

Interviewing and Assessment

Overview

1-Patient assessment is an important aspect of patient care. **Determining what patients understand about their medications, how they are taking their medications, how well their medications are working, and problems they perceive with their therapy** are key elements to ensuring positive health outcomes.

2-**Interviewing** is one of the **most common methods used in patient assessment**.

This lecture focuses on ways of improving patient assessment and the interviewing process.

Introduction

1-Pharmacists often must obtain information from patients as part of the patient assessment process. It range from simple requests, such as asking whether a patient is **allergic to penicillin**, to complex problems, such as determining **whether a patient is taking a medication properly**.

2-One of the first steps in the patient assessment process should be to determine not only **what medications patients may take** but also **what patients already know about their medications and their health-related problems**.

3-Determining how much patients know is necessary because **patient education strategies vary depending on the depth of understanding patients already possess**.

4-Patients who are **very familiar with their medications** have **different needs** than those **who know relatively little**. It is **inefficient to repeat information that patients already understand**. You provide the information you think is important for a particular patient.

Components of an Effective Interview

The interviewing process contains several critical components that should be Mastered.

A-Listening

1-When we think about **skills of communication** we probably think first of the skills involved in *speaking clearly*. However, **an equally critical part of the communication process, and perhaps the most difficult to learn, is the ability to be a good listener**.

2-In the relationship between a health professional and patient, **the patient's feeling of being understood is therapeutic in and of itself**. It helps to ameliorate the sense of isolation and helplessness that accompanies a patient's experience of illness.

3-Some communication habits can interfere with your ability to listen well.

A-**Trying to do two things at once** makes it evident that patients do not have your full attention.

B-**Jumping to conclusions before patients have completed their messages** can lead to only hearing parts of messages.

C-**Focusing only on content** cause us to miss much of the meaning in the messages people send us.

Listening well involves understanding **both the content** of the information being provided and the **feelings being conveyed**.

Skills that are useful in effective listening include:

A- **Summarizing**

B- **Paraphrasing**

C- **Empathic responding.**

A-Summarizing

When a patient is providing information, it is necessary for you to try to *summarize the critical pieces of information*.

Summarizing allows you to be sure you understood accurately all information that the patient conveyed.

B-Paraphrasing

When using this technique, you attempt to convey back to the patient the essence of what he or she has just said. The following are examples of paraphrasing:

Patient #1: I don't know about my doctor. One time I go to him and he's as nice as he can be. The next time he's so rude!

*Pharmacist #1: **He seems to be very inconsistent***

C-Empathic Responding

1-Many of the messages patients send to you **involve the way they feel about their illnesses or life situations.**

If you are able to communicate back to a patient that you understand these feelings (emotional meaning in a patient message), then empathic response can be established.

2-The main difference between an empathic response and a paraphrase is that empathy serves primarily as a reflection of the patient's feelings rather than focusing on the content of the communication. The following examples, adapted from the section on paraphrasing, should illustrate the difference.

Patient: *I don't know about my doctor. One time I go to him and he's as nice as he can be. The next time he's so rude I swear I won't go back again.*

Pharmacist:

Paraphrase: *He seems to be very inconsistent.*

Empathic Response: *You must feel uncomfortable going to see him if you never know what to expect.*

3-If you convey an empathic response to the patients, **they may be more open with you** and they will more likely tell you that they are having trouble taking their medications as prescribed or that they do not understand regimen directions if they **know that you will not think them stupid or incompetent.**

*The "Listening Techniques for the Interview Process" are shown in the table 1.

Table 1: Listening Techniques for the Interview Process

- **Stop talking.** You can't listen while you are talking.
- **Get rid of distractions.** These break your concentration.
- **Use good eye contact** (i.e., look at the other person). This helps you concentrate and shows the other person that you are indeed listening.
- **React to ideas, not to the person.** Focus on what is being said and not on whether you like the person.
- **Read nonverbal messages.** These may communicate the same or a different message than the one given verbally.
- **Listen to how something is said.** The tone of voice and rate of speech also transmit part of the message.
- **Provide feedback to clarify any messages.** This also shows that you are listening and trying to understand

B-Probing

1-Another important communication skill is learning to **ask questions in a way that elicits the most accurate information.** This technique is called "**probing.**"

2-The phrasing of the question is important. For instance, "**why**" type questions can make people feel that they have to justify their reason for doing a certain thing. It is usually better to use "**what**" or "**how**" type of questions. For example, people might become defensive if asked "Why do you miss doses of medication?" instead of "What causes you to miss doses of medication?"

3-In addition, the timing of the question is important. **The patient should be allowed to finish answering the current question before proceeding to the next one.**

4-In addition, **leading questions should be avoided.** These questions strongly imply an expected answer (for example, “You don’t usually forget to take the medication, do you?” or “You take this three times a day with meals, right?”). These questions lead patients into saying what they think you want to hear rather than what the truth may be.

5-To conduct an effective interview, it is important to understand the differences between **closed-ended** and **open-ended questions.**

A-A closed-ended question can be answered with either a “**yes**” or “**no**” response or with a few words at most.

B-On the other hand, an open-ended questions **allow people to respond in their own way** and expand their answers.

C-For example, a **closed-ended** question would be “**Has your doctor told you how to take this medication?**” The patient may only respond with a “yes” and not provide any useful information to you. On the other hand, an example of an **open-ended question** would be “**How has your doctor told you to take this medication?**”

With an open-ended question you are allowing patients to present information in their own words.

D-Closed-ended questions reduce the patient’s degree of openness because you are doing most of the talking. For this reason, **closed-ended** questions are referred to as “**pharmacist-centered questions.**”

E-**Open-ended** questions permit open expression and for this reason are sometimes referred to as “**patient-centered questions.**”

F-You may find a **combination of open-ended and closed-ended** questions most efficient for you in your practice. **Patient encounters may be initiated with an open-ended question, followed by more directed, closed-ended questions.**

G-For example, if you want to know whether Mr. Raymond is experiencing bothersome side effects from his antihypertensive medication, you may say “**What things have you noticed since beginning this medication?**”

H-If necessary, open-ended questioning can be followed by more direct questions that focus on specific side effects, such as “**Do you have trouble sleeping?,**” and so on.

6-For new prescriptions, the questions “**What did your doctor tell you the medication is for?,**” and “**How did your doctor tell you to take the medication?,**” are suggested as a way for assessment of patient understanding of new prescriptions.

7-Open-ended questions provide an opportunity for you to assess whether or not the patient **understands the key elements of drug therapy** (shown in table-2).

Table 2: Key Elements of Drug Therapy
1-Tell the patient the name, indication, and route of administration of the medication:
2- Inform the patient of the dosage regimen :
3-Tell the patient how long it will take for the drug to show an effect :
4-Tell the patient how long he/she might be taking the medication :
5-Discuss major side effects of the drug:
6-Discuss storage recommendations , ancillary instructions (e.g., shake well, refrigerate)

C-Asking sensitive questions

1-Some questions you ask patients may be particularly sensitive. Questions assessing **adherence**, or **alcohol** use. Assessment of effects (including side effects) of medications that relate to **sexual functioning** may also require a diplomatic approach.

2-**There are a number of techniques that can make such questions easier to ask.** Before asking a question about a sensitive topic, **let the patient know that the behaviors or problems you are asking about are common.** If you acknowledge that “**everyone**” has similar problems, it makes the issue seem less threatening. For example, say to a patient “It is very difficult to take a medication consistently, day after day. **Nearly everyone** will miss a dose of medication once in a while” before asking specific questions about adherence. Framing the question in this way can make it feel safe for patients to admit that they are having difficulty adhering to a medication regimen.

3-Another technique for reducing the threat of sensitive questions is to ask whether the **situation has ever, at any time, occurred and then ask about the current situation.** For example, asking first whether the patient has ever missed a dose of a medication and then progressing to estimates of the number of doses missed in the last week may make the information the patient provides more reliable.

4-In addressing these issues, the way **you phrase the question and your tone of voice should be no different for a question on alcohol consumption as for a question on use of an over-the-counter (OTC) product.**

5-In structuring the interview, **it helps to embed more threatening topics among less threatening topics and to ask more “personal” questions later in the interview.**

For example, questions about alcohol consumption may be better accepted by the patient if they follow questions about caffeine consumption.

6-If patients seem reluctant to address an issue, **it helps to discuss the reason why you are asking a particular question.** A statement such as: “People often do not think of alcohol as a drug, but there are many medications that can interact with alcohol. I ask about alcohol use so that I can help you prevent problems with the medications you take.” **If patients understand the reason for a question, they are more likely to respond honestly.**

7-In any case, before asking any question, and especially one that may be sensitive, be sure that the **question is necessary and that you have a clear need for the information** in your efforts to help the patient.

D-Use of silence

1-Another skill that you must learn in order to be an effective interviewer is the art of using **silence** appropriately.

2-Many times, the patient **needs time to think about or react to the information you have provided or the question you have asked.** Interrupting the silence destroys the opportunity for the patient to think about this material.

3-On the other hand, the **pause might be due to the fact that the patient did not understand the question completely.** In this situation, the question should be restated or rephrased.

4-**Responding with empathy** is a necessary component of any communication you have with a patient قد يكون الصمت..ابلق في التعبير عن التعاطف من الكلام

E-Establishing rapport

Successful interviews are marked by a high degree of **rapport between the two parties.** Rapport is built mainly on mutual consideration and **respect.** You can aid this process by using **good eye contact,** by using a **sincere, friendly greeting,** by being **courteous during the discussion,** and by **not stereotyping or prejudging** the patient. Each patient must be seen as a unique individual.