

Communicating with patients

The New Medicine Service (and MURs) provides a formal opportunity for pharmacists to communicate with patients on a one-to-one basis about their medicines and underlying medical condition(s). The NMS permits the interventions to be done either as a face-to-face appointment or via telephone. Careful consideration must be given as to which of these communication methods is adopted by the pharmacy as each method brings its own advantages and disadvantages.

Although face-to-face communication would be the preferred method of conducting an intervention, it is likely that telephone interventions will be used by most pharmacies at some stage. This brief guide will help you and your staff communicate more effectively when using the telephone as part of the NMS.

The words we use make up less than 10% of the way we communicate in a face-to-face situation, with the way we say these words (paralinguistics) and body language making up the remaining percentage. When you are dealing with someone over the telephone you cannot see them, which deprives you of most of the information you would normally have about the other person (body language, eye contact etc). You can base your judgements only on the words you can hear and the way they are being said, which can sometimes present challenges.

Advantages and disadvantages

Some of the advantages and disadvantages of telephone communication are:

Telephone communication

Advantages of communicating by telephone:

- often easier to reach someone by phone than by trying to arrange to see them in person; more convenient for patients
- more likely to succeed in contacting someone – especially if a time / date has been agreed (few people are able to ignore the telephone and leave it ringing)
- telephone conversations are, on average, shorter than face-to-face conversations as it's easier to control the conversation and take the initiative.

Disadvantages of communicating by telephone:

- it's more difficult to establish a rapport on the telephone, as you don't have all the visual signals that help you to get on the "same wavelength" as the other person
- when phoning someone it's possible to intrude at an inconvenient time and not realise it
- it's easy to assume that you have the other person's undivided attention
- you are more likely to get distracted and let your attention wander
- it is more difficult to avoid misunderstandings – you cannot use visual behaviour to get feedback on whether your message has been understood or if there are things left unsaid
- some things are impossible to check over the telephone such as inhaler techniques
- you are more likely to believe you can do other things at the same time as using the telephone – DON'T!

Voice matching

The first three seconds of a phone call are important, as this is when the other person makes a judgement about the caller. When making an outgoing call listen to the pitch, speed, volume and tone of the other person's voice when they first speak and try to "match" it. Matching is a good way of building rapport, which can otherwise be difficult over the telephone, and makes the other person feel more comfortable.

Opening the conversation

Introduce yourself clearly and ask to speak to the patient using their preferred title / name. Check it's still convenient to speak to the patient. If the patient is concerned about disclosing sensitive personal information over the telephone and cannot be satisfied that the caller is ringing from the pharmacy he / she may contact the pharmacy directly instead. Explain in a clear, simple manner the purpose of the call – check the patient understands the nature of the NMS and the reasons for the discussion. You should also confirm consent at this stage.

Body language

Body language, even though it can't be seen, can affect our voice when on the telephone. Therefore, think about your posture whilst on the phone. If you are comfortable and relaxed your voice is likely to reflect this. Remember to smile – even though it can't be seen it will be "heard" and you will sound friendly and assertive. If you are standing up whilst on the telephone this can also make you sound more assertive, and it is another way of ending a telephone call if you stand up during a conversation. Using a closed question for example is often helpful in stopping an enthusiastic patient digressing from appropriate lines of questioning.

Tips for effective telephone interventions

NMS intervention

Inform the patient you will be asking a series of questions about their new medicines and that you will be making notes as you go along. Listen to the patient's responses as you work through the questions - resist the temptation to interrupt. Demonstrate you are listening by making noises such as "um", "yes", and "really". Use assertive behaviour to stay in control of the call – use open / closed questions as appropriate (open questions invite detailed answers whereas closed questions invite single word answers).

Do not rush through the call. Talk at the patient's pace and pause after providing advice or offering solutions to a problem to allow the patient to air their views about this.

Finally agree the time / date for any follow-up intervention.

Remember to give the call your undivided attention!