

# Family Physicians' Perceptions of Academic Detailing

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## Introduction

- Dalhousie University Continuing Medical Education (CME) provides many forms of education for Nova Scotian physicians.
- Academic detailing is a form of CME in which a trained health care professional visits physicians in their offices to provide evidence-based, educational messages.
- Educational research has shown academic detailing, especially when combined with other educational programs, to be effective in changing physician behaviour.
- Dalhousie CME has had an academic detailing service for 4 years. Three academic detailers (2 pharmacists, 1 nurse) provide education to physicians throughout Nova Scotia.
- Handout material includes
  - Comprehensive booklet with summary statements in the front
  - Double sided laminate of key messages
- Records show that approximately
  - 414 (46%) family physicians have never used the Service
  - 110 (12%) have used it once
  - 375 (42%) have used it more than once

## Purpose

- Our **research questions** were:
  - How does the value of academic detailing compare to other forms of CME?
  - What features of academic detailing
    - Encourage physician participation?
    - Discourage physician participation?
    - Do physicians find valuable?
  - How can we improve academic detailing?

## Methods

- We divided the **study population** into 3 groups:
  - Those who had never used the Academic Detailing Service - **Used Never**
  - Those who had used the Academic Detailing Service once - **Used Once**
  - Those who had used the Academic Detailing Service more than once - **Used > Once**
- We used two methods of **data collection**:
  - Questionnaire mailed to all physicians in the 3 groups
  - Telephone interviews with 7 to 10 physicians from each group

### Contact Information

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[http://cme.medicine.dal.ca/ad\\_resources.htm](http://cme.medicine.dal.ca/ad_resources.htm)

## Results

### Questionnaire

	Response rate	
	Percent	N
Used never group	15%	60
Used once group	22%	24
Used > once group	55%	205
Overall	32%	289

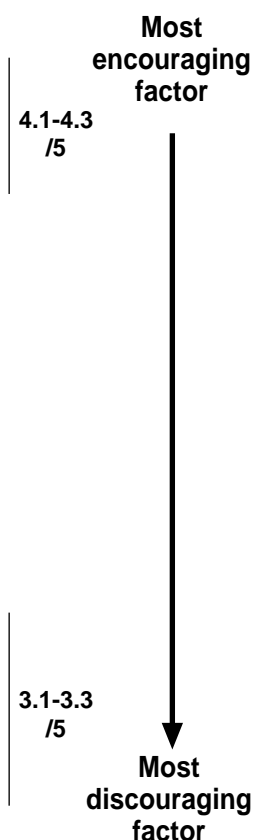
### 1. How does the value of academic detailing compare to other forms of CME?

- Used > Once group**
  - Rated academic detailing 4.3 on 5 point Likert scale.
  - Rated academic detailing as more valuable than other forms of CME (**Figure 1**).
- Used never group**
  - 50% of respondents had never heard of the Academic Detailing Service before receiving the questionnaire.

### 2. Factors that encourage and discourage physicians from using academic detailing

- On a 5-point Likert scale, we asked how much the following factors encourage or discourage physicians from using academic detailing.
  - Listed in overall rank order with **encouraging** factors listed **first**.

- Adopting an evidence-based approach
- Relevance of topic presented
- Usefulness of handout material
- Effectiveness of academic detailing as a way of learning
- Following up by finding answers to questions
- Awareness that topic was being presented
- Their clinical knowledge of a topic
- Obtaining CME credits
- Having access to CME in other ways
- Scheduling time to see the academic detailer
- Having CME provided by a non-MD
- Spending office time doing CME

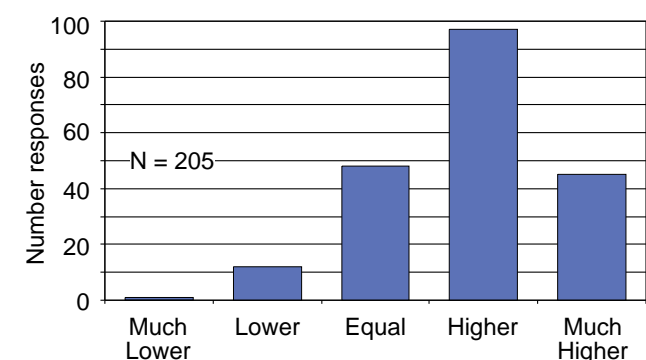


- All 3 groups rated
  - Adopting an evidence based approach as a strongly **encouraging** factor (Likert score means = 4.1/5 to 4.4/5)
- The **Used Never** group rated
  - Scheduling time to see the academic detailer and
  - Spending office time doing CME as **discouraging** factors (Likert score means = 2.6, 2.3)
- All three groups rated
  - Having CMD provide by a non-MD as a **discouraging or neutral** factor (Likert score means = 2.7, 3.1, 3.3)

### 3. How can we improve academic detailing?

- Information came from qualitative data.
- Used never group
  - Did not know how to access academic detailing.
  - Found it inconvenient to find time for CME during office hours.
  - Wanted more flexibility in times for seeing the academic detailer e.g., at home after regular hours.
- Handout material was reported as being useful but some suggestions for improvement were:
  - Include more tables and algorithms.
  - Do not include information that doctors already know.
  - Make them shorter.
  - Put them in Palm format.

**Figure 1** Value of academic detailing compared to other forms of CME – for **Used > once** group



### Other Qualitative Data

- There was strong support for an evidence-based approach.
  - The evidence-based approach has led to participants more critically appraising information derived from CME events, publications, and pharmaceutical representatives.
- Most respondents were satisfied with having CME provided by a non-MD. They recognized that the academic detailers could not answer all questions but were satisfied that they found the answers for them.
- Used > once group made many favourable comments and wanted to see the academic detailer more often.
  - They were supportive of having 2 consecutive visits on different aspects of a large complex topic such as diabetes.

## Conclusions

- Physicians who use academic detailing regularly are enthusiastic about the service and rate it as more valuable than other forms of CME.
- We need to make non-users of academic detailing more aware of its availability.
- We need to find more flexible ways of scheduling and making material available to physicians who cannot do CME during office hours.
- We will maintain our comprehensive evidence-based approach.