

#### Disclosure Statement - Julia Bareham

- Full-time with RxFiles Academic Detailing at the University of Saskatchewan
- RxFiles Academic Detailing receives grant funding from the Saskatchewan (SK)
   Ministry of Health (provincial government) for academic detailing in SK and not-for-profit revenue from sale of printed and digital drug therapy resources
- Pharmacist with Shoppers Drug Mart (retail pharmacy chain) casual
- Committee member of the Drugs and Therapeutics Advisory Committee for Non-Insured Health Benefits of Indigenous Services Canada (branch of the Canadian Federal government)
- No funding from the pharmaceutical industry





#### Disclosure Statement - Jacki Travers

- Full time academic detailing pharmacist for Pharmacy Management Consultants at the University of Oklahoma College of Pharmacy
- CARE program: Collaborative Advancement of Prescription Excellence
- Current and past funding sources include:
  - Oklahoma Health Care Authority (OHCA): Medicaid, a.k.a SoonerCare
    - Children's Health Insurance Program (CHIP)
  - Oklahoma State Department of Health (OSDH)
  - American Academy of Pediatrics (AAP)
- No funding from the pharmaceutical industry



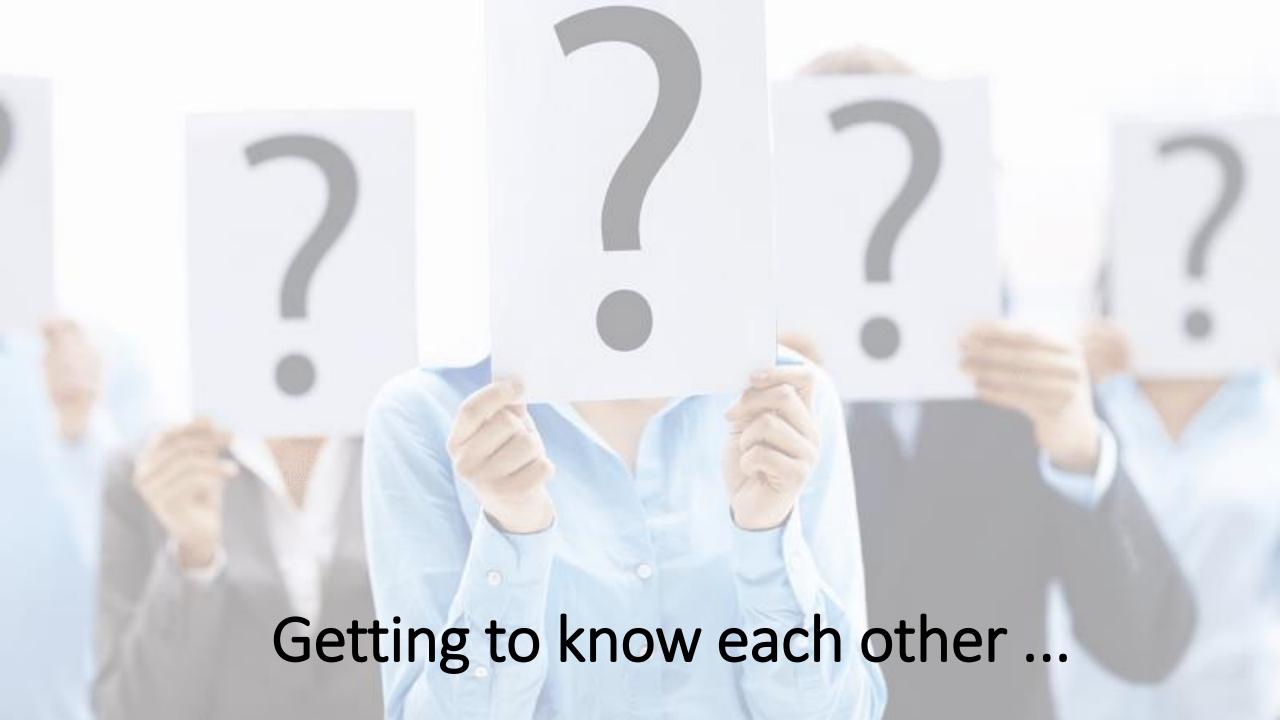
#### Objectives

This breakout session will empower and equip new & seasoned detailers to:

- 1. Build stronger relationships with providers; and
- 2. Leverage those relationships to result in meaningful behavioral changes

#### Housekeeping:

- Please:
  - Adjust your view to 'speaker view'
  - Turn your video on
  - Keep yourself muted when not speaking
  - Send chat messages to 'everyone'
  - Use the chat box to ask questions
  - Privately message Aanchal on Zoom if you have any technical issues





#### Getting to know us:

- Julia Bareham, MSc, BSP
- Pharmacist began academic detailing in 2009
- Other jobs: Prescription Monitoring Program, lung function clinic
- Education:
  - Masters developed, piloted, and evaluated a medication assessment service
  - Psych degree
  - Certificate of professional communication rhetorical communication
- Therapeutic areas of interest: geriatrics, psych, SUD
- How do I have fun outside of work?
  - Crafting quilting, sewing, Cricut
  - Sport shooting
  - Friends, family, dogs

#### Getting to know us:

- Jacki Travers, PharmD
- Pharmacist Began academic detailing in 2015
- Education: B.S. Chemistry (University of Colorado), PharmD (University of Oklahoma)
- Therapeutic areas of interest: pediatric acute & chronic conditions, especially mental health
- How do I have fun outside of work? DIY, board games, travel (pre-COVID)

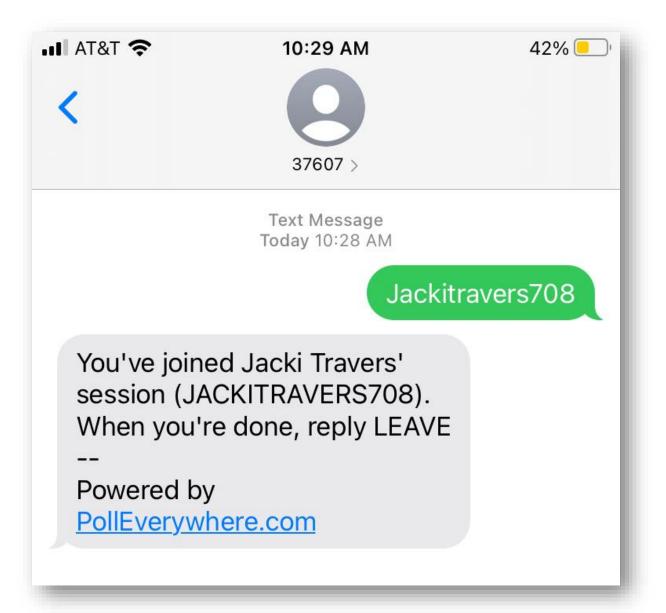


#### Poll Everywhere

Send a text to **37607** with the word **jackitravers708** 

Or use the website: pollev.com/jackitravers708





#### How long have you been detailing?

A: Less than 1 year

B: 1 to 2 years

C: 3 to 4 years

D: 5 to 10 years

E: More than 10 years

#### What are your current AD topics?

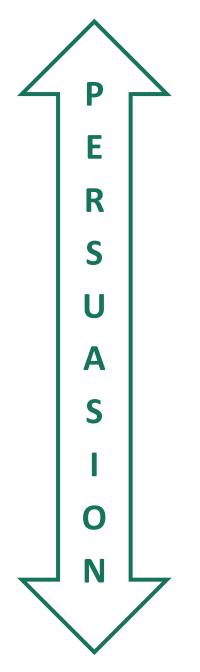


#### What is academic detailing?

 An academic detailer attempts to persuade or influence clinicians to accept key messages that are based on evidence and facts, then negotiates for behaviour change based on those key messages.

In the chat box, tell us how you define academic detailing.

#### The Structure of a 1:1 Visit







#### Persuasion, Influence, and Manipulation

- Persuasion: the act of causing people to do or <u>believe</u> something, which will usually bring positive outcomes
- Influence: the ability to affect someone else's <u>behavior</u> because of your (real or perceived) authority, knowledge or relationship with that person
- Manipulation: the act of controlling or playing upon someone by artful, unfair, or insidious means, especially to <u>one's own advantage</u>. It is often done without the other person's knowledge

#### **Necessity of Trust**

- Trust produces: security, happiness, satisfaction
- Trust is the bedrock of relationships
  - Detailers want to specifically develop <u>knowledge-based trust</u>
  - Increases dependence & commitment among parties
- Successful negotiation involves effective relationships
  - Negotiated behavior change will lead to optimized patient care!!!



Trust → Relationship → Behavior Change

#### Providers are saying:

"I think an obvious first strength is one-on-one interaction as opposed to sitting in a group setting or doing something online. The dialogue can be tailored to the interest and to the level of understanding. So, that makes a big difference."

"I was motivated to take action before I met the detailer, but she was—she probably was a nice <u>catalyst to help it come to fruition</u>, help my motivation, <u>enhance my motivation</u> to bring...forth a performance."

During a detailing visit, how is trust built?

#### Read the Signs:

Verbal cues!

General body Language

Responding!

LOOKINGAT WATCH?

Eye contact

Distracted?

Nodding?

Looking at phone?

> Just ask!

Looking at materials

They're talking.

IMPATIENT?

Just being polite?

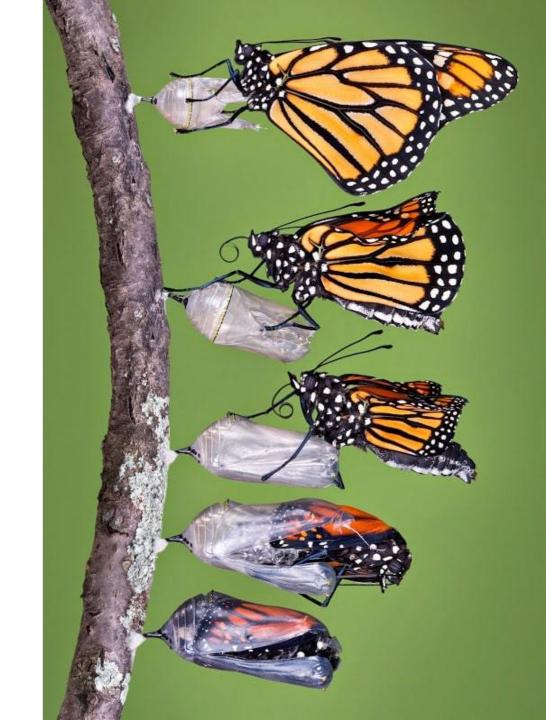
## Verbal & nonverbal communication builds trust in two ways:

- Cognitive route: based on rational, deliberate thoughts & considerations
  - Facilitates keeping conflict task-focused, rather than personal
  - Uses common goals, shared vision
  - Basis of making network connections

- Affective route: based on intuition & emotion
  - Warm feelings
  - Important primarily in the beginning of a relationship
  - May be difficult to establish remotely

#### Relationship stages:

- First encounter
- Strengthening the relationship
- Repairing the relationship
- Influencing behavior



#### First Encounter

- Capitalize on network connections
- Find similarities
- Identify shared goals
- Build initial trust

#### Strengthening the Relationship

- Continued trust development
  - Similarity
  - Exposure
  - Physical presence
  - Mimicry and mirroring
  - Reciprocity
  - Small talk
  - Flattery
  - Self-affirmation



## Strengthening the relationship: non-verbal strategies

- Similarity: people who are similar to each another like one another
- **Exposure:** the more we are exposed to something, the more we like it
- Physical presence: functional distance
- Mimicry & mirroring: mimicking mannerisms builds trust

How to you get close to a clinician when you are not co-located?

When you are co-located?

### Strengthening the relationship: verbal strategies

- Reciprocity: feeling obligated to respond when we have been offered or given something
- Small talk: shows continued interest
- Flattery: needs to be authentic
- Self-affirmation: focuses on an important personal value
- Mimicry & mirroring: mimicking language builds trust

How do you effectively or strategically flatter someone without being too obvious or awkward? How do you mimic or mirror?

#### Repairing the relationship



#### Causes of Relationship Damage



- **Distrust** having negative expectations about another person's motives
- Suspicion ambiguity about another person's motives
- Breach or defection one or both violate the trust that has been built
- Miscommunication unintentionally providing inaccurate information
- Dispositional attributions call into question another person's character & intentions by citing them as the cause of a behavior or incident

What might this look like for an AD?

# What happens when things go wrong?

#### Repairing broken trust:

- Step 1: Arrange a personal meeting
- Step 2: Put the focus on the relationship
- Step 3: Apologize
- Step 4: Let them vent
- Step 5: Do not get defensive
- Step 6: Ask for clarifying information
- Step 7: Test your understanding
- Step 8: Formulate a plan
- Step 9: Think about ways to prevent a future problem
- Step 10: Do a relationship check-up

#### Transform personal conflict into task conflict

- Personal conflict = emotional conflict
  - Anger, personality clashes, ego, & tension
  - Threatens relationships
- Task conflict = cognitive conflict
  - Depersonalized
  - Argumentation about the merits of ideas, plans, & projects
  - Enhances relationships











### These 6 principles help detailers influence providers:

- Reciprocity
- Consistency & commitment
- Social proof
- Authority
- Liking
- Scarcity



#### Reciprocity

- People tend to return a favor
- People feel an obligation to repay what has been given

#### **Consistency & commitment**

- Consistency: People feel strong pressure to be consistent within their own words & actions
- **Commitment**: If people commit to an idea or goal, they are more likely to honour that commitment



#### Social proof

 People often look to the behavior of similar others for direction about choices

#### **Authority**

 People are more easily persuaded by individuals perceived to be legitimate authorities



#### Liking

 People prefer to say 'yes' to those they like

#### **Scarcity**

 People value scarce information and commodities more than those that are in abundance.

## How do you leverage relationships to change behaviours

Think of your personal experience academic detailing.

What did you want the clinician to do? How did you phrase your 'ask' of the clinician?

Do you think we can still 'ask' when the change is an organizational directive?



#### Nurturing the detailerprovider relationship

- ☑ Be honest & truthful
- ☑ Be authentic
- ☑ Be empathetic
- ☑ Be supportive, not directive
- ☑ Be aware of non-verbal signals you send
- ☑ Be respectful of their time



#### Nurturing the detailerprovider relationship

- ☑ Share your intentions
  - Funding
  - Goals for the session
- ☑ Offer personalized information
  - Be relevant
- Avoid asking 'knowledge testing' questions



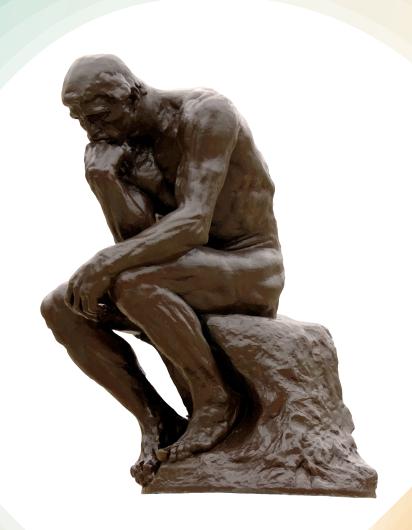
#### Nurturing the detailerprovider relationship

- ☑ Pay attention to semantics
  - "I'm here to educate you."
  - "I'm here to support you."
- ☑ Employ active listening
  - Be open to new experiences & perspectives
- ☑ Follow through on commitments

What additional tips might you add to the list?



#### Additional Questions?



#### References

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#### Closing thoughts

"Act as if what you do makes a difference.
IT DOES."

WILLIAM JAMES