

## Patient Engagement Self-Assessment Tool

This tool is meant to gather more specific data about your use of Patient Engagement (PE) Intentions and Skills which rely heavily on Motivational Interviewing (MI) techniques.

For questions 1 through 12, please choose your response by indicating which most aligns with you by underlining it or changing it to another color.

- 1.) When speaking to another person about behavior change, I believe they have at least some of the knowledge they need to be successful.  
**AGREE or DISAGREE**
- 2.) I know what is best when it comes to what people should change and how they should do it, so I rarely ask for their input.  
**AGREE or DISAGREE**
- 3.) I think open-ended questions are more helpful than close-ended questions, even if it means the other person talks more than me during a conversation.  
**AGREE or DISAGREE**
- 4.) When I hear someone talk about why they should continue a risky behavior, it means they don't want to change it.  
**AGREE or DISAGREE**
- 5.) I consistently use reflective listening to check my understanding of what I hear others say when speaking to them.  
**AGREE or DISAGREE**
- 6.) Reflections aren't important because the person knows what they just said.  
**AGREE or DISAGREE**
- 7.) I believe that affirming the good qualities within another person is more helpful than pointing out the not so good things.  
**AGREE or DISAGREE**
- 8.) I can hear change talk, even if it is mixed in with other things like sustain talk or discord.  
**AGREE or DISAGREE**
- 9.) If someone gets upset with me during a conversation about behavior change, I do not know how to figure out what role I may have played in those feelings.  
**AGREE or DISAGREE**
- 10.) If someone is "on the fence" about change, I let them know this is a very common part of the behavior change process for many people.  
**AGREE or DISAGREE**

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11.) I consistently use summaries to gather up the change talk and strengths that they have shared during our conversation.

**AGREE or DISAGREE**

12.) If I give someone ideas about how they could change their behavior, and they don't take them, it is because they are not really that concerned about this behavior.

**AGREE or DISAGREE**

In your opinion, how well do your conversations with patients reflect the recommended PE Intentions and Skills?

Please underline or change the color of the closest match/answer below:

**Fundamentally inconsistent** which is the absence of PE Intentions and Skills. The conversation has no indicators representing a client-centered approach.

**Generally inconsistent** which is the near absence of PE Intentions and Skills. May intentionally or unintentionally hit some elements of PE, yet the conversation does not fully represent a client-centered approach.

**Client centered/neutral** which is the use of many PE Intentions and Skills, but this does not occur consistently. Notable attempts to align conversations with PE Intentions and Skills occur, either intentionally or unintentionally, and the conversation remains focused on the client even though there is little effort to elicit and strengthen change talk.

**Competently** which includes being client centered while consistently using PE Intentions and Skills. Intentionally and purposefully focuses on and demonstrates PE Intentions and Skills. Takes some steps to elicit and strengthen change talk.

**Proficiently** which includes being client centered while continuously using PE Intentions and Skills. Expertly demonstrates advanced and skillful use of PE Intentions and Skills. Conversation embodies an empowering, forward moving approach that consistently elicits and strengthens change talk.

Note:

Above definitions adapted from Motivational Interviewing Competency Assessment (MICA).