



CONNECT AND CARE MODEL AND TOOLS



CANADIAN
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The following toolkit is the result of a project designed to investigate and support increased communication between pharmacists and patients by:

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INTRODUCTION

The landscape of community pharmacy is changing rapidly across Canada. Health care providers are increasingly moving towards the adoption of patient-centred care models, which require shared decision-making between health care providers and patients. Concurrently, new pharmacy service frameworks are being implemented across the country, giving community pharmacists the ability to prescribe, inject medications and provide routine medication reviews. In many jurisdictions, reimbursement frameworks compensate pharmacists for performing these new roles. Community pharmacists provide services that are much needed with an aging Canadian population, increasing rates of chronic disease, and insufficient access to physician services.

In spite of media announcements regarding these new services, patients using community pharmacies are often unaware or confused about the range of health care services that their pharmacists can now provide. There also appears to be a lack of awareness regarding the critical roles community pharmacists can play on health care teams. Community pharmacists have the distinction of being one of the most geographically and temporally accessible health care service providers in Canada, yet are also noted as a vastly underutilized resource in community-based health care services.

We recognize that for many pharmacists, the process of actively increasing engagement with patients may require a new understanding of the patient-pharmacist relationship and the development of new skills in order to practice effectively in the new pharmacy environment.

The goal of this project was to produce an evidence-based model that would support community pharmacists to increase engagement with patients in community pharmacies. For this work we conducted a scan of the academic and grey literature, interviewed stakeholders across Canada, and conducted focus groups with pharmacists and patients. This research provided the foundation for the development of the **Connect and CARE** Model.

THE MODEL

The Connect and CARE model illustrates best practices for engaging patients in patient-centered care services. We recognize that this model does not work for all practices nor should a pharmacist employ all steps at each interaction. We hope pharmacists find elements that work for their practice and that they can customize this model for their own practice.

The model and tools are premised on the following assumptions:

1. This model is primarily focused on frontline community pharmacists and the services they provide;
2. As health care professionals, community pharmacists have a moral and legal obligation to take the lead in fostering engagement with their patients, regardless of whether they are comfortable in this role;
3. Community pharmacists will have to address a wide range of patient needs in their practice, from patients who require only minimal assistance to those who require extensive support. Because of this, community pharmacists need ways to quickly and efficiently identify what level of patient care is required for each individual patient;
4. Pharmacists already have sufficient clinical knowledge to deliver all the services they are legislated to provide at the community level;
5. Patient-centered care is required for the profession of pharmacy to thrive. Patient-centered care is the emerging paradigm for health care services and community pharmacy requires pharmacists to be primarily providers of health care services, rather than health care products;
6. New workflow models will be required to support community pharmacists to engage in more patient-centred care.

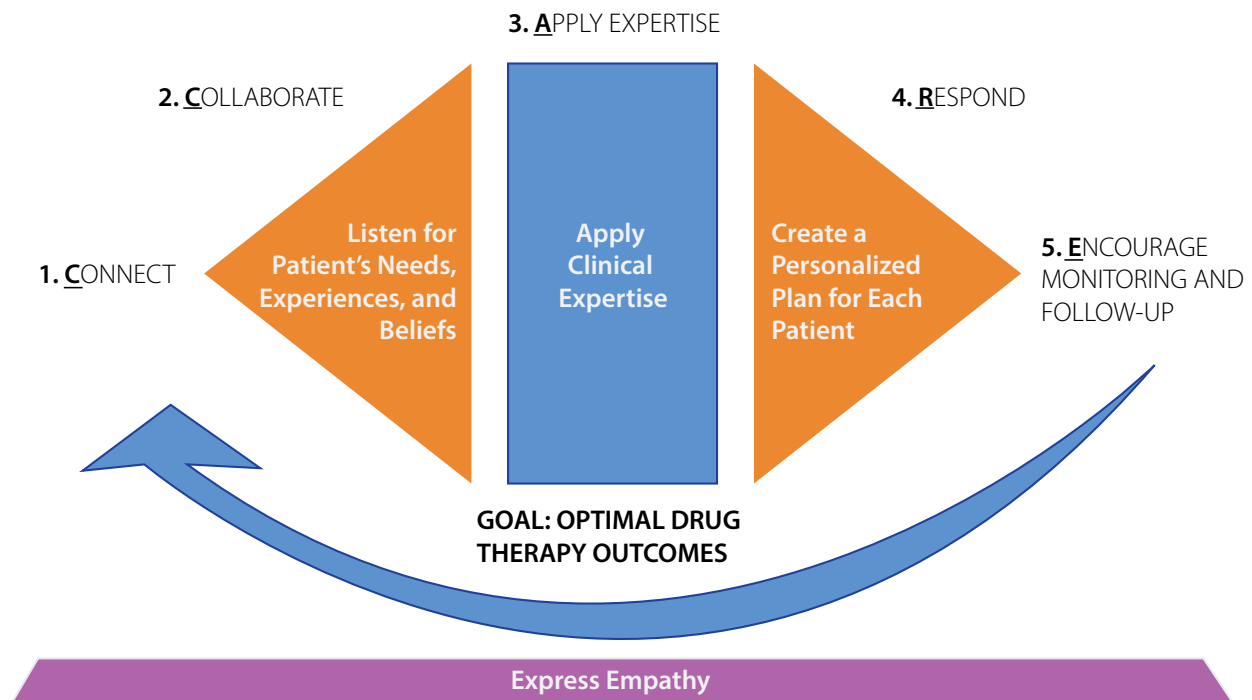
THE CONNECT AND CARE MODEL:

The Connect and CARE Model is comprised of the following five stages, illustrated below:

- 1. Connect:** Take a moment to connect with the person at the counter.
- 2. Collaborate:** Talk with the patient about medication or medical issues. Collaboration in a patient-centered model assumes that communication will be bi-directional, between pharmacist and patient, and address patient needs and concerns.
- 3. Apply Clinical Expertise:** Use clinical knowledge and expertise to ensure patients receive the right medication-related solutions.
- 4. Respond:** Respond to patient's needs with a personalized plan, with information that is tailored to - and relevant for - the individual patient. Support the patient in understanding how medication information applies to their specific needs and concerns.
- 5. Encourage Monitoring and Follow-up:** make patients aware pharmacists are interested in their health and want to know how they are doing. Also ensure patients have enough information to make sure their medications are working for them.

Expressing Empathy helps to create and maintain the connection. It can occur at any stage – or all stages – of the Connect and CARE Model.

Figure 1: Connect and CARE Model



THE TOOLS:

Concept models of five tools were developed to assist community pharmacists in implementing the Connect and CARE Model. The table below summarizes the use of the tools in relation to the model.

Tool	Model Stage	Purpose	Potential Uses
1: Pharmacist Reflection	Prior to using model	To provide an opportunity for pharmacists to reflect on their level of patient engagement and satisfaction.	Pharmacists could explore their need and motivation to change their practice.
2: New or Refill Prescription Check	Collaborate	To identify patient's questions or concerns about new or refill prescriptions. To inform patients about pharmacists' services.	Pharmacists or pharmacy staff could distribute this tool to patients or use it with patients.
3: Invite Listen Summarize (ILS)	Collaborate	To allow patients to share their story and allow pharmacists' to check their understanding	Pharmacists could use ILS to open conversations and replace "any questions?"
4: Personalized Medication Information Sheet	Respond	To produce individually tailored information sheets for patients to use for at-home reference.	Pharmacist could complete and print individual patient information.
5: Patient Quiz: Do you need a med review?	Respond/ Encourage Follow-up	To provide an opportunity for patients to self-assess their need for a medication review. To initiate conversations about medication reviews	This tool could be distributed as a handout or bag stuffer.

TOOL 1: PHARMACIST PRACTICE REFLECTION

The pharmacy paradigm is changing. With the new pharmacy standards for practice, reimbursement models, and pharmacy technician regulation across Canada, pharmacists have an unprecedented opportunity to engage patients to optimize medication therapy. Pharmacy corporate leaders have indicated that workflow in pharmacies will be changing to allow for increased patient engagement.

This toolkit will help provide you with skills and tools to effectively engage patients in conversations over the pharmacy counter. **Are you ready to get started?**

There are no right or wrong answers, but this should provide you with some guidance about your level of motivation to change your practice towards a more engaged and patient-centred one.

Please answer all questions based on your practice in the last **past month**.

For what proportion of the following patients do you or your <u>pharmacy staff</u> ask patients if they have any questions?	No Patients	Few Patients	Less than Half	Half	More than Half	Most Patients	All Patients
1: Patients with NEW prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2: Patients with REFILL prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3: Patients with OTC purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For what proportion of the following patients, do you <u>engage in a discussion</u> of their medications?	No Patients	Few Patients	Less than Half	Half	More than Half	Most Patients	All Patients
5: Patients with NEW prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6: Patients with REFILL prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7: Patients with OTC purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Answer these questions, thinking about a typical week in practice.	What percentage of time do you currently spend in the following?	What percentage would you like to spend ?
Medication-related activities/duties (e.g. dispensing, preparing medication, checking for accuracy, compounding)		
Third party coverage activities (e.g. explaining, contacting, completing paperwork)		
Patient care activities (e.g., provide advice/information, medication review, create a clinical care plan, documenting, working with health care professionals)		
Management/business duties (e.g. managing pharmacy personnel, financing and systems, processing and reconciling claims, other management or administrative activities, developing resources for pharmacy practice)		
Other (e.g. teaching, preceptoring, research, etc)		
Total Time	100%	100%

In your opinion, how satisfied are your patients with their current pharmacist interactions?

- Not at all
 A little
 Somewhat
 Mostly
 Completely
 I don't know

How confident are you in your ability to connect with patients in your pharmacy?

- Not at all
 A little
 Somewhat
 Mostly
 Completely
 I don't know

Take a moment to look over your answers. What do these answers mean for you, your patients and your pharmacy workplace? Now what, if anything, would you change?

TOOL 2 (A): NEW PRESCRIPTION CHECK

With every new medication, your pharmacist checks to ensure your medication(s) are right for you. Your pharmacist should ensure you know:

- √ The name of this medication(s)
- √ When and how you should take your medication(s)
- √ How to tell a medication(s) is working
- √ What to do if a medication seems not to be working
- √ Common and important side effect(s) and what do to about side effect(s)
- √ Interactions with prescription, non-prescriptions, and herbal medications
- √ Cautions about activities, foods, and other drugs that may not be safe with your medication(s)

Your pharmacist may also ask what you are using medication for and what you know about the medication, in order to personalize your medication information.

What else do you want to know today?

- Nothing, I don't need more information today.
- How should I manage this medication with my other medications?
- Why should I take this medication?
- How long you should take the medicine? How many refills do I have?
- Is alcohol safe to drink while I am taking this medicine?
- What should I do if I miss a dose or accidentally take too much?
- Are generic medications effective?
- What other medication options are available?
- What non-medication choices might help improve my health?
- Other questions? Please write in the space below.

TOOL 2 (B): REFILL CHECK

With every refill medication, your pharmacist checks to ensure your medication(s) are right for you. Your pharmacist should:

- ✓ Ask if the medication is working for you
- ✓ Ask if you have had side effects
- ✓ Make sure you can manage the medication

What concerns do you have about one or more of your medication(s)?

- I have no concerns today.
- I am not sure if my medication(s) are working for me.
- I have experienced some bothersome side effects related to my medication(s).
- I find the dosing times are inconvenient.
- I am not sure if I need this medication.
- I am on too many medications.
- I am concerned I will develop tolerance to my medications.
- I am worried about long-term effects.
- I am concerned about using alcohol with this medication.
- I am concerned the dose isn't right for me.
- I am not sure if this medication is safe with other medications, vitamins or herbals I take.
- I am not sure what to do if I miss a dose or take too much.
- My medications are getting too expensive.
- Other questions? Please write in the space below.

In order to respond to your concerns, your pharmacist may ask what you are using medication for, how you have been using it, what you know, and specific questions about side effects.

TOOL 3: INVITE, LISTEN, AND SUMMARIZE IN COMMUNITY PHARMACY PRACTICE

Patients appreciate being asked if they'd had a medication before and if they had any questions; however patients also indicated that they might not know what to ask. If the pharmacist looked busy or the line-up was long, patients felt that they were not "sick" enough to warrant the pharmacist's time and would be less likely to "disturb" the pharmacist with a question.

Undoubtedly, the most currently used phrase in community practice right now maybe "any questions?" from the pharmacist or "any questions for the pharmacist?" from a pharmacy technician. Next in popularity would be, "Had this before?"

It is important to note that these questions do not invite conversation with patients! Why is this?

Research has shown that when physicians asked "any questions?", patients were less likely to raise concerns when compared to patients who were asked an open-ended question or no question at all (Heritage 2005). A study in community pharmacy found that when technicians encouraged patients to ask the pharmacist any questions it did not increase question-asking (Taylor 2001).

In our society, "any" is associated with "none", as in, "I don't have any bananas." When patients hear "Do you have any questions?" it subconsciously triggers a blocking mechanism. Instead of perceiving an invitation to share information, patients interpret this phrase as a signal that the conversation is done.

Invite, Listen, and Summarize (ILS) is a technique that will help you to allow your patients to tell their story. It should be used near the start of an interaction to gather general information about a patient's experiences and could be used to replace "any questions?" It can be used several times to open up or explore topics. This does not replace the need for specific closed-ended questions that would be required to verify specific information.

In the next three pages you will find the details of the Invite List and Summarize technique explained as well as two examples of putting them into practice.

Invite

- Invite the patient to share why they are seeing you or what they know about the medication.
- *“What happened in the hospital?”*
- *“What do you know about this medication?”*
- *“Tell me how it’s going on the new blood pressure medication.”*
- *“Tell me about your chest infection.”*

Listen

- Actively listen to understand patient perspectives and information on the medication purpose, directions and monitoring.
- Phrases such as go on, tell me more, or simply nodding your head may help people to continue their story.
- Maintain eye contact, lean forward, and do not interrupt.

Summarize

- Summarize both the **facts** and the **feelings** to ensure the patient feels heard and understood.
- Facts: *“So this infection has been around for several weeks and cough syrups are not helping.”*
- Feelings: *“Sounds like you are upset about starting another blood pressure medication.”*

- ILS allows patients to feel they have been heard.
- ILS can also prevent medication errors. It is the same concept as when pharmacists repeat back verbal phone prescriptions to make sure they heard correctly, only it also invites acknowledging the patient’s emotions, if discernible.
- When invited to share their stories, most patients do not dominate the conversation. If patients are off track, they can be gently brought back to the topic by simply noting, *“Let’s get back to…”*.

NEW PRESCRIPTION SCENARIO: USING INVITE LISTEN SUMMARIZE

Pharmacist: I see you brought in a prescription for amoxicillin antibiotic today. Tell me a bit about what brought you in.

Invite

Mrs. A: Well, I've had this terrible cough and it just will not stop. I have tried two different cough syrups and nothing helps in the past two weeks. I am keeping the whole family awake

Pharmacist: [nods head]. What else?

Listen

Mrs. A: Well, I finally decided I had enough and went to see Doc Fred. He gave me this prescription for amoxicillin. My kids usually get this one. I am not sure if it is strong enough for me. I usually get Cipro®.

facts

Pharmacist: So, you have had a chest infection and Doc Fred prescribed you amoxicillin. You seem worried that amoxicillin may not work for you.

Summarize

Mrs. A: Yes, that is it! I want to get better and don't have time to waste on the wrong drug.

feelings

Pharmacist: Well, it turns out that amoxicillin does cover chest infections, maybe even a bit better than ciprofloxin. I think it is a good choice for you.

Mrs. A: Thanks.

Pharmacist: Sounds like you have had this before. I don't want to give you unnecessary information. Tell me what you know about amoxicillin.

Invite

Mrs. A: I know it is three times a day, takes a few days to work, and might cause a bit of diarrhea.

Pharmacist: What else?

Listen

Mrs. A: I know you keep the liquid in the fridge, but assume my pills can go on the counter.

feelings

Pharmacist: Right on. You sound confident. I might just add that it is important to take all 10 days to prevent the infection coming back. Here are the pills...Let me know how it works next time you are in.

Summarize

NEW PRESCRIPTION SCENARIO: USING INVITE LISTEN SUMMARIZE

Mr. D: Hi Sue [pharmacist]. Here is a new prescription for pills I started last month.

Pharmacist: Thanks Mr. D. How are you doing?

Mr. D.: Okay, glad the snow stopped.

Pharmacist: Me too. Tell me, how is it going on that new pain medication?

Mr. D: Well, like you said they made me sleepy at first, but I got used to that pretty fast. I don't feel dopy any more.

Pharmacist: You don't feel drowsy.

Mr. D: Uh uh, but the pain is not better. The doc said it would take a while, but I am not sure I can wait. I would like to get back to my usually dog walking.

Pharmacist: What else?

Mr. D: That's about it.

Pharmacist: So the sleepiness is wearing off, but the pain is still not better. You also seem disappointed, is that right??

Mr. D: Yes.

Pharmacist: Well, I can tell you that it can take up to 8 weeks for that medication to start workings. I have seen other patients who have waited and found results in the second month.

Mr. D: Really?

Pharmacist: Yes, it takes time, but it does work. Even if it doesn't there are still other options for you. Would you like me to have the pharmacy staff prepare this refill for you?

Mr. D: Sure, I will give it another try.

Invite

Listen

Listen

Summarize

facts

feelings

TOOL 4: PERSONALIZED MEDICATION INFORMATION SHEET

Pharmacist:

Prescription Label

This is the most important information for you to know. Please consult the drug information sheet for complete information.

How will I know if my medication(s) are working?

How should I take this medication? What do I do when I run out?

What are the common side effects? Call your pharmacist or physician if these are bothering you.

What are the rare but serious side effects? Call your pharmacist or physician immediately if you experience these side effects.

What other special instructions?

TOOL 5: QUIZ: DO YOU NEED A MEDICATION REVIEW?

Please answer each question to the best of your knowledge.

	Yes	No	Don't Know
1. I sometimes wonder if my medication(s) are working.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I have unwanted effects from my medication(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I find the dosing times are inconvenient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I am not sure if I need my medication(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I am on too many medications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I can't remember to take my medication(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I am worried about long-term effects of my medication(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I am not sure if alcohol is safe with this medication(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am concerned the dose is too high or low.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I am not sure if my medication(s) are safe with my other non-prescription, herbal remedies, supplements or vitamins.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you checked "Yes" to one or more items on this list above, you may wish to discuss this concern with your pharmacist or physician. They may be able to address this concern at your next regular visit.

If you are taking 4 or more medications or have multiple medical conditions, your pharmacist or physician may also book an appointment for a medication review. A medication review can also be called a Comprehensive Annual Care Plan or a Standard Medication Management Assessment. At a medication review, your pharmacist or physician may review all of your medications, health conditions, your health goals, identify issues and make a plan to help you stay healthy.

Ask your pharmacist to help you manage your medications!

FOR MORE INFORMATION

FOR MORE INFORMATION ON THE CONNECT & CARE
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