Section 3.3

Adapting Knowledge to a Local Context

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Why Should We Adapt Practice Guidelines for Local Use?

- Often there are many quality guidelines on the same topic, little need for a brand new guideline
- Reduces duplication of effort and optimizes use of existing resources
- Encourages consideration of implementation and ‘fit’ with the local context - enhances applicability
- Typically engages end-users thus helping uptake
How Do We Adapt Practice Guidelines for Local Use?

- Using a transparent, rigorous and replicable process
- Involves an explicit, participatory process involving relevant decision makers including clinicians, managers, researchers, and policy makers
- Preserving the integrity of the evidence-based recommendations
What is the ADAPTE Process?

- The ADAPTE process consists of three main phases:
  - planning and set-up
  - adaptation, and
  - development of a final product
- 9 modules
- 24 Steps
Phase I: Set-Up

Preparation Module

STEPS

1. Establish an Organizing Committee and working panel, resource team
2. Select a topic using criteria
3. Check if adaptation is feasible
4. Identify necessary resources and skills
5. Complete tasks for set-up phase inc. terms of reference, declaration of conflicts of interest, consensus process, endorsement bodies, guideline authorship, dissemination and implementation strategies
6. Write the adaptation plan
Phase II: Adaptation

**Scope and Purpose Module**
7. Determine/clarify health questions using PIPOH

**Search and Screen Module**
8. Search for Guidelines and other relevant documentation
9. Screen retrieved guidelines – record characteristics/content
10. Reduce a large number of retrieved guidelines using AGREE instrument

**Assessment Module**
11. Assess guideline quality
12. Assess guideline currency
13. Assess guideline content
14. Assess guideline consistency
15. Assess acceptability and applicability of recommendations
Phase II: Adaptation (Cont’d)

Decision and Selection Module
16. Review Assessments
17. Select between guidelines and recommendations to create an adapted guideline

Customization Module
18. Prepare draft adapted guideline
Phase III: Finalization

**External Review and Acknowledgement Module**
19. External Review – target audience of the guideline
20. Consult with endorsement bodies
21. Consult with source guideline developers
22. Acknowledge source documents

**Aftercare Planning Module**
23. Plan for aftercare of the adapted guideline

**Final Production Module**
24. Produce final guideline document
Future Research

• Evaluation (effectiveness, efficiency) of the ADAPTE methodology by both guideline developers and those undertaking adaptation as 1st step in implementation
• Development of tools to capitalize on implementation planning activity during guideline adaptation