

**Evidence-Based Guidelines-Collaborative Development and Implementation**  
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**Problem:** There is a gap between the care doctors provide and the evidence-based/best practice care they ought to provide. Furthermore, there is failure to translate research findings into clinical practice. Effective dissemination and use of guidelines in clinical care is far from perfect and presents major challenges.

**Evidence:** 50% of patients do not receive recommended preventive care. 30-40 % of patients do not get treatments of proven effectiveness. And 20-25% of patients get care that is not needed or potentially harmful. There is no shortage of evidence-based clinical care recommendations. There are over 20,000 medical journal articles published every year. However clinicians have little time to read, comprehend and determine the quality and relevance of these articles.

**Strategy:** The Institute for Clinical Systems Improvement (ICSI) has a multi-dimensional process for the development of evidence-based documents (guidelines, order sets, protocols). The development phase is a collaborative journey of experts in the prevention, detection or treatment of a specific health condition, to develop statements that assist practitioners in providing appropriate care. The final product is a consensus driven document (around the evidence) that is readily accepted by those who authored it and their peers. Implementation of the evidence-based documents can then be accomplished through a systematic process.

**Practice Change:** Guidelines, order sets and/or protocols are developed and then implemented in large medical systems, individual hospitals and clinics. Change management and quality improvement strategies are used in the system redesign and care delivery implementation.

**Evaluation:** Annually, the members of ICSI are surveyed asking about their use of the clinical guidelines. Responses range from full implementation of the guidelines to use as a general resource. Additionally, member groups are asked to review and comment on these documents during the documents' annual revision.

**Results:** For clinicians, the benefits of using evidence-based guidelines are that it is an improvement in the quality and safety of clinical decisions. For patients, benefits include improved health outcomes, better value (cost/benefit) and an increase in patient activation and education.

**Recommendations:** Guidelines, order sets and protocols developed for use by practitioners must be evidenced based. Using a collaborative of multidisciplinary clinicians improves the likelihood that these documents will be implemented.

**Bibliography:**

Schuster, McGlynn and Brook, Milbank Q; 76(4) 1998: 517-563.