CHAPTER 6
PATIENT COUNSELING

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Definition:

- Patient counseling is a broad term which describes the process through which health care professionals attempt to increase patient knowledge of health care issues.
- Patient counseling may be verbal or written performed on an individual basis or in groups, & provide directly to the patient or caregiver.
- The process provides for the exchange of information between the patient & health practitioner.
- The information gathered is needed to assess the patient's medical condition to further design, select, implement, evaluate & modify health interventions.

Outcomes of patient counseling:

- Patient recognizes the importance of their well being.
- It encourages the patient to establish a working relationship with a pharmacist & foundation for continual interaction and consultation.
- Improves the coping strategies to deal with medication side effects and drug interactions.
- Motivates the patient to take medicine for improvement of his/her health status.
- The patient becomes an informed, efficient and active participant in disease treatment and self care management.
- Develops the ability in patient to take appropriate medication related decision concerning the compliance or adherence to their medication regimen.

Patient counseling methods:

The structure of the counseling session is divided into four groups:

- Introduction of the session.
- Content of the session.
- Process followed.
- Conclusion of the session.

Introduction:

- Review the patient record prior to counselling.
- Conduct an appropriate patient counselling introduction by self and patient.
- Explain the purpose of counselling session.
- Obtain pertinent initial drug related information. E.g.: drug allergies, and other medications.
- Warn the patient about taking other medications including OTC drugs, herbals, or botanical drugs and alcohol which could inhibit or interact into the prescribed medication.
- Determines whether the patient has any other medical conditions that could influence the effects of their drug or enhance the likelihood of an ADR.
- Asses the patient understandings of reason for therapy.
- Assess any actual or problems of importance to the patient.

Counseling contents item:

- Discuss the name and indication of the medication.
- Explain the dosage regimen including duration of therapy when appropriate.
- Assist the patient in developing a plan to incorporate the medication regimen into his/her daily routine.
- Explain how long it will take for the drug to show its effect.
- Discuss storage and refilling information.
- Emphasize the benefits of completing the medication as prescribed.
- Discuss the potential side effect.
- Discuss how to prevent or manage the side effects of the drug.
- Discuss the precautions.
- Discuss the significant drug-drug, drug-food, and drug-disease interaction.
- Explain precisely what to do if the patient misses the dose.
- Explore the potential problems of the patient.

Counseling process items:

- Provide accurate information.
- Use language that the patient is likely to understand.
- Use the appropriate counselling aids to support counselling.
- Present the fact and order in a logical order.
- Maintain control & direction of the counseling session.
- Probes for additional information.
- Use open-ended question.
- Display effective non-verbal behaviours.

Counseling conclusion steps:

- Verify the patient understanding via feedback.
- Summaries by acknowledging or emphasizing key points of information.
- Provide an opportunity for final concerns or questions.
- Help the patient to plan, follow up and next consecutive steps.

Interactive communication skills

- Communication is the transfer of information meaningful to those involved.Interactive communication is a process that facilitates a dialogue to provide multiple opportunities to accurately interpret meaning and respondappropriately. An interactive model is similar to a discussion rather than alecture.
- ***For example***, using an interactive model, a patient may be asked what they know about their medications. As the patient describes aspects of his or her medication therapy, the pharmacist can then respond to fill in knowledge gaps, correct misinformation and verify patient understanding, thus eliminating or minimizing misunderstandings.
- Interactive communications are effective formany interpersonal situations, but are especially useful when working with patients to assure appropriate use of medications.

Interactive communication requires five key elements:

- open-ended questions;
- awareness of nonverbal cues;
- active listening;
- reflective responses; and
- verification of understanding.

Open-ended questions

- A key component of interactive communication is using open-ended questions.
- Open-ended questions are questions that start with **who**, **what**, **where**, **when**, **how** and **why** and require more than a **yes/no** response.These questions encourage disclosure of information.
- Closed-ended questions and leading/restrictive questions elicit yes/no responses and limit the information sought from the receiver. These types of questions should be avoided.

Example:

Closed-ended:

"Do you know how to take your medication?"

"Yes."

Leading/restrictive:

"You're familiar with your medications, aren't you?“

"Yes.“

Open-ended:

"What did the doctor tell you about taking the medications?"

- Is it always wrong to use closed-ended questions? No. There are certainly situation in which the focus and narrowness of a closed-ended question is appropriate.
- ***For example***, "Have you checked to see if your child has a
- temperature?" In fact, closed-ended questions are often mixed in with openended questions to clarify the information presented through open-ended questions. However, ***most people have a tendency to ask more closed or leading/restrictive than open questions***.
- Effective communicators draw people out through the frequent use of open-ended questions.

Nonverbal cues

- Appropriate nonverbal cues are also critical for effective communication.
- Facial expressions, body posture, gestures, tone of voice and use of eye contact are all forms of nonverbal communication.
- Skilled use of our nonverbal communication can make the difference between successful interactive dialogues and frustrating nonproductive encounters. What we say and how we say it must have the same meaning. When nonverbal cues are inconsistent with the words spoken, people tend to believe the nonverbal message.

Appropriate non-verbal clues:

- Friendly and smiling facial expressions.
- Varied eye contact(consistent, but not startling.)
- Professional appearance
- Relaxed, warm and comfortable gestures.
- Attentive body posture(slightly leaning forward)
- Appropriate personal space(18-48 inches)
- Varied voice rate and volume to keep the individual interested. However, a high pitched voice should be avoided.

Distracting non-verbal clues:

- Lack of eye contact may indicate little confidence or interest.
- Insufficient spatial discomfort(causing discomfort)
- Unfavorable tone of voice(can upset the people and create an unintended meaning)
- Slouching or weight shifted to one side(may indicate lack of interest)
- Messy work environment

Active listening

- When we think of communication skills, we usually think of skills relating to the manner in which we speak. However, equally important, and perhaps more difficult to learn, is the ability to listen well. Studies show that most people are not good listeners. In pharmacy practice environments, listening skill may be further challenged by the perception or reality of little time and by the attitudes of the listener and/or the speaker.

The following are specific habits that may interfere with an individual's ability to listen. Also listed are recommendations for improving one's listening ability.

- ***Trying to do two or more things at once***. This lack of attention comes across as a lack of interest in the other person and what they are saying to you.

  Solution: Get rid of distractions.

- ***Jumping to conclusions*** before a person has completed his or her message. The result is you only hear part of what was said.

  Solution: Stop talking, you can't listen if you are talking.

- ***Communicating stereotypes*** that you have internalized.

  Solution: React to the information, not the person.

- ***Faking interest in what is being discussed***.

  Solution: Use good eye contact, this will help you concentrate.

- ***Judging the individual*** based upon his or her appearance or condition.

  Solution: Focus on content, nonverbal cues and the manner in which something is said.

There are additional skills that can be used to enhance listening. These include ***paraphrasing***, ***clarifying***, ***summarizing*** *and* ***feedback.***

- ***Paraphrasing*** allows you (the listener) to convey back to the sender the message, and allows the sender to know that the receiver is listening. This technique encourages a dialogue.
- ***Clarifying*** provides opportunities to comprehend what is being said by helping the listener or receiver to understand the message.
- ***Summarizing*** assesses whether you accurately understand the information that you heard and enables you to verify that you process the information from the sender correctly.

Phrases and questions that facilitate listening:

Paraphrasing:

- Are you saying that.....?
- Do I understand you to mean...?
- What I've heard so far...?
- Let me tell you what I am understanding.....
- What I hear you say is.....

Clarifying:

- What do you mean by....?
- How do you know....?
- What do you mean....?
- I don't understand what do you mean....?

Summarizing:

- Would an example of that be...?
- Is that like when....?
- As you've described it...?

Active feed back:

- I see...
- Uh huh...
- No, I don't feel that way, but tell me why you do...
- Yes, that's how I've found it to be...

Reflective responses

- Reflective responses reflect back to the sender the receiver's understanding of both the content of what was said and the feelings that were expressed.
- A major advantage of these responses is that they allow an individual to be empathic without having to agree. As with active listening responses, they enable the receiver to check for the level of understanding of the information delivered from the sender.
- Reflective responses are useful in pharmacy practice settings because they are a powerful tool in establishing rapport with patients, other pharmacy personnel and other healthcare providers.

Example:

Patient: "I'm just not sure about this medicine."

Pharmacist: Imagine a reflective response you could use. Then compare it to the examples.

Suggested responses: "It seems that you are concerned about your prescriptions,"

Or

"You appear to be feeling unsure about your prescription."

- Reflective responses allow us to be empathic, communicate in a non-judgmental manner, and accept the patient's feelings or concerns. Using reflective responses sends a message of concern and acceptance, helping the patient to become less anxious and more open to discussion.

Reflective(empathic)responses:

- I gather that…
- Sounds like you're….
- You seem to be saying….
- So you believe….
- It seems like you….
- You appear to be feeling….

Verification of understanding

- Verifying understanding prevents misunderstandings. It is an important skill in the communication process because it is a checkpoint for communication.
- This process involves asking the receiver to state back the message that was sent by the sender and enables confirmation of what a person knows … not what we think they know. This tool confirms that the sender's message was translated as intended.
- In a pharmacist-patient interaction, verifying understanding confirms that the patient has received the information necessary to take his or her medication(s) properly. Verifying understanding can be achieved as discussed earlier by asking open-ended questions. For example,
- "Just to make sure I've discussed everything, can you tell me how you are going to take your medication?"
- The manner in which the questions are phrased is important. Remember, active communication skills foster a discussion in which both parties participate.
- Asking a questions using phases such as, "Now tell me how you are going to take your medication." are likely to be perceived more as a pop quiz than as part of a discussion and may make the patient feel uncomfortable or angry.
- Effective communication is a dynamic process that requires using a wide variety of skills.



THANK YOU