**Brief Intervention Observation Sheet**

**Provider #:**

**Rater:**

**Date:**

***Did the Provider …***

|  |  |  |  |
| --- | --- | --- | --- |
| **(1)**  **Raise the subject** | **1)** Explain role and respectfully ask permission to have a discussion about alcohol/drug use | **Yes No** | **Comments** |
| **2)** Review patient’s alcohol/drug use patterns | **Yes No** |  |
| **(2)**  **Provide feedback** | **3)** Share the patient’s AUDIT/DAST scores and zones | **Yes No** |  |
| **4)** Review low-risk guidelines relevant to his/her sex and age group | **Yes No** |  |
| **5)** Explore possible connection to health, social, work issues and express concern(s) (if relevant) | **Yes No** |  |
| **(3)**  **Enhance motivation** | **6)** Ask patient to select a number on the “Readiness Ruler” | **Yes No** |  |
| **6a)** What was the number? |  |  |
| **7)** Ask patient: *why didn’t you pick a lower number?* OR Ask patient: *how would your drinking (drug use) have to impact your life in order for you to start thinking about cutting back*? OR Discuss patient’s pros and cons of use | **Yes No** |  |
| **(4) Negotiate a plan** | **8)** Provide a summary of readiness (You said ...) | **Yes No** |  |
| **9)** Negotiate a goal with the patient based on his/her response to: *What steps would you be willing to take?* | **Yes No** |  |
| **10)** Offer a menu of choices for change, provide recommendation, secure agreement | **Yes No** |  |
| **Motivation** | **11)** To what degree did the provider use a motivational style (open-ended questions, reflective listening, not confrontational)?   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | ***Not At All*** |  |  |  |  |  | ***Very Effectively*** | | **1** | **2** | **3** | **4** | **5** | **6** | **7** | |  |  |  |  |  |  |  | |  |  |

Adapted from the BI Adherence/Competence Scale, and Oregon Brief Observation Sheet.

***12. Additional comments about provider performance:***