

Communication strategies to support Informed Decisions and practice based on Evidence

Overview of the DECIDE project

Better clinical guidelines, better healthcare decisions

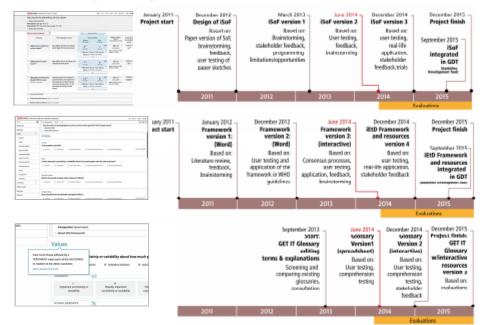
Developing and Evaluating Communication strategies to support Informed Decisions and practice based on Evidence (DECIDE) International Conference, 2 – 4 June 2014



This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement n°258583 Andy Oxman

DECIDE

• A 5-year research project (2011 to 2015)



GRADE

• Funded by the EU's 7th Framework Programme



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Partners

- Azienda Sanitaria Locale Roma
- Finnish Medical Society Duodecim
- German Cochrane Centre
- Iberoamerican Cochrane Center
- National Institute for Health and Care Excellence (NICE)
- Norwegian Knowledge Centre for the Health Services
- Scottish Intercollegiate Guidelines Network (SIGN)
- University of Aberdeen
- University of Amsterdam
- University of Dundee
- World Health Organization (WHO)

Objective

To improve the dissemination of evidence-based recommendations (and evidence-informed decision making)

- By building on the work of the GRADE Working Group
- To develop and evaluate methods that address the targeted dissemination of guidelines (and support for evidence-informed decisions)





Grading of Recommendations Assessment, Development and Evaluation (GRADE)

- The GRADE Working Group began in 2000
- It has developed a common, sensible and transparent approach to grading

Certainty of the evidence

- Strength of recommendations
- 80 organizations have provided input and use the GRADE approach



Targeted dissemination

Target audiences

- Patients and the public
- Healthcare professionals
- Policymakers and managers

Types of recommendations or decisions

- Treatment decisions
- Decisions about diagnostic tests
- Coverage decisions
- Health system and public (population) decisions

Six work packages

- 1. Healthcare professionals
- Policymakers and managers

 coverage decisions
- 3. Patients and the public
- 4. Diagnostic tests
- 5. Health system and public (population) health
- 6. A toolkit for preparing and disseminating evidence-based recommendations

Strategies

Tailored, interactive presentations

- Layered presentations
- Interactive Summary of Findings
- Interactive Evidence to Decision Frameworks
- Plain language glossary
- Guideline Development Tool

Methods

An iterative process:

- GRADE Working Group's approach
- Review of relevant literature and surveys
- Brain storming
- Feedback from stakeholders
- Application to examples
- User testing
- Trials



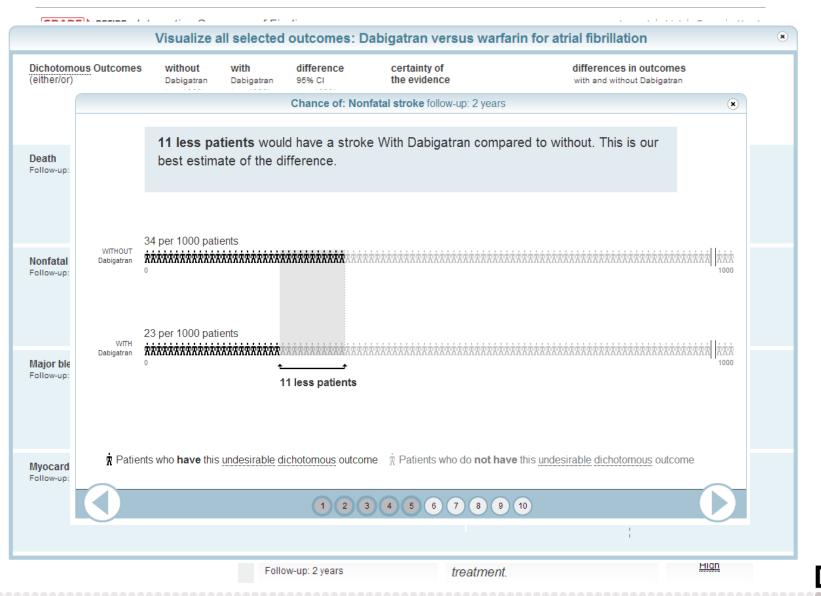
Layered presentations

	active Evidence to Decision Framewo	rk				About	Print Help
Project Details							• []
	n policies for rural students to ATION by WHO: Strongly recom	•	program	nes			
Health worker so	Routine screening n	nammography for	womer	1 age 40 to 49			
	RECOMMENDA	TION made by : Not	recom	mended			
							ıgs
Clinical rotation:	Recommendation	Justification	Who	is this for	What it mean	s for you	Certainty of the evidence
	We suggest most we	omen age 40 to 49 s	hould	not have rout	ine screening m	ammograph	€⊕€○ ^(I) Moderate
syringe							
12.3 Insertion and removal of intrauterine devices	ck for more info		Justifi There is uncerta may be	Non-fatal stroke Follow-up: mean 2 years High risk population	11 per 1000	17	⊕⊕⊕⊖ ^[i] Moderate
12.4 Insertion and removal of contraceptive implants				High his population Moderate risk population Low risk population		NNT: 167 patients 5% CI: 500 to 125	
12.5 Tubel ligation			7	Non-fatal major extracranial blev Follow-up: mean 2 years	eds 14 per 1000	13	⊕⊕⊕⊖ [®] Moderate
VZ.						NTH: 1000 patients % CI: -333 to 1000	

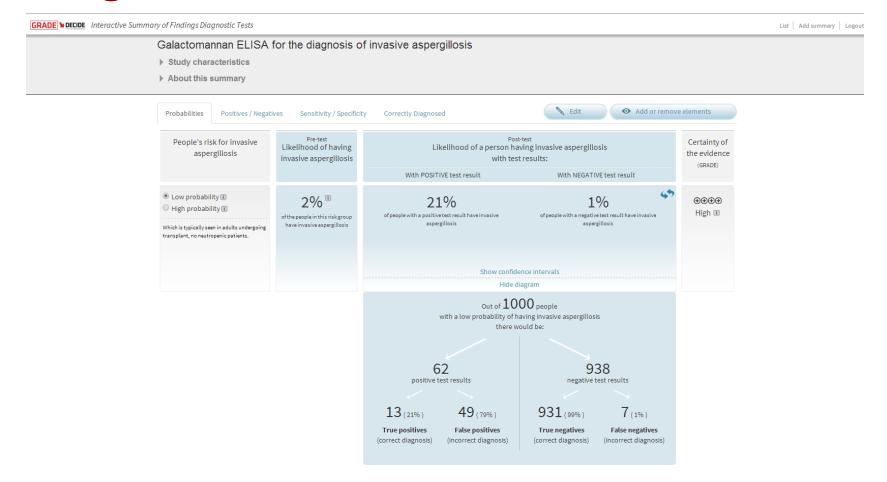
DEC

GRADE

interactive Summary of Findings



interactive Summary of Findings for diagnostic tests





interactive Evidence to Decision Frameworks

	active Evidence to Decision Framework User administration List About Help Logout
Search	▼ Dabigatran vs warfarin for atrial fibrillation Filename Version
Background	Should dabigatran versus warfarin be used for atrial fibrillation?
Subgroups	 Question details About this framework
Criteria 🔹	Criteria
Problem	Citteria
Values	Problem
Certainty of	Is the problem a priority?
effects	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS [DETAILED JUDGEM
Desirable effects	
Undesirable effects	Values
Balance of effects	Is there important uncertainty about or variability in how much people value the main outcomes?
Certainty of evidence of required resources	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS [DETAILED JUDGEM
Resources	Certainty of effects
required	What is the overall certainty of the evidence of effects?
Cost-effectiveness	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS SHOW SUBGROUPS
Eauitv	
Conclusions	
Evidence profile	Desirable effects How substantial are the desirable anticipated effects?
References	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS SHOW SUBGROUPS
Footnotes	•



interactive Evidence to Decision Frameworks for diagnostic tests

GRADE DECIDE Interactive Evidence to D	Administration List Abo	out Help Logout
Search	> 3 Filename Version Copy of test3	≫ ⊙ []
Background	Test accuracy	
Subgroups	How accurate is the diagnostic test?	
Criteria 👻	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS [DETAILED JUDGEMENTS]	
Problem		
Values	Certainty of evidence of test accuracy	
Test accuracy	What is the overall certainty of the evidence of diagnostic test accuracy?	
Certainty of evidence of test accuracy	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS (DETAILED JUDGEMENTS)	
Certainty of evidence of test's effects		
Certainty of evidence of management's effects	Certainty of evidence of test's effects	
Certainty of evidence of test result / management	What is the overall certainty of the evidence for any critical or important direct benefits, adverse effects or burden of the diagnostic test? showall Judgements Research evidence additional considerations [Detailed Judgements]	
Certainty of effects		
Desirable effects		
Undesirable effects	Certainty of evidence of management's effects What is the overall certainty of the evidence of effects of the management that is guided by the test results?	
Balance of effects	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS [] [DETAILED JUDGEMENTS]	
Cortainty of avidance of required resources		
Conclusions •		
Evidence profile	Certainty of evidence of test result / management	
References	How certain is the link between test results and management decisions?	
	SHOWALL JUDGEMENTS RESEARCH EVIDENCE ADDITIONAL CONSIDERATIONS [DETAILED JUDGEMENTS]	

Glossary of Evaluation Terms for Informed Treatment choices (GET IT) in plain language

- Plain language definitions and explanations
- **Collaboration**: developed by 3 international projects with over 20 partner organizations
 - Others can use GET IT to adapt definitions and explanations for specific targeted audiences, including translations into different languages.
- Short definitions (approximately 130 characters) that can be quickly accessed and read as scroll overs, longer explanations with examples
- Links to additional resources, such as illustrative examples, videos and interactive applications
- **Open access**: definitions and explanations can be accessed from other websites
 - The glossary can be embedded in other websites
 - Ohers can use its content to create their own tailored glossaries and applications

Guideline Development Tool



www.guidelinedevelopment.org



Broad involvement of stakeholders and dissemination activities

- Advisory groups
- Surveys
 - e.g. WP5 survey of policymakers
- Interviews
 - e.g. 100 interviews with patients and members of the public by WP3
 - e.g. in depth interviews with guideline developers by WP4 (diagnostic tests)
- User testing
- Use in guideline development and by health technology agencies
 - e.g. the Guideline Development Tool (WP6) has been used by WHO, WAO, ATS/ERS, the Saudi MoH
- Publications, presentations and workshops
 - 7 publications, 31 conference presentations, 18 workshops and 13 posters in the past 18 months
 - Including, for example, 6 WP2 (coverage decisions) workshops with 250 participants

Better clinical guidelines, better healthcare decisions

• 30 workshops, 20 posters, plenary sessions

www.decide-collaboration.eu

DECIDE

Home Queries & Staying Informed Project Partners & Coordinating Person Work Packages & Strategies

Keypoints Dissemination

Contact & Disclaimer

Monthly Round Up Member login



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- Coordinating Person and Decide Project Office
- Content Responsibility and Webpublisher
- Disclaimer & Copyright

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Would you like more information on the DECIDE project?

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