><b>Slide 6 and 7:</b></p> <ul style="list-style-type: none"> <li>• Advise participants that we are going to focus on applying these general communication skills to stop smoking consultations.</li> <li>• These communication skills are particularly useful to address those ‘heart sink’ statements that may arise in the pre-quit session and usually come from some ambivalence about quitting.</li> <li>• Ask participants to watch the film clip and <b>consider an appropriate response, considering the skills they have just been identifying.</b> <ul style="list-style-type: none"> <li>- Ask participants to use the ‘raise hand’ function. (<i><b>Trainer:</b> feedback from this first scenario allows you to see if participants are clear on eliciting patient views and reflective listening before completing the rest of this activity on slide 64).</i></li> </ul> </li> </ul> <p><b>Slide 8:</b></p> <ul style="list-style-type: none"> <li>• Ask participants to open Handout 2: Pre-quit patient statements.</li> <li>• Advise participants that you are now going to split into <b>groups of 3 for 10 minutes.</b></li> <li>• In their groups discuss, agree on and write down <b>ONE</b> person-centred response to each of the statements on their handout which are commonly posed by smokers before quitting (if time is tight provide each group with one or two statements to consider).</li> <li>• <b>After the breakout activity has ended,</b> bring the group together for feedback.</li> </ul> <p><b>Slide 9:</b></p> <ul style="list-style-type: none"> <li>• <b>Read out a statement and then ask each group to respond. Repeat the process for each statement</b> <ul style="list-style-type: none"> <li>- Trainers ask the group which responses they feel would be most effective and reinforce that there are several effective communication styles which work [<i>Use suggested trainer response document as a reference – for trainer use only</i>].</li> </ul> </li> </ul> <p><b>What to look out for:</b></p>

- If a participant is wildly off in their response, the trainer can gently make another suggestion, or continue with the round allowing other participants to share their examples.
- Responses should generally include: acknowledgement of issue; elicit patient's understanding of the issue; work with the patient to find a solution.

## Activity: Applying skills to practice (Face-to-face delivery instructions)

<p><b>Resources:</b>  Option 1: Groups, Handout 2: Patient statements  Option 2: Trainer facilitated group discussion</p>
<p><b>Group numbers and duration (optional):</b> 3 participants per group; 10 minutes</p>
<p><b>Duration:</b> 30 minutes</p>
<p><b>Method:</b></p> <p><b>Slide 6 and 7:</b></p> <ul style="list-style-type: none"> <li>• Advise participants that we are going to focus on applying these general communication skills to stop smoking consultations.</li> <li>• These communication skills are particularly useful to address those ‘heart sink’ statements that may arise in the pre-quit session and usually come from some ambivalence about quitting.</li> <li>• Ask participants to watch the film clip and <b>consider an appropriate response, considering the skills they have just been identifying.</b> <ul style="list-style-type: none"> <li>- Ask participants to use the ‘raise hand’ function. (<i><b>Trainer:</b> feedback from this first scenario allows you to see if participants are clear on eliciting patient views and reflective listening before completing the rest of this activity on slide 64).</i></li> </ul> </li> </ul> <p><b>Slide 8:</b></p> <ul style="list-style-type: none"> <li>• Ask participants to open Handout: Pre-quit patient statements.</li> <li>• Advise participants that you are now going to split into <b>groups of 3 for 10 minutes.</b></li> <li>• In their groups discuss, agree on and write down <b>ONE</b> person-centred response to each of the statements on their handout which are commonly posed by smokers before quitting (if time is tight provide each group with one or two statements to consider).</li> <li>• <b>After the activity has ended,</b> bring the participants together for feedback.</li> </ul> <p><b>Slide 9:</b></p> <ul style="list-style-type: none"> <li>• <b>Read out a statement and then ask each group to respond. Repeat the process for each statement</b> <ul style="list-style-type: none"> <li>- Trainers ask the group which responses they feel would be most effective and reinforce that there are several effective communication styles which work [<i>Use suggested trainer response document as a reference – for trainer use only</i>].</li> </ul> </li> </ul> <p><b>What to look out for:</b></p>

- If a participant is wildly off in their response, the trainer can gently make another suggestion, or continue with the round allowing other participants to share their examples.
- Responses should generally include: acknowledgement of issue; elicit patient's understanding of the issue; work with the patient to find a solution