**OARS Coding Sheet**

*Please watch your MI session video and code your OARS using the form below PRIOR TO MEETING WITH YOUR SUPERVISOR.* Bring this sheet to them to discuss during supervision*.*

What was the change focus? (i.e., drinking, smoking, exercise, academics, etc)\_\_\_\_\_\_\_\_\_\_

Rate client motivation to change that behavior (0-10): PRE \_\_\_\_ POST \_\_\_\_

|  |  |
| --- | --- |
| **OARS Tally** | Examples |
| **Open-ended Questions** |  |
| **Affirmations** |  |
| **Reflective Statements** |   |
| **Summary Statements** |  |
| **CHANGE TALK (flowers)** flowers |  |

Adapted from Miller & Rollnick (2002) & MET/MI materials provided by Miller & Rollnick (2000) for NIDA’s Clinical Trial Network Protocols (Carroll et al., 2002).

Now please answer the following questions based on your session and discuss these with your supervisor:

1) What was the best segment of the session and why?

2) What was the worst segment of the session and why?

3) Where were the openings for change in the session? Which ones did you capitalize on and which did you miss?

4) What are your overall strengths in doing MI?

5) What areas do you want to improve upon for your next peer consultation session?

**SUPERVISOR COMMENTS:**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_