

Virtual Detailing: Creating Supportive Networks in a Digital World

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Disclosures

- None

Acknowledgment

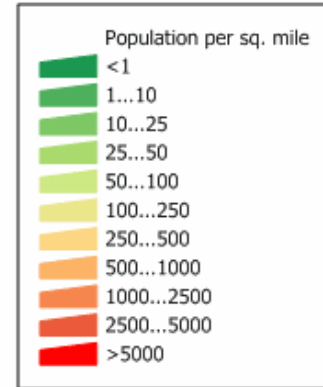
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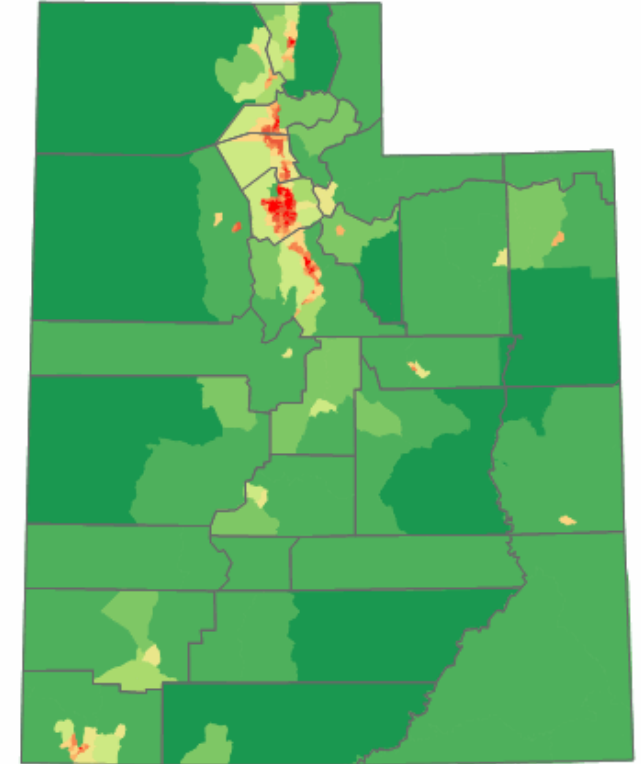


Program Background

- Utah has had a **ten-year consistent increase** in sexually transmitted infections and limited access to PrEP outside of Salt Lake City.
- The Utah Department of Health asked the Utah AETC to try a Public Health Detailing/Academic Detailing model to address these challenges.
- Just several weeks after the Detailing Institute in California in February 2020 the developing program had to **shift to 100% virtual due to COVID**



Source: U. S. Census Bureau
Census 2000 Summary File 1
population by census tract.



Program Development

- Goals of the program remained the same but moved everything to a digital format

Increase use of CDC STI Guidelines
Increase 3 site testing for Chlamydia/Gonorrhea
Increase use of PrEP

In Person	Digital
In office visits	Zoom
Schedule by phone	Calendly
Paper Handouts	PDFs w/ active links
Paper Surveys	Pre/Post Evals by Email
Binder Toolkits	Dropbox style Toolkits

Program Implementation

- Our first detailing sessions were with experts on our topics
 - All our experts reported they learned something from the program & felt it would be incredibly useful for providers
- **Created a flyer** for our program that could be posted and shared virtually
 - We received interest from rural areas that would have taken well over a year to reach with an in-person model
- Used local conference attendee lists



PUBLIC HEALTH DETAILING

Educational outreach for primary care providers to help support the tireless dedication you have to Utah's patients and community.

The focus of this program is to increase awareness and treatment for Sexually Transmitted Infections and increase access to PrEP.

Consultations can cover:

- » Thorough sexual health history training
- » Reviewing newest guidelines for testing and treating STIs
- » Determine frequency of testing needed
- » Individual training for PrEP
- » How to implement PrEP visits into your primary care practice without causing additional burden.

Visits are:

- » Virtual with hope for in person training in the future
- » Set for 15 minutes
- » Offered six days a week, as many times as you want
- » One on One so providers can have individual and customized information!
- » FREE!

Contact our Public Health Detailer today for your first visit!



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**Who could you detail that would make a good champion
and help you get referrals to other clinicians?**

Networking Successes: Qualitative

- **“Trickle down effect”**
 - Sessions would create separate projects
 - These projects would create more referrals & program awareness
- **Referral System**
 - Experts referred providers into our program
 - Those providers share other possible providers or community groups

Networking Successes: Quantitative

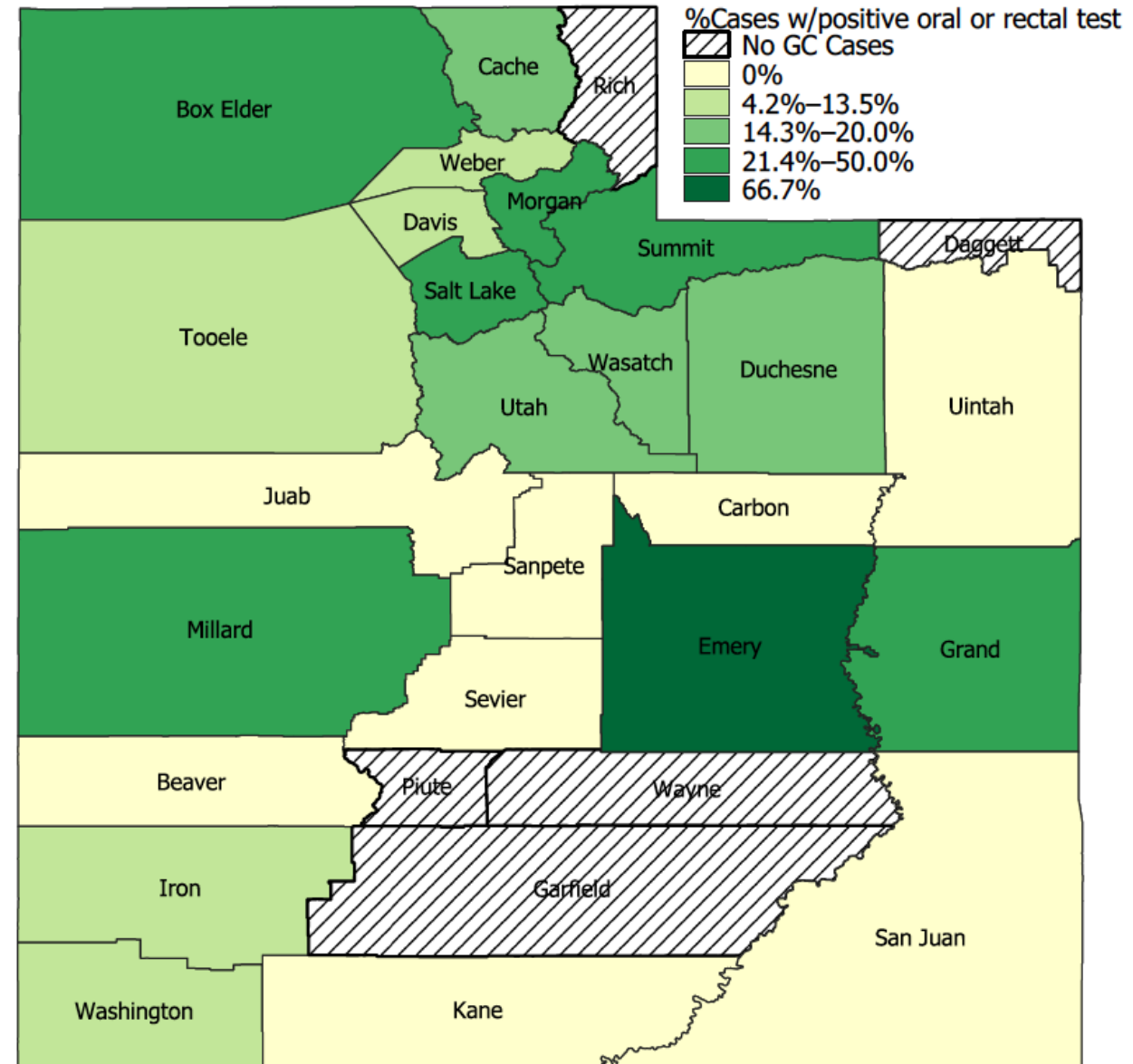
Effort	Result
Counties contacted	16
Number of attempted contacts	400
Detailing Sessions	45
Projects from Sessions	16

	Completed	%
Pre surveys	31	69
Post surveys	13	29

What's Next

- With our ability to meet anyone throughout the state we need to focus our efforts based on priority areas
- Consider 'clinic commitment' where all providers do one session
- As we navigate covid recommendations we are adding hybrid visits

Percent of Gonorrhea Cases Reported with a Positive Rectal or Oral Test by County, Utah, 2019



Conclusion

- **Flexibility is key!**
 - In person requires planning and TIME
 - Virtual allows for last minute meetings, changes, add-ons
- **Don't be afraid to make changes**
 - Our email templates have been modified several times
 - Kelsey.Genovesse@hsc.Utah.edu
 - <https://medicine.utah.edu/internalmedicine/infectiousdiseases/uaetc/public-health-detailing.php>