Family Physicians' Perceptions of Academic Detailing

Allen M, Ferrier S, O'Connor N, Fleming I
Office of Continuing Medical Education, Dalhousie University, Halifax, Nova Scotia, Canada

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:
  1. How does the value of academic detailing compare to other forms of CME?
  2. What features of academic detailing - Encourage physician participation?
     - Discourage physician participation?
     - Do physicians find valuable?
  3. 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

Results

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.

Contact Information
Dr Michael Allen
Associate Professor
Director Special Projects
Dalhousie University Continuing Medical Education
Halifax NS Canada
michael.allen@dal.ca
902-494-2173
http://cme.medicine.dal.ca/ADS.htm
http://cme.medicine.dal.ca/ad_resources.htm