



# Motivational Interviewing Target Scheme | MITS 2.1

An instrument for practitioners, trainers, coaches and researchers

## Explanation & Guidance

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July 2012 | English - UK

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## **This booklet**

This booklet explains the Motivational Interviewing Target Scheme (MITS 2.1), and why it was developed. Guidance is offered as to how it may be used, and by whom.

The authors will be extremely grateful to hear from people using the MITS. Comments and feedback will be invaluable in better understanding its applications, strengths and limitations.

## **Your contacts for discussing MITS**

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## **A note on language**

It is our intention eventually to publish this booklet in a variety of languages. At time of writing, translations have been made by colleagues in The Netherlands, Italy and Spain but will not generally be available until tests are complete. This version self-evidently is written for an English-speaking audience, including those who use English as a second language outside the UK. We have done our best to use the simplest most readily accessible language possible for the task. We appreciate, however, that some words, phrases and expressions may not have precisely the same meaning in the reader's first language, even outside the UK in countries where English is also spoken as a first language. For example, we use the word *practitioner* throughout to refer to the person practising or learning to practise motivational interviewing. This is the best generic noun for the UK. In other countries the best alternative may be *professional* to describe a broader group than *practitioner* circumscribes. We invite readers to offer comments on how best to achieve an accurate translation, without distorting technical meanings.

Whatever your first language, for those relatively new to MI, the definitions in this booklet in places may seem quite complicated. Indeed, the competent use of MI in practice *is* complicated and usually a result of many months of focussed learning. Nevertheless, we encourage you to persevere and keep at it. Re-reading might help. MITS describes practice performance without a specific context, so thinking about a familiar practice context might help shed some light.

## Summary

In general, less productive practice is associated with a higher incidence of MI-inconsistency. This is an evidence-based conclusion. The more MI-consistent the practitioner, the more likely the practitioner will exert an influence on outcome in a manner which the patient/client will find helpful and constructive. MITS is designed to measure the MI consistency of practice performance.

MITS is an instrument developed by MiCampus to describe and assess important components of motivational interviewing. It may be used by trainers, coaches and researchers, and also by individual practitioners seeking to develop skilfulness in MI.

The instrument describes, in precise detail, ten practitioner behaviours that are regarded as aspirational targets for attaining the highest standard of MI-consistent practice. The first seven target behaviours are regarded as necessary components of MI, while the last three are regarded as less important components in some practice settings. Each of the ten core definitions has its own elaborations, further extending the description.

Considered as a whole, the ten target behaviour definitions amount to a comprehensive, three-dimensional description of the observable practice of motivational interviewing *done well*. However, MITS is not intended as a substitute for the various summary definitions offered by the originators of MI, Miller & Rollnick, nor should it be regarded as such. These definitions and MITS sit adjacently and describe the same complex psychological intervention - motivational interviewing - from slightly different viewpoints, and for different purposes.

MITS has an assessment scoring procedure. This provides a straightforward method for making judgements about how close to a particular target is the practice performance under consideration. The scoring procedure may be used repeatedly to assess the extent to which the practitioner's work is apparently approaching or retreating from each particular target. With sampling over time, the scores for repeated sets may be seen to form a changing profile. Such changing profiles may be helpful in identifying areas of performance requiring attention.

MI is rarely used in its purest comprehensive form as a stand-alone therapy. The deployment, more frequently, is one of integration as a reference method - a platform on which work is done. In diverse professional settings, what we might term *lessons from* MI are implemented. Wherever difficult conversations about change occur, where issues of seriousness, reluctance or uncertainty are centre-stage, many professions use the various components of MI to improve engagement and enhance effectiveness. We make this point because the majority of professions do not regard competence in MI as an overarching prerequisite for practice. Rather, it is something to call upon in some circumstances. Irrespective of the advisability of such a standpoint, there are many practitioners whose daily work consists of dealing with people and their problematic behaviours who have found MI to be helpful in one way or another. MI is not a substitute for subject-specific professional expertise. It is however a conduit through which such expertise may be delivered - a productive conversational method. As such, while not seeking to become MI experts, many practitioners may wish to establish the extent to which their performance within their

own profession and field is consistent with MI. This is one intended application for MITS.

The use of MITS will enable practitioners in any profession or field to make considered judgements about how well they are applying this method, and where their strengths and weaknesses lie. Any professional conversation about change may be assessed for its MI consistency - even if the practitioner had never heard of MI. Such elements of MI consistency may be naturally occurring or coterminous with other similar conversational methods. MITS provides a series of lenses through which practice performance is brought into focus, while its accompanying assessment scoring procedure provides a measure of the distance between the observed practice and each exemplar definition.

At the time of publication MITS is not a validated instrument. It results from an inductive process of best-guess discussions and iterations which, without doubt, is yet to be completed. In the reformulations and adjustments to the descriptive text we believe we are getting ever closer to the essential nature of a method that patients/clients and practitioners will find particularly helpful and productive. It is our intention to conduct research to validate MITS in the course of 2012-13.

MITS is impressionistic rather than quantitative. Patients/clients are unlikely to draw conclusions or make judgements about the helpfulness (or otherwise) of practitioners based on the number or type of conversational artefacts present in a conversation. More likely, it is a gut feeling - a summation effect - perhaps difficult to put into words. A patient might say, *"There's something about that nurse I just like - she's so helpful and kind!"* A recording of that consultation might reveal the nurse offering a high proportion of complex reflections and working to build a collaborative ambience, or indeed a long list of relevant observable ingredients. The patient, however, chose *kind* and *helpful* to describe the practitioner. Some may judge the Achilles heel of MITS to be its lack of numeracy. However, we are suggesting that the very impressions gained by the dispassionate professional observer using MITS would correlate *significantly* with those of the patient/client in the practice sample. The only differences are those of detail. The ten target behaviours in MITS provide the detail that our hypothetical patient distilled as *kind* and *helpful*. The patient may be content with the distillation, but the detail is required to assess and learn MI consistency. We want patients to regard practitioners as helpful; the question is, what were they doing to cause that conclusion and could they do it even better?

## **MITS within the MiCampus certification procedure**

During 2010 MiCampus designed an examination procedure intended for practitioners who are not counsellors yet practise MI in an integrated form, within a broad range of contexts, all of which have one thing in common - a relatively short consultation time. The various existing instruments for assessing MI practice require practice samples longer than those usually available (for example a ten minute consultation with a nurse where the focus is weight management). The authors wanted to find out if it would be possible to reliably assess a set of brief samples for MI consistency as if these were one sample. This is how MITS will be used during 2012-13 in the testing of the certification procedure; the person assessing the practice sample views, listens or reads the practice sample set in its entirety before making the assessment. MITS is intended for a practice sample set of between thirty to forty minutes, containing up to six samples. It is likely that the shorter the practice sample, the more difficult the task of the observer will be in discerning the target behaviours. This is why it is recommended that a sufficient number of practice samples, of sufficient length, are gathered together.

## **MITS on its own**

MITS may also be used as a stand-alone instrument for training or coaching purposes, outside the MiCampus examination procedure. The trainer or coach, in conjunction with the practitioner, may focus on just one target, a particular selection, or all the targets.

## **How MITS was developed**

The three authors of this booklet all have extensive experience of MI, as practitioners, trainers, coaches, researchers or writers. Between us we have around forty-five years of thinking and talking about MI. We think we have a good idea what MI looks like in various settings! The starting point for the development of the MITS was a simple question; how might we clearly and accurately describe motivational interviewing in a manner sufficient to incorporate what we believe to be all the essential and observable behaviours? To answer the question we first considered the descriptions provided by Drs William R. Miller and Stephen Rollnick in their various published texts and journal papers, together with those in the MISC, MITI and CLAMI instruments developed by Dr Theresa B. Moyers with Miller (and others) at The University of New Mexico Center on Alcoholism, Substance Abuse, and Addictions. We decided that we would take a different route by expanding the various definitions of high-quality practice to a long series of definitions, all of which described, in sufficient detail, one aspect of MI practice. The task proved harder than anticipated. As the definitions became concrete each was subjected to rigorous debate and testing - could it be observed in practice samples? Do different observers see the same things? After much reformulation we now believe that the current version in this booklet is sufficiently stable, for the moment, to be offered to colleagues for debate and further testing in real-world scenarios. As stories emerge we will review, refine and republish. In 2010 two of the authors facilitated a workshop during the MINT Forum in San Diego to discuss with colleagues an earlier version. This proved invaluable in the development of our ideas.

## A definition of MI practice

We define MI practice as:

- The observable performance of motivational interviewing, the practitioner's explanation of that performance, and the evidence in the explanation of the practitioner's knowledge and understanding of motivational interviewing.

MITS is designed solely to assess the practitioner's observable performance. The performance is regarded as the intentional utilisation and manifestation of the practitioner's knowledge and understanding of motivational interviewing.

It is the evaluation of MI practice (performance, explanation and evidence) that will be done in the MiCampus Certificate of MI Consistency. MITS is the instrument at the centre of that certification procedure.

## A definition of MI consistency

MITS is designed to assess the degree to which a practitioner's performance is MI-consistent. We define MI consistency as:

- The performance of motivational interviewing in a manner consistent, to a greater or lesser extent, with the ten target behaviours defined in MITS.

MI consistency is rarely a steady-state phenomenon. It is more likely to be observed as a fluid tendency. As such, its measurement requires a range of possible outcomes. The five standards below are the outcomes from assessing the practitioner's performance using MITS.

MI inconsistency is defined with reference to the target behaviours in MITS 2.1 as being, a) the polar opposite of MI-consistent practice, b) the absence of MI-consistent practice, or c) the inability to demonstrate MI-consistent practice.

## The definitions of five standards of MI consistency

- Standard 1<sup>Alpha</sup> The practitioner has demonstrated a very high degree of MI-consistent practice, with no or almost no discernible evidence of MI-inconsistency.
- Standard 1 The practitioner has demonstrated a substantial degree of MI-consistent practice, with little evidence of MI-inconsistency.
- Standard 2 The practitioner has demonstrated a moderate degree of MI-consistent practice, with partial evidence of MI-inconsistency.
- Standard 3 The practitioner has demonstrated a partial degree of MI-consistent practice, with moderate evidence of MI-inconsistency.
- Standard 4 The practitioner has demonstrated no or almost no significant degree of MI-consistency.

Standard 1<sup>Alpha</sup> is usually associated with extensive training and ongoing practice development coaching. It is regarded as approximating to the level of proficiency required to participate as a practitioner/therapist in a research trial.



Standard 1 is usually associated with extensive training and ongoing practice development coaching.

Standard 2 is usually associated with an insufficiency of ongoing practice development coaching following basic training.

Standard 3 is usually associated with an insufficiency of basic training and an absence of ongoing practice development coaching.

Standard 4 is usually associated with an absence of basic training and/or practice development coaching. It suggests a comprehensive lack of understanding of the nature of motivational interviewing and an attendant lack of MI skilfulness.



## How to use MITS

MITS does not make the case for motivational interviewing. Neither does it explain its origins, rationale or nature. MITS describes MI as it will appear to the observer when practised by highly competent practitioners. The description of MI in MITS may seem fairly straightforward and obvious or on the other hand, rather dense and puzzling. The reaction of the reader/user may depend on previous exposure to MI or similar communication and counselling methods. At the moment, it is too early to draw conclusions as to the necessary prerequisites for using MITS competently to scrutinise practice. We are gathering experience during 2012-13.

It seems a reasonable assumption that any person largely familiar with motivational interviewing will find it fairly easy to understand MITS and to use it without difficulty. It may prove to be the case that people who are not practitioners but who have experience of coding practice, will use MITS *most* effectively, while practitioners assessing their own samples will use it *least* effectively.

When using MITS it is likely that greater accuracy will be achieved when observations are not distorted by judgements as to how the practitioner under scrutiny should have conducted the consultation differently. The primary use of MITS is for assessing what was done, not what might have been done differently. The secondary use is for the purpose of practice development coaching.

Please take time to become completely familiar with MITS before using it. The components of MITS are:

- The ten targets in the scheme (pages 12-21)
- The definitions of practice, MI consistency, and the five practice standards generated from MITS (pages 7-8)
- The scoring procedure for scoring the targets and arriving at the apparent standard of MI consistency (pages 22)
- The tables for guiding the scoring procedure (pages 23-26)

## Preparing practice materials before using MITS

MITS requires a practice sample set of recordings and/or transcripts. Here are our recommendations and suggestions for the practice sample set.

The practice sample set should be composed of either digital audio or digital video recordings, together with transcripts of the recordings. However, recordings may be used without transcripts. Similarly, transcripts may be used without the originating recordings but it will not be as easy to gain a full appreciation of the practice under scrutiny. In short, having either may suffice but having *both* may be best. The recordings and/or transcripts should be of complete individual MI sessions, with no more than six actual patients/clients. If possible, the same patient/client should appear in no more than two of the samples.

An individual sample should have no more than three people present and speaking: the practitioner, the patient/client, and an accompanying friend or family member. It is not recommended that more than one practitioner is present and party to the conversation.

The conversation in each practice sample should have at least one obvious behaviour change target, focal problem or issue for discussion.

A practice sample might include ~~real-play~~conversations specifically contrived for the purpose of assessment and/or coaching; for example, with actors, family, friends or colleagues. Similarly, samples of simulated, role-playing sessions might be included.

Each sample recording should be of a complete conversation - one where the start and end are evident. The quality of recorded speech should be good enough to hear clearly every word spoken by all parties to the conversation. Poor sound quality may result in an inconsistent transcription.

The practice samples together should constitute a minimum of 30 minutes and a maximum of 45 minutes. Practitioners working in settings with shorter consultation times might use up to six recordings, providing that, in total, these are a minimum of 30 minutes. It is acceptable for the practice sample set to contain just one sample of 30 minutes. However, in this circumstance it might be more difficult for the practitioner to demonstrate all ten target behaviours.

The table below repeats this guidance:

| <b>Practice sample set: Recommendations</b> |  |   |
|---|--|---|
| Number of samples in practice sample set    | Minimum length of an individual sample | Maximum total length of practice sample set |
| 1   | 30 minutes                             | 45 minutes                                  |
| 2   | 15 minutes                             |   |
| 3   | 10 minutes                             |   |
| 4   | 8 minutes                              |   |
| 5   | 6 minutes                              |   |
| 6   | 5 minutes                              |   |

## Transcripts

We have decided not to offer guidance on the preparation of transcripts. In view of the time and effort required to transcribe recordings with sufficient accuracy, most practitioners and coaches regard transcripts as desirable, though not essential. The advantage of a good transcript is that coach and practitioner may discuss with greater ease the conversation's precise detail. The circumstances and resources available will determine the decision to use or not.

## Observing and assessing the practice sample set

Before scoring the MITS, the task is to gain a thorough impression of the practitioner's work from observing the practice sample set. The governing question for the MITS user is; taking the practice sample set as a whole, to what extent is the participant's practice judged to be approaching or retreating from each target in the scheme? How close to the target description is the practitioner's performance?

To gain the fullest impression of the practice under scrutiny, all the samples in the

practice sample set should be observed/read together, one after the other. It is suggested that the user does this without stopping - as if she/he were a fly on the wall. Having done this, the user may wish to repeat the task, more slowly, while making notes.

The MITS is not concerned with counting specific behaviours. It is designed to give structure to the holistic impression gained by the user, having observed the practice sample set.

The description of the ten target behaviours is on the following pages.

## Target 1: Activity Emphasis

SUMMARY | Target 1 describes a flexible framework of three primary activities within which the other target behaviours may be practised. The practitioner shifts between activities and all that each activity requires. In any segment of a conversation this target addresses the question, *At this point, which activity will best serve the general strategic goal of increasing the likelihood of movement towards change?*

|                        |   |
|------------------------|---|
| DEFINITION             | The practitioner gives emphasis to an <u>activity</u> fitting to the <u>prevailing task</u> and <u>demonstrates a capacity</u> to change activity, when <u>appropriate</u> , to maintain helpfulness.   |
| PRIMARY ELABORATIONS   | <p><u>activity</u>: the schema has three activities . <u>Considering</u>, <u>Discussing</u> and <u>Advocating</u> . in each of which the conversational <del>ambience</del> varies. The practitioner maintains <u>navigation</u> in all three activities.</p> <p><u>prevailing task</u>: at a particular instance in the conversation, that task which is most likely to assist in exploring and resolving the focal predicament, and/or increasing readiness for change.</p> <p><u>demonstrates a capacity</u>: such demonstration becomes redundant in conversations where it is not appropriate to change activity.</p> <p><u>appropriate</u>: the practitioner demonstrates a capacity to change activity swiftly and effectively when the greater advantage of another activity becomes apparent.</p>  |
| SECONDARY ELABORATIONS | <p><u>Considering</u>: the practitioner actively listens and asks searching questions in an effort to better appreciate the nature of the predicament that forms the focus of the conversation. The prevailing task is one of thoughtful consideration, with the person largely to the fore and contributing the content.</p> <p><u>Discussing</u>: the practitioner and person exchange thoughts, feelings, ideas, etc. The prevailing task is one of building mutual appreciation of the nature and resolution of the predicament, with both parties contributing equally to the conversation. The practitioner adopts a largely evocative approach.</p> <p><u>Advocating</u>: the practitioner provides information and/or advice in an effort to assist the person in forming a considered opinion as to the preferred course of action. The prevailing task is one of utilising professional knowledge and judgement (expertise), with the practitioner largely to the fore and contributing the content.</p> <p><u>Navigation</u>: is defined in Target 7, below.</p> |

## Target 2: Posture

**SUMMARY** | Target 2 describes the preferred manner in which the practitioner should conduct her/himself at all times. It is an unchanging way of being with the person, resulting from a set of attitudes adopted and maintained for the challenge of productive engagement, with the intention ultimately of proving helpful for the person. This posture is consistent with enhancing effectiveness, common decency and, above all, doing no harm.

|                            |  |
|----------------------------|--|
| <p><b>DEFINITION</b></p>   | <p>The practitioner gives evidence of <u>being</u> compassionate, courteous, respectful, considerate, serious, caring and friendly. The practitioner acts as a <u>benevolent witness to change</u>.</p>  |
| <p><b>ELABORATIONS</b></p> | <p><u>being</u>: these adjectives may be regarded as aspects of a general attitude, sometimes to the fore, at other times less prominent.</p> <p><u>benevolent witness to change</u>: this expression is an attempt to capture the essence of what is meant by posture. It is intended to suggest a compassionate way of being, in which the practitioner conveys acceptance and abiding confidence in the capacity of the person to resolve the difficulties under discussion, and willingness to attend the process, as appropriate.</p> |

Target 3 is on the next page

### Target 3: Empathy

SUMMARY | Target 3 describes the core skills of discriminating empathic reflection. Its employment has many purposes in MI including, achieving and maintaining harmonious relations (rapprochement), steering the course of the conversation, and building the case for change.

|              |   |
|--------------|---|
| DEFINITION   | The practitioner <u>attempts</u> to demonstrate accurate understanding of the person's thoughts and feelings through the use of <u>reflective statements</u> . The practitioner appears to be genuinely curious about the person and what s/he has to say.  |
| ELABORATIONS | <p><u>attempts</u>: the practitioner's attempts to offer accurate reflections are prompted by her/his apparent respectful curiosity regarding all matters germane to the change target and/or focal problem. The accuracy and/or frequency may vary but it is the sense of <u>striving to understand</u> that is here more important.</p> <p><u>reflective statements</u>: in <i>exceptional</i> circumstances, the common understanding of a reflective statement may be broadened to include an utterance that appears to be <u>hypothesis testing</u> even when the practitioner's vernacular style apparently transforms a statement into a question. The practitioner's apparent intentions and the person's response should be a consideration.</p> |

Target 4 is on the next page

## Target 4: Collaboration

SUMMARY | Target 4 describes the sense of purposeful collaboration, of which all parties to the conversation become aware. It should be evident from both the practitioner's and the person's speech, and be the enduring impression of the observer.

|              |   |
|--------------|---|
| DEFINITION   | The practitioner fosters a collaborative <u>ambience</u> in the conversation and encourages the person to articulate her/his ideas so that these are placed at the centre of the conversation. Any decisions are reached with a sense of <u>purposeful partnership</u> .  |
| ELABORATIONS | <p><u>ambience</u>: a dynamic feeling, mood or quality of teamwork and partnership, either lasting throughout or existing in parts of the conversation, as appropriate. The practitioner is never impatient and appears able to exercise self-restraint.</p> <p><u>purposeful partnership</u>: practical cooperation focussed toward mutually agreed goals.</p> |

Target 5 is on the next page

## Target 5: Independence

**SUMMARY** | Target 5 describes a foundation aspect of the relationship, in which the practitioner works to establish, legitimise and maintain recognition of the person's independence with regard to all matters pertaining to the focal predicament.

|                           |  |
|---------------------------|--|
| <p><b>DEFINITION</b></p>  | <p>The practitioner is encouraging, supportive and accepting of the person's independence. The practitioner <u>seeks to enhance</u> the person's sense of control and freedom of choice.</p>   |
| <p><b>ELABORATION</b></p> | <p><u>seeks to enhance</u>: the practitioner takes every opportunity to encourage the person to accept responsibility for decision-making - to see themselves as occupying the driving seat or holding the conductor's baton. At the same time the practitioner emphasises her/his own role principally as being in the service of the person. In other words, the practitioner works to correct the customary power relations imbalance in such transactions.</p> |

Target 6 is on the next page



## Target 6: Evocation

**SUMMARY** | Target 6 describes the particular skills and tactics for assisting the person to articulate the arguments in favour of change and ideas about how change could be achieved. An evocative style should be maintained throughout with no evidence of the practitioner attempting to overtly persuade the person.

|                     |   |
|---------------------|---|
| <p>DEFINITION</p>   | <p>The practitioner <u>encourages</u> the person to articulate her/his own <u>motivations</u> for change, rather than attempting to inform, advise or direct the person. When the person articulates her/his own motivations for change and ideas about how change might happen, these are <u>accepted</u> by the practitioner.</p>   |
| <p>ELABORATIONS</p> | <p><u>encourages</u>: the practitioner offers well-crafted evocative questions, reflections, affirmations and summaries to assist the person in articulating and consolidating change talk. This is both an active and reactive process.</p> <p><u>motivations</u>: in this context, the person's utterances include expression of the DARN &amp; CAT components: reasons, desires, needs, abilities, commitment, activation and taking steps (some or all of these components).</p> <p><u>accepted</u>: the practitioner offers affirmations to encourage and consolidate change talk.</p> |

Target 7 is on the next page

## Target 7: Navigation

**SUMMARY** | Target 7 describes the skills of pushing forward the conversation in a promising and ultimately productive direction, taking the person along as a willing collaborator, and without causing things to fall apart - disengagement. The absence or presence of particular responses from the person is included as an indicator for how well the practitioner is doing.

### DEFINITION

The practitioner navigates the conversation so that discussion of the behaviour change target and/or focal problem is maintained largely at the centre, and does so without causing a discordant ambience or resistant behaviour from the person.

### ELABORATIONS

navigates: the practitioner largely determines the direction, focus and general content of the conversation by the deployment of conversational devices or tactics. The practitioner is not only aware of a general direction for the conversation but also of the more precarious and safer routes, and how best to traverse these. The word navigation is used to include both the notion of position and course

discordant ambience: an atmosphere of distrust, conflict, friction, fear, anger or reticence . any one, some or all of these.

resistant behaviour: opposition in apparent feeling, speech or behaviour towards the practitioner and/or her/his organisation. The expression by the person of antagonism, disagreement, hostility or unfriendliness toward the practitioner. Such behaviour may be sustained or transient. Sustain Talk is not regarded as resistant behaviour.

Target 8 is on the next page

## Target 8: Contrasts

**SUMMARY** | Target 8 describes the skills of causing the person to consider apparent inconsistencies between the conversation's focal problem and her/his goals, aspirations, beliefs or values, without evoking a sense of despondency or hopelessness. It is often in the desire to correct such inconsistencies that motivation for change is to be found.

### DEFINITION

The practitioner attempts to evoke, highlight and explore the ways in which the focal problem is inconsistent with the person's goals, aspirations, beliefs or values. This is done in such a way that the person's sense of self-worth is maintained or enhanced.

### ELABORATION

attempts to evoke, highlight and explore: where there may be an apparent advantage to be gained in developing discrepancy, the practitioner articulates, with measured restraint, the possible contradictions in the person's predicament. Such utterances are made more often in a reflective rather than an interrogative manner and are intended to evoke in the person an appreciation of the gains to be made in change.

Target 9 is on the next page

## Target 9: Structured Brief Tactics

SUMMARY | Target 9 is concerned with the skills of employing, intermittently, particular conversational ~~set~~ routines that, when done well, greatly assist in clarifying, for example; the topics for discussion, the possible goals of change, the person's state of readiness, factors inhibiting and facilitating change, or the route toward declared goals. Such routines, by their design, provide ~~short-cuts~~

|              |  |
|--------------|--|
| DEFINITION   | When the practitioner uses <u>structured brief tactics</u> s/he does so with <u>skilfulness</u> .  |
| ELABORATIONS | <p><u>structured brief tactics</u>: refers to conversational devices or routines such as, <del>agenda-setting/matching</del> <del>importance/confidence</del> <del>typical day</del> <del>ask-share-ask</del> <del>two possible futures</del> <del>goal-setting/route planning</del> etc.</p> <p><u>skilfulness</u>: with regard to a particular tactic, having good knowledge of its purpose, demonstrating practical ability in its application, and timeliness in its employment. The word <del>tactics</del> is used to describe the arrangement of conversational procedure with a view to particular ends.</p> |

Target 10 is on the next page

## Target 10: Information & Advice

SUMMARY | Target 10 is concerned with the skills of giving information and advice with effect; that is, in such a manner that the person most likely will at least consider it, if not act upon it.

|             |  |
|-------------|--|
| DEFINITION  | When the practitioner gives information and/or advice s/he does so with <u>skilfulness</u> .   |
| ELABORATION | <u>skilfulness</u> : prior to giving information the practitioner either expressly asks for permission, or offers information/advice in a permissive, neutral manner. The practitioner conveys information/advice with clarity. Advice is offered with options, where possible. The practitioner discusses the person's understanding and the meaning or value she/he attaches to the information and/or advice. The information and/or advice offered indicate that the practitioner has good knowledge of her/his subject. |

## The scoring and calculating procedure

The tables on the following pages have been designed to make the assessment procedure as simple as possible. Guidance is offered below for their use.

### Scoring the practice sample set using MITS

TABLE 1: TARGET SCORE OPTIONS gives the five target score options, and their definitions, for each of the targets. The adjectives in each definition are further clarified using suitable synonyms.

The user must select the assessment definition, and the associated score, that best describes her/his holistic impression of the extent to which the individual target behaviour is present in the practice sample set, as a whole.

The score selected from TABLE 1 is then entered in the appropriate row in TABLE 2: TARGET SCORE & OUTCOME MATRIX.

This procedure is repeated for the seven obligatory target behaviours in the scheme. The user may then score any or all of the three discretionary targets, if there is observable evidence. Note that there is no zero value for the discretionary targets, since if there is no evidence these need not be scored.

When the targets have been scored, at the bottom of TABLE 2 the user calculates the sum total, and then the mean. The mean score determines the standard.

The user then ascertains the standard with TABLE 3: CALCULATING THE STANDARD.

MITS may be used for a one-time assessment or repeatedly, over a period of time, with samples of the same practitioner's work. The repeated use of MITS is recommended to gain an appreciation of apparent changes in the profile of practitioner's work.

**Table 1 | Target Score Options**

| <b>Assessment <sup>(1)</sup></b>  |  | <b>Score</b> |
|---|--|--------------|
| There is <b>no evidence or almost no evidence</b> to support the target definition <sup>(2) (7)</sup> |  | <b>0</b>     |
| The evidence <b>partly</b> supports the target definition <sup>(3)</sup>                              |  | <b>1</b>     |
| The evidence <b>moderately</b> supports the target definition <sup>(4)</sup>                          |  | <b>2</b>     |
| The evidence <b>substantially</b> supports the target definition <sup>(5)</sup>                       |  | <b>3</b>     |
| The evidence <b>completely or almost completely</b> supports the target definition <sup>(6) (7)</sup> |  | <b>4</b>     |
| <b>Assessment</b> <sup>(1)</sup>  | The evidence in the practice sample is assessed <u>impressionistically</u> and <u>holistically</u> on relevant matters (in any order) of quality, quantity, frequency and appropriateness. |              |
| <b>No evidence</b> <sup>(2)</sup>   | Definition: <u>in no part; to no degree</u><br>Synonyms: not any, nothing, not a bit, not a hint.  |              |
| <b>Partly</b> <sup>(3)</sup>  | Definition: <u>in part; to some degree</u><br>Synonyms: after a fashion, appreciably, at the least, in a manner, in a way, in small part, in some measure, incompletely, partially.        |              |
| <b>Moderately</b> <sup>(4)</sup>  | Definition: <u>to some extent; to a mainly sufficient degree</u><br>Synonyms: reasonably well, somewhat, middling, passably, acceptably, nominally, somewhat, tolerably.                   |              |
| <b>Substantially</b> <sup>(5)</sup>   | Definition: <u>to a great extent; to a large degree</u><br>Synonyms: considerably, more than adequately, amply, largely, mainly, mostly, on the whole.                                     |              |
| <b>Completely</b> <sup>(6)</sup>  | Definition: <u>to the highest degree; with everything necessary</u><br>Synonyms: to the full or entire extent, wholly, entirely, totally, all, altogether, comprehensively, exhaustively.  |              |
| <b>Almost</b> <sup>(7)</sup>  | Definition: <u>for the most part; very nearly all</u><br>Synonyms: all but complete, on the verge of, within sight of, not quite, within an ace of.  |              |

| Table 2   Target Score & Outcome Matrix |   |                            |          |          |          |                      |
|---|---|----------------------------|----------|----------|----------|----------------------|
| Practitioner ID   Name                  |   | Assessment ID   Date       |          |          |          |                      |
| Target <sup>(1)</sup>                   |   | Target Score (See Table 1) |          |          |          |                      |
| Obligatory                              | Discretionary   |                            |          |          |          |                      |
| 1   Activity Emphasis                   |   | 0   1   2   3   4          |          |          |          |                      |
| 2   Posture                             |   | 0   1   2   3   4          |          |          |          |                      |
| 3   Empathy                             |   | 0   1   2   3   4          |          |          |          |                      |
| 4   Collaboration                       |   | 0   1   2   3   4          |          |          |          |                      |
| 5   Evocation                           |   | 0   1   2   3   4          |          |          |          |                      |
| 6   Independence                        |   | 0   1   2   3   4          |          |          |          |                      |
| 7   Navigation                          |   | 0   1   2   3   4          |          |          |          |                      |
|   | 8   Contrasts   | 1   2   3   4              |          |          |          |                      |
|   | 9   Structured Brief Tactics  | 1   2   3   4              |          |          |          |                      |
|   | 10   Information & Advice   | 1   2   3   4              |          |          |          |                      |
| <b>Total Score</b> <sup>(2)</sup>       |   |                            |          |          |          |                      |
| <b>Mean Score</b> <sup>(2)</sup>        |   |                            |          |          |          |                      |
| <b>Standard</b> <sup>(3)</sup>          |   | <b>4</b>                   | <b>3</b> | <b>2</b> | <b>1</b> | <b>1<sup>A</sup></b> |
| <b><sup>(1)</sup> Target</b>            | Obligatory Targets 1-7 <u>must</u> be scored. Discretionary Targets 8-10 <u>should</u> be scored if the behaviour is observed. Targets 8-10 have no zero value. |                            |          |          |          |                      |
| <b><sup>(2)</sup> Score</b>             | <u>Calculate</u> first the sum total, then the mean. The mean score determines the standard using Table 3.  |                            |          |          |          |                      |
| <b><sup>(3)</sup> Standard</b>          | See Table 3.  |                            |          |          |          |                      |



**Table 3 | Calculating the Standard**

| <b>Mean Scores <sup>(1)</sup></b> | <b>Definitions</b>   | <b>Standard</b>       |
|-----------------------------------|--|-----------------------|
| 0.00 - 0.99                       | The practitioner has demonstrated <b>no or almost no</b> significant degree of MI-consistency  | <b>4</b>              |
| 1.00 - 1.99                       | The practitioner has demonstrated a <b>partial</b> degree of MI-consistent practice, with moderate evidence of MI-inconsistency  | <b>3</b>              |
| 2.00 - 2.99                       | The practitioner has demonstrated a <b>moderate</b> degree of MI-consistent practice, with partial evidence of MI-inconsistency  | <b>2</b>              |
| 3.00 - 3.99                       | The practitioner has demonstrated a <b>substantial</b> degree of MI-consistent practice, with little evidence of MI-inconsistency  | <b>1</b>              |
| 4.00                              | The practitioner has demonstrated a <b>very high</b> degree of MI-consistent practice, with no or almost no discernible evidence of MI-inconsistency   | <b>1 <u>Alpha</u></b> |
| <b><sup>(1)</sup> Mean Scores</b> | <p>Each mean score range is set so that the score within the range will be consistent with the adjectives describing the target score options and the definitions.</p> <p>There are no <del>P</del>ass or <del>F</del>ail outcomes, only the five standards of MI consistency.</p> |                       |



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