

Level 2 Award in Supporting Behaviour Change (Health and Wellbeing)

February 2019

**14 Guided Learning Hours (GLH)
16 Total Qualification Time (TQT)**

Ofqual Qualification Number: 603/3149/5

Description:

The objective of this qualification is to provide the learner with the knowledge, confidence and skills to support individuals who are thinking of making a health behaviour change. It will enable learners to understand the importance of effective communication in building rapport with individuals.

It will also help learners to understand how to work with individuals to increase their motivation to make a behaviour change and explore the factors that hinder and facilitate that change. Learners will know how to engage with individuals for the purpose of very brief interventions such as Making Every Contact Count (MECC) and develop an action plan with individuals to make and sustain behaviour change.

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Level 2 Award in Supporting Behaviour Change

Total Qualification Time: 16

Guided Learning Hours: 14

Unit Level: 2

Unit reference: T/616/9705

Summary of Learning Outcomes

To achieve this qualification a candidate must:

- 1 *Understand how to communicate effectively and build rapport with an individual, with reference to:***
 - 1.1 key elements of listening skills and their application to effective communication and rapport building
 - 1.2 ways of checking whether an individual has understood a communication and how to address any misunderstandings
 - 1.3 ways of agreeing an agenda for a behaviour change conversation with a client
 - 1.4 the importance of respecting and acknowledging an individual's priorities in relation to their health and wellbeing and their right to refuse advice and information
 - 1.5 what should be avoided in behaviour change conversations

- 2 *Understand what can impact on behaviour change and how to explore these factors with an individual, with reference to:***
 - 2.1 models of behaviour change
 - 2.2 ways in which models of behaviour change can be used to support health behaviour change conversations
 - 2.3 reflective and automatic motivation
 - 2.4 barriers which can prevent behaviour change

- 3 *Understand how an individual can be supported in thinking about making a lifestyle or health behaviour change, with reference to:***
 - 3.1 the key components of very brief interventions or brief interventions
 - 3.2 how to present information about what you or your service can provide and in ways appropriate to an individual's needs
 - 3.3 what self-efficacy is and how to support a client to build their self-efficacy
 - 3.4 how Importance and Confidence scales can support behaviour change conversations

4 Understand how to support an individual to plan for a behaviour change,
with reference to:

- 4.1 the components of a SMART goal and how to ensure that the goal is effective.
- 4.2 the ways of evaluating a SMART goal
- 4.3 the methods of assessing and monitoring an individual's current health behaviour
- 4.4 why it is important to record information and review it before and after behaviour change

Candidates successfully achieving this qualification will have knowledge and understanding of facts, procedures and ideas around supporting behaviour change to complete well-defined tasks and address straight-forward problems. They will be able to interpret relevant information and ideas and will be aware of a range of information that is relevant to supporting behaviour change.

Indicative Content

1 Understand how to communicate effectively and build rapport with an individual

- 1.1 *Key elements of listening skills and their application to effective communication and rapport building:* **Elements;** open questions, affirmations, reflective listening and summarising. **Application to effective communication and rapport building;** engaging manner, listening to what the speaker means as well as what is being said, asking relevant open questions, making statements that acknowledge the individual's strengths, successes, and efforts to make a behaviour change, giving an account of what was heard in own words, seeking verification concerning accuracy, showing empathy and being non-judgmental.
- 1.2 *Checking whether an individual has understood a communication and how to address any misunderstandings:* using reflections and allowing the individual to respond; observing body language and facial expressions; asking the individual and address misunderstandings.
- 1.3 *How to agree an agenda for a behaviour change conversation with a client:* ask open questions to identify issues/problems individual would like to discuss, declare any additional items that were set prior to the meeting, agree with individual what the priorities and will be discussed at current meeting.
- 1.4 *The importance of respecting and acknowledging an individual's priorities in relation to their health and wellbeing and their right to refuse advice and information:* **Why respect and acknowledgement is important;** part of an enabling relationship, promotes choice, only way to achieve an effective outcome. **Reasons why individuals may refuse advice and information;** not ready to change, fear of failure, feeling of invulnerability; need to create opportunities for the individuals to revisit.
- 1.5 *What should be avoided in behaviour change conversations:* arguing or correcting, providing unsolicited advice, confronting a client on failure to act, emphasizing client's feelings of powerlessness or lack of control, using own personal experiences.

2 Understand what can impact on behaviour change and how to explore these factors with an individual

- 2.1 *Different models of behaviour change:* components of various models such as COM-B; Theory of Planned Behaviour; Theory of Reasoned Action; Health Belief Model.
- 2.2 *Ways in which models of behaviour change can be used to support health behaviour change conversations:* any TWO from sharing with an individual to raising awareness of their motivation; exploring and building self-efficacy; exploring and building on feelings of control; discussing individuals' views on social norms and their impact; exploring the individual's habits and

opportunities to make changes; exploring beliefs and attitudes to change; exploring enablers and opportunities; exploring capabilities to make changes; exploring process and possible outcomes including possibility of relapse.

2.3 *Reflective and Automatic motivation:* **Reflective Motivation:** Beliefs about what is good and bad, conscious intentions, decisions and plans; **Automatic Motivation:** Emotional responses, desires and habits resulting from associative learning and physiological states.

2.4 *Barriers which can prevent behaviour change:* social determinants of health including peer network, family, education, access, equality, physical disability, caring commitments, money; desire to change more than one behaviour; triggers.

3 **Understand how an individual can be supported in thinking about making a lifestyle or health behaviour change**

3.1 *The key components of very brief interventions or brief interventions:* *very brief intervention:* Ask, Advise, Assist; permission should be obtained before advice is given and the individual asked about their existing knowledge of the topic; the intervention should be tailored to the needs of the individual; *brief intervention:* Ask, Advise, Assess, Assist; acquire permission, check existing knowledge and tailor advice to the needs of the individual; assess whether the individual is willing to make a behaviour change; assistance is tailored to the needs of the individual.

3.2 *How to present information accurately about what you or your service can provide and in ways appropriate to an individual's needs:* own level of expertise; whether referral/signposting reflects expressed need of individual; appropriateness of the service and taking into account the national Accessible Information Standard (AIS) guidelines.

3.3 *What self-efficacy is and how to support a client to build their self- efficacy:* **Self-efficacy;** a person's belief in their ability to succeed in specific situations or accomplish a task. **How to support a client to build their self-efficacy;** recognise similar or smaller achievements; explore the people and things that can help you make that change.

3.4 *Importance and confidence scales:* can be used as a tool to either confirm a high level of confidence or to improve the score on the scale by exploring what would need to change for them to report a higher score, reflecting and highlighting personal strengths and goals and brainstorming solutions to any barriers.

4 **Understand how to support an individual with a lifestyle or behaviour change implementation plan**

4.1 *Components of a SMART goal and how to ensure it is effective:* **Components:** Specific, Measurable, Achievable, Realistic and Timed. **Ensure that it is effective:** the goal must not be too difficult or easy, short-term goals are more effective than long-term goals, rewards, clear actions defined, desired outcomes acknowledged, importance of ownership of the plan, if-then plans.

- 4.2 *Ways to evaluate a SMART goal:* follow up conversation or appointment; assess whether the goal was SMART and how to adjust it and consider any barriers and facilitators; ensure that own responsibilities are fulfilled; plan a follow-up meeting; determine whether further action by self is required; consider what incentives may be effective; consider agreeing a commitment contract.
- 4.3 *Methods of assessing and monitoring an individual's current health behaviour:* wellbeing scales, health behaviour questionnaire, behaviour change diary: such as smoking diary, alcohol diary, smoking diary, food diary or physical activity diary.
- 4.4 *Importance of recording information and reviewing it before and after behaviour change:* **Before;** Client can gain understanding of their behaviour, what triggers it and how it makes them feel; **After:** client can compare with before, if they have achieved their SMART goal and impact of change.

Assessment

The knowledge and understanding of the candidates will be assessed by a multiple-choice examination. The multiple choice examination is provided by RSPH and consists of 35 questions. A candidate who is able to satisfy the learning outcomes will **achieve** a score of at least 24 out of 35 in the examination. Strong performance in some areas of the qualification content may compensate for poorer performance in other areas. The duration of the examination is 70 minutes

Progression

Learners who achieve this qualification can progress to the following qualifications:

RSPH Level 2 Award in Understanding Health Improvement
RSPH Level 2 Award in Improving the Public's Health

Recommended prior learning

There are no recommended prior learning requirements for this qualification.

Centre Guidance

Useful websites

COM-B article: <http://www.thebsa.org.uk/wp-content/uploads/2016/03/FB-JC-article.pdf>

Health Trainer Handbook: <http://healthtrainersengland.com/wp-content/uploads/2014/05/NHSHealthTrainerHandbook.pdf>

Health Education England Making Every Contact Count training: <https://www.e-lfh.org.uk/programmes/making-every-contact-count/>

Nursing Article: <https://www.nursingtimes.net/clinical-archive/motivational-interviewing-1-background-principles-and-application-in-healthcare/5018759.article>

Special Assessment Needs

Centres that have candidates with special assessment needs should consult The Society's *Regulations and Guidance for Candidates with Special Assessment Needs*; this is available from The Society and The Society's web site (www.rsph.org.uk).

Mapping to National Occupational Standards

The qualification has been mapped to the following National Occupational Standards of Skills for Health:

HT2 Communicate with individuals about promoting their health and wellbeing

HT3 Enable individuals to change their behaviour to improve their own health and wellbeing

Further details of these National Occupational Standards can be obtained from RSPH Qualifications.

How to apply to offer this qualification

To become an approved centre to offer this qualification, please complete the 'Centre Application Form' which can be found on our website in the Qualifications and Training section. If you are already an approved centre, please complete the 'Add an additional qualification form' which can be downloaded from the Centre area on the website www.rsph.org.uk. Please ensure that you include details of your quality assurance procedures. You will need to attach a CV to this application. Please contact the Qualifications Department at: centreapproval@rsph.org.uk if you need any assistance.

Registration of Candidates

Candidate registration forms can be downloaded from the Centre Area of the Qualifications section of the RSPH web-site (www.rsph.org.uk).

Recommended Qualifications and Experience of Tutors

The Society would expect that tutors have teaching experience and a qualification in a relevant subject area, but recognises that experienced teachers can often compensate for a lack of initial subject knowledge, or experienced practitioners for a lack of teaching experience.

Centres should be registered with RSPH.

Contact Details

Any enquiries about this qualification should be made to:

The Qualifications Department, Royal
Society for Public Health, John Snow
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