

# Brief encounters

Training for primary healthcare professionals

Giving health professionals the skills to identify and provide support  
to those they encounter with relationship difficulties

## SUMMARY OF AN EVALUATION

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***A most useful if not the most useful course since training as a health visitor.***

***All health visitors should attend this course — invaluable.***

Brief Encounters is from  One Plus One  
Marriage & Partnership Research

# Brief encounters

## Who couples turn to when trouble strikes

Research reveals that British couples are very reluctant to seek marriage counselling when things start to go wrong in their relationship — in a recent survey only 2% said they would first go to a marriage counsellor. But many do turn to someone, often under the guise of a parenting problem: more often than not, a local health professional with whom they have routine contact, such as a GP or health visitor.

In fact, parents of children under five make more calls on their GP service than any other group, so health professionals are in a key position to support young parents at a critical time. However, they are often unsure if they have the time or skills to give support. This led One Plus One to develop its innovative Brief Encounters training for health professionals.

## Brief Encounters: training to support couples

Brief Encounters is designed to give professionals the skills and confidence to offer support to individuals and couples going through relationship difficulties. It was developed with the needs of both the professionals and of their clients in mind. It is based on a brief intervention framework designed to help participants recognise and respond supportively to relationship difficulties, particularly at critical times such as after the birth of a baby.

They learn to limit their involvement so that they can approach clients' problems without fear of getting in too deep or being unable to extricate themselves.

## Dissemination of Brief Encounters: One Plus One trainers and NHS tutors

Brief Encounters was developed and piloted with Department of Health funding in 1994 and launched as a three year project in 1995. It is a four-day course of eight sessions, usually run as two 2-day modules, accredited by the RCN Institute of Advanced Nursing Education, and endorsed by the CPHVA.

- A team of 12 freelance **One Plus One trainers** were trained in October 1995 to deliver the courses nationwide.
- To increase dissemination this team, led by One Plus One's Head of Training and her Assistant, later trained 30 Health Trust employees — mainly health visitors — as **NHS tutors** to teach Brief Encounters in their health authority areas.
  - Tutors and trainers were very positive about their training:

**"Looking back on the learning I feel I have gained new skills, had a chance to practice a new training model (and I like it very much), and have been challenged in my understanding of new ideas."**

### THE BRIEF ENCOUNTERS EVALUATION

The evaluation of the 3-year project by Prof Corney is based on the views of 212 Brief Encounters course participants, mainly health visitors, but also GPs, practice and district nurses, teachers, ministers and social workers who attended three open courses.

● They completed: a form after each session; a questionnaire at the end of the course; and one after six months, to find out if they were using their new skills.

● One Plus One team courses were evaluated separately from NHS tutor courses to see if training differed.

### ONE PLUS ONE TEAM COURSES EVALUATION

**All sessions were viewed extremely positively**

ALL the participants felt that the sessions were well designed, well organised and potentially relevant to professional practice; and that the tutors were well prepared, created a sympathetic learning environment, and encouraged participation.

Practically without exception, they felt they had clear aims and learning outcomes and that every session had improved their understanding.

Overall, they found them stimulating, useful and were very satisfied with them.

### Views at the end of the course were equally positive

The training was welcomed and recommended for other health professionals by every participant with a medical background. Many said they had already recommended it.

**"I feel as though I have benefited enormously."**

**"Gave me a chance to review my technique after years of visiting."**

**"a very 'rich' course providing much food for thought and practical experience to draw on in future."**

- Nearly all (97%) felt more confidence in themselves and their ability to support people with marital and relationship problems.

**"Before I have always avoided marital problems."**

**"I'm much more aware of signals — more importantly I have the confidence to tackle them."**

- Many said the course was the best they had been on.
- The majority said they would use the skills learned.  
**“I may intervene in conflicts I previously ignored and feel comfortable and confident about it.”**

#### Training welcomed for health visitors

All the medical participants agreed that BE was suitable for use in primary care.

**“Very much, especially because of the lack of agencies to refer people to and the stages we see clients at, i.e. new babies, dealing with couples.”**

**“Yes, most definitely because resources are so limited health professionals need such skills in order to offer ‘time bounded’ help and support”.**

**“We are usually the first port of call for all sorts of problems and we may be able to help the client resolve problems before they escalate.”**

- Nearly all (97%) said they would like further training; a refresher course or further counselling or couple work.

#### SIX MONTHS LATER

Overall views were as positive as those at the end of the course. Participants were using their skills in their work, and their confidence in dealing with clients’ relationship problems had increased. Many had learned the value of setting limits and boundaries; and that even if a solution was not always possible, giving clients time, attention and respect were valuable.

#### Wide use of Brief Encounters skills

- 96% of respondents felt the course had affected the way in which they worked.
  - 94% were using the BE framework to some extent; over half on a daily or weekly basis.
- Some said they did not use it as often as they would like due to time pressures, other roles and priorities, large caseloads, the setting and type of clients. Some said a refresher course would help improve their use.
- Most reported that they were more likely to ask questions about their clients’ relationships; while 72% said they were much more likely, and 23% slightly more likely, to respond to difficulties.
  - Many (85%) noted an increase in their confidence to use counselling skills.

**“I no longer feel out of my depth with relationship issues. I have the confidence to offer a Brief Encounter and realise its value.”**

#### Effect on workload

One concern is that exploring client relationship issues will increase workload. In fact, while some indicated that using the model and skills had led to a slight increase in workload, only 5% said it had markedly increased their workload, while just under a half indicated their workload had stayed the same

and 5% that it had decreased slightly.

- In fact, the majority (88%) felt they had learned to manage their time more effectively to some extent, and most (91%) felt more able to control their involvement in clients’ problems.

#### Brief Encounters skills useful in diverse cases

The BE framework was being used in many ways, clinically and in homes, with school pupils, engaged couples and first time parents. Cases included family break up, violent relationships, parenting problems, sexual problems, depression, termination and bereavement counselling; and physical problems such as asthma, diabetes, giving up smoking, losing weight.

Nearly half also said they used the model when offering support to colleagues, or in formal supervision.

#### Training still rated important for health visitors

Three quarters of respondents rated the training as either essential or very important for health visitors, and only 2% thought it not important.

Again, most would have liked further training — a refresher course (85%) and/or further training (73%).

#### Overall evaluation of One Plus One team courses

Importance of the course:

**“Probably the best course I have attended in recent years.”**

**“A most useful if not the most useful course since training as a health visitor. It was in every area absolutely appropriate. I felt I had been ‘given permission’ to address genuine needs.**

Confidence gained in supporting relationships:

**“BE gives you a basis on how to lay ground rules and progress with clients’ problems — instead of the never-ending circle of events.”**

**“Gives one far greater confidence to tackle problems in relationships and allowing clients hopefully to resolve their problems.”**

**“It gave me the confidence to offer a time limit to my interaction, to ‘hand back’ the problem to the client and to build on their strengths and ability to solve their own problem.”**

#### EVALUATION OF NHS TUTOR COURSES

Session and end of course evaluations were based on the views of 65 participants on the four courses from November 1997 to April 1998.

- As with the One Plus One team courses, the sessions were very positively received in terms of design, organisation, content, and standard of tutors.
- ALL participants felt they were potentially relevant to professional practice.

### Responses to the course overall were very positive

The evaluations were only slightly less positive than those for One Plus One team courses.

- In two courses (supervised by a One Plus One team member), views of the course were as good as those of the One Plus One team courses. ALL felt that the course had met their expectations, contributed to their professional development; increased their understanding of patients' relationship problems and confidence in taking them up; developed their skills; and felt it could be used in their work.

- All respondents from these two courses said they would recommend the course very much.

**"I felt I had gained a wealth of knowledge, which was easily understood. The Brief Encounters framework will be ever present in my mind. I feel I am better equipped to cope with clients' emotions and maybe anger. Thank you all so much."**

- Responses from the other two courses were slightly more mixed, and the overall results were mainly affected by one course run by tutors who had not attended an initial BE course. They had some difficulty in managing the group, some of whom were very experienced and more knowledgeable in some areas than the tutors. However, the majority on these two courses were still very positive and felt it had been extremely useful. All except one agreed that they could use learning from the course with their patients.

- ALL agreed the course was suitable for health visitors and most said they would like further training (only one person said they did not).

### SIX MONTHS LATER

Only the first course could be evaluated, since the other three fell within six months of the end of the project — 10 participants responded.

- They were still enthusiastic about the course and their responses were as positive as those at the six month evaluation of the One Plus One team courses.

- All said they were more likely to ask questions

about their clients' relationships and to respond to difficulties when these were revealed.

**"I feel more confident in my ability to work with relationship difficulties."**

**"Extremely useful, certainly made me structure interviews with clients and made me aware of cues when looking for underlying problems."**

- All except one used the BE model to some degree.

### Range of cases where Brief Encounters is used

BE skills were used in a range of cases, including relationship difficulties, postnatal problems, bereavement, supporting mothers and children, and stress management.

### Managing workload

Although five indicated that their workload had increased slightly, the rest reported no change. However, nine said that the course had enabled them to use their time more effectively.

### Training still rated important for health visitors

Similarly to those on the One Plus One team courses, four felt that BE training was essential, four that it was very important and the other two that it was fairly important. All said that they would like a refresher course.

### Overall evaluation of the NHS tutor courses

All felt enthusiastic about the training:

**"An excellent course giving me confidence to address issues I was unsure about before."**

**"Four days well spent — both in time and Trust money."**

**"A very valuable course. Has increased my understanding of relationships. Given me greater confidence in broaching the subject."**

**"Certainly one of the most helpful courses I have attended."**

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## CONCLUSIONS FROM THE INDEPENDENT EVALUATION

**"It can be seen that the Brief Encounters project has been a remarkable success."**

Prof Roslyn Corney, independent evaluator of Brief Encounters training.

- Courses run by One Plus One trainers were all positively received: the training was recommended for other health professionals; many noted that it was the best course they had been on; nearly all respondents felt more confident in their ability to support people with marital and relationship difficulties.

- The evaluations after six months were as positive as those at the end of the course and participants were using their skills in their work.

- The NHS tutor courses were also positively received — two courses received similar responses to those run by the One Plus One team, suggesting that NHS tutors can achieve as good an outcome, and problems can be overcome.

- Most would have liked further training, and while not all respondents had been able to set up and maintain peer supervision groups, some ongoing support or retraining will be necessary to maintain and develop Brief Encounters skills in the longterm.

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For further information on Brief Encounters training, or on the work of One Plus One, contact:  
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