

Role of clinical practice guidelines in healthcare/outcome improvement



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The consulting room of Dr. Smith, The Netherlands



Dr. Smith, medical oncologist, sees Mrs. Jones.

Mrs. Jones, 75 y, has a rare tumour, in addition to other conditions.

Dr. Smith is in doubt which treatment option suits best.

To be up to date, Dr. Smith has to read 75 articles on oncology. Every day.

There is no such time available. And it is hard to translate information from articles to daily practice, to weigh and grade findings.

Especially when findings are contradicting. Or lacking (despite 75 articles)

Dr. Smith wants to provide high quality care to Mrs. Jones.
He has got the duty to do so.

Mrs. Jones wants the best possible outcome. For her.
She has got the right to get that.

- Dr Smith needs up to date information on new treatments / treatment options for various patient groups, like Mrs. Jones (older woman, diabetes).
- He needs info on pro's and con's of these options.
- And he needs to find out what Mrs. Jones wants.

- Mrs. Jones is confused and scared. She is tired. She has this rare tumour that no one knows about on top of her diabetes. She wants clarification.

- Dr Smith cannot build on his expertise or experience nor on evidence in this case.
- The insecurity of doctors leads to undesirable variation in health care. It leads to misdiagnosis, overtreatment, rehospitalisation, to extra costs.
- Or even.... to HARM.
- That's where the guideline comes in: bringing new knowledge into practice by changing behaviour in the consulting room.

Definition

- A guideline is a document with recommendations, aimed to improve the quality of health, based on systematic reviews of scientific studies combined with a consideration of harms and benefits of different care options, supplemented with expertise and experience from care providers and care users.

Dutch guideline for guidelines, 2012, based on IOM

What for?

- To improve care
- To realise efficiency and effectiveness
- To diminish variation
- To canalize knowledge
- To reduce ineffective and unnecessary care
- To bridge the gap between science and practice
- But.... Mostly used as reference for care, not in decision making

Guideline cycle



Step 1: Topic selection and scope

- Focus
- Problem analysis
- Key questions related to difficulties in practice
- Insight in area's for improvement

Step 2: Preparation

- (Composition of a) working group
- (prelongated) Mandated members of scientific societies, patient groups and professional societies

Step 3: development of concept guideline

- PICO (important!)
 - Literature search
 - Critical appraisal (standards/tools available)
 - Summary of findings
 - Conclusions
 - Other considerations
 - Formulation of recommendations
 - Concept texts
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- Input gl group (discussions, disagreements, collaboration issues) is used for implementation toolkit

Step 4&5: Consultation & authorisation

- Guideline for consultation (peer review) to all stakeholders
- Approval by societies

Step 6: dissemination & implementation

- Publication guideline database
 - Publication articles
 - Implementation toolkit
 - Advisors & Change leaders
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- Implementation is the: process-oriented and systematic introduction of innovations and / or changes of proven value, to allow structural uptake on (professional) behaviour, the functioning of organizations or the structure of health care

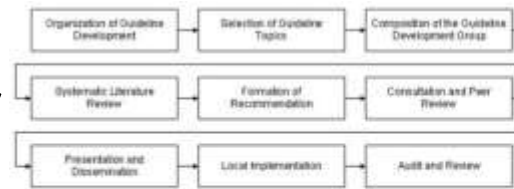
- Dr. Smith is not going to change his behaviour, without strong conviction (graphs) nor without guidance on 'how to' change.
- The board of directors of Dr. Smith's hospital is not going to make investments, without a solid business case (RoI)
- Therefore: IKNL advisors introduce new recommendations in oncology committees, multi disciplinary team meetings and scientific societies to guide the change and translate gl in carepathways.

Step 7: evaluation, update & revision

- Evaluation of guideline using indicators measured with the cancer registry (variation of care)
- Benchmark with data (feedback loop)
- Revision of (module of) guideline (key question)

Guideline methods

- This circle isn't unique
- We can use local flavour to improve methods
- But can mainly use similarities to further harmonise our work, as collaboration on guidelines is required for sustainable improvement of care.



Back to the consulting room

- An up to date guideline, with PICO questions, and critically appraised literature might have helped Dr Smith as a reference in a MDTM on how to proceed.
- Then, he could discuss his preferred, evidence based, treatment with Mrs. Jones.
- Mrs. Jones asks about alternative treatment options, because of her hard to control diabetes and fatigue.
- Together they decide.
- Dr. Smith reports decision in PHR.
- This reporting provides insight in treatments and variation of care

Continuous learning and improving

- We learn from each and every case.
- We learn to improve, for future patients and better outcomes.
- Learn more about guidelines?
- Join the worldwide Guideline International Network (G-I-N) and meet me and all my colleagues





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