

Using clinical practice guidelines in emergency care

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1. Clinical Practice Guidelines

- NSW paediatric emergency guidelines developed by NSW Health and the Clinical Excellence Commission (CEC).
- Adult asthma guidelines developed by the National Asthma Council.

2. Stakeholders

- Hunter-New England Health, emergency department (ED) clinicians, rural GPs, NSW Health, CEC, NICS.

3. Evidence-practice gap

- Although evidence-based guidelines for the management of adult and paediatric asthma had been disseminated to EDs, the use of the guidelines in day-to-day clinical practice was low.

4. Guideline implementation strategies

- We devised an evidence-based implementation, consulting the literature on what works and what doesn't work, and tailoring it to our local environment.
- Guideline formatting, education, audit and feedback, reminders and use of opinion leaders.
- A focus on the institution, organisation, and processes within the ED rather than the individual clinician.

5. Data sources

- We developed clinical indicators for each of the conditions for which we implemented guidelines.
- Our studies varied from controlled trials with before and after data, to simple quality improvement methodology.

6. Results

- The pre-intervention audit identified a low rate of compliance with current asthma guidelines across 7 clinical indicators of asthma care.
- The intervention significantly increased compliance with 5 of the clinical indicators, and for the aggregated 7 clinical indicators by 41% for the adult guideline and 36% for the paediatric guideline (see figure 1).
- Positive changes in clinical behaviour were immediate and the gains were sustained at 12 months.

7. Barriers

- Changing the prevailing culture within the department was essential given the rotation of junior medical staff and frequent use of locums.
- Sustainability was dependent on a department-wide approach to implementation rather than targeting individuals.

8. Enablers

- Localising of the guidelines into user-friendly simple formats.
- The support of senior staff as opinion leaders and drivers of the project.

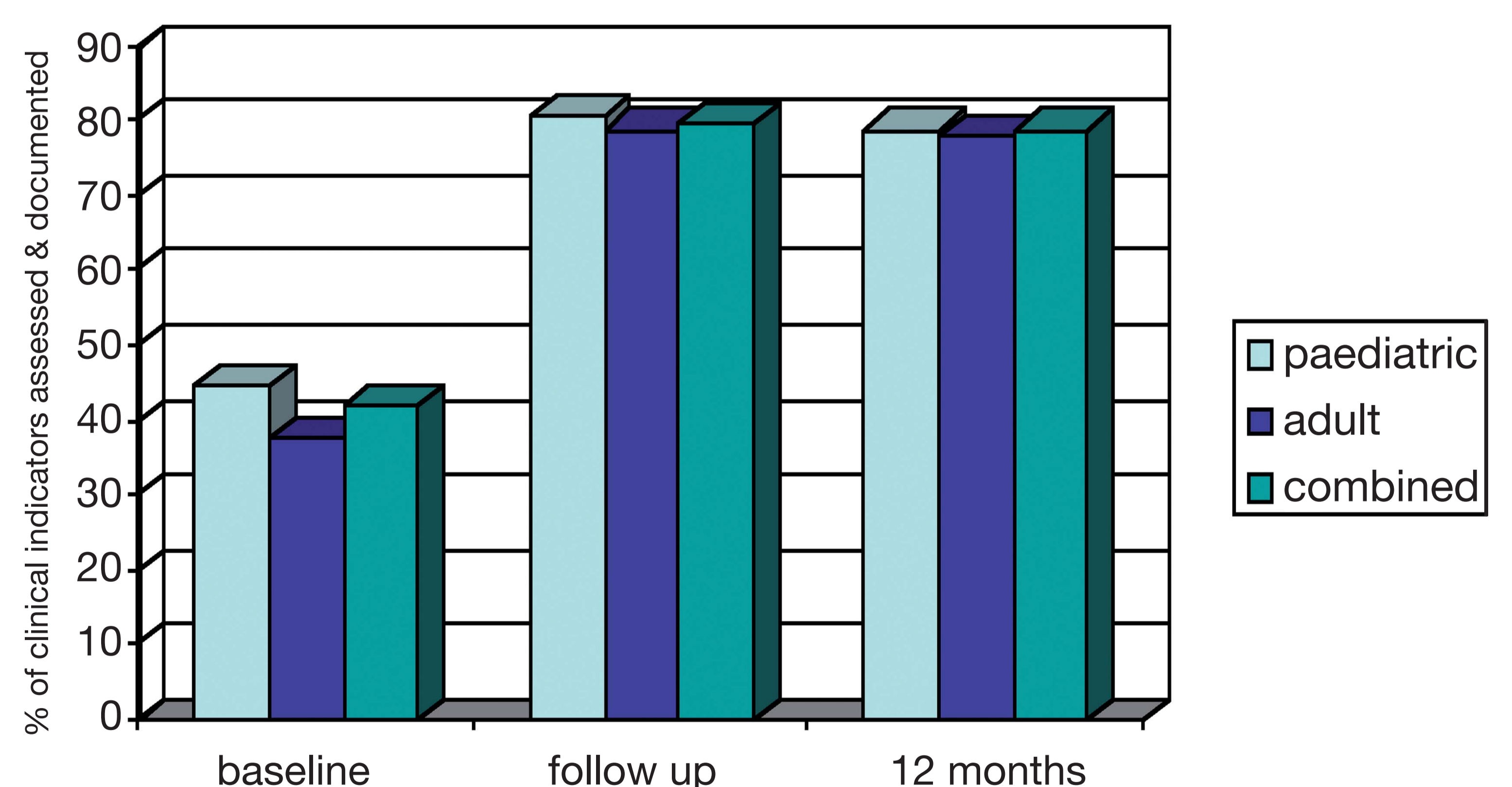
9. Resources

- NICS Fellowship.

10. Key messages

- Simplicity of guidelines and user-friendly implementation strategies are the key to engaging individual clinicians, although to achieve this requires working your way through complex systems and processes.
- Be prepared to discuss evidence-based medicine, and to know its strengths and limitations.

Figure 1: Audit of asthma clinical indicators



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