

## **Enhancements to ICSI Scientific Documents Program**

ICSI has been developing evidence-based clinical practice guidelines (CPGs) to improve patient care since 1993. A cornerstone of this work has always been enlisting member clinicians to perform rigorous oversight and development of these guidelines, and ICSI is grateful for the time, experience, and wisdom shared by members as part of this work.

ICSI plans to remain a leader in practicing evidence-based medicine to meet the demands of health care delivery moving forward. We believe in order to continue to provide the best value to our members and broaden the implementation of best practice guidelines, we need to implement three main strategies starting in 2014:

- Ensure that ICSI's guidelines posted on the National Guideline Clearinghouse are in full compliance with Institute of Medicine (IOM) standards
- Implement a new process to endorse guidelines developed by other respected organizations
- Review our guidelines and see which can have their revision cycle extended without affecting the practice of best medicine

By taking these actions, we can increase our efforts to add decision-support information to some guidelines, and provide more tool kits that enhance the implementation of guidelines in practice.

### **Meeting New IOM Standards**

In 2011, the IOM released updated recommendations on the best methods or standards to promote consistency and trustworthiness of CPGs across developers. These standards and ICSI's guideline development framework are designed to:

- Combat bias
- Enhance transparency
- Highlight benefits and harms
- Promote optimal patient outcomes
- Provide cost-effective care options that enhance the patient experience
- Limit practice variation through strong recommendations and care options.

All ICSI guidelines are currently available on the National Guideline Clearinghouse (NGC), a highly respected comprehensive database of evidence-based clinical practice guidelines and related documents. Beginning in the summer of 2014, only guidelines that meet the new IOM standards can be listed on the NGC.

ICSI has been working since 2011 toward the adoption of the new IOM standards. Due to the expanded rigor and standardization of our guideline format required to meet the new standards, ICSI plans to restructure some aspects of the guideline revision process, including:

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- Expanding the number of required meetings to three
- Adding structures to accommodate alignment with all eight IOM standards
- Extending the revision cycle for some guidelines if warranted
- Continuing some guidelines to meet ICSI standards and member needs that are not intended to meet IOM standards.

### **Endorsement Process**

ICSI's evidence-based CPGs are developed using IOM's 2011 framework and are designed to combat bias, enhance transparency, and meet member needs.

In an effort to enhance and expand on its guideline work, ICSI plans to implement a new process in 2014 to endorse guidelines developed by others. The reason is that several organizations develop quality clinical practice guidelines that are in alignment with ICSI's work. Plus this will enable members to request guidelines relevant to their practice that ICSI has not internally developed.

The endorsement process for reviewing external CPGs will maintain the same quality standard, rigor, and value as those for developing ICSI's own guidelines. The process will be transparent and collaborative, and grounded in rigor that reflects our guideline development history. ICSI will not endorse low quality evidence-based CPGs or guidelines that in any way reduce the current ICSI quality standard.

This new process will enable ICSI and its members to work more efficiently together; creates an expanded input process through new electronic methods; and ensures that the benchmark standardization in formatting set forth by IOM is maintained.

Details about the endorsement process will be provided to work group members, but it is important to note these key points:

- Guidelines must meet a number of requirements related to evidence quality, funding sources, conflicts of interest and more to qualify for consideration
- ICSI staff will perform an initial critical review of the guideline using methodology aligned with IOM standards, requirements of the NGC and ICSI's own rigorous standards
- The work group will seek community feedback similar to the current response report process, but will utilize a new electronic tool to streamline the work
- The work group has three options: to recommend a full endorsement, endorse with supplement or not endorse
- Sign-off by the Committee for Evidence-Based Practice (CEBP) is required before the ICSI-Endorsed Guideline can be posted on ICSI's website.

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### **Revision Cycle Extension**

ICSI is considering extending the guideline revision cycle by 12 months for some guidelines. Even with this extension, ICSI guidelines would be revised more frequently than most other guidelines. As part of this process, we will factor in new research or evidence for a health condition that would warrant a shorter revision cycle for a particular guideline. We will visit with guideline work groups to identify the need for shorter revisions cycles.

### **More Information**

More details will be communicated in *ICSI News* and on our website at [www.icsi.org](http://www.icsi.org).

If you have immediate questions about this new direction after reviewing the materials, please contact Cally Vinz, Vice President, Health Care Improvement and Member Relations, at [cvinz@icsi.org](mailto:cvinz@icsi.org) (952) 814-7060, or Claire Neely, MD, Medical Director, at <mailto:cneely@icsi.org> (952) 814-7091.

We appreciate your comments and collaboration as together we accelerate the transformation of health care in our communities.