Promoting and Applying in Clinical Practice Guidelines

Catherine Marshall
CEO, New Zealand Guidelines Group
Deputy Chair, G-I-N

Promoting Guidelines

- Awareness campaign
- Education programme
- Dissemination programme
- Implementation programme

Awareness Campaign

- Create awareness of the guideline among practitioners, funders and consumers
- Provide information about what the guideline involves and what is new and surprising
- Explain the guideline development process – independent, trusted evidence-based advice
- Use at least three different media to the same target audience

Education Programmes

- Work with academic and professional organisations to develop resources to encourage small group training + CME points
- Focus educational initiatives on interactive learning
- Work with multi-disciplinary teams
- Provide education for community and consumer organizations
Consumer resources

Dissemination Programme

- Information from the guideline should be recognisable, readily accessible and easy to use
- Distribute guideline information using methods including paper and electronic media

Implementation Programme

- Create tools
- Encourage reference to the guideline at time of consultation
- CME training packages
- Academic detailing
- Audit tools
- Development of electronic decisions support systems and computer assisted decision aids
- Development of recall systems
- Development of e-learning tools.
NZ Example

PREDICT-CVD
- Web-based clinical decision support on CVD risk assessment and management for individual high risk patients in primary care

Guidelines used
- 2003 NZGG Guidelines on CVD risk and management
- 2001 NCEP Guidelines
- 2001 ACC/AHA Guidelines
- 2000 Joint British Recommendations on prevention CHD
- 2001 SIGN Diabetes Guidelines
- 1996 SIGN Obesity Guidelines
- 2002 NZ Smoking Cessation Guidelines

EDS requirements
- Fully integrated within electronic patient management system
- Systematic CVD risk assessment
- Provide electronic medical record of CVD risk
- Evidence-based decision support based on patient-specific profile
- Tailored patient education/info
- Non-identifiable patient data collected
- Potential validation or development of new risk equations for Maori/PI
- Future adaptability

Risk Assessment: results
Issues in Translating Guidelines

- Gaps in guideline or evidence
- Guideline recommendation is often a blanket statement - may not apply to an individual with subtle changes in profile
- Constraints of the EDS architecture
- Hard to keep the guidelines up to date

What is G-I-N’s role?

- developing standards for the translation of evidence-based guidelines into electronic formats
- commissioning training seminars for traditional (natural language, text-based) guideline developers
- identifying areas where evidence-based decision support systems can be used by healthcare workers and consumers
- identifying existing standards and languages for formal guideline representations.

The EDS group encourages:

- one internationally accepted mark-up format
- development of intelligent formats for ‘living guidelines’
- increased awareness and growth to electronic decision support throughout the world
- communication between guideline developers and IT scientists
- developing standards and protocols for standardization and translation of guidelines into electronic formats
- research for the development and implementation of guideline-based decision support systems.

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