Clinical Practice Guidelines in Action

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Agenda

• Overview of APA’s Clinical Practice Guideline development process- Raquel Halfond, PhD

• Perspectives from three different settings:
  o Veteran’s Administration- Chris M. Crowe, PhD
  o Large regional health system- Jared L. Skillings, PhD, ABPP
  o Private practice- Diana L. Prescott, PhD

• Questions
What is evidence based practice?

“Evidence-based practice in psychology (EBPP) is the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences,” (APA, 2005)
What is a clinical practice guideline?

- APA defines two main types of guidelines:

1. **Professional practice guidelines** - “recommendations to professionals concerning their conduct and the issues to be considered in particular areas of clinical practice” (APA, 2002).

2. **Clinical practice guidelines** - “provide specific recommendations about treatments to be offered to patients” and “they tend to be condition or treatment specific” (APA, 2002).
How is APA creating guidelines?

- In 2010, APA’s major governing bodies agreed it was time to develop clinical practice guidelines
- Cross directorate staff work group meeting for several years
- Board of Directors directed formation of the Guidelines Advisory Steering Committee (ASC)
- ASC meetings and monthly conference calls
How is APA creating guidelines?

- ASC appointed three multidisciplinary guideline development panels (GDPs) in late 2012: Depression, Obesity, and Posttraumatic Stress Disorder

- Multidisciplinary panels include Psychology (clinicians, researchers), Medicine (psychiatry, family, general), Social Work, Nutrition, Nursing, and Patient/Consumer/Community Members

- APA is following the Institute of Medicine’s 2011 standards for guideline development
3) For each recommendation, GDP determines the recommendation’s:
   a) Direction (For or Against);
   b) Strength (e.g., Strong or Conditional); and,
   c) Wording (Standardized; Reflects a & b above):
      ✓ “We recommend using...”
      ✓ “We suggest using X for patients with Y.”
      ✓ “We recommend against using...”
      ✓ “We suggest against using X for patients with Y.”

1) GDP completes decision tables/grids for each relevant treatment option.
2) GDP formulates treatment recommendations, considering:
   - Strength of evidence
   - Balance of benefits/harms (Net Benefit)
   - Patient values and preferences
   - Applicability of evidence to real patients

1) Rate quality of evidence per critical outcomes (benefits & harms), for all relevant treatment decisions

Evidence Quality Domains:
   - Risk of bias
   - Consistency
   - Directness
   - Precision
   - Publication bias
   - Effect size
   - Dose-response

2) Rate strength of evidence (SOE) for each PICOTS question (all comparisons), aggregated across all critical outcomes:

SOE graded as:
   - High
   - Moderate
   - Low
   - Very Low/Insufficient

Adapted from: Falk-Ytter & Schünemann (2009); Schünneman & Berkman (2011); Owens et al. (2009)
How is APA creating guidelines?

- Panels at different stages in the process:
  - PTSD GDP:
    - Guideline document reviewed and approved by Council, Feb. 2017
  - Depression GDP:
    - Revising guideline document to go out for public comment
  - Obesity GDP:
    - Revising guideline document to go out for public comment
PTSD Guideline Development Panel

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