



ORIGINAL ARTICLE

Clinical practice guidelines were adapted and implemented meeting country-specific requirements—the example of Kazakhstan

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Abstract

Objectives: In a twinning partnership between the Canadian Society for International Health and Kazakhstan's Ministry of Health, a project to build capacity and a process for the adaptation and implementation of international clinical practice guidelines (CPGs) was undertaken.

Study Design and Setting: A pragmatic CPG adaptation process was developed that took into consideration national and local contexts. A 15-step process ranging from topic prioritization to copyright clearance to final Ministry of Health approval was developed. An implementation strategy was developed and piloted in three local regions using a five-step approach.

Results: High-quality international CPG candidates were identified for all topics; forty-two CPGs were adapted locally by the clinical working groups. Three CPGs using 21 recommendations were implemented locally. Many challenges were identified including priority setting, obtaining permission to use and translate guidelines into Russian and producing high-quality translations, and organizational barriers during implementation. Facilitators included tools to guide the process and the creation of working groups.

Conclusion: We describe a process of large-scale adaptation of international CPGs with the pilot implementation of selected adapted CPGs and recommendations. Further evaluation and monitoring are required to ensure its integrity. © 2015 Elsevier Inc. All rights reserved.

Keywords: Evidence-based medicine; Practice guidelines as topic; Guideline adherence; Quality Assurance; Health care; Implementation research; Knowledge translation

1. Introduction

In a partnership between the Canadian Society for International Health and Kazakhstan's Ministry of Health, a project designed to result in the adaptation and implementation of international clinical practice guidelines (CPGs)

and build capacity for ongoing work was undertaken. Kazakhstan's Ministry of Health selected the Center for Standardization, a technical governmental agency in health care, to work directly with Canadian Society for International Health under the auspices of the World Bank. Together, they were tasked with introducing high-quality,

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What is new?**Key findings**

- Clinical practice guideline (CPG) adaptation was a preferred option to developing original guidelines in a country new to CPG development, and the process of CPG adaptation can be further customized to suit country-specific requirements.
- Adhering to copyright rules and obtaining permissions were variable and sometimes controversial and lengthy cumbersome process that needs to be taken into account.
- Translation issues related to language may place a significant barrier to CPG adaptation.

What this adds to what was known?

- The process of guideline adaptation was not straightforward and required the use of many different theoretical frameworks to suit the culture in Kazakhstan.
- Through the adapted CPGs, health care professionals in Kazakhstan now have access to high-quality evidence to apply in everyday practice.
- New capacity for Kazakhstan Ministry of Health and its affiliated institutions was developed and can be further built on with further CPG implementation across the country.
- Identified barriers such as lack of equipment or miscommunication between inpatient departments to CPG implementation brought to light important issues of care organization and administration.
- Detailed indicators developed for specific recommendations in the process of CPG implementation allowed reduction in the collection of additional or unimportant statistical data at the medical facility level.
- Detailed indicators developed for CPG implementation allowed reduction in the collection of additional or useless statistical data at the medical facility level.

What is the implication and what should change now?

- The in-country CPG regulatory framework should be updated.
- Patient confidentiality and copyright issues need to be reviewed and standards developed for in-country application.
- A formal system of continuous knowledge translation should be developed to include the updating/

revision of the CPG adaptation priority topic list, updating the adapted CPGs, implementation of CPGs recommendations into local clinical practice.

- Medical education with professional associations needs to play an important role at each step.
- Improved skills for specific indicators development are required to provide the opportunity to assess the process and results of the CPG implementation.

evidence-based CPGs into the Republic of Kazakhstan. Several attempts have been made to develop CPG tools for health professionals in Kazakhstan within the past decade. CPGs were among them too, but use of a CPG quality development process was not developed.

CPGs are documents that have been developed systematically and include recommendations to optimize patient care. They are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options [1]. Internationally, the use of CPGs has impact at four levels, including the patient level, the health provider level, the organizational level, and the political level [2]. Incorporating CPGs (or CPG methodology?) into medical education provides the basis for future excellence in clinical decision making. If CPGs are carefully developed and well implemented, they result in improved quality of care [3]. Implementing guidance can help clinicians and decision makers in Kazakhstan ensure that patients receive clinically and cost-effective care. This article describes general principles relevant to guideline adaptation and implementation in settings that are only recently emerging into evidence-based health care models.

2. Methods

The aim of this initiative was to develop a process to select, adapt, and implement one hundred CPGs in Kazakhstan over a two and a half year period. Initially, the original request included the development of new CPGs. However, the country level experience for using, developing, and implementing CPGs was at the beginning stages. It was decided that the best approach would be to adapt high-quality international CPGs so that capacity and familiarity around the use of CPGs could be built on and a product for adaptation could be developed more quickly for implementation. The focus was to develop a process that was pragmatic and practical because of our short timelines. The approach took into consideration national contexts and needs.

At the beginning of the project, key CPG methodology and guidance publications were reviewed and used to inform project methods [4–13]. However, none of these

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