Department of Veterans Affairs Veterans Health Administration Washington, DC 20420 VHA Directive 1108.18 Transmittal Sheet November 10, 2022

PHARMACY ACADEMIC DETAILING

- 1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive establishes policy for establishment and maintenance of Veterans Integrated Services Network (VISN) Pharmacy Academic Detailing programs.
- **2. SUMMARY OF CONTENT:** This is a new directive establishing policy to operate and maintain VISN Pharmacy Academic Detailing programs. Academic Detailing is an evidence-based knowledge-translation service provided to front-line clinicians and other health care staff.
- **3. RELATED ISSUES:** VHA Handbook 1108.11(1), Clinical Pharmacy Services, dated July 1, 2015.
- **4. RESPONSIBLE OFFICE:** Office of Patient Care Services, Pharmacy Benefits Management Services (12PBM), is responsible for the contents of this directive. Questions may be addressed to the Executive Director, PBM at 202-461-7360.
- 5. RECISSIONS: None.
- **6. RECERTIFICATION:** This VHA directive is scheduled for recertification on or before the last working day of November 30, 2027. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

BY DIRECTION OF THE OFFICE OF THE UNDER SECRETARY FOR HEALTH:

/s/ M. Christopher Saslo DNS, ARNP-BC, FNAAP Assistant Under Secretary for Health for Patient Care Services/CNO

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

DISTRIBUTION: Emailed to the VHA Publication Distribution List on November 10, 2022.

CONTENTS

PHARMACY ACADEMIC DETAILING

1. PURPOSE1	l
2. BACKGROUND1	
3. DEFINITIONS1	
4. POLICY	<u>></u>
5. RESPONSIBILITIES	2
6. TRAINING)
7. REFERENCES	7
APPENDIX A	
VISN PHARMACY ACADEMIC DETAILING PROGRAM STRUCTUREA-1	
APPENDIX B	
GENERAL PRINCIPLES OF ACADEMIC DETAILERS	

PHARMACY ACADEMIC DETAILING

1. PURPOSE

This Veterans Health Administration (VHA) directive establishes policy to improve and standardize evidence-based delivery of healthcare, disease management and preventative services at every Veterans Integrated Services Network (VISN) by establishing and maintaining a Pharmacy Academic Detailing (AD) Program that provides academic detailing services to front-line clinicians and other health care staff. **AUTHORITY:** 38 U.S.C. § 7301(b).

2. BACKGROUND

- a. In VHA, Academic Detailing services consist of a multifaceted approach to champion quality improvement initiatives and partner with and support front-line clinicians and other health care staff to improve Veteran health care. The basic principles of academic detailing incorporate evidence-based recommendations using "key message"-focused discussions, comparative effectiveness evidence, patient safety and quality care, cost-effectiveness evidence and relationship building. A core component of academic detailing services is service-oriented educational outreach focused on knowledge translation and clinical implementation barrier resolution. It leverages the one-on-one communication approach of pharmaceutical industry combined with the evidence-based, non-commercial aims of academic groups and research to understand clinical implementation barriers and opportunities for improvement. Academic detailing services then provide targeted customized interventions with the goal of improving Veteran health care and decreasing variability in evidence-based practice among facilities.
- b. Pharmacy Benefits Management (PBM) Academic Detailing Services (ADS) is the national program designed to support VISN Pharmacy AD programs by centrally resourcing academic detailers with training resources, educational materials, informatics tools that can be used for audit and feedback, a workload recording platform and evaluation of academic detailing outcomes. PBM ADS has contributed to many publications, presentations and reports that have demonstrated the positive impact of Academic Detailing in VHA (e.g., increasing medication treatment for alcohol use disorder, catalyzing distribution of naloxone, reducing high-dose opioids, reducing coprescribing of opioids and benzodiazepines, reducing benzodiazepine use in high risk populations). For a complete list of PBM ADS publications, please see: https://dvagov.sharepoint.com/sites/vhaacademicdetailing/SitePages/Publications-&-Conference-Posters.aspx?csf=1&web=1&e=6Ar8xf. **NOTE:** This is an internal VA website that is not available to the public.

3. DEFINITIONS

a. <u>Academic Detailer.</u> An academic detailer is one who has been trained in academic detailing basic skills and is providing academic detailing services. *NOTE:* Pharmacists who have had or currently have a scope of practice are the preferred

candidates to provide academic detailing services.

- b. <u>Academic Detailing Basic Skills Training.</u> AD basic skills training that teaches staff academic detailing skills. The training currently utilizes a combination of didactics and interactive role-play; trainees first learn about the skills then have an opportunity to practice the skills.
- c. <u>Academic Detailing Campaign.</u> An academic detailing campaign is a topic or initiative usually comprised of key messages (or action statements) and typically covers a specific clinical practice area, disease or medication class. These key messages or action statements take on various forms of interventions tailored to specific professions and clinical areas to encourage and improve the use of evidence-based health care.
- d. <u>Outreach Visit.</u> An outreach visit is considered a core component of academic detailing services. It is an interaction between an Academic Detailer and other individual(s) (typically front-line clinicians and other health care staff) designed to promote implementation of evidence-based practices related to an Academic Detailing campaign. An outreach visit may be conducted in person or virtually.
- e. <u>PBM Academic Detailing Services Campaign.</u> A PBM ADS campaign is an overarching topic or initiative supported by educational resources and data tools developed or endorsed by PBM ADS and hosted on the PBM ADS SharePoint as a campaign, available here: https://dvagov.sharepoint.com/sites/vhaacademicdetailing. NOTE: This is an internal VA website that is not available to the public. It is usually comprised of three to six key messages (or action statements) and typically covers a specific clinical practice area, disease or medication class.
- f. <u>Supportive Activity.</u> A supportive activity (sometimes referred to as campaign activity) is a component of academic detailing services often needed to catalyze evidence-based care changes when barriers to clinical implementation are identified. Supportive activities are often part of the multifaceted approach provided by academic detailing programs and may include things such as providing an in-service to a large group of staff to increase knowledge or skills, engaging leadership in key initiatives or developing and implementing process improvement strategies.

4. POLICY

It is VHA policy that every VISN must establish and maintain a Pharmacy AD program that provides academic detailing services to front-line clinicians and other health care staff on a minimum of one PBM ADS campaign per fiscal year for all facilities and a majority of corresponding CBOCs in the VISN to improve evidence-based delivery of health care and disease management/preventive services and decrease variability in evidence-based practice among facilities. **NOTE:** Please see Appendix A for information on the VISN Pharmacy AD Program Structure.

5. RESPONSIBILITIES

a. Under Secretary for Health. The Under Secretary for Health is responsible for

ensuring overall VHA compliance with this directive.

- b. <u>Assistant Under Secretary for Health for Patient Care Services.</u> The Assistant Under Secretary for Health for Patient Care Services is responsible for:
 - (1) Supporting the implementation and oversight of this directive across VHA.
- (2) Ensuring PBM has sufficient resources to provide centralized resources and support to VISN Pharmacy AD Programs as applicable (e.g., training, educational resources, data tools, evaluations).
- c. <u>Assistant Under Secretary for Health for Operations.</u> The Assistant Under Secretary for Health for Operations is responsible for:
 - (1) Communicating the contents of this directive to each of the VISNs.
- (2) Ensuring that each VISN Director has sufficient resources to implement this directive in all VA medical facilities within that VISN.
- (3) Providing oversight of VISNs to assure compliance with this directive and its effectiveness.
- d. <u>Executive Director</u>, <u>Pharmacy Benefits Management</u>. The Executive Director, PBM, is responsible for:
- (1) Defining policy and guidance regarding pharmacy academic detailing services to VISNs and VA medical facilities.
- (2) Ensuring PBM ADS is staffed and resourced adequately to provide centralized resources and support to VISN Pharmacy AD Programs as applicable (e.g., training, educational resources, data tools, evaluations).
 - (3) Serving as an advisor, as needed, to PBM ADS.
- e. **National Director, Academic Detailing Services.** The National Director for ADS is responsible for:
- (1) Providing national leadership related to the PBM ADS mission, vision and relevant policy.
- (2) Establishing strategic goals for PBM ADS and communicating those to VISN Pharmacy AD programs.
- (3) Collaborating and communicating with PBM leadership, VISN Pharmacy AD program leadership and other appropriate stakeholders to establish priorities and identify shared goals.
 - (4) Supporting guidance to standardize VISN Pharmacy AD programs.

- (5) Ensuring VISN Pharmacy AD programs have access to centralized academic detailing resources and support (e.g., training, educational resources, data tools, evaluations).
- (6) Collaborating with pharmacy leadership (e.g., VPEs and Chiefs of Pharmacy) and executive leadership from VHA program offices to identify best practices for VISN Pharmacy AD programs.
- (7) Monitoring and reporting compliance with this directive to PBM leadership and working with VISNs to develop an action plan if non-compliance is identified.
- f. <u>Chair, Academic Detailing Service Operations Board.</u> The Chair, ADS Operations Board is responsible for:
- (1) Ensuring academic detailing workload data is readily available to board members.
- (2) Contributing to PBM ADS operational plan development by providing input on campaign selection, timelines for deployment and trainings offered to align with VISN AD program plans and resource needs.
- (3) Facilitating partnerships with subject matter experts and other key stakeholders to support academic detailing efforts and align with VHA priorities.
- (4) Drafting a PBM ADS Operations Board Charter with approval by the board members and reviewing the Charter as deemed appropriate.
- g. <u>Veterans Integrated Services Network Director</u>. The VISN Director is responsible for:
- (1) Ensuring the VISN Pharmacy AD Program is staffed and resourced adequately to provide Academic Detailing services on a minimum of one PBM ADS campaign per fiscal year for all facilities and a majority of corresponding CBOCs in the VISN. *Please see Appendix A for information on the VISN Pharmacy AD Program Structure*.
- (2) Ensuring VISN compliance with this directive and taking appropriate corrective action if non-compliance is identified.
- (3) Encouraging collaboration between the VISN Pharmacy AD Program and VISN leadership to align operational goals with both those of the VHA and VISN for the benefit of the Veterans.
- h. <u>Veterans Integrated Services Network Pharmacist Executive or VISN</u>

 <u>Pharmacist Academic Detailing Program Manager.</u> The VPE or VISN Pharmacist AD

 Program Manager or designee is responsible for:
- (1) Ensuring that the VISN Pharmacy AD Program academic detailers provide and record academic detailing services on a minimum of one PBM ADS campaign per fiscal

year for all facilities and a majority of corresponding CBOCs in the VISN. **NOTE:** Please see Appendix A for more information on VISN Pharmacy AD Program Structure.

- (2) Providing management of the VISN Pharmacy AD Program and when applicable supporting action plans to resolve gaps in academic detailing services or to improve academic detailing program performance and/or outcomes. **NOTE:** Supervisory oversight of academic detailers may be under the pharmacy facility leadership (e.g., chief of pharmacy).
- (3) Evaluating data and identifying gaps in clinical care, identify shared goals, support quality improvement efforts and inform campaign(s) selection for the VISN Pharmacy AD Program.
- (4) Overseeing VISN Pharmacy AD program activities to achieve academic detailing performance goals, align with evidence-base practice recommendations and meet academic detailing-relevant quality, formulary and regulatory requirements across the VISN.
- (5) Serving as the primary liaison between the VISN Pharmacy AD Program and VHA Central Office, VISN and VA medical facility leadership, as appropriate, for operation of AD program activities, staffing, campaign implementation progress and academic detailer performance.
 - (6) Serving as a member of the PBM ADS Operations Board.
- (7) Developing the VISN Pharmacy AD Program fiscal year operational/strategic plan and communicating this plan to PBM ADS and other applicable VISN and VA medical facility leadership in a timely manner.
- (8) Responding timely to PBM ADS requests for VISN Pharmacy AD Program information.
- (9) Providing feedback and coaching to VISN Pharmacy Program Academic Detailers on performance of assigned academic detailing duties.

i. Academic Detailer. The Academic Detailer is responsible for:

- (1) Providing academic detailing services as assigned by the VPE or AD Program Manager designee, recording academic detailing activities in the PBM ADS endorsed workload tracking tool (e.g., Salesforce), monitoring progress of and reporting on academic detailing activities as assigned.
- (2) Collaborating with VA medical facility front-line clinical staff and leadership as necessary to understand local prescribing patterns and clinical care processes related to VISN Pharmacy AD Program identified campaign(s) and leading efforts to improve facility-level care when opportunities for improvement are identified (e.g., providing academic detailing outreach visits, engaging leadership, providing inservices, providing training, supporting development and implementation of process improvement projects).

- (3) Monitoring, supporting resolution of and providing updates on the implementation of academic detailing campaigns to foster resolution of gaps in care as assigned.
- (4) Collaborating with PBM ADS, VPE (or VISN AD Program Manager designee), VISN and facility leadership and other relevant stakeholders (e.g., workgroups, committees) to inform academic detailing strategies.
- (5) Serving as an academic detailing subject matter expert and local champion working in conjunction with facility leadership and leading implementation of academic detailing campaign(s) at facilities as assigned.
- (6) Serving as a primary point of contact for information regarding VISN Pharmacy AD Program services (e.g., campaign goals, resources, data tools) for facility leadership and clinical staff as assigned.
- (7) Identifying and reporting on facility-level best practices related to assigned academic detailing campaigns so information or strategies can be spread across the VISN when applicable.
- (8) Collaborating with facility and VISN leadership to assist with preparation of responses to inquiries (e.g., PBM ADS, GAO) regarding VISN AD Program activities as assigned.
 - j. **VA Medical Facility Director.** The VA medical facility Director is responsible for:
- (1) Ensuring the VA medical facility is staffed and resourced adequately in VISNs where VISN Pharmacy AD Program FTEE is assigned at the facility level instead of the VISN level.
- (2) Ensuring VA medical facility compliance with this directive and taking appropriate corrective action if non-compliance is identified.
- k. <u>VA Medical Facility Chief of Staff.</u> In collaboration with the Chief of Staff and Associate Director for Patient Care Services (ADPCS), the VA medical facility Chief of Staff is responsible for collaborating with the VISN Pharmacy AD program to achieve campaign outcome goals.
- I. <u>VA Medical Facility Chief, Pharmacy Service.</u> The VA medical facility Chief, Pharmacy Service or designee, is responsible for collaborating with the VPE or VISN AD Program Manager designee and when necessary providing support as needed for academic detailers and campaigns at the facility level.

6. TRAINING

a. The following training is *required* for all new Academic Detailers and must be completed within 90 days of entering position: VA Talent Management System (TMS) course: Office of Patient Care Services – AD Basic Skills.

b. The following training is *recommended*: Other Academic Detailers are encouraged to proactively identify trainings that will improve their skills and abilities to promote evidence-based care and successfully implement quality improvement initiatives. Examples of relevant trainings may include but are not limited to: academic detailing advanced skills training, academic detailing virtual refresher course, Motivational Interviewing training, implementation facilitation-related trainings, leadership training, process improvement and/or quality improvement-related trainings.

7. REFERENCES

- a. P.L. 114-198.
- b. Bounthavong, M., et al., Comparison of naloxone prescribing patterns due to educational outreach conducted by full-time and part-time academic detailers at the U.S. Veterans Health Administration. J Am Pharm Assoc (2003), 2020. 60(4): p. 639-646

VISN PHARMACY ACADEMIC DETAILING PROGRAM STRUCTURE

- 1. Every Veterans Integrated Services Network (VISN) must establish and maintain a Pharmacy Academic Detailing (AD) program. The VISN Pharmacy AD program must be staffed to provide AD services on a minimum of one Pharmacy Benefit Management (PBM) Academic Detailing Services (ADS) campaign per fiscal year (FY) for all facilities and a majority of corresponding Community-Based Outpatient Clinics (CBOCs) in the VISN. VISN Pharmacy AD staff can be assigned at the VISN or facility level based on available resources, but VISN Pharmacy AD Program activities should be directed by the VPE or VISN AD Program Manager designee in collaboration with facility-level leadership in order to achieve VISN Pharmacy AD Program goals. This appendix outlines the recommended structure of the VISN Pharmacy AD program.
- 2. A minimum of 3.0 Full-Time Equivalent Employee (FTEE) Licensed Pharmacists at assignments at or above the GS-13 level, as described in Department of Veterans Affairs (VA) Handbook 5005, Appendix II-G15, dedicated to providing academic detailing services for the VISN Pharmacy AD Program is required. NOTE: VISNs with more than seven facilities or VISNs who elect to provide AD services for more than one campaign per FY should consider using a calculation to estimate FTEE needed to ensure services are provided to all VA medical facilities and CBOCs as needed to achieve VISN and VA medical facility academic detailing goals. For example, VISNs with more than seven facilities providing academic detailing services on one campaign per FY should consider: 0.4 FTEE multiplied by the number of facilities in the VISN equals the estimated VISN AD Program academic detailer FTEE needed. If VISNs elect to provide academic detailing services on more than one campaign per FY, it is recommended to use 0.4-0.8 FTEE multiplied by the number of facilities in the VISN to account for both VISN size and average number of campaigns per FY. This calculation provides an estimate only; variables such as VISN size, number of campaigns to be covered on average and development of VA medical facility and VISN campaign resources (if applicable) should be taken into consideration when determining adequate staffing levels to ensure VISN Pharmacy AD Program services can be provided to all facilities and corresponding CBOCs in the VISN.
- a. It is recommended that FTEE consist of AD duties greater than or equal to 0.4 per licensed pharmacist academic detailer. **NOTE:** Variables to consider when considering amount of time needed per Licensed Pharmacist may include size of assigned territory, number of academic detailing campaigns assigned, number of clinical staff in assigned territory, etc. According to an analysis performed on the impact of Academic Detailer FTEE allocation on naloxone prescribing rates, Academic Detailers with less than 0.4 FTEE dedicated to providing academic detailing services were shown to be less effective than those with greater than or equal to 0.4 FTEE (Bounthavong 2020).
- b. Minimum productivity goals should be established for VISN Pharmacy AD Program Academic Detailers (e.g., number of outreach visits per quarter). PBM ADS to review academic detailing activity recorded in the PBM ADS endorsed workload

tracking tool and provide guidance on productivity levels.

3. One VISN Licensed Pharmacist at assignments equal to or above the GS-14 level, as described in VA Handbook 5005, Appendix II-G15, with dedicated time for management of the VISN Pharmacy AD program. **NOTE:** This role involves a considerable time, commitment and the dedicated effort of a highly committed individual is needed to ensure the academic detailing program is high functioning, successful and sustainable. See VPE (or VISN AD Program Manager designee) responsibilities in section 5.h. for a list of responsibilities.

GENERAL PRINCIPLES OF ACADEMIC DETAILERS

- 1. Veterans Integrated Service Network (VISN) Pharmacy AD programs improve evidence-based delivery of health care and disease management and preventive services by supporting Department of Veterans Affairs (VA) medical facility front-line clinicians and other health care staff using specially trained Academic Detailers, individualized provider data and educational programming. Academic Detailers are trained to have the skills necessary to assist front-line clinicians and other health care staff to utilize the best, evidence-based clinical practices, thereby ensuring Veterans receive the latest, most optimal care. These skills are multi-faceted and strategies are uniquely tailored to the front-line clinician's or other health care staff's situation. For example, if a VA medical facility healthcare system is facing an issue with treatment of opioid use disorder (OUD) (e.g., underutilization of medications to treat OUD) academic detailers utilizing the latest, evidence-based approaches, would focus their efforts on partnering with staff to first identify why current practice does not align with the evidence, then support them to make changes that would improve the care of Veterans with OUD.
- a. Academic detailing strategies vary based on the specific needs of the staff and facility but typically include:
 - (1) Focused discussions with the clinical staff members.
 - (2) Review of educational and training materials.
 - (3) Sharing of resources and tools to assist with engaging Veterans (e.g., handouts).
- (4) One-on-one or small group outreach and support to ensure those clinicians understand why they should use the latest, evidence-based approaches.
 - (5) How those clinicians can implement this into their practice.
- b. Academic Detailers typically provide follow up services (e.g., follow-up visits, use of audit and feedback data tools, emails) to ensure the strategies are being implemented and to address any barriers to implementation that were identified by the clinical staff member(s). Together the multifaceted approach used by academic detailers helps to not only identify why the latest evidence-based approaches are not being utilized, but also when and why clinicians and other health care staff should be using such approaches and how those approaches can be employed within the VA medical facility they are in.
- 2. Academic Detailers are trained to have skills that target and identify root causes of why the best, evidence-based approaches are being under-utilized. Historically, Academic Detailers would first utilize dashboards and reports to identify where there were opportunities to improve utilization or where there was variability amongst facilities in evidence-based practices. They would then provide one-on-one or small group

outreach with a goal of better understanding the clinical environment and decision-making processes (e.g., why staff were or were not practicing according to current evidence, strategies already tried, barriers to implementing evidence-based practice). This allows academic detailers to have a deep understanding of why clinical practice is not matching the evidence and what is needed to improve clinical practice and align with the evidence.

- 3. To accomplish this, Academic Detailers must:
- a. Understand how to engage and partner with clinicians and other health care staff by utilizing using advanced communication skills (e.g., open-ended questions, reflections, elicit-provide-elicit approach when discussing information, active listening) to influence clinical behavior change.
- b. Develop strategies to deliver clear, unambiguous, actionable, evidence-based education and training to promote appropriate clinical decision-making and improved patient outcomes. Academic detailers have historically met with various members of the health care team (e.g., nurses, physicians, pharmacists) to ensure that each member of the team understands the current evidence and what they can do to align with evidence-based practices in their respective role.
- c. Understand how to overcome barriers, establish credibility, communicate more effectively with front-line clinicians and other health care staff and promote changes in clinical practice when needed (e.g., Academic Detailers would regularly meet with staff and stakeholders to actively listen, discuss and resolve conflicts, concerns and hesitations about employing the latest, evidence-based approaches).