

TEACHING COMMUNICATION SKILLS IN PHARMACY PRACTICE TO KNOW AND TO DO ARE TWO DIFFERENT THINGS

INTRODUCTION & OBJECTIVES

Communication is an essential component of clinical competence and a core clinical skill. The pharmacist is responsible for assuring that the use of medications and other health care products by the patient is safe and effective. The pharmacist has to also ensure that the patient has a thorough understanding of the disease and the medications being used. When dispensing prescription or OTC medicines the pharmacist has the opportunity to support his/her patients in their decisions about medication use, by providing written and oral medicine information and responding to patients' questions and concerns. To be able to provide pharmaceutical patient-centred care effective communication must be in place. However, in the Czech Republic communication is one of the competencies in which pharmacists have not received any pre-gradual as well as post-gradual training.

The aim was to develop appropriate training programs that could significantly change pharmacists' communication knowledge, skills, and attitudes, applying principles of effective communication and using appropriate procedures and techniques to improve the use and understanding of medications by the patient and to achieve positive clinical outcomes. The objective was to help the pharmacists acquire effective patient-centred communication skills which are relevant to their pharmacy practice and enable them to conduct effective consultations in special circumstances.



METHODS

Two tutors – a pharmacist and a communication specialist - lead one-day training sessions. The size limit per one course is 15 participants. Every course begins with an introduction outlining the theory. To make sure that all participants feel safe in the group, some time is spent working out group rules. The bulk of the course work is interactive. The participants work in groups of three (pharmacist, patient and observer roles). They take turns/switch roles to practise their skills and counseling the patient using the clear communication techniques covered in the presentation. It is important that every participant has a chance to take the role of pharmacist. The participants and the tutors then give feedback on what they have observed. The tutors use a mixture of feedback methods, varying flexibly to meet the demands of the situation and the participants.

Evidence-based input, a short explanation of a specific skill, possibilities to practise and demonstrate what they learned in various situations enable the participants to acquire the core skills.

RESULTS

In the period from 2008 to 2010, 499 pharmacists were trained in a series of structured courses. **These courses were attended by 702 participants in 2011 and 336 pharmacists in the beginning of the year 2012. Based on the feedback forms the course objectives (managing effective structure of pharmacist-patient interaction, dealing with angry/aggressive patients, patient-counseling, addressing specific needs of patients and working with patients from diverse backgrounds) were found useful and relevant for pharmacy practice and awakened their interest in further communication skills development.** Some new courses were therefore developed for the year 2012 (health coaching, mental hygiene, team and interdisciplinary communication).

Enrolling in all courses was strongly encouraged as their content and skills development are linked. **Those pharmacists who attended all courses integrated their clinical and communication skills and were prepared to deal with different types of patients and handle various communication situations.**

The concept of the patient-centred consultation was adopted by the Faculty of Pharmacy of University of Veterinarian and Pharmaceutical Sciences in Brno, CR. Communication skills have been taught since 2010 as structured sessions in years 4 and 5.

CONCLUSIONS

Both pharmacists and their patients benefit from skills related to achieving a patient-centred communication style. Pharmacists are able to identify their patients' problems more effectively and accurately. Their patients are more satisfied with such approach and feel comfortable which leads to better understanding of their problems, treatment options and medication regimen. Ultimately patients adhere more to their treatment and follow advice on lifestyle changes. Pharmacists are more likely to attend follow-up courses in communication skills if they know that their own agenda, most frequently responding to difficult situations, handling anger and dealing with emotions, will be discussed. Setting the size limits of the group allows more opportunities to practise and creates safe working environment for disclosure of participants' feelings and difficulties. Last but not least effective communication reduces stress in pharmacists.

REFERENCES

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