

The Efficacy of Academic Detailing on Primary Care Clinician Behavior Change for Tobacco Cessation

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Disclosure

Kelsey Bolton, BA, has no financial interests to disclose.

GHS Medical Education

- 21 Counties in WI, MN, IA
 - UME, GME, and CME
- 500+ attending clinicians
 - Prescribers & non-prescribers

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- Tobacco Use
 - GHS ranks 15/21 in WI for tobacco cessation
 - 130k patients; \$56m per year

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Tobacco Cessation

- **Primary Objective**
 - To determine the effectiveness of academic detailing on clinician practice change for tobacco cessation at GHS
- **Secondary Objective**
 - Evaluate clinicians' perception of the usefulness of academic detailing as an educational intervention
- **Tertiary Objective**
 - Evaluate the outcomes of tobacco cessation for patients at GHS

Implementation

- Internal training
 - Practice, practice, practice!
- Creating detailing aid
 - Medical partners
 - Marketing department
 - Practice, practice, practice!

Tobacco is a chronic substance abuse disorder and is a modifiable risk behavior that should be addressed by the healthcare team.

- ✓ Approach: Believe your patient can quit
- ✓ Updated Treatment Options
 - Medication PLUS Counseling Gold Standard
- ✓ Updated Tools/Clinician Smart Set

Visits

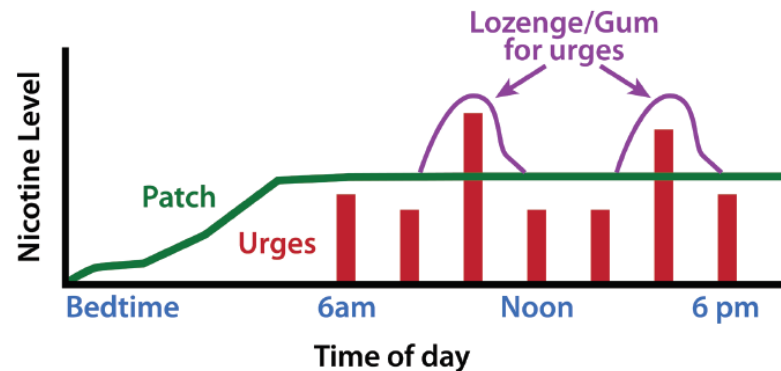
Pharmacology/Treatment Options

Combination NRT PLUS Counseling

- Combination NRT plus counseling is the gold standard
- Patch plus lozenge/gum is much better than single-agent NRT

Lozenge/gum dosing:

- 4 mg if smoke <30 minutes of waking
- 2 mg if smoke >30 minutes of waking



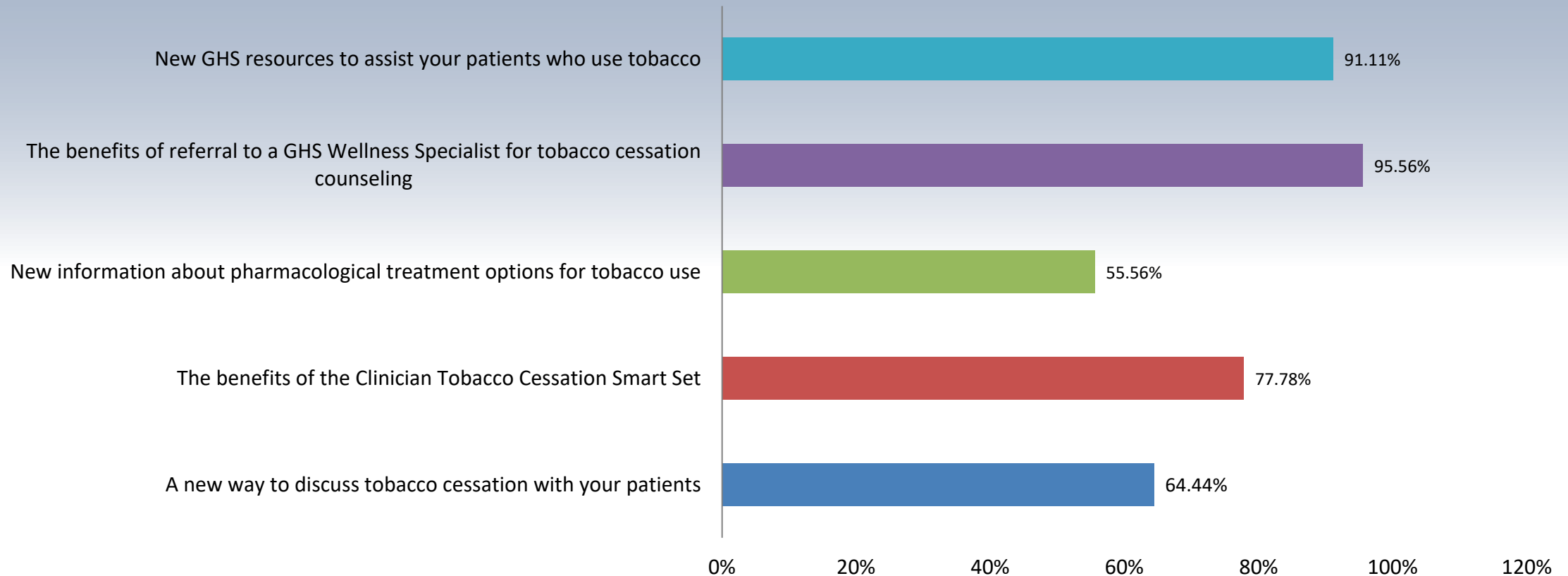
- Lunch!
- Key messages
 - Communication
 - Therapies
 - EMR shortcut
- Visit data
 - Surveys
 - Spreadsheet
 - Descriptive statistics and standard tests of association

Methods

- Education consultants completed training in academic detailing
 - Through The National Resource Center for Academic Detailing.
- Survey tool created
 - *Kirkpatrick's Four Levels of Training and Evaluation*⁵
 - Administered to 46 family medicine primary care clinicians within 14 different GHS clinics
- Primary outcome measured by analyzing clinician survey results
- Secondary outcome measured by determining changes between intervention and control groups and analyzing appointment level data
 - 1) prescribed quitting method(s), 2) order set use, and 3) referrals for GHS patients between Nov 2018 and March 2020.

Preliminary Results

Level 2 - 3: Learning & Behavior (n=45)



Mean : 3.190 | Confidence Interval @ 95% : [2.977 - 3.402] | Standard Deviation : 1.428 | Standard Error : 0.108

Preliminary Results

Interventions

ANY INTERVENTION (unique patients by MONTH)	2019	2020	
			(among PCP visit)
January	553	766	25.0%
February	441	764	26.8%
March	503	693	28.7%
April	517	435	26.6%
May	559	441	20.9%
June	544	383	14.9%
July	661	338	12.7%

Patient Outcomes... Coming Soon!

Conclusions

- Learning and clinician behavior change was optimized through academic detailing
- Clinicians have an increased understanding of resources, tools, and methodology in assisting patients with quitting tobacco
- **Hypothesis:** Post intervention tobacco cessation rates increase as evidenced through an increase in order set utilization, referrals, and prescribed quitting methods
- Long term research is needed to study the effects of sustained clinician behavior change