**A reflective tool for anticoagulation consultation skills (adapted from the Medication-Related Consultation Framework (MRCF)1)**

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| --- | --- |
| Practitioner’s name |  |
| Name of reviewer (if applicable e.g. peer or mentor): |  |
| Date of consultation with patient |  |
| Date of review/self-assessment completed |  |

**HOW WELL DID YOU UNDERTAKE THE FOLLOWING ACTIVITIES WHEN CONSULTING WITH THE PATIENT?**

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| --- | --- | --- | --- |
| **(A) INTRODUCTION –** *Was I fully able to build a relationship with the patient? Did I...?* | | **Yes / No** | **Comments / reflections** |
| **1** | Introduce myself |  |  |
| **2** | Confirm patient’s identity |  |  |
| **3** | Discuss purpose and structure of the consultation |  |  |

**Learning needs** (i.e. areas for improvement / action points):

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| --- | --- | --- | --- |
| **(B) EXPLORING PATIENT’S KNOWLDEGE AND BELIEFS –** *Was I fully able to elicit the patient’s knowledge and beliefs? Were we able to set a shared agenda. Did I...?* | | **Yes / No** | **Comments / reflections** |
| **1** | Assess the patient understands the rationale for oral anticoagulation |  |  |
| **2** | Elicit patient’s (lay) understanding of his/her illness |  |  |
| **3** | Assess patient’s knowledge and beliefs about oral anticoagulation |  |  |
| **4** | Elicit concerns about oral anticoagulation |  |  |
| **5** | Explore social history |  |  |
| **6** | Set a shared agenda |  |  |

**Learning needs** (i.e. areas for improvement / action points):

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| --- | --- | --- | --- |
| **(C) EDUCATION –** *Was I fully able to establish that the patient had an understanding of the following …* | | **Yes / No** | **Comments / reflections** |
| **1** | Reason for oral anticoagulation and expected duration of therapy |  |  |
| **2** | Description of warfarin tablets |  |  |
| **3** | Mode of action including variability of dosage |  |  |
| **4** | The INR and monitoring of oral anticoagulation |  |  |
| **5** | Importance of adherence and the action to take if a dose is omitted |  |  |
| **6** | Non-serious bleeding – examples and actions |  |  |
| **7** | Serious bleeding – examples and actions |  |  |
| **8** | Drug-drug interactions |  |  |
| **9** | Dietary interactions |  |  |
| **10** | The effects of alcohol |  |  |
| **11** | The effects of acute illness |  |  |
| **12** | Risk avoidance, e.g. surgical procedures, dental work, immunisation, gardening, sewing, sports, kitchen activities, acute illness |  |  |
| **13** | Relate information to patient’s illness & treatment beliefs (risk-benefit discussion) |  |  |

**Learning needs** (i.e. areas for improvement / action points):

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| **(D) CLOSURE –** *Was I fully able to empower and enable the patient to take their oral anticoagulation? Did I...?* | | **Yes / No** | **Comments / reflections** |
| **1** | Check patient understanding (using the ‘teach-back’ method where possible) |  |  |
| **2** | Ask the patient what they thought about taking warfarin |  |  |
| **3** | Ask the patient how they will remember to take their warfarin each day |  |  |
| **4** | Explain the clinic procedures |  |  |
| **5** | Provide a further appointment and contact details |  |  |
| **6** | Offer opportunity to ask further questions |  |  |

**Learning needs** (i.e. areas for improvement / action points):

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| **(E) CONSULTATION BEHAVIOURS –** *Did I fully demonstrate the following consultation behaviours?* | | **Yes / No** | **Comments / reflections** |
| **1** | Listen actively & allow the patient to complete statements |  |  |
| **2** | Use open & closed questions appropriately |  |  |
| **3** | Demonstrate empathy & support the patient |  |  |
| **4** | Avoid or explain jargon |  |  |
| **5** | Accept the patient (i.e. show respect, not judgemental or patronising) |  |  |
| **6** | Adopt a structured & logical approach to the consultation |  |  |
| **7** | Summarise information at appropriate time points |  |  |
| **8** | Manage my time effectively (work well within the time available) |  |  |
| **9** | Keep the interview “on track” or regain “control” when necessary |  |  |

**Learning needs** (i.e. areas for improvement / action points):

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| --- |
| **OVERALL IMPRESSION** |
| Overall, my ability to consult with the patient meant that their pharmaceutical needs were: Not addressed❑Partially addressed❑Mostly addressed❑Fully addressed ❑ |
| **Main strengths:**  **Main areas of weakness / further improvement:** |
| **Now prioritise your key learning needs and design an action plan for further development of specific consultation skills. Please describe WHAT you need to develop further and HOW you plan to achieve this.**  **Learning need identified Timescale**  1).  2).  3).  4).  **Patient Feedback** You may also wish to obtain further feedback from the patient and use this to inform the development of your consultation skills and to further inform your CPD.  **Action plan** |

1. Abdel Tawab R, James DH, Fichtinger A, Clatworthy J, Horne R, Davies G (2011). Development And Validation of the Medication-Related Consultation Framework (MRCF) *Patient Education & Counseling* 83 (3): 451-7.