



Standardised Pharmacy Interactions

The series of Standardised Pharmacy Interactions (SPIs) form one component of Practice Review. They are designed to be reflective of situations with which pharmacists practising in patient-facing roles would be expected to be capable of dealing with, such as counselling a patient on a medication, providing advice to someone on the treatment of a minor ailment or dealing with an enquiry from a healthcare professional. These interactions have been designed, developed and reviewed by peer pharmacists. Practice Review will include seven SPIs, in addition to an initial trial run SPI which will not contribute to the review.

Standardised Pharmacy Interaction Set-up

Each SPI occurs in its own separate consultation room. The pharmacist will be provided with materials or references that are required to undertake the SPI. *Please note: access is **provided to online references** only. However, pharmacists may bring hardcopies of references e.g. BNF if they would prefer. It is recommended that up-to-date versions of hardcopy references are used.*

Prior to undertaking the seven SPIs in the Practice Review event, the pharmacist will complete a trial run SPI. This will give pharmacists an opportunity to settle into the event and familiarise themselves with what to expect. All pharmacists in the same group will undertake the trial run SPI at the same time.

Pharmacists will have eight minutes to complete each SPI, followed by a two minute break before undertaking the next SPI. A clear signal will be given when there is two minutes left to complete the SPI (i.e. six minutes after the start of the SPI) and again when the full eight minutes are finished. Pharmacists will also have two break stations during the course of the SPIs.

Two individuals will be present in the pharmacy setting for each of the SPIs: a trained actor, who will play the role of the patient or healthcare professional during the SPI; and a Practice Reviewer, who will observe the pharmacist undertaking the SPI, and record on a checklist when they observe the pharmacist demonstrating the required skills and competencies. Practice Reviewers are peer pharmacists who have received training to ensure they will be fair and objective in their role. There will be a different actor and Practice Reviewer for each of the seven SPIs.

The Practice Reviewer and Actor will remain in the room for the duration of the SPI. The pharmacist enters the room at the beginning of the SPI and will leave the room at the end to move to the next station. Feedback from pharmacists indicates that it is beneficial they remain in the room for the full duration of each SPI (i.e. 8 minutes) to allow every opportunity to demonstrate the required skills and competencies. Once the pharmacist has left the room that interaction is finished and no further information can be added. However, while the pharmacist remains in the room with the Practice Reviewer and Actor they can add any additional information they may have forgotten, right up until the end of the station is signalled.

Resources for completing the SPI

The area where the pharmacist will undertake the SPI will contain a desk and will look similar to the layout in a patient consultation area. Seating will be provided for the pharmacist, the actor and the Practice Reviewer. The pharmacist can choose to sit or stand depending on their own preference.

A number of items will be provided to the pharmacist for each SPI:

- A pen and paper, to facilitate note-taking if required;
- A laptop computer with internet access, so that pharmacists may access online references or any websites that they might ordinarily use.
- Any additional information that the pharmacist may require for the SPI (e.g. a copy of the patient medication record);
- Any props relevant to the SPI. These may include: Summary of Product Characteristics (SPC) and/or Patient Information Leaflets (PIL); calculator; medication; prescriptions.

Everything that is required to undertake the SPI will be provided to the pharmacist. In order to maintain the integrity of the process, it is not possible to use email, or your personal mobile phones and tablets during the Practice Review event.

There will also be a small partition screen on the desk. This will enable the pharmacist to collect their thoughts, look up references or review and prepare information for appropriate responses. Sufficient time has been allocated to each SPI to provide pharmacists with the opportunity to look up reference sources and consider how they will approach the SPI. The actor will wait patiently while the pharmacist is carrying this out.

Standardised Pharmacy Interaction Review

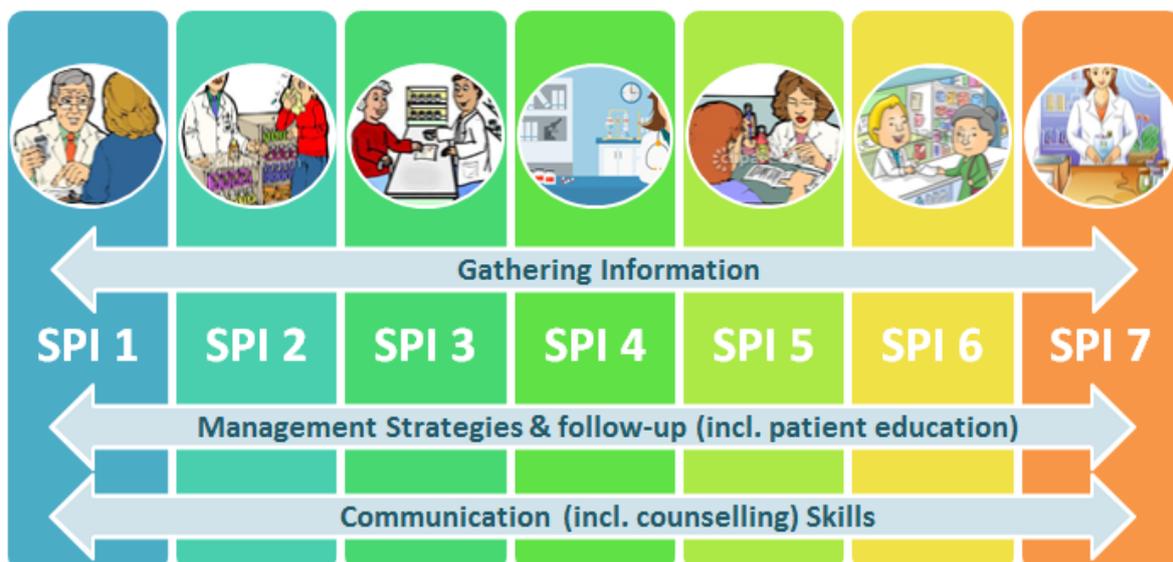
The SPIs will focus on three of the competencies for Practice Review as identified in the legislation:

1. [Gathering information](#)
2. [Management strategies and follow-up \(including patient education\)](#)
3. [Communication skills \(including counselling skills\)](#)

For each SPI, a list of observable actions relating to each of these three competencies has been developed by peer pharmacists. This outlines the actions that a competent pharmacist would be expected to undertake when dealing with the SPI in question. The Practice Reviewer observes the pharmacist undertaking the SPI and will record when they observe these actions. This provides an objective method for reviewing a pharmacist's performance. It is important to remember that the Practice Reviewer cannot observe what the pharmacist is thinking, but can record what they say and do. The pharmacist should ensure that they display clear observable evidence of how they are approaching the SPI.

Under each of the three competencies the Practice Reviewer also completes a global competency rating. This enables the Practice Reviewer to give a general account of the pharmacist's overall performance for that competency.

Pharmacists are reviewed on their performance in each competency combined across all seven SPIs undertaken during Practice Review. For example; a pharmacist's performance for communication skills will be reviewed by combining their performance for this section across all seven SPIs.



The SPI is not designed to review legal practice relating to the practical dispensing skills including labelling of medication, prescription types, drug schemes and reimbursement of medication, medication costs...etc.

Competency 1: Gathering information

The specific actions for “Gathering information” required for each SPI will depend on the scenario, and may include some of the following examples, where relevant:

- Establishes the presenting complaint e.g. migraine headaches
- Identifies what the prescription is for e.g. arthritis
- Establishes the patient’s medication history
- Establishes how long the patient has been taking medication for
- Establishes the patient’s current/past medical conditions
- Establishes if the patient has any allergies
- Asks about the patient’s lifestyle where relevant (alcohol intake, diet, smoking...etc.)
- Asks about the history of the present condition/presenting concerns
- Elicits the patient’s understanding/experience of their current problem



Competency 2: Management strategies and follow up

Management strategies and follow-up consists of addressing the most relevant problems and communicating clearly to the patient in lay terms. Providing appropriate counselling to the patient is a key element of the management strategy. This also includes discussing contributing factors such as lifestyle issues and devising a plan together to resolve or prevent similar situations from occurring. Providing appropriate patient education is an important aspect of providing practical recommendations to enable patients to make better health care choices, as is providing patients with the opportunity to ask questions or to clarify any outstanding issues. Follow-up strategies are determined by the requirements of the SPI, and may involve a simple invitation for the patient to call back if they have any concerns.

The specific actions required for each SPI will depend on the scenario, and may include some of the following examples, where relevant:

- Explains why medication has been prescribed
- Counsels patient on how to take medication e.g. with or after food
- Counsels patient on dose and frequency of medication

- Counsels patient on possible/common side effects of treatment
- Explains benefits of lifestyle changes/non-medication/dietary measures where relevant
- Explains why adherence to therapy is important
- Checks patient understanding of directions
- Asks if patient has any other questions and/or provides opportunity for follow-up



Competency 3: Communication Skills

During each of the SPI's the pharmacist should demonstrate their ability to communicate in each of the following four areas:

1. Response to patient's feelings and needs (*empathy*) – The pharmacist should respond to the patient's needs and cues in a perceptive and genuine manner.
2. Degree of *coherence* in the interaction – The pharmacist should demonstrate an organised approach to the SPI. They should have control of the interaction with the patient and demonstrate flexibility when required.
3. *Verbal Expression* – The pharmacist should demonstrate a command of expression during the SPI. This will include their grammar, tone, modulation and volume of voice, rate of speech and pronunciation.
4. *Non-verbal expression* – The pharmacist should exhibit a command of non-verbal expression. This will include eye contact, gestures, posture and use of silence.

When communicating with a patient, it is important to remain professional, be clear and concise and use language that the patient will understand. Pharmacists should demonstrate empathy for the patient's situation and be willing to help with their needs. Well-developed listening skills are essential for an effective interaction. When patients express themselves, pharmacists should pay attention to their verbal and also their non-verbal messages (for example, facial expression, and body language). Patients can provide important cues as to how they are feeling and what really matters to them. Interacting with patients and healthcare professionals is always a two-way communication where both participants contribute to the discussion.

The Review System

The Practice Reviewers will record each time they observe one of the observable actions from the checklist for each SPI and will separately provide a global rating for each of the competencies required. The checklists and the global competency ratings for each of the seven SPIs are collated after the Practice Review event. These are carefully checked and the performances of individual SPIs and Practice Reviewers are analysed for any inconsistencies. A statistical analysis of the observable actions against the global competency ratings for is used for standard setting for each of the three competencies.

The overall performance of the pharmacist across the seven SPIs for each of the three competencies will be considered. The standard setting process can take a number of weeks so no information on how each pharmacist performed will be available at the Practice Review event.

Preparation

The skills and competencies required for the SPIs are representative of those that a pharmacist practising in a patient-facing role would utilise. The best preparation for this portion of Practice Review, therefore, is active practice. The normal, routine practice of pharmacists should adequately prepare them to demonstrate the skills and competencies that are required to successfully undertake the Practice Review.

It is important to remember that the SPIs are not designed to 'catch you out' and that the entire process is reviewing a baseline level of competence.

The following additional support is available to enable pharmacists to undertake the SPI:

- Printable guides
- Interactive guides
- Information videos about Practice Review
- Videos showing sample SPIs with a variety of pharmacists