

14th PCNE working
conference

CLOSING SESSION

5th – 8th February 2025



Enhancing Pharmaceutical Care: exploring and coding pharmacist-patient communication

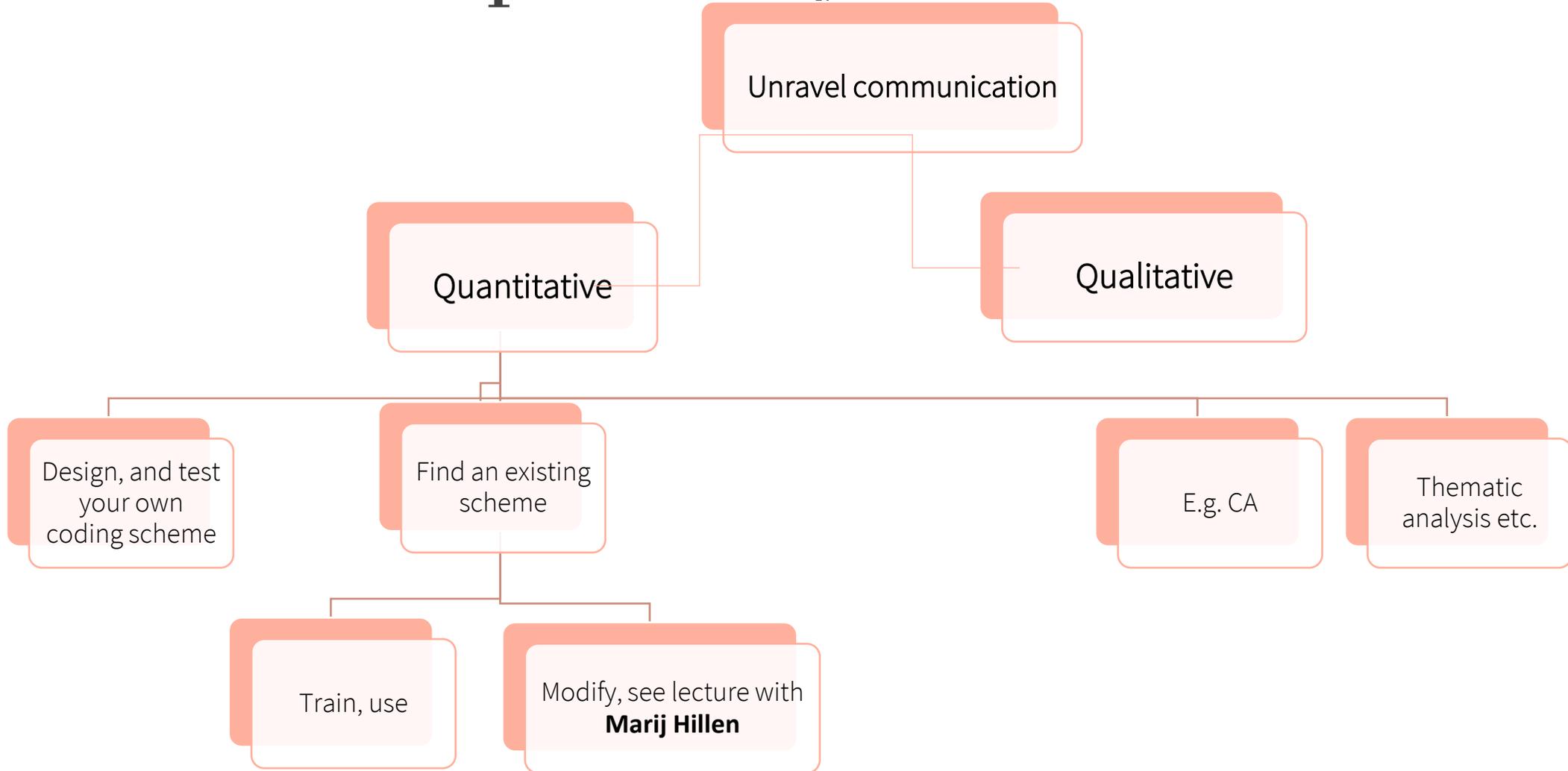
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Pharmaceutical Care is the pharmacist's contribution to the care of individuals, in order to optimize medicines use and improve health outcomes.

- Research in communication and counseling central in Pharmaceutical care
- How to approach
- Aim of workshop to explore the variety of available coding instruments developed for other health care contexts and provide recommendations for the research field of pharmaceutical care

Research in pharmacy communication



One example of a coding tool:

RIAS-the Roter method of Interaction process Analysis

Abbreviations for RIAS Categories

Personal	Personal remarks, social conversation
Laughs	Laughs, tells jokes
Concern	Shows concern or worry
R/O	Reassures, encourages or shows optimism
Approve	Shows approval - direct
Comp	Gives compliment - general
Disapprove	Shows disapproval - direct
Crit	Shows criticism - general
Agree	Shows agreement or understanding
BC	Back-channel responses (Physician only)
Empathy	Empathy statements
Legit	Legitimizing statements
Partner	Partnership statements (Physician only)
SDis	Self-disclosure statements (Physician only)
?Reassure	Asks for reassurance
Trans	Transition words
Orient	Gives orientation, instructions
Check	Paraphrase/Checks for understanding
?Understand	Asks for understanding

Personal Remarks, Social Conversation (Personal)

1. Greetings, initiating contact through friendly statements that are part of a formal greeting, return of friendly gestures and greetings, and goodbyes. (*Exception: When the patient responds to a greeting of "How are you?" with a description of medical problems, the question would be coded as Asks for Opinion, as this is the way the question was interpreted.)

Examples:

Hello, I'm Dr. Smith. How's it going?

Fine, thanks. How about you?

Nice to meet you.

Nice to meet you, too.

Goodbye now. See you.

One example of a coding tool



Dialogue - Target behavior: Starting a new medication treatment	RIAS Codes	Time Stamp
Ph: Hello and welcome, Ann-Sofie!	Personal	#00:00:03-9# #00:00:06-5#
MedU: Hi, thank you so much!	Personal	#00:00:06-5#
Ph: How are you today?	Etc.]	#00:00:07-1#
MedU: Well, it's still good.		#00:00:10-5#
Ph: Yes.		#00:00:10-5#
MedU: So to speak, but...		#00:00:12-2#
Ph: It's moving toward spring and brighter days here.		#00:00:14-8#

RIAS_CODER - Study: RIASbasic

File Doctor Patient Media Position Help

RIAS Coder Edit Screen Affect Rating

Media Status:
Name:
Length: 11:31
Current Position: 00:06 (6)

Utterances:
Count(344):

Enter/Select
No Block
Opening

Utterance Note:

Categories:

D personal P	D gives med P	D [?] med P	D ?service P
D laughs P	D gives thera P	D [?] thera P	D ?opinion P
D approve P	D gives ls P	D [?] ls P	D ?permission P
D comp P	D gives ps P	D [?] ps P	D ?reassure P
D disagree P	D gives other P	D [?] other P	D ?understand P
D crit P			D ?bid P
	D agree P	D ?med P	
D emp P	D BC P	D ?thera P	D C-med/thera P
D legit P	D checks P	D ?ls P	D C-ls/ps P
D concern P	D trans P	D ?ps P	
D R/O P	D orient P	D ?other P	D unintel P
D partner P			
D self-dis P			

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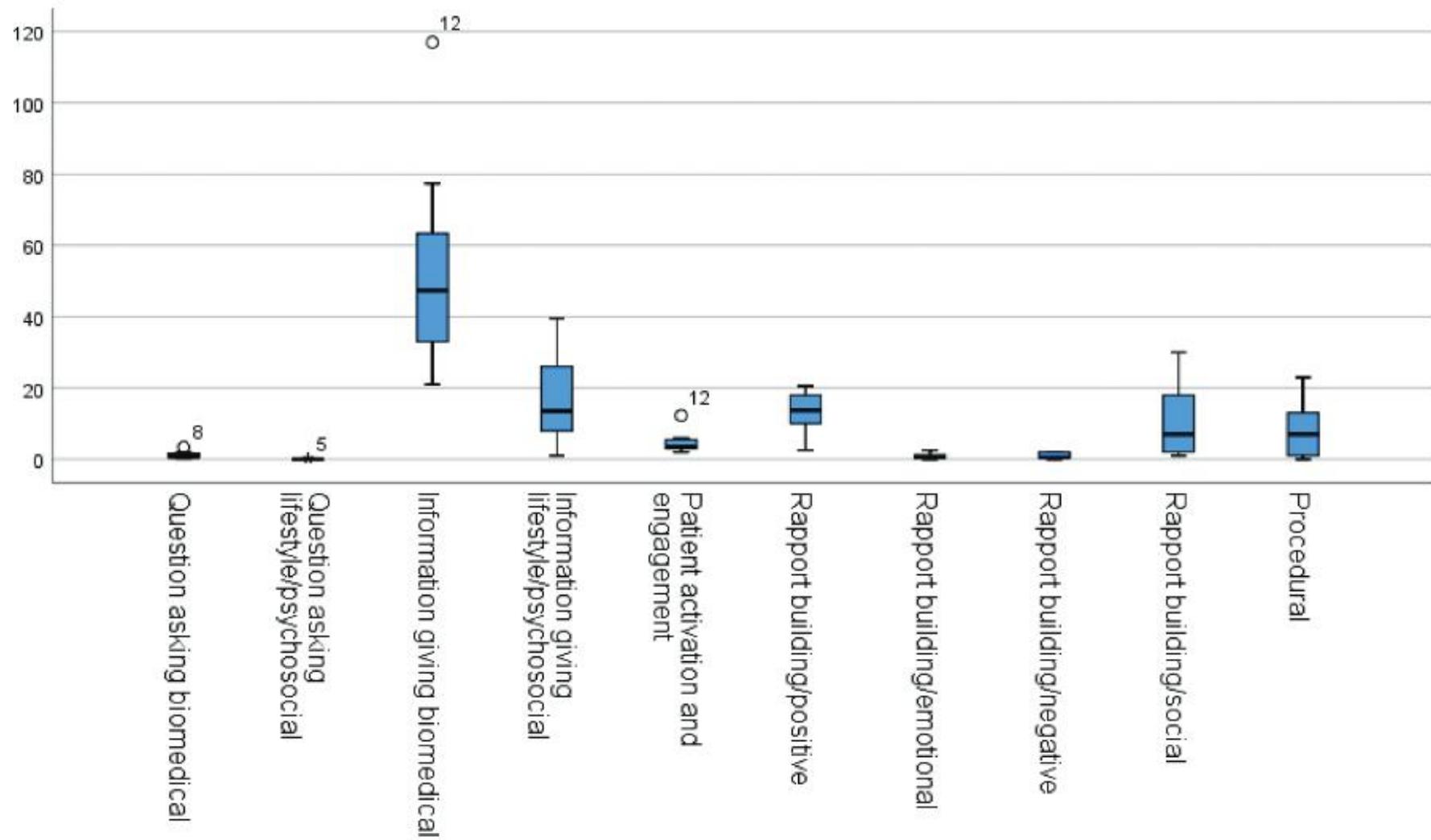


Figure 2. Patients' RIAS composites.

Working with coding tools

RIAS

Medicode v.1

**The behavior change
counseling index
(BECCI)**

Simplified VR-Codes



Conclusions so far – for Pharmaceutical

Care Research

- Useful YES – motivation to focus more on communication - fx. how we work with patient information
 - Needs adoption for PC or possible new tool – pharmacy: different types of consultation + focus on medicines use
 - Be pragmatic - new respect: would be good to team up with experienced researchers
-
- WRITE UP AS COMMENTARY INCL. SYSTEMATIC REVIEW/
 - NEED TO ARRANGE WORKSHOP - SPECIFIC TRAININGS?