2. BEING PREPARED
How to Anticipate Potential Barriers to Counseling

"I don't know...sometimes it gets so frustrating. You try to do the right thing and counsel patients, but a lot of times you get 'blindsided.' Suddenly you're presented with a complex situation. All you can think is 'Oh no!' You're not sure what's going on...or where to begin, and...well, you just want to give up...I mean, what can you do?"

This reaction of one pharmacist to a challenging encounter is typical. Recovering from, and dealing with, a breakdown in communication is never easy when you are surprised. The first strategy to prevent you from having to deal with that type of situation is to be prepared.

Before each counseling session, you can arm yourself with a few key facts about the patient that will alert you to:

- potential barriers to communication
- possible compliance problems
- the need for increased privacy for the encounter
- the likelihood that increased counseling time will be required.

Note: At this stage, the aim is primarily to raise your awareness of potential problems. This should make you more receptive to any clues that may subsequently emerge during your encounter with the patient. If appropriate, you may then take actions to minimize the repercussions of a challenging situation.

Using the Prescription

The prescription provides data about:

- the patient's name
- the medication
- whether it is a new prescription or a refill
- the date of refill (if a repeat prescription).

Patients' names can alert you to various potential problems that might arise when you begin to counsel. For instance, in a given neighborhood, you generally know which names may increase the likelihood that a patient is not fluent in English or has health beliefs that are different from your own, which may influence the approach the patient takes to the prescribed medication. By being prepared, you will be better able to deal with any problem that arises.

The medication itself can provide valuable information. Medications obviously intended for the treatment of a particular disease alert you to potential problems associated with that condition.
For example, the possibility of vision impairment secondary to diabetes should be considered when insulin has been prescribed. Prescriptions for antidepressants or antipsychotic agents raise a whole spectrum of potential challenges associated with mental illness. Embarrassment and reluctance to discuss fears can also be anticipated from the type of medication prescribed, but this level of sensitivity should not be reserved solely for obvious situations, such as counseling about a medication to treat a sexually transmitted disease. This type of sensitivity is also crucial in more subtle situations. For example, a patient who has been prescribed a drug to control arthritis following the repeated failure of other agents may be near despair over the continued discomfort.

A new prescription prompts the use of the prime question approach, whereas a refill indicates that the show and tell counseling procedure should be used.

Using the Patient Profile

Both computerized and manual patient profiles are excellent resources to aid in preparing for counseling. Key information that might be sought from a profile would include:

- Name
- Age
- Sex
- Medication history
- Diagnosis
- Previous prescriptions and refills (to aid in the detection of compliance problems)
- Known allergies
- Communication problems (e.g., hearing deficit, Alzheimer's disease).

Noting the name, age, and sex of the patient helps prevent counseling the wrong patient and enables you to quickly identify a caregiver.

Additionally, when counseling patients who are extremely old or young, you are more likely to encounter communication barriers that would require you to adapt your counseling procedure.

If the patient is a child, you can anticipate talking with a proxy—probably a parent or a caregiver. The presence of a sick, irritable child can create an environment not conducive to counseling. Patients who are minors also make for more complex counseling situations.

The observation that a patient is elderly also should alert you to the potential presence of age-related problems such as hearing or vision impairment. Approximately 30% to 40% of the 23 million Americans over 60 are hearing impaired, and in those over 80, the proportion is closer to 75%. Seven out of eight Americans over 45 wear glasses, and in the remainder the incidence of uncorrected vision disturbance is considerable.
In addition to vision and hearing limitations in the elderly, you can expect higher incidences of senile dementia, complex therapeutic regimens that make compliance more difficult, and drug-induced mental impairment, all of which may require more counseling time. In neighborhoods with large immigrant or ethnic subculture populations, the elderly patient is more likely to hold alternative health beliefs or have problems with English fluency.

Note: Although you have a high likelihood of encountering a communication barrier when counseling an elderly person, remember that many interactions with senior citizens will not present a counseling challenge.

Using the prescription in conjunction with the medication history and diagnosis on the patient profile makes analysis of information about patients and their medical condition/status more effective. Refill dates that are later than expected (detected by referring to a patient’s record) provide a clue to noncompliance and raise many questions, including “Might this apparent noncompliance be the result of a breakdown in communication about the medication in the past, which now needs to be addressed?”

The sophistication of the patient profiles you keep can be enhanced by attempting to document details of episodes of noncompliance, allergies to medications, and any communication difficulties experienced by you or other pharmacists in your practice. Entries of this sort will help you and your colleagues to be more prepared for counseling the patient next time.

Note: The entire process of reviewing the prescription and patient record may only take a matter of seconds and can be done ahead of time.

Using Personal Knowledge of the Patient

The patient profile can be a “communal memory jogger”—a way of becoming instantly familiar with everything your pharmacy knows about a patient. Such information is highly valuable if you work in a high-volume practice and/or might not have previously interacted with a specific patient. However, personal familiarity with regular clients enhances efficiency, greatly adds to your ability to recognize underlying feelings or problems with compliance, and facilitates the success of open and frank discussions, should they become necessary.

Preparing Mentally

Taking a moment to finalize your preparation and get ready mentally is the final part of the preparation phase of PAR.

Briefly summarize the information gleaned from the preparation process. Then review the environment—the pharmacy and yourself. Examine the state of the pharmacy and the patients who are waiting, and check how you’re feeling:

- Is the pharmacy busy?
• Have people been waiting a long time because you're backed up today?
• Are you "burned-out" or stressed?
• Are you worn out with being nice to people?

If the answer to either of the first two questions is "yes," then be prepared for the possibility of frayed tempers. Your next patient may well be frustrated or overtly angry.

If you answer "yes" to the last two questions, then be aware that your own "fuse" may be shorter than usual. While it may not be possible to take a break, you can at least use your heightened self-awareness to avoid venting your own feelings on the next patient.

If you answer "yes" to all four questions, your self-control will be under considerable strain, and you may find the advice given in Chapter 4, on responding to patients, particularly helpful.

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**Summary of PREPARE**

**Preparation principally involves:**

• A review of the *prescription* for information about a patient's name, the prescribed medication, and whether or not the prescription is a refill

• A review of the *patient's profile* for information about the patient's age, sex, medication history, diagnosis, allergies, and any previous noncompliance or communication difficulties

• A review of any *personal knowledge* about the patient

• Just before counseling, a brief *mental preparation* that includes a review of the state of the pharmacy and the people waiting to be seen, as well as how you are feeling.