

Nerissa Caballes, PharmD, MS, CRC; Sonia Shah Dave, PharmD; Sajitha Purathur, PharmD; Brianna McQuade Hudak, PharmD, BCACP, MHPE
University of Illinois Chicago Retzky College of Pharmacy Department of Pharmacy Practice

Background

- Illinois ADVANCE (ILA) is a pharmacist-led academic detailing (AD) and drug information program run by clinical faculty from the University of Illinois Chicago Retzky College of Pharmacy.
- AD aims to close the gap between current evidence and appropriate prescribing for healthcare professionals (HCPs) by improving medication use and chronic disease state management.¹⁻³
- AD visits consist of a brief, interactive educational session conducted by trained detailers (pharmacists, physicians, or nurses) tailored to the needs and practice setting of the HCPs.^{1,4,5}
- Clinician education is essential to optimizing medication outcomes and remains a cornerstone of managed care pharmacy.⁶
- Methods to evaluate effectiveness and impact of a detailing program include two validated surveys:
 - Provider Satisfaction with Academic Detailing (PSAD) is a 10-question survey given to HCPs after a visit to evaluate their perspective on the detailer's knowledge and effectiveness, practicality of educational material, and applicability of the information to their practice.^{7,8}
 - Detailer Assessment of Visit Effectiveness (DAVE) is a 5-question survey completed by detailers to evaluate their perspective of the effectiveness and impact on the HCP's practice post-AD visit.^{7,9}

Objective

- To assess the impact of ILA AD services on detailer effectiveness and clinician learner satisfaction

Methods

- PSAD and DAVE survey data collected from January to December 2024 through Qualtrics experience management platform.
- Detailers completed the DAVE survey post-visit and shared the optional PSAD survey with HCPs to determine the effectiveness of AD and provide an opportunity for program improvement.
- PSAD and DAVE items are scored on a Likert-type scale from 1 (not at all) to 5 (extremely).
- PSAD scoring: Satisfaction score using measures 1-7 and willingness to change using measure 8.⁷ (To reduce survey fatigue, the "feasibility" and "consistency" measures were removed)
- DAVE scoring: Willingness to change score using measures 1-3, feasibility using measure 4, and communication using measure 5.⁷

Table 1. Final PSAD Survey for 2024 ILA AD Program*⁸
(Response Scale: Not at all = 1, Slightly = 2, Moderately = 3, Very = 4, Extremely = 5)

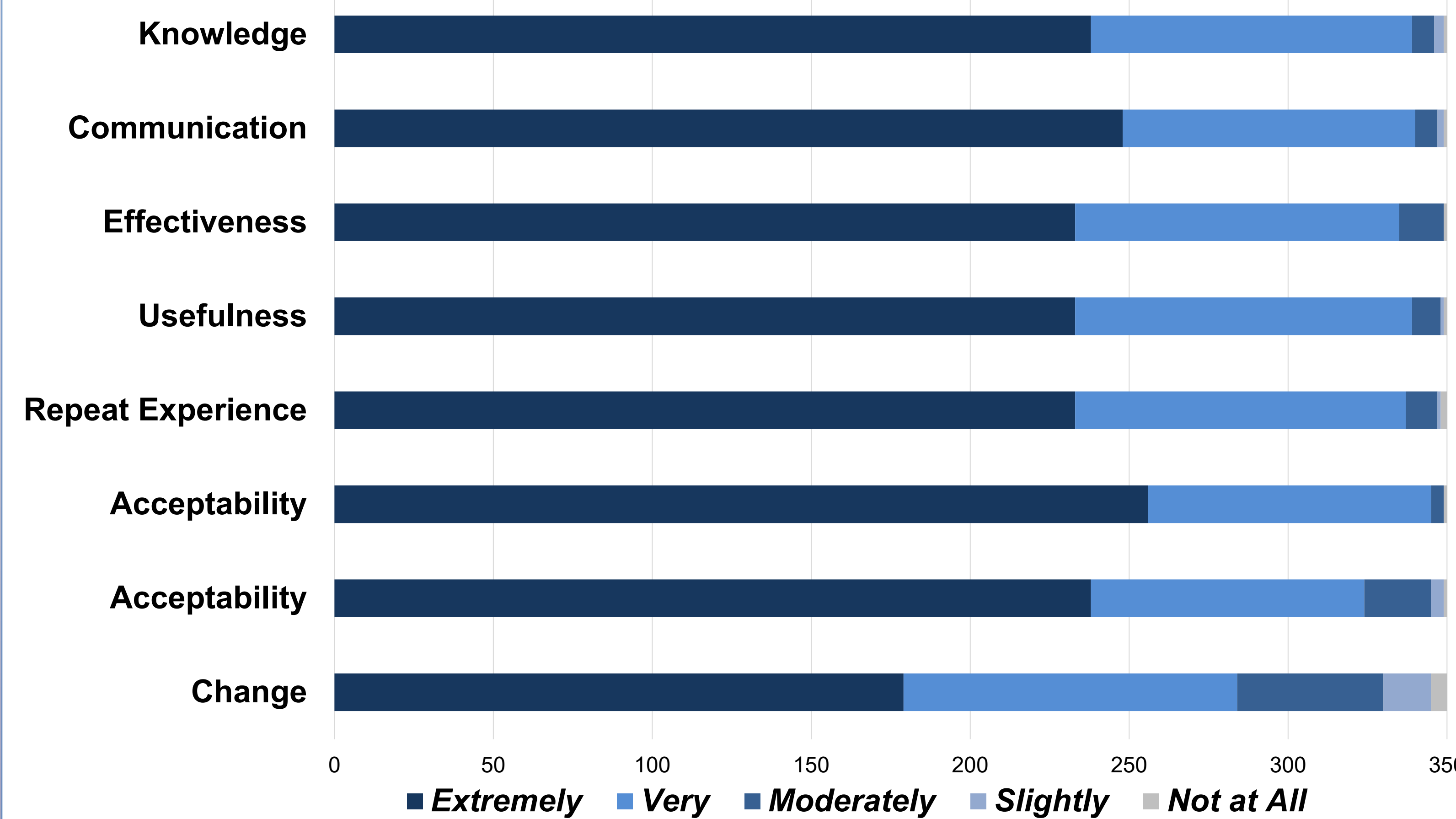
Measure	Survey Item
1 Knowledge	The detailer was knowledgeable
2 Effectiveness of Communication	The detailer was an effective communicator
3 Effectiveness	Academic detailing is an effective way to get updated on important topics
4 Usefulness	The detailing material was useful
5 Willingness to repeat experience	I would be receptive to future visits
6 Acceptability	This is an important clinical topic
7 Acceptability	The topic was relevant to my practice
8 Willingness to change	My practice is likely to change as a result of this visit

Table 2. Final DAVE Survey for 2024 ILA AD Program⁹
(Response Scale: Not at all = 1, Slightly = 2, Moderately = 3, Very = 4, Extremely = 5)

Measure	Survey Item
1 Usefulness	This visit was useful to the provider
2 Relevance	The provider is willing to implement
3 Acceptability	The provider is likely to change his/her/their practice as a result of this visit
4 Feasibility	It is feasible for the provider to implement the key points
5 Communication	The conversation went smoothly

Results

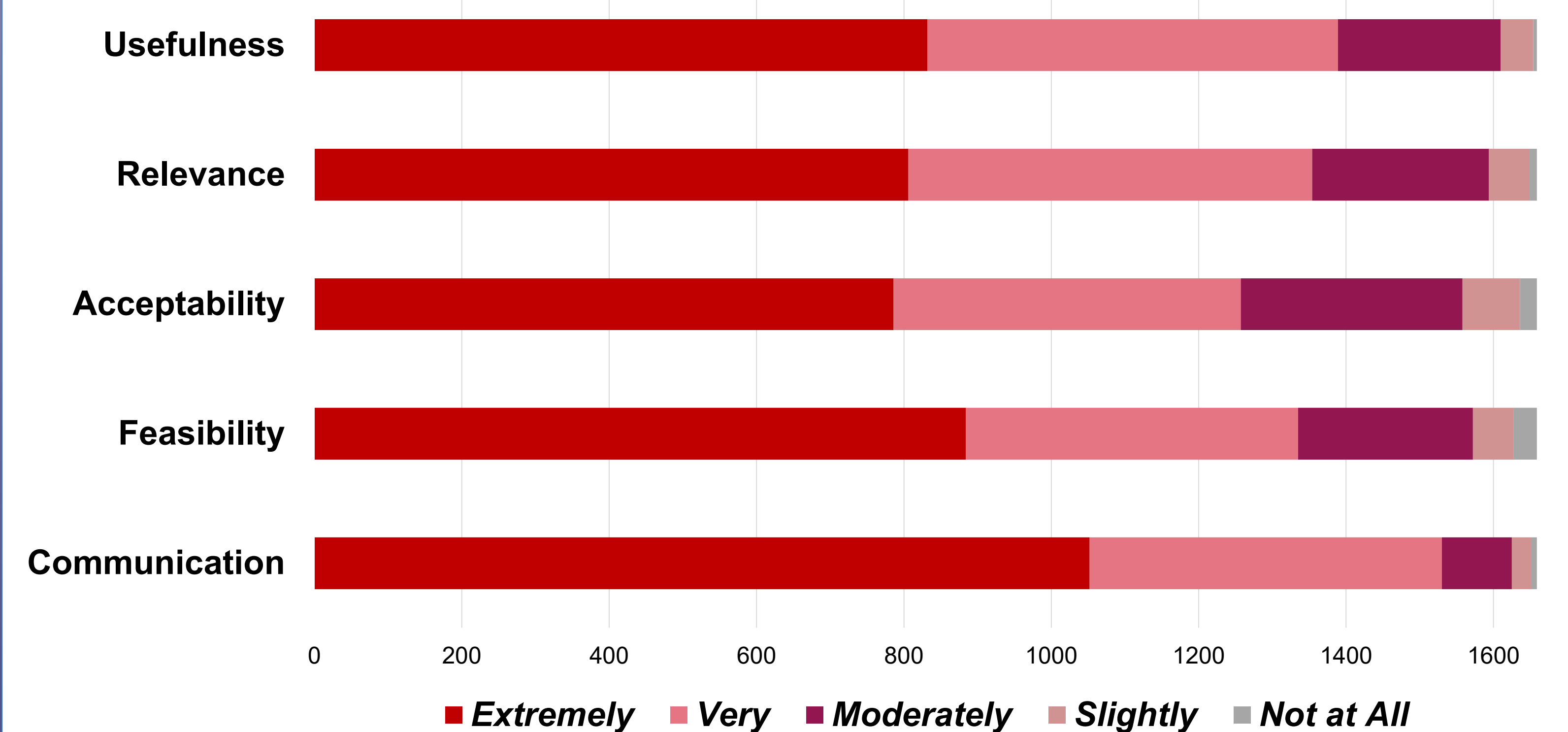
Figure 1. ILA PSAD Data Results (n=350)



	Knowledge	Communication	Effectiveness	Usefulness	Repeat Experience	Acceptability	Acceptability	Change
Extremely	238	248	233	233	233	256	238	179
Very	101	92	102	106	104	89	86	105
Moderately	7	7	14	9	10	4	21	46
Slightly	3	2	0	1	1	0	4	15
Not at All	1	1	1	1	2	1	1	5

Mean Satisfaction Score: 4.64
Mean Willingness to Change Score: 4.25

Figure 2. ILA DAVE Data Results (n=1659)

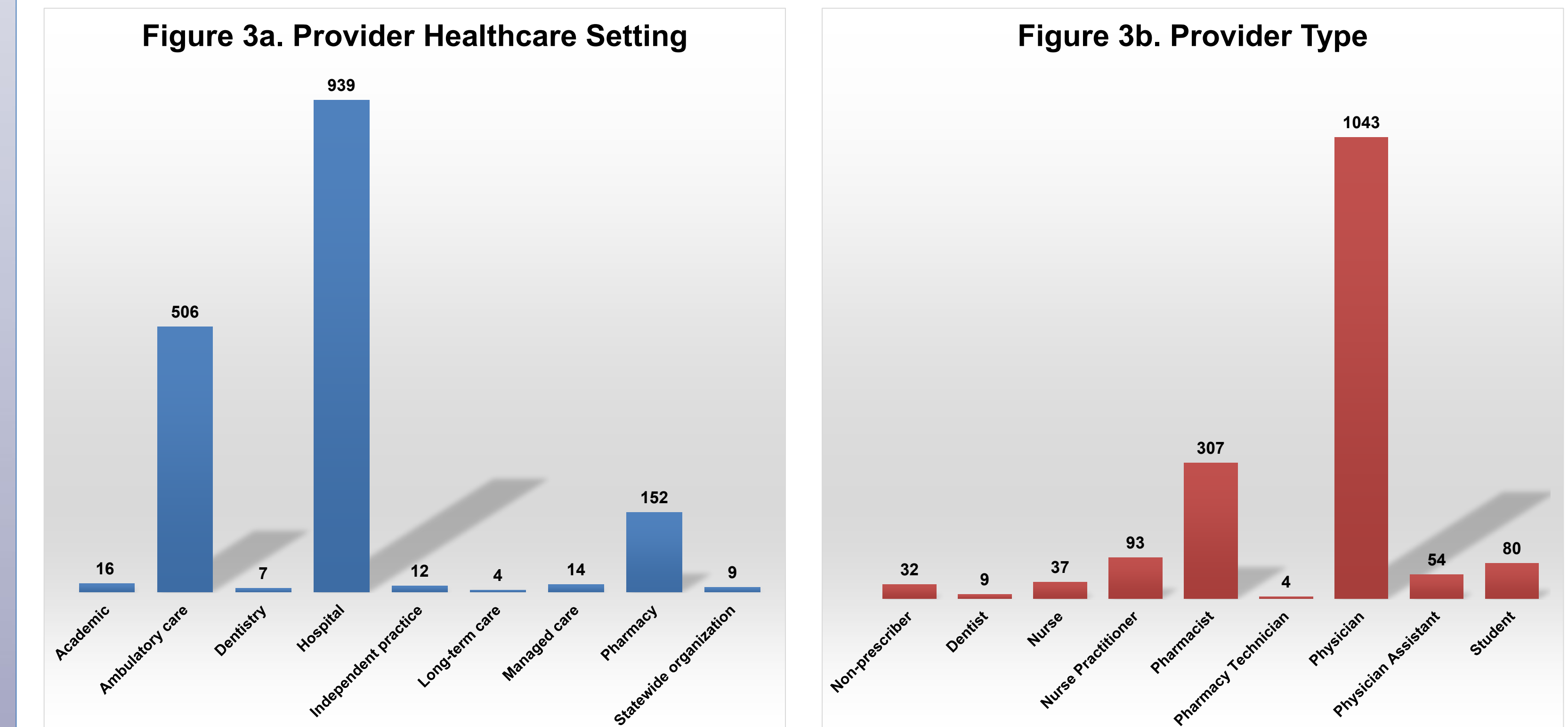


	Usefulness	Relevance	Acceptability	Feasibility	Communication
Extremely	832	806	786	884	1052
Very	557	548	471	451	478
Moderately	221	240	301	237	95
Slightly	44	55	78	55	26
Not at All	5	10	23	32	8

Mean Willingness to Change Score: 4.24
Mean Feasibility Score: 4.27
Mean Communication Score: 4.53

Results

Figure 3. Healthcare Provider Demographics



- Detailers completed 4,489 AD visits in 2024, covering topics such as opioid prescribing, opioid safety, infectious disease, substance use disorder, and chronic disease management.
- A total of 350 surveys completed by 233 HCPs led to a 7.8% response rate. The average rating for overall satisfaction was 4.64 and likelihood to change practice was 4.25.
- A total of 1659 detailer surveys were completed for 936 unique providers. The average rating for likelihood to change practice was 4.24, feasibility was 4.27, and communication was 4.53.
- Approximately 51% of HCPs and 47% of detailers rated "extremely" for likelihood of HCP to change practice after the AD visit.

Conclusion

- Results from the PSAD and DAVE assessment tools utilized by the ILA AD program demonstrate AD remains an effective method of presenting best evidence and reinforcing clinical knowledge.
- Ratings from participating HCPs and pharmacist detailers conveyed a mutually effective engagement experience. Both groups rated high likelihood for a change in practice and high satisfaction and usefulness of AD visits.
- The primary goals of AD programs are to deliver impactful, actionable education to healthcare clinicians, improve prescribing behaviors, and enhance overall patient care.
- Future research goals of ILA include to evaluate survey data stratified per topic, assess HCP reported changes in knowledge and behavior pre- and post-AD visit, and measure the impact of ILA on behavior change in HCPs who received AD via prescribing data.

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Acknowledgments and QR Code

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