

# Remembrance of Things Past

Bruce Millin

As President of the Canadian Society of Hospital Pharmacists (CSHP), I represented the organization at the Western Branches Banff Seminar this past March. I attended my first Banff Seminar exactly 30 years earlier, as a young, impressionable resident. I don't remember much of that first conference, but I do remember one specific presentation and its impact on my practice. The presentation was about communicating with other health care professionals, physicians in particular. I've never regretted the choice I made at that time to incorporate into my daily practice the take-home message of the value of open, cross-professional communication.

Fast forward 30 years and a panel discussion on the patient care experience. The two speakers on the panel, a patient care advocate and a hospital pharmacist, spoke with eloquence and passion about their personal experiences within the health care system and the role of the pharmacist. The impact of the presentation lay in its simple message: how we as pharmacists choose to communicate (or not communicate) with a patient affects the patient's journey through our complicated health care system.

The irony of the situation was not lost on me. Here I was at the same conference, after a significant span of time, being touched by another presentation that focused on communicating more effectively with a specific target audience. As a result, I have once more committed to incorporating lessons learned from a communication panel into my current practice and will specifically endeavour to take the following actions based on the 2015 panel discussion:

- Smile (simplistic, perhaps, but easy and effective).
- Introduce myself and describe my role.
- Explain the intent of my visit or question.
- Listen more than I talk.
- Focus on the person with whom I'm interacting.
- Conclude by asking "What questions do you have?" (rather than "Do you have any questions?").

It is my hope that these simple acts, whether I perform them while talking to a staff member or to a patient, will make the individual realize that I have been listening and have heard his or her concerns.

The *Hospital Pharmacy in Canada 2013/14 Report* highlighted the CSHP 2015 objectives crowned with success and those with room for improvement (see [www.lillyhospitalsurvey.ca/hpc2/content/2015\\_report/chapter\\_e%20.pdf](http://www.lillyhospitalsurvey.ca/hpc2/content/2015_report/chapter_e%20.pdf)). Objective 1.5 set the following target: "50% of recently hospitalized patients or their caregivers ... will recall speaking with a pharmacist while in the hospital". Of the 162 respondents to this question, 77% had conducted a client satisfaction survey, of whom only 23% reported asking a question about an interaction with a pharmacist. Sadly, only 4% of those who asked such a question met the CSHP 2015 target. Even admitting that the 50% target may have been too optimistic, these recent data certainly suggest we have a way to go in raising our profile. With this in mind, I will work with others in my own health authority to have a question about recall of pharmacist interactions added to our postdischarge patient satisfaction survey. The author of the aforementioned CSHP 2015 chapter asked the rhetorical question, "If more hospital surveys were to ask patients about their interactions with pharmacists, would the rate of recall be higher?" I don't know, but I intend to find out!



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