

COMMUNICATIONS LAB MANUAL
S&A Pharmacy 652
Spring 2006

**Pharmacist Communication:
Educational and Behavioral Interventions**

Prof. Betty A. Chewning (Coordinator)
Prof. Henry N. Young
University of Wisconsin-Madison
School of Pharmacy
777 Highland Ave.
Madison, WI 53705
Email: bachewning@pharmacy.wisc.edu
Tel: (608) 263-4878

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II. Reading Packet

COURSE STAFF & POLICIES

A. Course Overview

- This course is focused on principles and techniques of pharmacist communication with patients and provides an opportunity to develop your skills in:
 1. interviewing and listening,
 2. using educational and behavioral interventions, and
 3. creating change in pharmacy settings to increase pharmacist communication with patients, pharmacy staff and other providers/agencies external to the pharmacy.
- You will attend one 50-minute lecture and one three hour lab each week.

B. Course Coordinator

Betty A. Chewning, PhD, Professor

Email: bachewning@pharmacy.wisc.edu Rm 25 Rennebohm Hall, Tel: 263-4878

Office hours: Thurs 12-1 or by appointment.

C. Lab Staff

Henry Young, PhD

Email: HNYoung@pharmacy.wisc.edu ; Rm 2519 Rennebohm Hall; Tel: 890-0367

Office hour: TBA

Gerrie Bleifuss, MS, RN, Clinical Instructor (Lab Coordinator)

Email: gbleifuss@edgewood.edu , Rm 2405 Rennebohm Hall, Tel: 663-2243

Office hour: Before or after lab or by appointment

Lisa Guirguis, BSc.Pharm, MS (Lab Coordinator)

Email: lmguirguis@pharmacy.wisc.edu; Rm 2505 Rennebohm Hall, Tel: 262-4723

Office hour: TBA

CharlieLee, RPh Pharmacy Manager - Target Pharmacy (Faculty Assistant)

Email: leerph@sbcglobal.net; Rm 2506 Rennebohm Hall, Tel: 576-4431

Office hour: Before or after lab or by appointment

Pallavi Patwardhan, BPharm, MS (Teaching Assistant)

Email: patwardhan@wisc.edu; Rm 2506 Rennebohm Hall, Tel: 262-4723

Office hour: TBA

Jeanine Porter, PharmD (Teaching Assistant)

Email: porter1@wisc.edu ; Rm 2504 Rennebohm Hall; Tel: 262-6534

Office hour: TBA

Audrey Hung, BScPharm, MS (Teaching Assistant)

Email: shung@wisc.edu; Rm 2506 Rennebohm Hall, Tel: 262-4723

Office hour: TBA

D. Course Materials

- The lab manual and readings are available for sale by pharmacy students.
- Lab manual and readings also will be on reserve in the library.
- Learn@UW will be used for posting course announcements, self-evaluation forms, lecture slides, grades, and other materials. Learn@UW will also be used to post and submit pre-lecture assignments.
- This course has 2 required textbooks.
 - Berger, B. (2005). Communication skills for pharmacists: Building relationships, improving care (pp. 107-130). Washington DC: American Pharmacists Association.
 - Kisch, G.R. (2005) Essential Spanish for Pharmacists (2nd Ed) . Washington, D.C: American Pharmacists Association.

E. Evaluation of performance

Your course grade will be based on:

| | | Points |
|--------------------|---|---------------|
| Exams | Lab Exam 1 (Week 7) | 30 |
| | Lab Exam 2 (Week 12) | 30 |
| | Written exam in Finals Week: May 11 2:45-4:45 | 72 |
| | Subtotal=132 | |
| Lec & Lab | Pre-lecture assignments (3 points each x 14) | 42 |
| | Lecture comments (2 points each x 4) | 8 |
| | Self-evaluations (4 points each x 7) | 28 |
| | Subtotal=78 | |
| Group Project | Group proposal paper | 38 |
| | Group presentation | 24 |
| | Templates (2 points each x 14 templates) | 28 |
| | Subtotal=90 | |
| Grand Total | | 300 |

- Each lab exam will involve one videotaped consultation with a standard patient followed by self, peer, and staff feedback. Attendance at the feedback sessions is required.
- The written exam will cover concepts and techniques discussed in lecture, readings, and labs.
- Details about the pre-lecture assignments, lecture comments, self-evaluations and group project are in separate sections of the manual.

Your course grade will be based on the percentage of all points obtained:

- A = 90-100%
- AB = 85-90%
- B = 80-85%
- BC = 75-80%
- C = 70-75%
- D = 65-70%
- F = < 65%

F. Policies regarding lateness, illness, emergencies, and dress in lab

- Pre-lecture assignments for week 1-5, 7-11, and 13-15 are due at 11 am on Mondays. Pre-lecture assignments for week 6, 12, and 16 are due the prior Friday at noon. These are marked on the “Schedule at a Glance”. Please submit pre-lectures on Learn@UW. You may wish to print a copy to use in lecture or lab.
- Self-evaluations and the majority of group project assignments are due in the lab before the group review.
- One point will be taken off for each school day that a pre-lecture assignment, self-evaluation or group project assignment is late.
- Due to tight scheduling of patients, you are expected to come to lab at the assigned time unless you have prior approval from lab coordinators (please contact Lisa Guirguis or Gerrie Bleifuss).
- If there is an illness or emergency, please call your TA as soon as possible.
- Dress in lab: professional dress (school name badge & white coat).

G. Course Philosophy.

In this course, we place value on:

- Self-evaluation and peer review. We value self-evaluation and peer review because we learn from seeing and hearing ourselves and others. Professionals also must learn to give critical feedback and suggestions to co-workers so they can improve professionally.
- Discussion and group work. We value discussion because the discussion of ideas and alternative strategies improves learning. We value group work because group leadership and process skills are important to professional life.
- Integrity. We value personal and professional integrity. This includes but is not limited to being truthful in dealing with others, taking responsibility for one’s actions, and acknowledging another person’s ideas. There will be zero tolerance for cheating and plagiarism. Ask for clarification if you are unsure about how to quote or cite another person’s ideas or materials.
- Reading. We value reading the professional literature because it fosters critical thinking and new ideas about how to improve care. Look for the main concepts and do not get bogged down in detail.
- Each individual student. We believe that each person can make a difference. It is an honor to work with you in this course!

Good luck to each of you! We want this course to help you address challenges realistically and create opportunities to enhance your professional practice. Please let us know if you have suggestions, questions or concerns so that we can all work together to make this a worthwhile course in your LAST semester!

Schedule at a Glance

| Week | Date | Lecture 11-11:50 Monday | | | *Pre-Lecture | Comment | Lab | |
|------|--------|---|---|------------------|--------------|--|--|--------------------------------------|
| | | Readings | Topic | Patient Scenario | | | Group Project Template | |
| 1 | 17-Jan | No Lecture | | | | | Lab Orientation / Counsel SP with new and refill prescription | 1-Select Potential site (due in lab) |
| 2 | 23-Jan | Berger, 2005 -Chpt 11; Svarstad, 2003; Tindall, 2003. | Counseling Framework + Building Rapport | X | | Complete consultation with depressed SP | 2-Describing the Site (due in lab) | |
| 3 | 30-Jan | Harrison, (2005); Hagel & Rovers, (2002) | Intro to Group Project | X | | n/a | 3-SWOT Analysis (due in lab) 4-Stakeholder Survey (review in lab/due week 4) 5-Problem & Significance (due week 4) 6-Mission Statement & Objective (due week 4) | |
| 4 | 6-Feb | Berger, 2005 -Chpt 4; An interactive approach to patient consult 2002; Tindall, Beardsley, & Kimberlin, 2002. | Counseling Hurried Patients + Listening & Empathy | X | | Counsel SP with diabetes & limited time or interest | 7-Pros and Cons (due in lab) | |
| 5 | 13-Feb | Promoting patient adherence, 2002; Weiss & Britten, 2003; Murphy & Tallis, 2003. | Medication Taking Partnerships | X | | Counsel SP with "adherence" problems | 8-Intervention Flow Chart (due in lab) 9-Job Assignments (due in lab) 10-Intervention description (due week 7) 11-Intervention Materials (due week 7) | |
| 6 | 20-Feb | n/a | Expanded Roles in Hospitals | Xa | X | LAB EXAM-1 | | |
| 7 | 27-Feb | Berger, 2005 -Chpt 6; Berger, 2005 -Chpt 7; | Dealing with Anger & Conflict | X | | Counsel SP with anger or distrust of RPh | Review Structure of Executive Summary & Appendixes | |
| 8 | 6-Mar | Berger, 2005 -Chpt 9; Scales, 2003; Berger, 2005 -Audio | Helping Patients with Lifestyle Change | X | | Counsel SP with resistance to change | 12-Project Flowchart & Timeline (due in lab) | |
| 9 | 13-Mar | SPRING BREAK | | | | | SPRING BREAK | |
| 10 | 20-Mar | Hermansen-Kobulnicky et al, 2004; The Right Track 2003; Janke & Tobin, 1997. | Setting Goals & Self-Monitoring | X | | Counsel SP with poor BP & low motivation to adhere | 13-Budget (due in lab) | |
| 11 | 27-Mar | Boyd et al, 2005. | Dealing with Complex Medication Regimes | X | | Counsel SP with complex medication regimen | 14-Quality Improvement (due in lab) | |
| 12 | 3-Apr | Berger, 2005 -Chpt15; Rodriguez de Bittner & Sias, 2004; Review USP Pictograms; Kisch, 2005. | Cultural Competency | Xa | X | LAB EXAM-2 | | |
| 13 | 10-Apr | Berger, 2005 -Chpt 10 | Physician-Pharmacist Communication | X | | n/a | Executive Summary & PowerPoint | |
| 14 | 17-Apr | Berger, 2005 -Chpt 8 | RN & Technician-Pharmacist Communication | X | | Time off to work on Group Project. TAs available by appointment. | | |
| 15 | 24-Apr | n/a | Changing Patient Expectations | Xa | X | Group Project Presentations | | |
| 16 | 1-May | n/a | Expanded Roles in Community Pharmacy | Xa | X | Group Project Presentations Lab Wrap-Up (Return folders, videos and graded materials; Q&A for final exam) | | |

*Pre-lecture Assignments marked X are due on the Monday at start of lecture. Pre-lecs marked Xa are due the prior Friday at noon.

STUDY GUIDE

For each week, there is a list of goals, assignments, lecture topics, and lab activities. Please review study guide before completing your assignment. Note: SP=Standard Patient

Week 1 –Lab Orientation 17-Jan

GOALS:

1. Learn about course and lab procedures
2. Complete first videotaping session
3. Set personal goals for consultation skills

✂ Toolbox:

Self-assessment

ASSIGNMENTS:

No Assignment

LECTURE: No Lecture

LAB (Go to 2121):

1. Select members of the small group projects
2. Discuss possible pharmacy site for project
3. Complete lab orientation
4. Videotape baseline consultation with standardized patient (SP)
5. Complete self-evaluation to identify strengths and goals for improvement
6. Discuss small group leadership and staff feedback procedures

| | |
|--|---------------|
| Week 2 –Counseling Framework and Rapport Building | 23-Jan |
|--|---------------|

GOALS: After completing this week's activities, you should be able to:

1. Identify key characteristics of project site pharmacy
2. Tailor & integrate IHS approach within your larger counseling framework.
3. Identify and apply different types of probes when assessing the patient's understanding.

✂ TOOLBOX:

1. Indian Health Service approach to counseling
2. Probing techniques, questions

ASSIGNMENTS:

Read:

1. Berger, B. (2005). Supportive communication. Communication skills for pharmacists: Building relationships, improving care (pp. 141-150). Washington DC: American Pharmacists Association.
2. Svarstad, B.L. (2003) Probing the Patient's Response, pp. 1-2.
3. Tindall, W. M., & Millong, M. K. (2003). Judith Somers Hanson: Energy and fun equal progress. Pharmaceutical care: Insights from community pharmacists (pp 81-88). CRC Press: Boca Raton, FL.

Do:

Week 2 Pre-lecture Assignment
Describing the Site Template in lab

LECTURE: Betty Chewing

LAB:

1. Describe pharmacy site using template.
2. Complete consultation with depressed SP having poor understanding of condition or its treatment
3. Analyze videotape for effective and ineffective methods of checking understanding (*Self-evaluation*)
4. Participate in group feedback and discussion.

GOALS: After completing this week’s activities, you should be able to:

1. Develop an overview of a planning process
2. Understand and conduct a preliminary SWOT Analysis
3. Focus a needs assessment on a pharmacy site
4. Develop an understanding of your pharmacy’s mission & project objectives
5. Examine the significance of the problem you are addressing in the group project via lit search

✂ TOOLBOX:

1. SWOT Analysis
2. Needs Assessment as part of a planning process
3. Writing Objectives

ASSIGNMENTS:

Read:

1. Harrison, D. L. (2005). Strategic planning by independent community pharmacies. *Journal of the American Pharmacists Association*, 45(6), 726-733.
2. Hagel, H. P., & Rovers, J. (2002). Planning for patient care. *Managing the patient-centered pharmacy* (pp. 1-19). Washington DC: American Pharmacists Association.

Do:

Week 3 Pre-lecture Assignment
SWOT Analysis Template in lab
Stakeholder Questions Template in lab
Significance of the Problem Template started (due start of lab in week 4)
Start working on pharmacy’s mission and objectives for your project (due start of lab in week 4)

LAB:

1. Meet with lab staff to begin to formulate your program objectives for your group project.
2. Conduct a preliminary SWOT Analysis to begin to test the possibilities.
3. Identify 10-12 questions per 3 stakeholders to identify needs and feasible approaches
 - a. Note typed responses from stakeholders due at start of lab week 4.
4. Find 3-5 articles on the significance of the problem and possible approaches to address it.

GOALS: After completing this week's activities, you should be able to:

1. Define and demonstrate show-tell techniques for new and refill prescriptions
2. Identify strategies to establish rapport/ empathy in a busy community pharmacy and with hurried patients
3. Identify other ways to raise or uphold standards of counseling if pharmacy is busy or patient is rushed
4. Frame the significance of a problem for group project and state objectives to address it.

✂ TOOLBOX:

1. Show and tell
2. Techniques for establishing rapport
3. Promise statement
4. Business cards
5. Weighing options for any intervention within reality

ASSIGNMENTS:

Read:

1. *Berger, B. (2005). Listening and Empathetic responding. Communication skills for pharmacists: Building relationships, improving care (pp. 49-58). Washington DC: American Pharmacists Association.
2. Pharmacist-patient consultation program: An interactive approach to patient consultation (2002). (pp. 5-8). New York, NY: Pfizer Inc.
3. Tindall, W. N., Beardsley, R. S., & Kimberlin, C. L. (2002). Listening and Empathetic responding. Communication skills in pharmacy practice (4th ed.) (pp 63-80). Philadelphia: Lippincott, Williams & Wilkins.

Do:

Week 4 Pre-lecture Assignment
Significance of the Problem Template due at start of lab
Initial Problem, Objectives Template due at start of lab
Typed summary of Stakeholder responses due at start of lab
Do Pro's & Con's Template 7 in lab

LECTURE: Charlie Lee

LAB:

1. Do Pro's & Con's Template 7 in lab
2. Complete consultation with hurried SP
3. Analyze videotape for common errors and appropriate responses in these challenging situations (*Self-Evaluation*)
4. Participate in group feedback and discussion. Consider images and attitudes projected

GOALS: After completing this week’s activities, you should be able to:

1. Assess patients’ medication taking behaviors.
2. Detect barriers to adherence using supportive probing techniques
3. Develop strategies to help patients overcome barriers to taking their medications (i.e., cost)
4. Compare and contrast compliance, adherence and concordance frameworks.
5. Begin to design and use flowcharts.

✂ TOOLBOX:

1. Support ways to ask patients about medication taking behaviors.
2. Reflective responses, nonjudgmental statements & open-ended questions.
3. Situations & techniques to use Transtheoretical Model & Concordance.
4. Flowcharts

ASSIGNMENTS:

Read:

1. Pharmacist-patient consultation program: Promoting patient adherence. (2002). (pp 3-10) New York, NY: Pfizer Inc.
2. Weiss, M., & Britten, N. (2003). What is concordance? *The Pharmaceutical Journal*, 271, 493.
3. Murphy, A., & Tallis, R. (2003). How to achieve concordance through ethnic sensitivity and lateral thinking: A case study. *Pharmaceutical Journal*, 271(7270), 511-512.

Do:

Week 5 Pre-lecture Assignment

Flowchart Template in lab

Job Assignment Template in lab

Look over the following templates in lab due in lab week 7:

Template 10 - Intervention Description

Template 11 – Intervention Materials

LECTURE: Betty Chewing

LAB:

1. Develop flowchart of intervention
2. Identify responsibilities of group members
3. Complete consultations with asthmatic SP having adherence problems.
4. Analyze videotape for appropriate use of objective and subjective evidence and adherence probing techniques (*Self-Evaluation*)
5. Participate in group feedback and discussion.

| |
|--|
| Week 6 – Expanded Roles in Hospitals / Lab Exam I |
|--|

| |
|---------------|
| 20-Feb |
|---------------|

GOALS: After completing this week's activities, you should be able to identify examples of expanded pharmacy roles in hospital settings

✂ TOOLBOX:

ASSIGNMENTS:

Read: n/a

Do: Week 6 Pre-lecture Assignment

LECTURE: Guest Lecturer

LAB: EXAM.

1. Complete consultation with SP having problems discussed in previous weeks
2. Obtain individual feedback from lab staff at the end of the session.

GOALS: After completing this week’s activities, you should be able to:

1. Recognize verbal and nonverbal cues signaling anger, conflict, and lack of trust in pharmacist
2. Recognize and demonstrate appropriate techniques for dealing with these challenging situations.
3. Detect and correct non-recommended responses to these situations
4. Design and use flowcharts

✂ TOOLBOX:

1. Assertive behaviors (& avoiding passive and aggressive behaviors).
2. Prepare, Assess, and Response (PAR) technique.
3. Reflecting responses.
4. Probes techniques such as acknowledging, pressing the pause button, getting going, & using non-verbal cues.
5. Setting limits by guiding talk, starting again, being factual, using feedback, & ending the consultation.
6. Flowcharts

ASSIGNMENTS:

Read:

1. Berger, B. (2005). Managing the angry patient. (pp 75-86). Washington DC: American Pharmacists Association.
2. Berger, B. (2005). Assertiveness. Communication skills for pharmacists: Building relationships, improving care (pp. 87-96). Washington DC: American Pharmacists Association.

Do:

Week 7 Pre-lecture Assignment
Hand in Template 10-Intervention Description
Complete & hand in Template 11- Intervention Materials

LECTURE: Betty Chewing

LAB:

1. Identify resources (tools) to be used in your proposed plan via template 11.
2. Complete consultation with angry SP.
3. Analyze videotape for common difficulties and appropriate responses in these situations (*Self-Evaluation*)
4. Participate in group feedback and discussion. Consider different images and attitudes projected in these situations.

GOALS: After completing this week's activities, you should be able to:

1. Demonstrate motivational interviewing techniques to help patients resistant to change
2. Detect and correct common errors by professionals when interacting with resistant patients.
3. Develop a timeline for the preparation and implementation of an intervention in a pharmacy

✂ TOOLBOX:

1. Motivational interviewing techniques
2. Development of Timelines

ASSIGNMENTS:

Read:

1. Berger, B. (2005). Helping patients with change. Communication skills for pharmacists: Building relationships, improving care (pp. 107-130). Washington DC: American Pharmacists Association.
2. Scales, R. (2003). Why wrestle when you can dance? Optimizing outcome with motivational interviewing. Journal of the American Pharmacists Association, 43(5), s46-47.
3. Berger, B. (2005). Enhancing Compliance through Motivational Interviewing. Presented at American Pharmacists' Association Conference, Orlando, Florida, April 1-5, 2005. (Audio will be available at Learn@UW).

Do:

Week 8 Pre-lecture Assignment;
Timeline & project flowchart template12 in lab

LECTURE: Betty Chewing

LAB:

1. Complete a timeline for preparing for and implementing your intervention
2. Complete consultation with SP having resistance to change
3. Analyze videotapes on the use of motivational interviewing techniques in this situation
(*Self-Evaluation*)
4. Participate in group feedback and discussion.

GOALS: After completing this week's activities, you should be able to:

1. Identify patient goals and monitor their progress.
2. Assess a patient's interest in self-monitoring
3. Identify the importance of patient goals related to self-monitoring
4. Help patients decide how to document their symptoms/readings
5. Identify key resources and tools your group project will use
6. Identify how quality improvement is relevant to pharmacy innovations

✂ TOOLBOX:

1. Models for documenting symptoms/values
2. Approaches to assess patient interest, goals
3. Appreciation for home monitoring approaches and tools
4. Budget planning

ASSIGNMENTS:

Read:

1. Hermansen-Kobulnicky, C. J., Wiederholt, J. B., & Chewning, B. A. (2004). Adverse effect monitoring: Opportunity for patient care and pharmacy practice. *Journal of the American Pharmacists Association*, 44, 75-86.
2. The Write Track: Personal health tracker. (2003). Princeton NJ: Bristol-Myers Squib.
3. Janke, K. K., & Tobin, C. (1997). Initiating practice change: Negotiating goals of therapy with patients. *Canadian Pharmaceutical Journal*, 130, 24-25,27.

Do:

Week 10 Pre-lecture Assignment;
Budget template 13 in lab

LECTURE: Betty Chewning

LAB:

1. Hand in completed Budget template after identifying startup costs & revenue (if any)
2. Complete consultation with SP having poor BP control and low motivation to adhere
3. Analyze videotape for the appropriate management of these situations (*Self-evaluation*)
4. Participate in group feedback and discussion.

GOALS: After completing this week's activities, you should be able to:

1. Identify and demonstrate appropriate use of medication boxes and special packaging
2. Identify situations in which these techniques are known to be effective.
3. Demonstrate effective ways of assessing patients' needs for assistance in this area
4. Identify quality improvement approaches that might be used in a pharmacy

✂ TOOLBOX:

1. Tools for assessing and intervening in patient adherence
2. Quality improvement planning

ASSIGNMENTS:

Read:

1. Boyd, C. M., Darer, J., Boulton, C., Fried, L. P., Boulton, L., & Wu, A. W. (2005). Clinical practice guidelines and quality of care for older patients with multiple comorbid diseases: Implications for pay for performance. *JAMA*, 294(6), 716-724.

Do:

Week 11 Pre-lecture Assignment
Quality Improvement and Budget Template

LECTURE: Betty Chewing

LAB:

1. Identify ongoing mechanisms to gather information for quality improvement on your proposed intervention
2. Complete consultation with SP having multiple medications and a recall barrier
3. Analyze videotape for the appropriate use of tailoring and cueing when counseling patients in these situations (*Self-Evaluation*)
4. Participate in group feedback and discussion.

GOALS: After completing this week's activities, you should be able to:

1. Discuss implications of racial & ethnic disparities in health care for RPh practice
2. Evaluate a pharmacy's stage of cross-cultural relationships & cultural competence
5. Identify resources that a pharmacy can use to assist with its cultural competence
6. Accept with humility that this is an ongoing area for growth

✂ TOOLBOX:

1. Working with an interpreter.
1. *Spanish for Pharmacists* book.
2. Links to resources for patients for whom English is not a first language.
3. Telephone resources

ASSIGNMENTS:

Read:

1. Rodriguez de Bittner, M., & Sias, J. J. (2004). Partners in self-care: Working with hispanic populations. Washington DC: American Pharmacists Association.
2. *Berger, B. (2005). Cultural competence. *Communication skills for pharmacists: Building relationships, improving care* (pp. 193-206). Washington DC: American Pharmacists Association.
3. The United States Pharmacopeia,. USP pictograms. Retrieved Jan 7, 2004 from <http://www.usp.org/drugInformation/pictograms/> (Link available at Learn@UW)
4. *Kisch, G.R. (2005) *Essential Spanish for Pharmacists* (2nd Ed) . Washington, D.C: American Pharmacists Association. Please review the book.

Do:

Week 12 Pre-lecture Assignment

LECTURE: Betty Chewning & Panel

Week 13 – Physician-Pharmacist Communication**10-Apr****ASSIGNMENTS:****Read:**

1. Berger, B. (2005). Interacting with physicians. Communication skills for pharmacists: Building relationships, improving care (pp. 131-140). Washington DC: American Pharmacists Association.
2. Examples of Executive Summaries on Course Website

GUEST LECTURE(s)**LAB:**

1. Work on handout, executive summary, & PowerPoint slides.

Week 14 – Technician-Pharmacist Communication**17-Apr****ASSIGNMENTS:****Read:**

1. Berger, B. (2005). Conflict management. Communication skills for pharmacists: Building relationships, improving care (pp. 97-106). Washington DC: American Pharmacists Association.

GUEST LECTURE(s)**LAB:**

1. Time off to work on Group Project. TAs available by appointment.

Week 15 – Changing Patient Expectations**24-Apr**

No Readings

GUEST LECTURE(s)**LAB:**

1. Presentations

Week 16 – Expanded Roles in**1-May**

No Readings

GUEST LECTURE: Mike Flint**LAB:**

1. Presentations
2. Lab Wrap-Up

LAB INFORMATION

Sequence of Labs

1. Lab Intro: Room 2121 10 Min

- TAs will share course announcements and pass out folders (with self-evaluations and templates)
- TAs will provide an overview of the current lab.

2. Group Project: Room 2121 30 Min

- TAs will share course announcements and pass out folders (with self-evaluations and templates)
- TAs will hand out and explain template for this week's part of the group project
- Complete the template in your small group.
- TAs will circulate, review progress, and answer questions
- Hand in templates before the group review.

3. Taping: 60-75 min

Background for Patient Encounters

In the communications lab, you will be playing the role of the counseling pharmacist in a community or clinic pharmacy. You will be assigned one taping time for the semester first lab.

A Typical Taping Session

- You start in room 2121 where you will have 5 minutes to prepare for the patient scenario.
- You will be provided with a short description of the scenario, a patient profile similar to the one used in pharmacotherapy, drug information sheets, and a copy of the prescription. These materials will be provided on a clipboard for you to take into patient consultation. Labeled prescription vials and/or other products will be provided in the taping station with the standardized patient.
- You may bring any drug information book(s) into 2121 for preparation. You can not bring the books into the consultation.
- You can bring one page of paper into the consultation. We will leave blank pages for you. We strongly encourage you NOT to read or extensively referred to this page in the patient consultation. If you do so in a lab exam, you may be deducted marks.
- You will have 6 minutes to complete your consultation. A warning timer will go off at 5 minutes indicating that you have 1 minute remaining. The second timer will go off at 6 minutes. You should stop your consultation at that time.
- We encourage students to be brief and efficient. You will NOT be penalized for ending early. In fact, we encourage you to do so while still covering all important information.

- After the consultation, please move to a viewing station. You have 15 minutes to view your tape and complete a self-evaluation (forms available at the front of the lab).
- Please hand in self-evaluation to front of the lab.
- You may leave the lab while others are taping and return for group review or you may work on the group project in 2121.
- If your tape is being reviewed by the group or staff, please rewind to the beginning of this week's encounter.
- Patients will evaluate your performance each week on a standardized form. These evaluations do not count toward your grade, but can provide you with useful feedback on your performance. They will be returned to you in the group review.

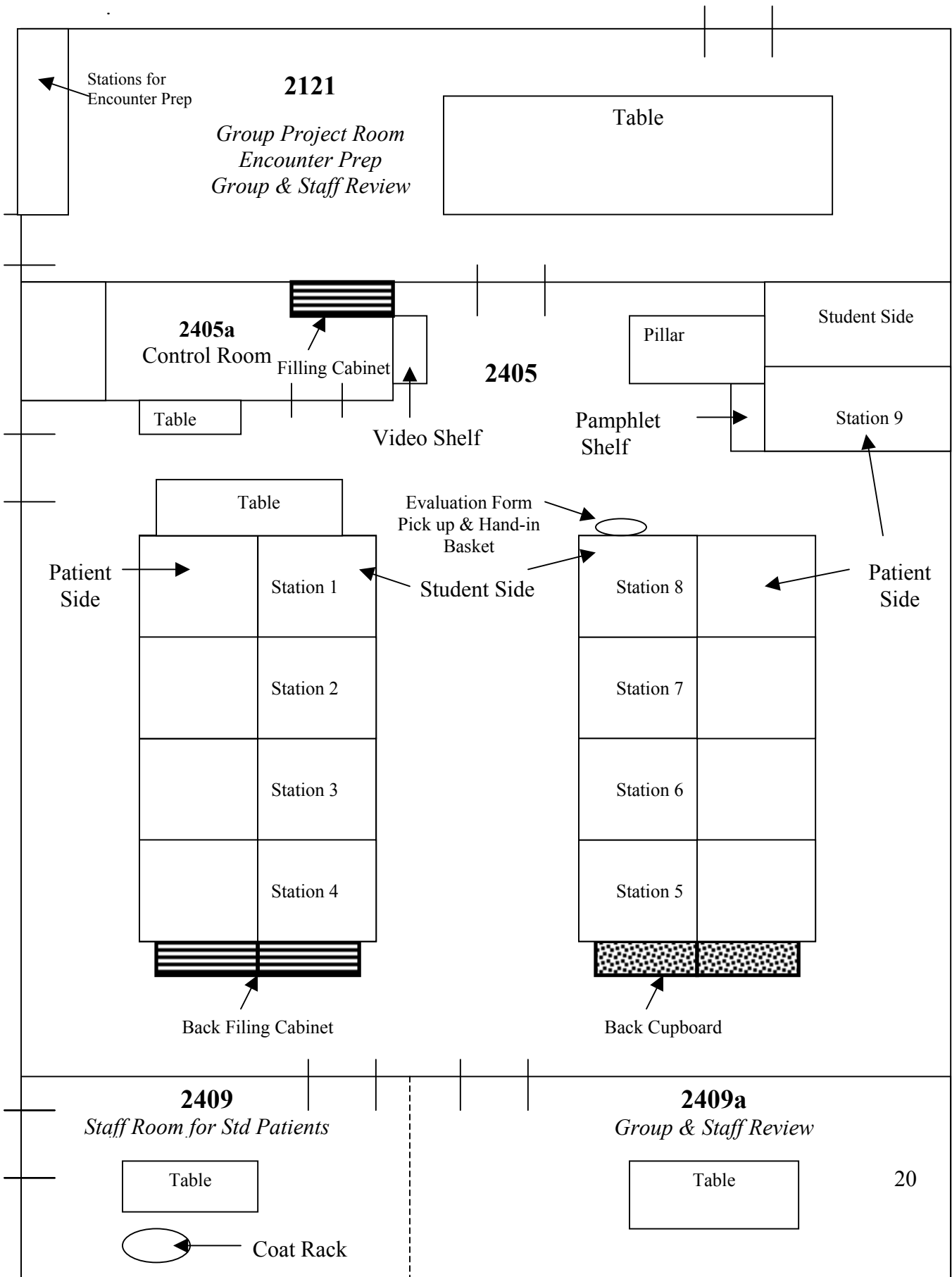
4. Group Review: 35-50 min (Note: Templates should be handed in before Group Review)

- You will be assigned into one of 2 groups for group review – A and B.
- One group goes into 2121 and the other group into 2409a. Each group watches one student's video and provides feedback.
- You be assigned one week during the course when the group watches your video.

5. Staff Review: 30 min

- You will be assigned to staff review twice during the course.
- When it is your turn, you and at least one other student will receive feedback from your TA.
- After watching their videos together, you will give feedback on your video and receive additional comments from your TA.

652 Lab Map



PRE-LECTURE ASSIGNMENTS

- Pre-lecture assignments are due weeks 2-8, 10-16.
- Pre-lecture assignments will help you prepare for lecture and lab where different counseling situations and techniques will be presented and practiced each week.
- Each assignment consists of several questions to integrate your experiences and the content from the readings. Your answers should reflect your thoughts about the assigned reading.
- Pre-lecture assignments are available on Learn@UW.
- To receive full credit, the pre-lecture assignment must be completed and submitted on Learn@UW by 11:00am on Monday.
- Your TA will grade your assignment electronically and may post comments for you on Learn@UW.

LECTURE COMMENTS

- Lecturer comments and questions are assigned on weeks 6, 12, 15 and 16.
- You will be required to write a comment and post a question for each guest lecturer. More specific instructions will be provided prior to each lecture.
- To receive full credit, you must hand in your lecture comments at the back of the lecture hall at the end of the lecture. Late lecture comments will not be accepted.
- Your TA will post your grade electronically on Learn@UW. Lecture comments will not be returned to you.

SELF-EVALUATIONS

- Self-evaluations are to be completed after regular (not exam) taping with standardized patients.
- The self-evaluation of your videotape will give you an opportunity to see and hear how well you were able to apply the week's counseling concepts and techniques, to examine the patient's verbal and nonverbal cues and responses to your counseling efforts, and to identify questions/observations/challenges that you might share with others during the group or staff review sessions.
- Tape evaluation forms will be posted on Learn@UW prior to the lab if you wish to use them to prepare for labs.
- Tape evaluations forms will be provided in the lab for the self, group, and staff-evaluations.
- To receive full credit, the self-evaluation must be handed in by the start of group review and indicate that you have analyzed and thought about your counseling skills and ways to improve them.
- TA will grade your self-evaluation and return them to you to file in your lab folder.
- The next page has a sample tape evaluation form.

Tape Evaluation: Week 2

Student Pharmacist:

Lab:

Rater: __self __peer __staff

1. What prime questions were used? What probes or follow-up questions were used to clarify, elaborate, or 'expand' the patient's response? (Give wording if possible)

| Area of understanding | Prime questions used | Probes or follow-up questions used (include silent probes) |
|---|----------------------|--|
| Drug names, purpose, how it works | 1. 2. | 1. 2. |
| Directions for use, treatment duration, etc. | 1. 2. | 1. 2. |
| Drug effects, side effects, precautions, what to do | 1. 2. | 1. 2. |
| Other | | |

2. What verbal/nonverbal cues signaled misunderstanding or need for information? How did student pharmacist respond?

| Cues signaling possible misunderstanding or need for info | Student response |
|---|------------------|
| 1. | 1. |
| 2. | 2. |

Please Turn Over & Complete other Side

3. Overall, how well did student pharmacist apply counseling concepts/skills? Identify three (3) strengths and two (2) suggestions for him/her to consider in the future.

| Strengths: |
|------------|
| 1. |
| 2. |
| 3. |

| Suggestions for future: |
|-------------------------|
| 1. |
| 2. |
| 3. |

GROUP PROJECT

A. Project Objectives, Steps, Schedule and Assignments

1. Objectives.

- The objectives of this project are to increase communication and planning skills to:
 - a) address one of two barriers to expanded pharmacist communication and roles,
 - b) propose pharmacy changes by analyzing needs, designing and evaluating pharmacy interventions,
 - c) identify existing tools and approaches that you can use in practice to support expanded roles and communication,
 - d) promote your ideas by means of an oral presentation and written executive summary,
 - e) work together as a group.

2. Types of Projects.

There are two group projects that 652 students will address. Your group will plan how to help a pharmacy make changes in one of three areas. You will focus on one pharmacy – selected by your group. If your group cannot select a pharmacy you have contacts with please ask your TA to help you. The pharmacy can either be local or outside of Madison. (See **Steps in Project Planning** below to see the types of information you will need from the site via phone.) Your group will design a project to do one of the following:

A) **Raise Patient Expectations of Pharmacists** for consultation & monitoring roles.

- This project can take many forms such as raising expectations of patients during routine consultations (initial and/or refills), introducing new programs at the pharmacy, reaching out to groups with certain characteristics (ethnic, disease group, complexity of regimens, ages, disease groups, etc.)
- In this project, you will consider current pharmacy staff roles and opportunities, environment and cues, patient population characteristics and current expectations. Your task is to plan a program to raise patient expectations.

B) **Raise External Groups' Expectations of Pharmacists** by working with at least one group (and possibly more) on a project.

- This project can take many forms such as raising expectations and forming partnerships with physicians, HMO's, employer groups, public health departments, public schools, independent insurance agents or other third party reimbursers.
- Your work could include any of the following for example: promoting continuity of care generally or for a specific group of patients, developing a possible educational or monitoring program, establishing a collaborative agreement with a physician group around medications/disease areas of your choice, establishing a reimbursement mechanism for a program you are starting, helping to plan a reimbursed service by an employer group.
- In this project, you will not only consider your pharmacy but the perspective of your

potential partner/group that you wish to work with. Your group must decide how you would decide who to approach, how to approach them, and how to establish trust / respect and systems that will allow your joint project to move forward. This project can take many forms depending on your interest.

3. Steps in project planning.

- Across the semester, you will work in small groups on structured, phased tasks of a planning process in the first hour of our weekly labs. In this way, substantial planning progress can be made during class time.
- Below are the steps in the project planning and the assignments that will be due. We will provide structured templates in class to aid a focused planning process and group discussion. These templates will be combined with an executive summary for the written portion of the final assignment. The templates will also provide information for the final oral presentation.
- Each week one group member will act as the leader and another will act as the recorder. Rotate these jobs throughout the semester to ensure all group members share the workload.

Week 1

- You will select your groups of 4-5 people and you will receive your group folders.
- You will exchange information within your group about potential pharmacies you have had contact with.
- You will select a group member to contact the potential pharmacy. If your group is at a loss for pharmacy contacts you will discuss this with your TA for help.
- You will decide which of the 2 topics at least initially seems most interesting to work on.

Assignment(s):

1. Selecting a Pharmacy Site (neatly handwritten copy due in lab)

Week 2

1. You will complete Template 2: Describing the Pharmacy Site for the final pharmacy your group selected.
- Describe your site or sites (physical, staffing - techs, clerks, pharmacists throughout the week; scripts /staff ratio; presence of a drive through; layout; privacy; typical customer characteristics; common types of prescriptions; any current special programs; proximity to other health care providers; chain, franchise, independent; rural, small town, urban; documentation and computer arrangement; any third part reimbursement for cognitive services; special challenges).

Assignment(s):

1. Describing the Site Template (neatly handwritten copy due in lab)

Week 3 (Three hour session)

- In the first hour of this lab you will analyze your site using a SWOT analysis technique and identify additional information/questions you need to collect about your site. Then you will be free to go to the library for literature searches and/or to contact your pharmacy.

- The tasks for the first hour include the following.
 - a. Complete an initial SWOT analysis for your pharmacy using a template.
 - b. Design the site assessment by developing a list of 10-12 questions you would like to ask three stakeholders (pharmacy manager, tech, physician, insurer, consumer, etc.) to determine needs/ elements of the problem and how you might address them. You may use some of the SWOT questions in addition to other questions you identify. Also identify any other information sources at the site or corporation to determine needs or approaches you should use or avoid. Please identify characteristics of the patient population and the most common products used. Both patient profiles and pharmacist observation can assist. Consult with your TA about your plan to gather answers from your stakeholders at or before the next lab.
 - c. Begin thinking about the problem & significance of the problem your group will address based on your contact with the pharmacy if you have had them. Your stakeholder assessment will allow you to define this more precisely or even steer you into a new area. At the **next** lab 4 you will hand in the template 5 : Problem & Significance.
 - d. At the **next** lab 4 you will hand in the template 6: Mission Statement & Objectives. This is given to you in lab 3 so that you can identify the Mission of the pharmacy. You will decide on your objectives in lab 4 and hand these in at that time.
- The remaining time is available to go to the library to find 3-5 articles that document the significance of your group's problem and possible approaches others have used to address the problem. Please identify 3-5 citations to be used in 1-2 paragraphs that summarize the significance of the problem you are attempting to address and any approaches you found that you liked. (This needs to be typed up and is due at beginning of lab Week 4).

Assignment(s):

1. SWOT Analysis Template (neatly handwritten copy due in lab)
2. Stakeholder Questions Template (neatly handwritten copy due in lab)
3. Significance of the Problem Template (typed draft due at beginning of week 4 lab)
4. Mission Statement and Objectives Template (typed draft due at beginning of week 4 lab)

Week 4

- Group members will discuss their SWOT information as well as the answers to their 10-12 questions from the Stakeholder Survey.
- This information coupled with your literature search in Week 3 will help frame your statement of objectives that you will work on today. In the week 4 lab, complete the template in which you define an *initial* statement of the objectives.
- Identify options for approach to meet objectives you defined. Analyze the pro's and con's of each option. Please force yourself to scale down and tailor your options to the pharmacy. Evaluate the feasibility of each option to help you do this.

Assignment(s):

1. Stakeholder Typed Responses to Survey (typed and due in beginning of lab).
2. Significance of the Problem Template (typed and due at beginning of week 4 lab)
3. Mission Statement and Objectives Template (typed and due at beginning of week 4 lab)
4. Evaluate the pro's, con's and feasibility of your options. (neatly handwritten copy due in lab)

Week 5

- Today create a flow chart of your intervention (Template 8) and indicate how you will show this to your pharmacy for feedback. This is handed in at the end of today's lab. List a few questions you want to ask of those directly or indirectly affected by this plan to evaluate if it is feasible and they would want to buy in.
 1. Over the next 2 weeks you will seek feedback from your pharmacy on your flowchart and summarize feedback from your pharmacy for the next lab which is 2 weeks from now. It is essential to get the pharmacy's suggestions about how to make this project realistic. Be prepared to reduce the project if needed.
- Complete the table of job assignments (Template 9) for each of your group members to assure an equitable distribution of responsibilities and allow TA's to attribute accomplishments appropriately. A neat handwritten draft is due at the end of lab.
- Start the intervention description (Template 10) with a description of recommendations and reactions from your pharmacy. Please consider what you will refine or adapt further based on the feedback. Refine your plan and flowchart based on reported buy-in and perceived feasibility from sites. Keep your notes on this for your final product.
- Over the next 2 weeks look through books in the labs and library to identify approaches, resources and materials that could be available to help accomplish your goals (e.g. patient handouts, documentation forms, physician fax letters, advertisements, flyers, checklists, patient education materials, and more) for Template 11. You may create them if you cannot find the right resources. If you feel you need to revise or reduce your objectives, you may do so. But you need to talk to your TA about this.

Assignment(s):

1. Intervention flowchart template 8 and plan for getting pharmacy feedback (neatly handwritten copy due in lab).
2. Job Assignments template 9 should be completed today.
3. Intervention Description Template 10 (typed copy due at beginning of week 7 lab)
4. Intervention Material Resources Template 11 (typed copy due at beginning of week 7 lab)

Week 6 LAB EXAM 1

Week 7

- Your TA will review the structure of the executive summary and appendixes as well as provide an example.
- Meet with your group to discuss the structure of your executive summary and appendixes.

Assignment(s):

1. Intervention Description Template 10 (typed copy due at beginning of week 7 lab)
2. Intervention Material Resources Template 11 (typed copy due at beginning of week 7 lab)

Week 8

- This week identify stages and a specific timeline for implementing the proposed approach using the template in lab. Develop a project implementation flowchart in which you chart steps for implementing your plan. Over time who does what and when. Pay attention to how this will fit into the existing responsibilities and procedures at the pharmacy. For example,

what type of training, development of materials, advertising, staff reallocation, space changes, delegation of responsibilities, evaluation, etc. is needed and in what sequence to implement the plan effectively? After you draw a flowchart of steps put it into a timeline in template 12.

Assignment:

1. Project Flowchart and Timeline template 12 due in this lab (handwritten neatly).

Week 9 – SPRING BREAK

Week 10

- Identify your budget for the proposed project you have planned including personnel and items needed for the project. Include the pharmacists' time, material costs. If your project will generate revenue please indicate this as well and how it would be generated (third party reimbursement, fees to employers, fees to patients, etc.).

Assignment:

1. Budget Template 13 (neatly handwritten copy due in lab)

Week 11

- In the spirit of quality improvement, please identify what you would do to keep improving on your approach (information you would gather formally or informally, who would be your sources and when (ongoing?, periodic?), who would gather it.

Assignment:

1. Quality Improvement Template 14 (neatly handwritten copy preferably due in lab, but will be accepted up to week 12 lab exam)

Week 12 LAB EXAM 2

Week 13

- Planning Your Presentation. This lab you have time to work on handouts, executive summary, and PowerPoint as well as the complete executive summary which will be handed in on the day of the presentation.
- You will sign up for which week you wish to do your presentation.

Assignment(s):

none

Week 14. Free time to work on presentations with opportunity to make an appointment with TA.

Week 15 PRESENTATIONS

Week 16 PRESENTATIONS

4. Oral presentation.

- Each team will give one 30-minute oral presentation (20 minutes for presentation, 10 minutes for discussion.) of your plan. We are inviting pharmacists and consumers to be present for the presentations to join in giving you feedback on your plans. Depending on the projects you undertake we may invite other professionals to join the feedback sessions as well.
- Each student is expected to participate equally in giving the oral presentation. The presentation should include PowerPoint slides or other visual aids and one or more handouts showing the tools you propose to use in your program. A laptop computer and projector will be available. If you are unfamiliar with PowerPoint, please inform your lab coordinator by April 1. We will arrange training sessions if there is a need for them.

5. Written Executive Summary.

- At the time of your oral presentation you will present our guests and the teaching instructors with your 3-4 page Executive Summary and appendices.
- Assume that you are staff pharmacists in your selected practice setting and that your executive summary is now going to be read by a range of people including the managers and/or administrators who must approve your proposed program.
- The appendix should have a table of contents and include your resources/ tools, handouts if you have any, template assignments (typed or very neatly printed), proposed quality improvement tools (surveys, etc.). All of your lab group project assignments have prepared you to do this document and should be reflected in it.

6. Grading Criteria

- Detailed Grading Criteria will be available on Learn@UW.
- See information on grading under “Evaluation of Performance” under “Course Staff and Policies” at the start of the manual for grading information.

The following Group Project Templates #1-14 will structure your group planning project..