

PROMOTING COMPETENCES FOR HEALTH TECHNICIANS IN THE DEVELOPMENT OF A BRIEF INTERVENTION FOR ALCOHOL: EXPERIENCE OF TRAINING.

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BACKGROUND

Brief Interventions (BIs) have been shown to be effective when

RESULTS

The main competences identified were:

- applied by primary care health professionals (physicians, nurses, psychologists).
- In Chile, a BIs for alcohol program has been implemented, in which a significant percentage of BIs are performed by nonprofessionals. This is probably due to an international tendency to have non-professional trained human resources, given the current scarcity of professionals in primary care.
- Recently, a randomized clinical trial (RCT) demonstrated the effectiveness of these BIs performed by health technicians (non-professionals) in real conditions in primary care center.
- In the context of this research, one of the first needs to implement was to design a structured training that would allow the necessary skills to be given to health technicians to execute the IBs.
- This work describes the characteristics of the training utilized in this RCT.

- Communication skills for the delivery of clear and direct messages
- 2. Skills on the use of alcohol screening tools
- Ability to coordinate actions in an assertive and empathetic manner.
- 4. Clarifying doubts and intervening under the FRAMES model
- Recognize the healthcare teamwork value to optimize the management of patients with alcohol consumption.
 - Trainings were conducted in 5 primary care centers in Santiago de Chile and were structured in two theoretical-practical sessions of 4 hours each. The materials used for the training were a demonstration video, a digital presentation, and a guided exercise for the BI.
 - Training included a role-playing activity where the health technician put into practice the five necessary skills detected to adequately perform a BI.
 - The evaluation was individual with a simulated patient and with evaluation guideline known by the technician. A total of 58 health



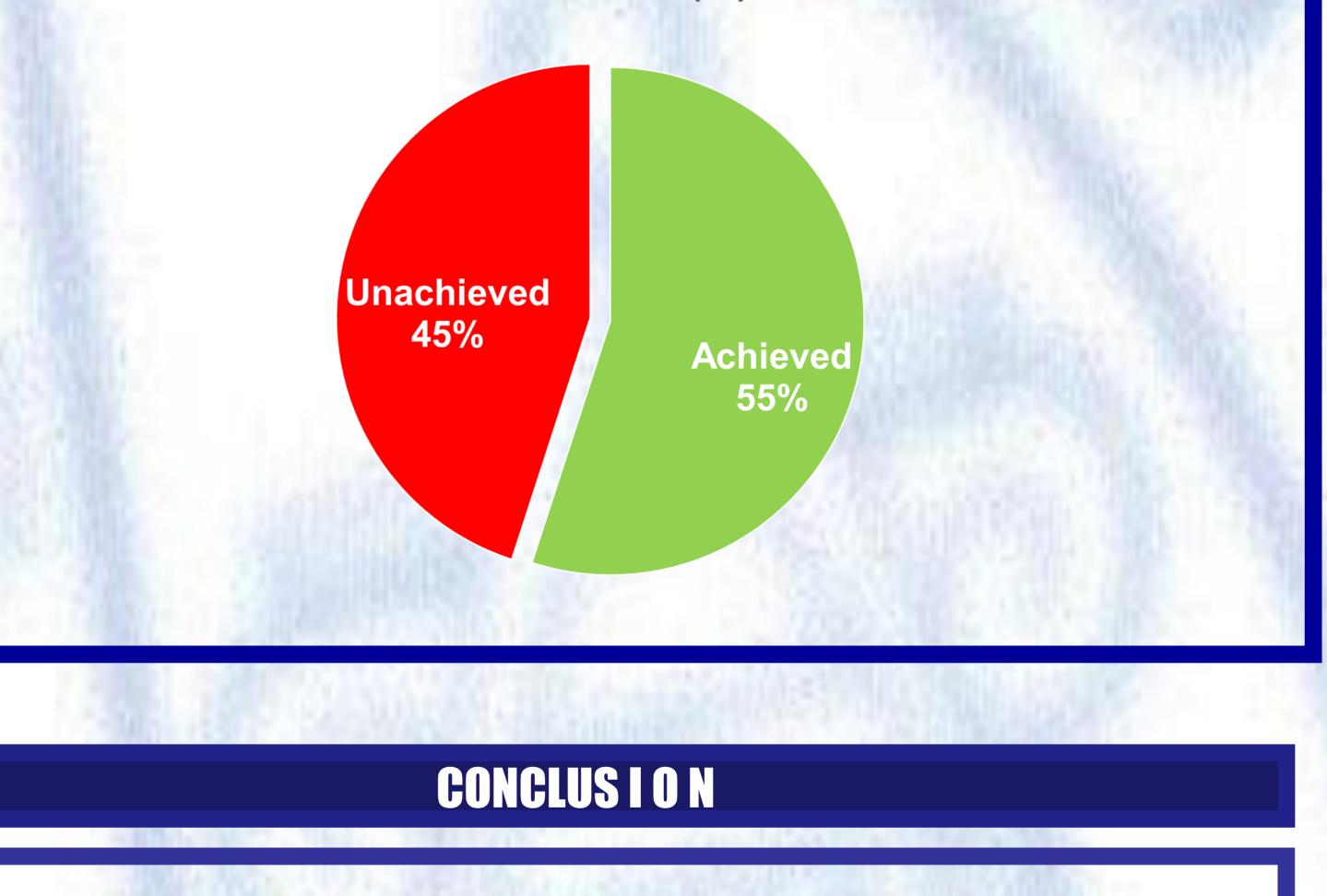
A review of the necessary competences needed to achieve BI was carried out.

- Additionally, a group of health technicians was observed in the field to assess the extent to which these competencies are adequately developed in other activities.
- Subsequently a training was designed based on the principles of participatory adult education, according to Jane Vella.
- The training will consist of two stages: 1. Face-to-face training 2. Evaluation

The acquisition of competencies was evaluated by observing in a simulated patient session through a mirror, using a standardized rubric.

technicians were trained, and 32 achieved 70% or more compliance with the evaluation rubric.

Figure 1. Results of the evaluation of health technicians (%)



 With a structured training of 8 hours, 55% of the participants achieved proficiency with the model.

Compliance of 70% was defined as sufficient for subsequent participation in the clinical trial

The diffusion and implementation of the SBIRT strategy must consider a significant amount of resources for an adequate fidelity to the intervention model and ensure the quality of the BIs carried out

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