

# **Consultation skills for pharmacy practice: practice standards for England**

For all pharmacy professionals

March, 2014

Developed by



**NHS** Health Education England

Endorsed by

ROYAL PHARMACEUTICAL SOCIETY



#### Foreword

These practice standards have been prepared as part of the Modernising Pharmacy Careers (MPC) programme to define the knowledge, skills, behaviours and attitudes that pharmacy professionals should be able to demonstrate when communicating and consulting with patients. Although primarily aimed for the start of a career as a pharmacy professional, they are also intended to guide pharmacy professionals in their early careers and beyond.

The document is one part of a framework being developed to support the professional development of pharmacists and pharmacy technicians in the areas of medicines optimisation and public health. It follows the same style as the framework used by the Royal College of General Practitioners (RCGP) for its GP curriculum and in particular, the contextual statement on the GP consultation in practice. We hope that you will find these standards helpful in the development of your consultation skills, enabling you to provide high quality services and patient-centred care.

We would like to thank the task and finish group who led the development of these standards, the Modernising Pharmacy Careers team at Health Education England and Lesley Grimes, senior pharmacist, learning development, CPPE for their contributions.

#### **Christopher Cutts**

#### **Clare Howard**

Professor of Professional Development and Practice Director, Centre for Pharmacy Postgraduate Education Associate Dean for External Relations, Faculty of Medical and Human Sciences Centre for Pharmacy Postgraduate Education Manchester Pharmacy School Deputy Chief Pharmaceutical Officer, NHS England

## Co-chairs, Consultation and Communication Skills Task and Finish Group

# Acknowledgements

This document follows the same style as the framework used by the Royal College of General Practitioners (RCGP) for its GP curriculum and in particular, the contextual statement on the GP consultation in practice, part of the RCGP curriculum for 2010 (used with permission).

In addition to the RCGP curriculum, the practice standards were developed with reference to various frameworks and guidelines including:

#### The medication-related consultation framework

A reflective tool to support the development of consultation skills for pharmacy practitioners. Abdel Tawab R, James DH, Fichtinger A, Clatworthy J, Horne R, Davies G (2011). Development and validation of the medication-related consultation framework (MRCF) *Patient Education & Counseling* 83 (3): 451-7.

# A single competency framework for all prescribers

National Prescribing Centre: May 2012

Medicines adherence: NICE clinical guideline 76 January 2009

# Foundation Pharmacy Framework: a framework for professional development in foundation practice across pharmacy

Royal Pharmaceutical Society 2014 (The standards link to cluster 1 of the framework, Patient and Pharmaceutical Care.)

# Task and finish group

Reena Barai, local pharmacy tutor, South West London, CPPE Nina Barnett, consultant pharmacist, Older People, Northwick Park Hospital, East and South East **England Specialist Pharmacy Services NHS** Gill Bullock, training and development manager, Dean & Smedley Ltd Christine Burbage, superintendent pharmacist, Superdrug Stores plc Alastair Buxton, head of NHS Services, PSNC Catherine Davies, education officer, APTUK James Desborough, lecturer in pharmacy practice, School of Pharmacy, University of East Anglia Dr Catherine Duggan, director of professional development and support, Royal Pharmaceutical Society Liz Fidler, educational and practice supervision specialist, Pharmacy, Health Education Kent Surrey and Sussex. Chair of NHS PEDC Support Staff Subgroup Lesley Grimes, senior pharmacist, learning development CPPE Rob Horne, professor of behavioural medicine, director, Centre for Behavioural Medicine, UCL School of Pharmacy, University College London & UCL Academic Lead, Centre for Advancement of Sustainable Medical Innovation (CASMI) Sandra Hutchinson, group L&D manager, Rowlands Delyth James, senior lecturer, programme director, MSc in Pharmacy Clinical Practice (Community & Primary Care), Cardiff School of Pharmacy and Pharmaceutical Sciences Barry Jubraj, lead pharmacist for Academic Studies & Professional Development, Chelsea & Westminster Hospital NHS Foundation Trust Yousuf Khan, recently registered pharmacist Harriet Lewis, ABPI regional partnership manager Raminder Sihota, head of pharmacy & healthcare learning & development, Boots Liz Stafford, Royal Pharmaceutical Society representative Sneha Varia, pharmacy professional development specialist, London Pharmacy Education & Training Ruth Wakeman, head of professional support, Royal Pharmaceutical Society Ellen Williams, regional education and training specialist pharmacy technician, University Hospitals **Bristol NHS Foundation Trust** Kurt Wilson, general practitioner

# **Project support**

Kellie Espie-Whitburn, Modernising Pharmacy Careers Team, Health Education England Janet Flint, Modernising Pharmacy Careers Team, Health Education England Lesley Grimes, senior pharmacist, learning development, CPPE

# Structure of the standards

The practice standards have been developed around the following areas:

- 1. The management of patient-centred consultations
  - a) Organisational and management skills
  - b) Key consultation skills and behaviours, including those relating to health coaching and taking a patient-centred approach
- 2. Context-specific skills
- 3. Delivering a comprehensive approach to patient care
- 4. Understanding the health needs of your local population
- 5. The essential features that relate to you as a pharmacy professional

# Areas of competence

## 1 Management of patient-centred consultations

This area of competence is about how you communicate and manage your consultations with patients. The competencies relate to the organisational and management skills and the key skills typically associated with good communication between pharmacy professionals and patients, which are needed to ensure patient consultations are delivered efficiently and effectively. It further builds on these skills by including specific competencies that relate to the context of taking a patient-centred approach and health coaching (see below for details), treating your patients as individuals, and working in partnership with them. It centres on the competencies required when entering into shared decision making with patients, while considering the patient's own values, beliefs and expectations.

Patients should be put at the centre of their own healthcare and although you, the pharmacy professional, are the expert in medicines, the patient is also an expert within the consultation with respect to their health and social situation. It is important to view the patient holistically and consider the big picture of internal and external factors that may influence adherence to a management plan. This means understanding and respecting the values, culture, family structure and beliefs of your patients, and understanding the ways in which these will affect the experience and management of their health issues and the way in which they take their medicines.

#### a) Organisational and management skills

- 1.1 Undertake the consultation in a supportive environment, taking account of safety, comfort, confidentiality, dignity and respect
- 1.2 Be able to describe common consultation models relevant to the pharmacy profession and demonstrate how you can apply these models in practice
- 1.3 Use patient medication records, and clinical records, when available, effectively as part of the consultation
- 1.4 Use time and resources efficiently and effectively
- 1.5 Recognise the roles of health and social care colleagues and draw on this expertise appropriately
- 1.6 Use skill mix appropriately to facilitate the administrative tasks associated with the consultation
- 1.7 Achieve meaningful consent and agreement to a management plan

- 1.8 Document a full history from the patient of their medication or any public health issues discussed
- 1.9 Keep accurate, legible and contemporaneous records to document the consultation.

# b) Key consultation skills and behaviours, including those relating to health coaching and taking a patient-centred approach.

Coaching as a general concept helps people to set goals and identify ways of achieving them. Pharmacists have the relevant knowledge relating to medicines and health and wellbeing to provide the patient with the information they need, but can also use a coaching approach to give patients ownership of their own health goals. The coaching approach is based on evidence that taking a collaborative approach with the patient will increase the likelihood of behavioural change.<sup>1</sup>

- 1.10 Set the scene of the consultation professionally and appropriately while building rapport with the patient
- 1.11 Hear and acknowledge the patient's agenda without interrupting and further balance with your own agenda before negotiating a shared agenda
- 1.12 Communicate positively and effectively throughout the session, using language that is appropriate and respectful to the patient (non-technical, non-jargon) that has the greatest positive impact on the patient
- 1.13 Share information and discuss options in an open, honest and unbiased manner to support the patient in assessing the risks versus benefits in relation to medicines-taking and making changes to lifestyle
- 1.14 Adapt your communication skills and consultation skills to meet the needs of different patients (eg, for language, age, capacity, physical and sensory impairments)
- 1.15 Recognise that patients are diverse; that their behaviour, values and attitudes vary as individuals and with age, gender, ethnicity and social background, and that you should not discriminate against people because of those differences
- 1.16 Listen actively, focussing completely on what the patient is saying (and the non-verbal cues demonstrated by the patient) without interrupting, to understand the meaning of what is being said in the context of the patient's desires

<sup>&</sup>lt;sup>1</sup> Definition adapted from that used by the London Deanery. Further information available from <u>http://www.londondeanery.ac.uk/global-news/coaching-for-health-training-programmes-march-2012</u>

- 1.17 Demonstrate respect for the patient's perceptions and support the patient in selfexpression
- 1.18 Apply tools to facilitate the consultation (such as interview schedules) in such a manner that it does not detract from the patient focus of the consultation
- 1.19 Use questioning techniques that reflect active listening, draw out the information needed to gain maximum benefit from the discussion and challenge the patient at a level which is appropriate for them
- 1.20 Check understanding at points within the consultation while allowing the patient time and space to reflect
- 1.21 Negotiate a shared understanding of the issue and its management with the patient, so that they are empowered to take responsibility and look after their own health
- 1.22 Appreciate and respect the reasons for non-adherence to a management plan (practical and behavioural, intentional and non-intentional) when deciding how best to support patients; assess adherence in a non-judgemental way
- 1.23 Deal sensitively with the patient's emotions and concerns
- 1.24 Explore the patient's attitudes towards taking medicines, or following advice they have been given about their health and wellbeing, while identifying and respecting the patient's values, beliefs and expectations
- 1.25 Advocate and provide ongoing support for new behaviours and actions to be taken by the patient, including those involving taking risks and fear of failure
- 1.26 Before concluding any consultation, determine whether the patient has sufficient information for their needs or whether they require further explanation, by providing them with further opportunities to ask questions
- 1.27 Demonstrate techniques to manage the conclusion of the consultation effectively, providing a safety net, while agreeing and summarising the plan appropriately in a timely manner
- 1.28 Use your own intuition appropriately and trust your 'gut feeling' and further apply the evidence base to support or deny this
- 1.29 Know that consultations with patients can have psychological and social as well as clinical components, with the relevance of each component varying from consultation to consultation
- 1.30 Identify the extent to which other healthcare professionals, relatives, friends and carers are involved in decisions about a patient's health, while balancing a patient's right to confidentiality

- 1.31 Understand that your patient's views and perspectives may change during the course of a long-term condition
- 1.32 Accept that patients may wish to approach their health (and illness) in a non-scientific way. The reality for patients is that they make their own choices on the basis of their own values and not necessarily on the basis of clinical evidence.

# 2 Specific skills

There may be times during the consultation when specific skills need to be applied in order to establish additional information or communicate more specialised or detailed information to a patient. This area of competence is about the context-specific aspects of practice.

- 2.1 Undertake appropriate clinical assessments, using relevant equipment and techniques
- 2.2 Base treatment and management recommendations and referral decisions on the best available evidence
- 2.3 Make timely and appropriate referrals, using relevant information
- 2.4 Demonstrate the ability to communicate risks and benefits relating to medicines adherence and healthy living choices in a way that is meaningful to patients
- 2.5 Display the skills to offer patients health choices based on evidence so that an informed discussion can occur, taking into account patients' values and priorities
- 2.6 Appreciate the limitations of the efficacy of evidence-based interventions in relation to adherence to agreed therapeutic aims
- 2.7 Recognise that building good relationships can be used to enhance adherence and apply this
- 2.8 Acknowledge that patients do not always provide a full picture of their health issues
- 2.9 Provide printed or written information when appropriate to supplement information given verbally.

# 3 A comprehensive approach

Promoting health and wellbeing and being able to deliver public health interventions is now an essential part of pharmacy practice. This area of competence is about how you as a pharmacy professional should be able to manage co-morbidity, co-ordinating and addressing the care of acute illness, chronic illness, health promotion and disease prevention during the consultation.

- 3.1 Use the consultation to educate patients about self-managing their conditions
- 3.2 Demonstrate a commitment to promoting health and wellbeing within the consultation
- 3.3 Use up-to-date sources of information to signpost patients, where appropriate, to other healthcare professionals and support groups
- 3.4 Acknowledge that ill health or progression of a long-term condition may affect a patient's ability to understand information and make decisions
- 3.5 Aim for a consultation outcome in which both you and the patient achieve respective aims and are satisfied.

# 4 Community orientation

This area of competence is about the health profile of your population, understanding the health needs of your locality and balancing this against the health of the overall population. It addresses the competencies needed to understand the interrelationship between health and social care, and the tensions that may exist between individual wants and needs and the needs of the wider community.

- 4.1 Manage the potential conflicts between individual health priorities, evidence-based practice and public health responsibilities
- 4.2 Understand the correlation between socio-economic deprivation and ill health
- 4.3 Have an appreciation of how the values and beliefs prevalent in the local culture can impact on patient care
- 4.4 Understand how the demography and ethnic and cultural diversity of your local population impact on the range and presentation of health issues
- 4.5 Identify and reflect on issues raised within individual consultations, such as unmet health needs and gaps in service provision, in order to promote the development of appropriate services for the community as a whole.

#### You as a pharmacy professional

The competencies or essential features (EFs) set out below relate to you as a pharmacy professional and your ability to apply the core areas of competence to your everyday practice in the workplace.

## **EF1** Contextual features

This essential feature is about understanding your own situation as a pharmacy professional and how it may influence the quality of your consultations with patients. Important factors are the environment in which you work, including your working conditions, degree of autonomy, nature of your role (employee, owner, manager etc) nature of your local community, and regulatory frameworks.

Examples of this are:

- EF1.1 Recognising how consultations conducted via remote media (telephone and email) differ from face-to-face consultations, and demonstrating skills that can compensate for these differences
- EF1.2 Understanding inter-professional boundaries with regard to clinical responsibility and confidentiality
- EF1.3 Knowing local services and referral pathways to ensure appropriate continuity of care
- EF1.4 Appreciating the role of the wider pharmacy team in the identification and resolution of health issues.

## **EF2** Attitudes and values

This essential feature is about your professional capabilities, values, feelings and ethics and the impact these may have on your patient care.

Examples of this are:

- EF2.1 Recognising, monitoring and managing personal emotions arising from consultations with patients
- EF2.2 Recognising how personal emotions, lifestyle and ill-health can affect your performance in consultations and your relationship with patients
- EF2.3 Understanding that your attitudes, feelings and values are important determinants of how you practice

- EF2.4 Reflecting on how particular clinical decisions have been informed by ethical concepts and values such as consent, confidentiality, truth telling and justice
- EF2.5 Being able to clarify and justify your personal ethics to patients and to external reviewers.

## **EF3** Pharmaceutical and pharmacological features

This essential feature is about how you as a pharmacy professional ensure you have up-to-date pharmacological and pharmaceutical knowledge and apply this to inform patients and aid decision making within the consultation.

Examples of this are:

- EF3.1 Demonstrating sufficient up-to-date clinical, pharmacological and pharmaceutical knowledge in relevant areas to provide the best information for patients
- EF3.2 Knowing the mode of action and pharmacokinetics of medicines
- EF3.3 Understanding the potential for adverse effects and how to avoid/minimise, recognise and manage them
- EF3.4 Recognising pharmacodynamic and pharmacokinetic drug interactions and their relative importance
- EF3.5 Having up-to-date information about relevant products (eg, formulations, pack sizes, storage conditions, costs)
- EF3.6 Applying the principles of evidence-based practice, including clinical and costeffectiveness
- EF3.7 Exploring patient values and placing them in context with clinical evidence, so that you can develop an appropriate shared management plan
- EF3.8 Understanding the public health issues related to medicines and their use
- EF3.9 Appreciating the potential for misuse of medicines
- EF3.10 Applying knowledge relating to national policy and guidance relating to medicines use when making recommendations to patients and other healthcare professionals