Implementation of a Quality Management System for Clinical Practice Guidelines with the Scientific Medical Societies in Germany: The AWMF Guideline Register

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- Guidelines are -nationally and internationally- an important decision making tool
- Minimum criteria for devoloping high-quality guidelines were published in 2012 (G-I-N standards)
- High-quality guidelines require financial and human resources with a wide range of skills and expertise across the different professions
- in Germany, guidelines are developed by the scientific medical societies ("bottom-up" vs. "top-down" approach)



AWMF as an umbrella organization of 174 Scientific Medical Societies) pursues the following tasks and goals:

- to further develop the methodology
- to improve guideline competence within member societies
- to support the medical societies developing guidelines
- to promote interdisciplinarity and patient involvement
- to recognize the need for guidelines (prioritization)
- to make guidelines available free of charge on the Internet



Development of quality management following the Plan-Do-Check-Act (PDCA)-cycle

- 1) Establishing structures and processes
- Implementing a quality management system for guidelines
- Further continuing expansion of quality management to date



1) Establishing structures and processes (1995-1999):

Important structural and process elements were:

- Convening a standing commission for guidelines at AWMF
- Appointing guideline delegates within the societies
- Formulating the first guidance for guidelines and introduction of a guideline classification (S1 to S3), indicating the degree of systematic development
- Initiation of quality improvement
- Sharing methodological knowledge



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2) <u>Implementing a quality management system</u> <u>for guidelines (2000-2010) includes:</u>

- The development of methodological standards to develop evidencebased guidelines
- Setting up a manual to support the ongoing methodological development
- Adapting the AGREE evaluation instrument (harmonizing methodological procedures internationally)
- Establishing a structured dialogue
- Introducing initial rules focused on fostering consensusbuilding/interdisciplinarity
- The registration process for guidelines under planning and development (registration form as project outline) (2004)
- Deleting outdated guidelines (maximum validity 5 years) (2008)



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3) Further continuing expansion of quality management to date:

The key elements of this cycle were and are:

- Implementing a total of seven rules
 - The registration process for guideline planning and development (status as per 2013)
 - Explanation of and procedure for dealing with conflicts of interest (form) (status as per 2010 with updated beta version for testing)
 - Classification of the S1, S2k/S2e, S3 development stage (status as per: 2010)
 - Submission for publication (status as per 2010)
 - Deletion of outdated guidelines from the AWMF Guideline Register (maximum validity 5 years) (status as per 2008)

3) Further continuing expansion of quality management to date:

The key elements of this cycle were and are:

- Structured external appraisal of each submitted guideline by two reviewers
- Evaluation documentation and structured dialogues
- Regular seminars for guideline developers
- Development of a curriculum for guideline advisers
- Training and exchange of expertise at annual guideline conferences



1) Establishing structures and processes:

	Helou 1998	ı	
Documentation of guideline development	Criteria	П	
	met		
Clear naming of the responsible institution	100%		
Representative composition of the	-	ı	
guideline committee			
Transparency of the literature search	-		
documentation			
Description of methods used to evaluate	-		
the strength of evidence			
Naming the methods used to make	75%		
recommendations			
Description of the methods used for	60%		
phrasing recommendations	incomplete		

2) <u>Implementing a quality management system</u> <u>for guidelines</u>

	Helou 1998	Kopp 2002	7	
Documentation of guideline development	Criteria	Criteria		
	met	met		
Clear naming of the responsible institution	100%	100%	1	
Representative composition of the	-	25%		
guideline committee				
Transparency of the literature search	-	23%		
documentation				
Description of methods used to evaluate	-	28%		
the strength of evidence				
Naming the methods used to make	75%	76%		
recommendations				
Description of the methods used for	60%	17%		
phrasing recommendations	incomplete			

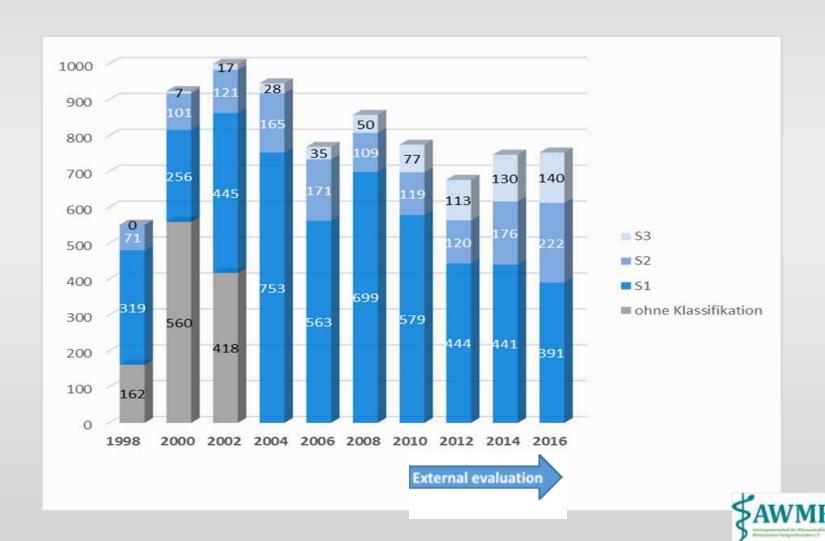
2) Implementing a quality management system for guidelines

	Helou	Корр	7	Graham
	1998	2002		2001
Documentation of guideline development	Criteria	Criteria		Criteria
	met	met		met
Clear naming of the responsible institution	100%	100%	7	100%
Representative composition of the	-	25%		55%
guideline committee				
Transparency of the literature search	-	23%		18%
documentation				
Description of methods used to evaluate	-	28%		21%
the strength of evidence				
Naming the methods used to make	75%	76%		Not
recommendations				included
Description of the methods used for	60%	17%		26%
phrasing recommendations	incomplete			

3) Further continuing expansion of quality management to date:

- Continuous development: reduction of S1 guidelines and increase of S2 / S3 guidelines
- AWMF Guidance (manual and rules) was published in 2011/2012
- Col are transparent in ALL Guidelines published via AWMF
- S3-guidelines in the AWMF register fully meet the international methodological requirements for high-quality guidelines

Development of the Guideline Register 1998-2016



- 1. There has been a cultural change from individual expert opinions to evidence-based, interdisciplinary and multi-professional consensus-built guidelines.
- 2. The scientific medical societies are constantly motivated to create high-quality guidelines under their own responsibility with the support of the AWMF.
- 3. The AWMF has been accepted by the scientific medical societies and established as their umbrella organization and network.

- 4. By analyzing the formal methodology, the guideline groups have accepted the 3-stage classification; the methodological quality of their guidelines is comparable with international guidelines.
- 5. The guideline groups have accepted structured external evaluations of the guidelines they submitted; thereby contributing to building a highly valuable Guideline Register with its established seven rules.
- 6. "quality assurance is only achieved by working with and not against doctors"

Thank you for your attention!

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