

Pharmacist Spotlight:

Communication



Healthcare Providers Service Organization (HPSO) in collaboration with CNA has published the 2nd Edition of our *Pharmacist Claim Report*. The report includes statistical data and legal case studies taken from CNA's claim database, along with risk management recommendations designed to help pharmacists reduce their professional liability exposures and improve patient safety.

You can find the full report at: www.hpso.com/pharmacistclaimreport

This Pharmacist Spotlight focuses on our analysis and risk control recommendations regarding one of the most significant topics from the report: Issues related to Communication.

Effective Communication

Mutual trust and respect are the foundation of the pharmacist-patient relationship, and they must be developed from the first encounter and continuously reinforced. Trust and respect depend in turn upon effective communication, which involves more than talking to patients. It also includes careful and empathic listening; awareness of gestures, posture and other forms of nonverbal communication; and attention to the level of information presented. By consistently utilizing strong communication skills, pharmacist can create a positive first impression and maintain a healthy rapport with patients, thus increasing patient satisfaction and reducing friction and potential misunderstanding.

Deficiencies in communication are sometimes a contributing factor in a patient's decision to initiate legal action against a healthcare provider following an adverse outcome. Communication problems may include poor listening skills, such as interrupting others in mid-sentence, finishing their sentences or changing the subject abruptly. Another common issue is inappropriate body language, such as fidgeting, glancing around the room, looking at one's watch or the clock, or otherwise exhibiting impatience. Other negative nonverbal traits include lack of eye contact, poor posture, inattentive or irritated facial expression, or crossed arms or legs, which may appear defensive to the patient.

Fortunately, good communication skills, including the critical nonverbal aspect of communication, can be learned by pharmacists and improved through practice. The following communication strategies are designed to help pharmacists initiate and maintain a sound relationship with patients.

- **Greet the patient by name** while establishing eye contact.
- **Display open and relaxed body language**, avoiding signs of impatience.
- **Use open-ended questions**, such as "What can I do for you today?" and "What questions do you have about this medication?" to encourage patients to describe concerns.
- **Speak clearly and succinctly**, avoiding medical or pharmaceutical jargon.
- **Avoid interrupting the patient** and limit one's own talking.
- **Turn off or tune out distractions** and concentrate intently on what the speaker is saying.

- Clarify key points by asking questions and paraphrasing patient comments.
- Focus on both verbal and nonverbal messages conveyed by the patient.
- Ask patients to restate important information in their own words.
- Make use of other informational tools, such as websites, DVDs, brochures/pamphlets, photos and models.
- Hold all patient discussions in a private area to maintain confidentiality. If a patient requests private counseling about a prescription or medication, direct the patient to an area where privacy can be maintained.
- End encounters on a helpful and concerned note by asking the patient, "Is there anything else I can do for you today?"
- Notify waiting patients as soon as possible of delays and offer to call them when medications are ready.

Communicating with Angry Patients

- Watch for verbal and nonverbal signs of anger, dissatisfaction and frustration.
- Provide a private area for discussion, away from others.
- Acknowledge patient anger or dissatisfaction and show that these concerns are taken seriously.
- Ask the patient to clarify the issues, and then restate them in one's own words.
- While listening, maintain a nonjudgmental attitude, indicated by a neutral tone of voice and open body language.
- Enlist angry patients in the problem-solving process by asking them for their ideas on how to resolve the issues.
- End the discussion with a mutual understanding of actions that will be taken to address the patient's concerns.
- Do not mention police or security to a hostile individual. Instead, immediately request assistance using a prearranged distress signal if a patient uses profanity, makes sexual comments, states that he or she is about to lose control, appears extremely tense or angry, or seems under the influence of alcohol or drugs.
- Without alarming the patient, exit the area and summon help if the situation escalates (e.g., "You've certainly raised some tough questions. I'll consult my colleagues to see what I can do.").
- Dial 911 to report threats of violence, using a telephone that is out of the hostile person's sight and hearing.
- Objectively and carefully describe events – e.g., "The patient's face was flushed and his hands were clenched," rather than "The patient appeared to be angry."

For more information, refer to the Occupational Safety and Health Administration's "[Guidelines for Preventing Workplace Violence for Health Care & Social Service Workers.](#)"

Apology Dos and Don'ts for Pharmacists

Whether an apology should be offered and how it should be framed depend on the facts surrounding the event. Factors to consider should include the degree of certainty surrounding the event, the severity of the incident, and the elements of human and system error. If the decision is made to offer an apology, the apology should be given by an individual of stature who can take ownership of the incident on behalf of the pharmaceutical practice, acknowledging a connection between actions taken and the unintended outcome.

Many healthcare providers may be less likely to disclose a mistake due to a concern that patients ultimately will not understand what is being told to them. These fears can translate into an impatient or defensive attitude, thus defeating the purpose of the apology. Pharmacy owners, pharmacists, and pharmacy staff should be encouraged to heed the following advice when it comes to apologies:

Do...	Don't...
Think about and discuss with other members of the patient care team what went wrong and what could have been done better.	Engage in blame-shifting, defensiveness or evasion.
Apologize face-to-face whenever possible.	Add insult to injury by communicating primarily via voicemail or email.
Ensure that the apology includes all significant information.	Discuss issues of marginal relevance to the patient.
Focus on established facts and analysis.	Speculate beyond what is known to be true.
Write out key points before meeting with the patient and/or family.	Become overly emotional or lose control.
Consider body language and tone of voice when issuing an apology.	Underestimate the importance of non-verbal communication in expressing sympathy and candor.
Convey deep sympathy for the patient and an awareness of the effects of the event.	Seek sympathy for oneself or otherwise shift the focus away from the patient's plight.
Use everyday language that conveys both thoughts and emotions.	Utilize medical or pharmaceutical jargon that may confuse, intimidate, or otherwise irritate the patient.
Acknowledge all known consequences of the event, including emotional, familial and monetary impact, as well as the potential effect on the pharmacist-patient relationship.	Treat the issue as minor simply because the patient has not suffered a serious injury.
Give the patient and/or family time to consider and respond to the apology.	Demand a quick response or ask the patient's/ family's forgiveness.

Risk Management Self-assessment Checklist for Pharmacists

The following abbreviated checklist, selected to focus on communication, is designed to assist pharmacists (and other pharmacy professionals where appropriate) in evaluating and modifying their current customs and practices, in order to enhance medication and patient safety.

SELF-ASSESSMENT TOPIC	YES/NO	ACTION(S) NEEDED TO REDUCE RISKS
Improving Communication		
Talking to patients, family members, colleagues and practitioners in a clear, concise, correct and complete manner.		
Conveying respect and consideration for patients and family members.		
Recognizing potential barriers to effective communication.		
Being aware of nonverbal signals.		
Developing sensitivity to cultural and linguistic issues.		
Observing telephone, email and social media etiquette.		
Avoiding common online and social media pitfalls, such as disclosing sensitive patient information or giving specific medical advice.		
Protecting confidentiality by avoiding patient-related conversation in hallways, waiting rooms and other common areas.		
Understanding HIPAA privacy requirements, especially with respect to securing protected health information and identifiable patient data.		
De-escalating conflict situations and managing angry patients.		
Knowing how to respond if a violent situation arises.		
Knowing and applying practice protocols regarding minors when communicating with patients under the age of 18 and/or their parents.		
Utilizing the chain of command when necessary, without fearing retaliation from immediate supervisor.		
Patient Education and Counseling		
Counsel each patient regarding his/her medications and document the process, including patient refusals of counseling/education.		
Encourage patients to ask questions regarding their medications. Respond to all such questions until they are able to correctly repeat back the information, and document this in their pharmacy record.		
Ensure that patients know both the brand and generic names for their medications, as well as the expected appearance of each form of the drugs they are taking.		
Counsel patients to keep drugs in a safe place and require them to sign for non-safety caps.		
Instruct patients to discuss their expectations regarding any off-label drug use with the prescribing practitioner, and document this request.		



This information was excerpted from HPSO and CNA's full report, *Pharmacist Liability Claim Report: 2nd Edition*.
www.hpso.com/pharmacistclaimreport



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In addition to this publication, CNA and Healthcare Providers Service Organization (HPSO) have produced numerous studies and articles that provide useful risk control information on topics relevant to pharmacists, as well as information relating to pharmacist professional liability insurance, at www.hpso.com. These publications are also available by contacting CNA at 1.888.600.4776 or at www.cna.com.

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