

Communication With Other Health Professionals

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Patient Communications /
Monitoring / Counseling II
31:725:587

Class Outline

- ♦ Introductions
- ♦ Communications Overview
- ♦ Objectives of Communication
- ♦ Who Am I Communicating With?
- ♦ PAR Strategy
- ♦ Obtaining Facts Through Active Listening
- ♦ Communication between Pharmacists and Physicians
- ♦ Communications Among Healthcare Professionals and its effects on the Pharmaceutical Industry
 - Direct to Consumer Marketing / Advertising
 - PhRMA Code Guidelines
- ♦ Nonsense
- ♦ Summary
- ♦ Questions

Why is Communication Important?

- ♦ Effective Communication between Physicians, Nurses, Pharmacists, etc. is essential for **Pharmaceutical Care**¹
- ♦ Poor communication can lead to:
 - Frustration
 - Lack of respect among professions
 - Compromised patient care

Communication with other Health Professionals...*Objectives*

- ♦ Be able to prepare for and appropriately assess the best method to communicate with other health professionals
- ♦ Develop effective techniques for communication with other health professionals
- ♦ Strengthen relationships with other health professionals

What other Health Professionals?

- ♦ Physicians
- ♦ Nurses
- ♦ Nurse Practitioners
- ♦ Physician Assistants
- ♦ Midwives
- ♦ Dieticians
- ♦ EMT / EMS
- ♦ Other Pharmacists

Effective Strategies for Communication

♦ PAR Strategy:

- Prepare
- Assess
- Respond

PREPARE to Communicate

♦ Do your HOMework:

- Know the:
 - ♦ Patient
 - ♦ Pathophysiology
 - ♦ Drug Information
 - ♦ **Practitioner (Physician, PA, etc.)**
 - ♦ **Setting**
 - ♦ What you are going to say before you say it
 - You will be held accountable for your counseling

PREPARE to Communicate, cont.

◆ **Know the Practitioner:**

- Must consider the specialty, personality, previous experience, etc.
- What do they want from you?
 - To give Quality Care
 - To be the patient advocate
 - To save time
 - To be treated with respect

PREPARE to Communicate, cont.

◆ **Know the Setting (Timing and Method of Communication):**

- Timing
 - ◆ How quickly does it need to occur?
- Method of Interaction:
 - ◆ Face-to-face
 - ◆ Telephone
 - ◆ Note
 - ◆ eMail
 - ◆ Via 3rd party (Nurse or Office Staff)

When are these appropriate
/ inappropriate?

Written Communication (Pros and Cons)

- ◆ Time of reading is not controlled by you but may be when practitioner is already seeing the patient
 - “Reviewing your notes strategy”
- ◆ Does not allow for more information gathering / two-way communication
 - No “open-ended” questions
- ◆ Must be crystal clear and carefully worded
- ◆ Should follow the SOAP note format

Assess and Respond

- ◆ Recognize Barriers
 - What are some barriers to communication with practitioners?
- ◆ Present Issue(s) Concisely
- ◆ YOURS Dialogue Technique

YOURS Dialogue Technique

- ♦ Yield the conversation – dialogue opener
 - “I have Mr. Jones here who just came in from your office”
 - “I wanted to discuss Mrs. Smith’s drug therapy with you and hear your perspective”
- ♦ Obtain facts / rationale
 - Ask questions rather than make statements
 - “Tell me more...”
 - “Why do you say that?”
 - “What else should I know?”

YOURS Dialogue Technique, cont.

- ♦ Unveil alternatives
 - Consider any new information they have given you
 - Be willing to follow up with the practitioner if more information is needed.
 - Give a Recommendation / Alternative (counseling)
- ♦ Reach Agreement
- ♦ Strengthen Relationship
 - Always CLOSE

Obtaining Facts Through Active Listening

♦ Active Listening and the Use of Playbacks:

- Reaffirms practitioner / pharmacist ideas or recommendations
 - Practitioner feels understood
 - Pharmacist appears attentive
 - Advances dialogue / builds relationship
- *“If I understand you correctly”*
 - *“Let me review what you have just said”*
 - *“So what I hear you saying is”*

Communication between Pharmacists and Physicians

Several Different Perspectives...



World Medical Association

- ◆ Joint Statement of the International Pharmaceutical Association and the World Medical Association²
 - Working relationship between Physicians and Pharmacists in Medicinal Therapy:
 - “The patient will best be served when pharmacists and physicians collaborate together, recognizing each other’s roles, to ensure that medicines are used safely and appropriately to achieve the best health outcome.”

National Consumers League

- ◆ Presentation in Washington DC to the National Consumers League³
- ◆ Highly critical of current physician / pharmacist ability to share information with other health practitioners and the general public

National Consumers League Quotes

- ◆ “...there are jealous, turf battles between physicians and pharmacists – on who gives information to patients and who gets reimbursed for telling a consumer about a medicine”
- ◆ “There must be a balance...not doctors having one jurisdiction; pharmacists another. There must be a communication and coordination and teamwork established between the patient / consumer / caregiver and the health professional”

National Consumers League Quotes, cont.

- ♦ “Pharmacists fit into the picture as that person who can best explain and help the patient not only with medications, but with a holistic approach to better health”
- ♦ Four things that must happen to improve communication:
 - There must be a renewed commitment to comply with the law – to counsel patients
 - There must be comprehensive consumer education
 - There must be a commitment to nondiscrimination (I.e., non-English speakers)
 - There must be a commitment from the top down and bottom up (I.e., CEOs of major drug firms to staff pharmacists)

Linda F. Golodner, President- National Consumers League

- ♦ “Pharmaceutical Care works...it lowers costs and improves patient care”

Teachable Moment

- ♦ The time at which true communication can take place between the pharmacist and the patient being counseled
- ♦ This is when people learn
- ♦ This is when the pharmacist has the greatest impact

American Pharmaceutical Association View on Communication between Pharmacists and Physicians

- ♦ Physicians' Perceptions of Communication with and Responsibilities of Pharmacists⁴
 - Objective: To understand physicians' perceptions of...
 - Their communication with pharmacists
 - Pharmacists professional duties
 - Degree of responsibility with which pharmacists perform these tasks

<http://www.medscape.com/viewarticle/406699>

American Pharmaceutical Association View on Communication between Pharmacists and Physicians, cont.

- ♦ What they were looking for:
 - Physicians' attitudes and experiences related to their interactions with pharmacists and their perceptions about pharmacists' responsibilities
- ♦ 176 physician participants
- ♦ Age Range: 27 to 86 years old
- ♦ 79.5% were men, 50.6% were in family practice

American Pharmaceutical Association View on Communication between Pharmacists and Physicians, cont.

- ♦ Pharmaceutical Care is the synthesis of a pharmacist's distributive and informational responsibilities into a responsibility **for drug therapy**.
- ♦ A pharmacist's responsibilities under this model are:
 - Advise and consult physicians and patients
 - Accept responsibility for implementing therapeutic plans, including the supply of drug and products
 - Monitor patient progress and drug-related outcomes

American Pharmaceutical Association View on Communication between Pharmacists and Physicians, cont.

- ♦ The pharmacist's primary relationship is with the patient as a therapist
- ♦ The pharmacist's primary relationship with the physician is collegial as a co-therapist
- ♦ There is a huge communication gap between the understanding of physicians and pharmacists
 - Why?

American Pharmaceutical Association View on Communication between Pharmacists and Physicians, cont.

- ♦ Reasons for the communication gap:
 - Pharmacists' expressed lack of confidence in their ability to persuade physicians to accept their recommendations
 - Ineffective or needless communication initiated by pharmacists, which makes physicians less willing to listen to pharmacists during future interactions
 - Physicians do not see that pharmacists are readily available drug information specialists because of factors such as location (basement) and telephone delays

American Pharmaceutical Association View on Communication between Pharmacists and Physicians, cont.

♦ Results:

- 88% of physicians were comfortable with pharmacists' abilities to catch medication errors
- 65.1% of physicians were confident in the pharmacists' abilities to counsel patients
- Only 52% were willing to allow pharmacists to suggest prescription medications to physicians

Collaborations Between Pharmacists and Physicians

- ♦ Steps for Building More Effective Working Relationships⁵:
 - CE / CME co-sponsored by Merck and APhA
- ♦ “The role of the pharmacist in the United States health care system needs to be focused on the delivery of Pharmaceutical Care – improving the quality of medication use”

Collaborations Between Pharmacists and Physicians, cont.

- ◆ Common Obstacles to Inter-professional Collaboration Among Practitioners:
 - Boundary or turf concerns
 - Communications breakdown
 - Power issues
 - Lack of trust in another practitioner's competence
 - Practice sites distant from one another

Collaborations Between Pharmacists and Physicians, cont.

- ◆ Collaborative working relationships:
 - Staged approach to developing the pharmacist – physician collaborative working relationship:
 - Stage 0: Professional Awareness
 - Stage 1: Professional Recognition
 - Stage 2: Exploration and Trial
 - Stage 3: Professional Relationship Expansion
 - Stage 4: Commitment to the Collaborative Working Relationship

Collaborations Between Pharmacists and Physicians, cont.

♦ **Strategies to Achieve Stage 3: Expanding the Professional Relationship...**

- Communicate to referring physicians the patient outcomes that have resulted from pharmacy care interventions
- Be consistent in the provision of care to patients
- Continue to make high-quality clinical interventions
- Have periodic face-to-face meetings with physicians to establish and enhance personal and professional relationships
- Identify any conflicts due to pharmacy care interventions and discuss strategies to resolve them

Communications Among Healthcare Professionals and its effects on the Pharmaceutical Industry

- ♦ Direct to Consumer Marketing / Advertising
- ♦ PhRMA Code Guidelines

Direct to Consumer Marketing / Advertising

- ◆ Method to communicate with Physicians, Patients, Nurses, and Pharmacists...
- ◆ Advertisement for a particular drug increases the probability that it will be prescribed
- ◆ DTC is here to STAY!!!

Direct to Consumer Marketing / Advertising, cont.

- ◆ Impact of DTC:
 - DTC exposure increases increases patient requests for the advertised drug
 - 20 to 40% of patients who saw an ad on TV or in print talked to their physician about the medication
 - Surveys suggest that patients have mixed attitudes towards DTC ads, while almost 100% of physicians are critical of the ads
 - It has been suggested that DTC actually increases the cost of medicines

Direct to Consumer Marketing / Advertising, cont.

♦ Dangers of DTC:

- DTC has now and in the past delivered misinformation about medicines:
 - Speaks only of benefits and not risks or side effects
- DTC only gives partial information on drug benefits, side effects, costs, etc.
- Ignores the possibilities of alternative therapies

Multi-Billion Dollar Industry!

PhRMA Code Guidelines

♦ Pharmaceutical Research and Manufacturers Association

- ♦ <http://www.phrma.org>

- Adopted a new Marketing Code on April 19, 2002 (background)
- **Impact of the new code:**
 - *“Makes it crystal clear that the interactions of company sales representatives with healthcare professionals are to benefit patients and enhance the practice of medicine”*

PhRMA Code Guidelines, cont.

- ◆ Practitioner “Medical Education” cost the Pharmaceutical Industry \$5billion in 1999
- ◆ This will increase to \$11billion by 2004
- ◆ The number of blockbuster drugs being released to market is increasing exponentially every year
- ◆ What does this mean?
 - Fundamentally changes the way Pharmaceutical Companies market to key customers and the entire healthcare sector:
 - ◆ KOLs
 - ◆ Consultants
 - ◆ Formulary Committees

PhRMA Code Guidelines, cont.

- ◆ Government has greater control over:
 - General Practitioner Interaction
 - Entertainment
 - Continuing Education
 - Consultants
 - Educational and Healthcare Practice-related items

PhRMA Code Guidelines, cont.

- ◆ Example:
 - TAP Pharmaceuticals
 - Buy a boat
 - Cell phone use
 - Season tickets

Examples from “Dot-Bomb” Hell...

- ◆ Drugstore.com
- ◆ DrKoop.com
- ◆ WebMD.com
- ◆ Medscape.com

Questions?



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