IMPLEMENTATION OF CLINICAL PRACTICE GUIDELINES – THE MALAYSIAN EXPERIENCE

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BACKGROUND

- Clinical Practice Guidelines (CPG) produced since 1992
- Initially consensus statements
- Later CPG
- Drawn up by Academy of Medicine Malaysia & disseminated by Health Care Quality Unit, Ministry of Health Malaysia
- 2001 coordination of CPG under purview of Health Technology Assessment Unit organization structure & work process reviewed & reorganised.

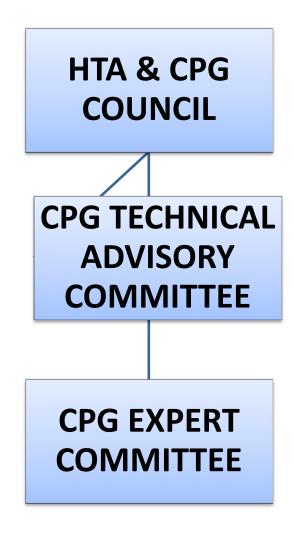
CHALLENGES FACED IN IMPLEMENTATION

- Concerns about quality of CPG lack of acceptability of CPG
- Lack of ownership no involvement in CPG formulation
- Reluctance to be involved due to
 - perceived difficulties in formulation of CPG
 - Lack of expertise
- Lack of systematic process
- Lack of awareness

STRATEGIES TO IMPROVE IMPLEMENTATION

- setting up of organisation structure with formal process of approval – accepted as national policy
- Clear process for CPG formulation
- Standardization of format for CPG
- Emphasis on attributes & evidence base for CPG
- Guidelines for formulation of CPG produced
- Training in systematic reviews provided
- Formal committees set up for each CPG
- Guidance & support provided to CPG committees
- Improved dissemination
- evaluation format for CPG drawn up
- implementation through clinical pathways

ORGANISATION STRUCTURE FOR CLINICAL PRACTICE GUIDELINES



CPG WORK PROCESS

Define topic/issue

Develop appropriate health care questions

Determine mode of formulation of guidelines

Retrieve literature

Critical appraisal of literature

Analyse strength of evidence

Apply evidence to determine benefits/harms & cost-effectiveness & feasibility

CPG WORK PROCESS

Develop guidelines Consultation & peer review ~ CPG TAC → HTA& CPG Council Develop patient version of guidelines Disseminate guidelines Develop clinical pathways Monitor & evaluate guidelines

FORMAT OF CPG

- 1. OBJECTIVES
- 2. CONTENTS

About the guideline:

Foreword, Development team, External validation, Documentation, Acknowledgements

Guideline Information – Introduction, Summary, Detailed guideline, Supporting evidence (Summary of the evidence, Evidence tables), Appendix, Related information

References - References quoted, Linked material used in the review (web-links), Other supporting material e.g. other guidelines

Algorithms

CPG - ATTRIBUTES

- valid
- clear
- reliable & reproducible
- clinically applicable
- clinically flexible
- multidisciplinary involvement
- scheduled review
- processes clearly documented

CPG — EVIDENCE-BASED

- evidence to be specified
- methodology of obtaining evidence
- strength of evidence
- date of most recent evidence
- listing of evidence
- use of expert evidence to be indicated (in absence of evidence)

GUIDELINES FOR CPG FORMULATION

- CPG guidelines developed in 2002 to assist in development of CPG
- Guidelines –well received revised & reprinted in 2003
- Guidelines
 - organizational structure
 - work process & methodology
 - formats for request for CPG
 - Contents of CPG
 - evaluation format for CPG

TRAINING IN SYSTEMATIC REVIEWS

- Training in systematic reviews methodology has been provided to specialists
- workshops hands-on training in retrieving evidence, practice in critical appraisal, methods of synthesis of evidence

GUIDANCE & SUPPORT FOR CPG COMMITTEES

- Assistance provided in selection of members of CPG committee
- training provided to committees
- Coordination of meetings
- Guidance provided to committee
- Assistance in searching for evidence & getting full text articles where necessary
- individual drafts from members merged to produce draft CPG
- draft reviewed & edited

IMPROVED INVOLVEMENT & DISSEMINATION OF CPG

- draft CPG put on web-site & comments invited from other specialists
- final CPG Ministry of Health Malaysia website & Academy of Medicine Malaysia web-site
 allows free downloading of CPG
- limited number of printed copies distributed to health care facilities.

EVALUATION FORMAT

- Evaluation format drawn up for CPG
- CPG committee ensures that CPG meets elements of format
- Feedback can be provided by filling in evaluation format

INCREASING AWARENESS OF CPG

- Clinicians advised to draw up local guidelines based on national guidelines – not very successful
- Wide dissemination of CPG made easily accessible
- CPG discussed at continuing medical education (CME) sessions & educational lectures provided
- CPG workshops to get local clinicians involved in the utilization of guidelines - impact could not be sustained.

IMPLEMENTATION OF CPG THROUGH CLINICAL PATHWAYS

- clinical pathways means of implementing
 CPG
- clinical pathways drawn up based on CPG taking into account local resource constraints
 & local practices