

Guideline Resource Unit (GURU) 2015-2016 Annual Report

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GURU MISSION

The role of the Guideline Resource Unit (GURU) is to support the Provincial Tumour Teams (PTTs) in activities related to clinical practice guideline development and implementation. Through review, selection, synthesis, evaluation, interpretation, and reporting of evidence, GURU facilitates communication and collaboration amongst PTT members. The roles and structure of GURU serve to extend the expertise of PTT members and to enhance the evidence-based culture of CancerControl Alberta (CCA).

SUMMARY

Clinical practice guidelines are systematic statements about specific health problems intended to assist decision making; guidelines provide health care practitioners with evidence-informed recommendations that reflect best practices. Within CCA, GURU coordinates the development of guidelines for cancer treatment and follow-up care in collaboration with the PTTs.

In 2015/16, GURU supported the PTTs with development of four new clinical practice guidelines and updates to 19 existing clinical practice guidelines, there are now more than 100 guidelines available on the [Cancer Guidelines](#) website. GURU team members contributed expertise to 13 quality improvement projects, which led to several publications in peer reviewed journals and presentations at national and international oncology conferences. The team also commenced work on Supportive Care guidelines and the Palliative Tumour Team was established.

The GURU team coordinated 12 annual PTT meetings in 2015/16 ranging from a half- to two-days in length, and involving 29 to 102 participants per meeting. Annual PTT meetings bring together health care practitioners from across different centres and multiple disciplines to review new and updated guidelines, share best practices and to discuss research collaborations.

STRUCTURE AND OBJECTIVES OF GURU

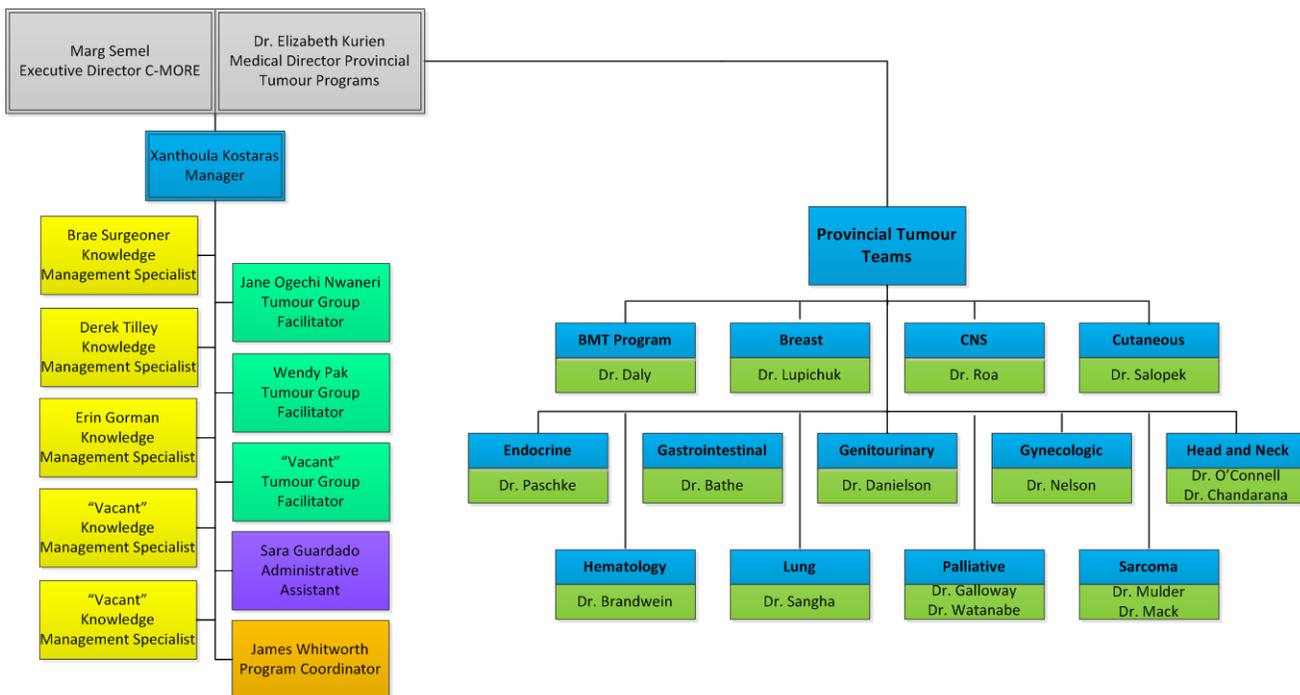
GURU was established in 2006 by the former Alberta Cancer Board, and is supported operationally by CCA. The main objectives of GURU are to:

1. Develop and update provincial clinical practice guidelines for cancer care, including diagnostic workup/staging, cancer treatment, and supportive and follow-up care.
2. Promote the implementation and uptake of cancer clinical practice guidelines across the province.
3. Identify, promote, and contribute to quality improvement initiatives to improve cancer care.
4. Work with partners across CCA to support the development of key indicators to be embedded within the clinical practice guidelines and used in quality improvement initiatives.
5. Plan annual meetings to discuss clinical practice guidelines, quality of care, and research collaborations.
6. Contribute to research initiatives in collaboration with PTT members that may lead to new, more effective strategies for cancer management.

The core staff of GURU includes the manager, administrative assistant, program coordinator, knowledge management specialists, and tumour group facilitators. The group is overseen by the medical director of provincial tumour programs and the Cancer Measurement Outcomes Research & Evaluation (C-MORE) executive director.

The GURU manager is responsible for the overall operations of GURU. The administrative assistant is instrumental in planning and coordinating the annual PTT meetings, is responsible for communications between GURU and the PTT members, and provides administrative support to the medical director. The program coordinator oversees the planning and execution of annual PTT meetings and provides communication, accounting, research, and operational support. The knowledge management specialists summarize the evidence on which the guideline recommendations are based, assist in the formulation of recommendations, and oversee the development of the final guideline document. The tumour group facilitators are responsible for communicating and promoting the guidelines, and developing and implementing strategies to improve guideline awareness and uptake. The knowledge management specialists and the tumour group facilitators work closely to evaluate the use and adherence to guideline recommendations through quality improvement and evaluation projects.

Figure 2: GURU Organizational Chart 2015/16*



*Organizational chart current to the end of 2015/2016

PROVINCIAL TUMOUR TEAM ORGANIZATION

PTTs are responsible for developing and implementing evidence-based clinical practice guidelines for use by cancer specialists and family physicians throughout Alberta. The explicit goals of the PTTs include:

1. Advancing knowledge about cancer treatment for patients with cancer in Alberta.
2. Establishing provincial research strategies.
3. Reviewing practice patterns across different treatment centres, aimed at improving cancer care and the quality of life for patients with cancer in Alberta.

Each PTT meets annually in-person to: establish provincial consensus on new guideline recommendations, review and update existing guidelines, and discuss guideline topics. In addition, these annual meetings are a key discussion forum to share best practices and discuss research collaborations between different centres. As a result of bringing members of these multidisciplinary teams together, we are able to ensure consensus on the best and most up to date practices in cancer care across Alberta. The leadership structure of the PTTs varies: while some teams have a single provincial leader, others have co-leads, one from each of the tertiary centres. PTTs also have executive councils with representatives from relevant specialties to support the provincial leads throughout the year. All PTT members volunteer their time to attend the meetings and contribute to the development and maintenance of clinical practice guidelines.

Financial support for PTT meetings is provided by the Alberta Cancer Foundation (ACF), and is used specifically to cover the costs of transportation, accommodations, meeting rooms, meals, and guest speakers, as well as the Continuing Medical Education (CME) accreditation fees. Industry representatives who provide unrestricted grants to the ACF in support of the provincial meetings are also invited to attend select sessions of provincial meetings. Industry support is vital to the continued success of the PTT meetings. GURU staff work closely with the PTT leads and executives to control and minimize costs without compromising the quality of the meetings. The 2015/16 meetings took place in either Calgary or Edmonton with a total of 632 attendees; this represents an increase of 22% over 2014/15. The average cost per meeting attendee was under \$300.

Participants were asked to complete meeting evaluations following each 2015/16 PTT meeting, and feedback was generally positive. The vast majority of participants indicated that the objectives were clear and the content was well organized. Almost all attendees (96.9%) found the topics presented to be relevant to their practice, while 97.4% rated the meetings as credible and non-biased, and over two-thirds (69.3%) of meeting attendees said they would alter their treatment practices based on information presented at the annual meetings. GURU uses these evaluations to improve the PTT meetings and to ensure that items of particular interest are included in upcoming meetings.

GUIDELINE DEVELOPMENT

GURU's core business is the development, maintenance, and implementation of clinical practice guidelines for the treatment of cancer across Alberta. New guidelines are developed in response to emerging trends and needs within the cancer care community or in an attempt to fill existing gaps within the literature. Quite often guidelines are developed to inform stakeholders on new treatment strategies or in response to a new drug or innovation. Regularly updating the content of the guidelines is critical to ensure that they remain evidence-based and are a true reflection of the best practices of PTT members.

Table 1 summarizes the development and update of the GURU guidelines in 2015/16.

Table 1: 2015/16 Guideline Development Summary

Tumour Team	New Guidelines Developed	Existing Guidelines Updated	Guidelines Under Development	Guidelines Under Review
Bone Marrow Transplant*	0	4	0	All
Breast	0	1	0	2
CNS	0	0	2	2
Cutaneous	0	2	1	3
Endocrine	0	0	4	0
Gastrointestinal	0	3	1	3
Genitourinary	0	1	0	1
Gynecologic Oncology	0	2	0	1
Head and Neck	2	1	2	0
Hematology/Lymphoma	1	4	1	1
Lung	0	0	0	4
Sarcoma	1	0	0	0
Supportive/Follow-up Care	0	1	8	1
Radiotherapy-Special Topics	0	0	1	2
TOTAL	4	19	20	20

*refers to Alberta Bone Marrow & Blood Cell Transplant Program manual chapters

DISSEMINATION AND IMPLEMENTATION

Guideline dissemination and implementation include strategies to communicate and promote the guidelines, evaluate the use of and adherence to guideline recommendations, and develop and apply strategies to improve guideline awareness and uptake. Dissemination and implementation activities are important because they facilitate the integration of evidence based recommendations into practice, which can lead to better patient outcomes. Examples of such activities undertaken in 2015/16 include:

Communication. GURU continues to focus on timely and concise communications to PTT members. In 2015/16, two bi-annual newsletters were published and distributed to PTT leads, local tumour group leads, guideline working group members, and other interested partners. These newsletters are used to disseminate information and to maintain engagement amongst the PTT members. All PTT members received monthly guideline status reports that provide detailed information on the progress of all guideline updates and new guidelines under development.

The external [Cancer Guidelines](#) website hosts over 100 clinical practice guidelines, dozens of treatment algorithms and a wide variety of support documents. The [Canadian Medical Association](#) Clinical Practice Guideline database and the [National Guideline Clearinghouse](#) database continue to partner with GURU to promote and maintain the guidelines on their websites and the guidelines were accessed electronically hundreds of thousands of times in 2015/16 by people and organizations around the world.

Tumour team specific SharePoint sites are a platform for discussion, document editing, status reports, announcements, external content, links and supporting documents. These sites enable PTT members to communicate and network remotely which encourages engagement amongst the team. Each PTTs page is updated monthly with the current status of guidelines and Quality Improvement projects, and all PTT meeting minutes and presentations are posted on the sites following each provincial meeting.

GURU also maintains a Twitter account to reach out to interested groups and individuals around the world; to date there are over 300 followers and 1,500 tweets. The use of social media for knowledge dissemination/translation and stakeholder engagement has several advantages as it allows information to be disseminated quickly, provides opportunity to broaden your audience, and it has the ability to quickly link intended audiences to the resource in question.

Continuing Medical Education Credits (CME). CME credits are offered to PTT members for attending the annual provincial meetings, reviewing guidelines and contributing to guideline working groups. These credits are necessary to maintain licensure and other professional privileges, and they help to ensure continuous improvement in practice and patient care. The annual meetings are accredited educational events and in 2015/16 a total of 70.5 CME credits were available for meeting attendees.

Quality Improvement (QI) Projects. Members of GURU and the PTTs published two articles in peer-reviewed journals and had eight abstracts accepted for presentation at national and international conferences in 2015/16. These projects were focused on improving the quality of care for patients through evaluating utilization and outcomes of guideline recommendations.

Three QI projects were completed over the past year: two projects evaluated adherence to radiation oncology (RO) referral recommendations in prostate cancer patients, and another project evaluated optimal adjuvant chemotherapy for breast cancer to increase the specificity of Alberta guidelines.

Members of GURU and the PTTs also began several new QI projects in 2015/16:

- Evaluating whether partial nephrectomy is being utilized according to guideline recommendations, and how outcomes compare to radical nephrectomy in renal cell carcinoma patients.
- Evaluating adherence to testicular follow-up recommendations.
- Evaluating adherence to various recommendations across the spectrum of patients who receive adjuvant FEC-D for HER2 negative, node positive breast cancer.
- Evaluating a number of guideline recommendations in the 'triple negative' breast cancer population.
- Evaluating recommendations related to liver metastasis in colorectal patients.
- Outcomes related to recommendations for chemotherapy/radiotherapy/surgery for esophageal cancer.
- Assessing changes in practice after the introduction of GUROC recommendations into Alberta guidelines relating to patients with high-risk features after prostatectomy.
- Evaluation of desmoid tumour treatment approaches across Alberta to inform the production of a clinical practice guideline.

QI projects are vital to identify and evaluate gaps in guideline adherence and encourage the use of evidence based medicine in cancer care. All QI projects conducted in 2015/16 were carried out by GURU team members without additional resources.

Resource Development. Algorithms, care pathways and supplemental materials may also be developed to enhance the utility and applicability of clinical practice guidelines and to improve access to information for clinicians and their patients. A treatment algorithm or care pathway is a structured multidisciplinary plan that details essential steps in the care of patients with a specific clinical problem; they are also a means of improving systematic collection and abstraction of clinical data for audit, and to promote change in practice. Treatment algorithms visually map out recommendations and/or treatment choices, and may define what data elements should be recorded about the care. There are currently 50 treatment algorithms available on the GURU website as either standalone documents or embedded within treatment guidelines. Other supplemental resources developed by GURU and the PTTs include: position papers, physician and patient follow-up letters and checklists, drug information guides, patient guides, referral guidelines, resource lists, posters and fact sheets.

Database Integration. GURU is working with a variety of partners to integrate the guidelines into electronic data systems. This will promote the use of and adherence to guidelines across the province and also allow for measurement of guideline adherence and evaluation of guideline updates. The data obtained from these initiatives permits evaluation of current user practices and the relative utility/applicability of published guidelines allowing future interventions to be better tailored to react to evolving best practices within Alberta.

COLLABORATIONS AND PARTNERSHIPS

Development of cancer care clinical practice guidelines and support materials requires collaboration with departments or programs both within and outside of CancerControl Alberta. GURU cooperates with a variety of internal and external groups to further existing knowledge and facilitate the transfer of information between stakeholders who have common goals.

Medical Professionals. Medical oncologists, surgical oncologists, radiation oncologists, pathologists, nurses, pharmacists, and surgeons make up the majority of our PTT membership. In addition, professionals outside of CancerControl Alberta who interact with patients throughout their cancer journey also contribute to guideline development and implementation, this includes: psychologists, family physicians, radiologists, spiritual care providers, dermatologists, dentists, speech language pathologists, respirologists, dietitians, and social workers. This broad cross-section of specialists enhances the meetings with a variety of perspectives, expertise and experiences ensuring a representative group of professional collaborate on developing best practices for cancer treatment in Alberta.

Patient Advisors. Patient Advisors were added for the Head and Neck, and Breast Tumour Teams. These advisors play a crucial role by sharing their health care experiences which helps identify how patient care and the quality of services can be improved. Patient Advisors also ensure that the guidelines developed take the patient perspective into account.

Supportive Care Council. GURU has partnered with the Supportive Care Council to develop and adapt guidelines which aim to reduce or relieve the symptoms associated with cancer treatment. Working groups were established for eight guidelines and members of these groups are representative of all PTTs as supportive care issues span across disease sites. Current work is focused on guidelines for cancer related fatigue, sexual health, chemotherapy-induced peripheral neuropathy, chemo-induced nausea and vomiting, constipation-diarrhea, oncologic pain, anorexia/cachexia and mouth care and the guidelines are expected to be complete by December 2016.

The Alberta Cancer Prevention Legacy Fund (ACPLF). GURU worked closely with the ACPLF and **Person Centred Care Integration** to develop physician and patient transfer of care letters, follow-up guidelines, and patient handouts. In another collaboration with the ACPLF and the **Alberta Thoracic Oncology Program (ATOP)**, GURU developed tobacco screening and treatment guidelines for adult cancer patients.

Provincial Immunization Program. Once again in 2015/16, GURU partnered with the Provincial Immunization Program to update guidelines for pneumococcal and influenza immunizations for adult and pediatric patients undergoing cancer treatment. Clinician factsheets and posters were also developed for influenza immunization for adults with cancer, cancer survivors, and hematopoietic stem cell transplant recipients.

GURU is working with a variety of partners to integrate the guidelines into electronic data systems such as the **Cancer Surgery Alberta (CSA)** surgical synoptic templates, and the **Clinical Data Integration (CDI)** minimum data sets and associated questionnaires. PTT members will be the primary users of these data systems therefore their engagement in the planning, development and implementation of the data sets is essential. These datasets will promote the use of and adherence to guideline recommendations across the province and will also allow for measurement of guideline use, adherence to and evaluation of guideline updates.

GURU and the PTTs have partnered with **Path to Care** in the development and maintenance of referral and eReferral guidelines. These guidelines outline the information required to provide a complete referral to a cancer centre and ensure the necessary information is available to triage and treat the patient in a timely manner. Breast and Lung cancer eReferral guidelines were updated in 2015/16 and have been implemented within Netcare and the GURU clinical practice guidelines. Referral guidelines are currently under development for the Gastrointestinal, Genitourinary, and Hematology teams.

The **Clinical Knowledge and Content Management (CKCM)** team facilitates the development of knowledge topics for use in the future Clinical Information System (CIS); knowledge topics are defined as best practice/evidence-informed clinical standards for defined diseases/conditions, specific patient populations, or segments of a clinical pathway. For oncology patients, the contributions of GURU and the PTTs will be key to the successful development and roll out of this initiative. The goal of the work is two-fold: 1) to have provincially endorsed content for the anticipated CIS and 2) to create a usable tool kit of knowledge and resources for clinician use now. The cancer knowledge topics will be based on the existing PTT clinical practice guidelines in addition to incorporating order set components, documentation tools, patient teaching materials, and other aspects of care.

PROFESSIONAL DEVELOPMENT

GURU staff participated in a variety of professional development initiatives in 2015/16 including ARECCI project ethics courses, ARECCI second opinion reviewer certification, plain language training, advanced computer applications, and AHS leadership development coursework.

In addition, GURU staff presented posters or abstracts at the AHS Quality Summit, the Cancer Control Leadership Meeting, and the American Society for Radiation Oncology (ASTRO) Annual Meeting in 2015/16, and were included as contributing authors on posters and abstracts presented by PTT members at the St. Gallen International Breast Cancer Conference, the Canadian

Association of Medical Oncology Annual Meeting, Canadian Association of Radiation Oncology Annual Meeting and the Canadian Association of Radiation Oncology Annual Scientific Meeting.

PLANNING AHEAD: 2016/17

The GURU team will continue to work with its partners to develop high quality clinical practice guidelines and associated documents while maintaining focus on research and QI initiatives. In collaboration with our stakeholders and partners GURU will continue to offer high quality meeting opportunities to engage a wide range of stakeholders both within and outside of CCA. This fosters knowledge translation, the development of evidence based clinical practice guidelines and encourages standardization and implementation of evidence based practice across the province.

Other priorities for 2016/17 include the development of 31 knowledge topics for the provincial CIS, the completion of the Supportive Care guidelines, the completion of the transitions/follow-up guidelines, the expansion of the referral/eReferral guidelines, and the development of Section 3 CME Continuing Professional Development options for the Maintenance of Certification program.