

# Evidence informed decision-making process: perspective from developing countries

**Prof d-r Elizabeta Zisovska**  
**Republic of Macedonia**

# Evidence informed decision-making

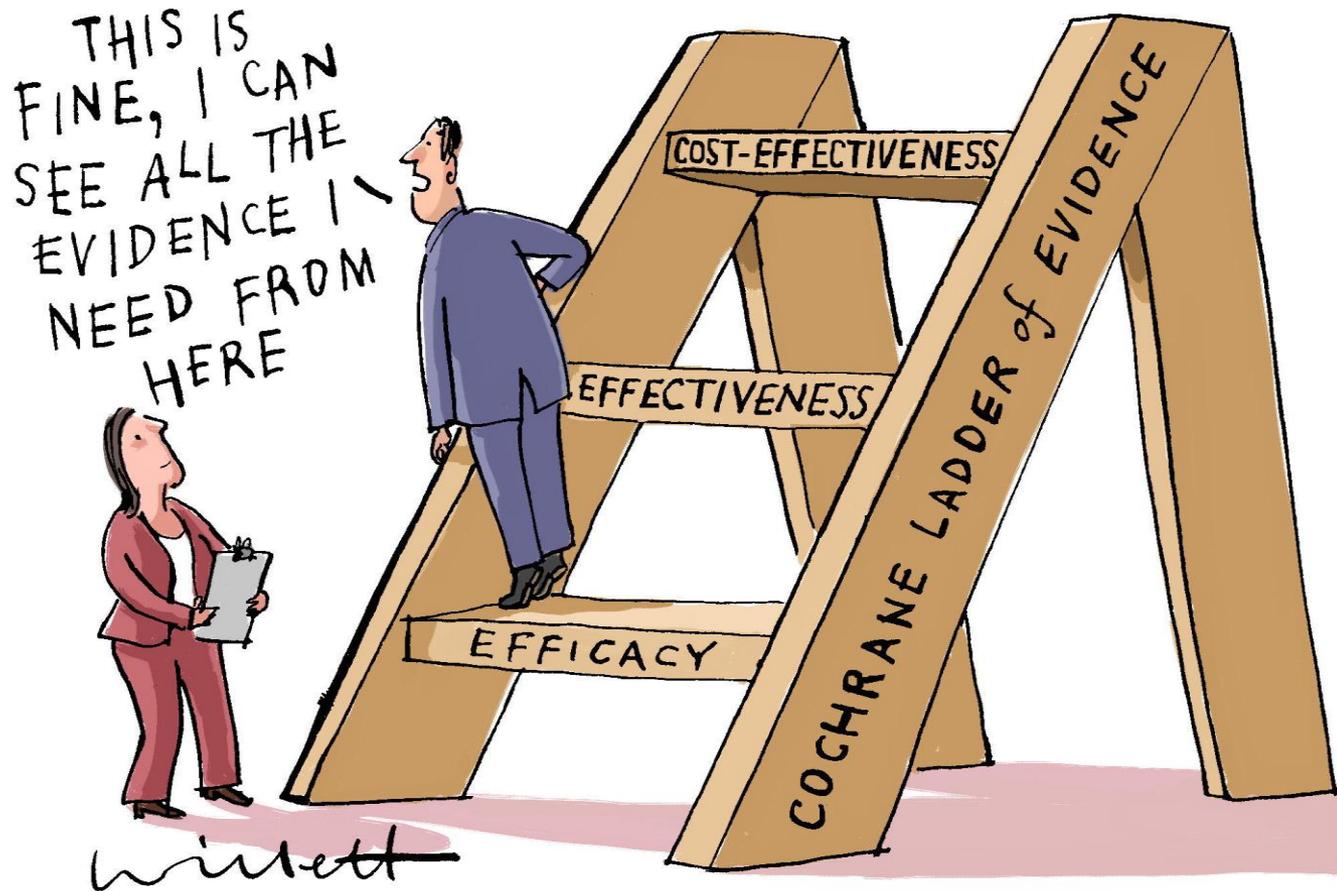
Evidence-informed decision making is a global initiative that promotes the systematic use of health research evidence in policy and decision making.

It means promotion of national partnerships between policy-makers, researchers and civil society representatives in order to facilitate both policy development and policy implementation through the use of the best scientific evidence available.

- As a result, different sectors in the country jointly address specific priorities, develop and use specific skills to assess research evidence and to integrate them in policy briefs that provide for evidence-informed decisions by high-level decision makers at both national and local level
- Developing countries perceive this concept clearly, because the main aim is the same worldwide-efficient, effective health care of high quality.

Challenges:

- What is the best evidence?
- How it could be assessed?



- ▶ The health care has shifted from one to another model, with different transitional periods and duration in between.
- ▶ Starting from fee-for-services, through pay-per-performance to the newest model value-based approach.
- ▶ Fee-for-services is the among the oldest models, where payment generally has little to do whether their patients' health improves

# A Brief History of Health-Care



The House Call



The Office Call

*Gary Varvel*  
THE INDIANAPOLIS STAR  
© Gary Varvel 2007  
garyvarvel.com



The 1-800 Call

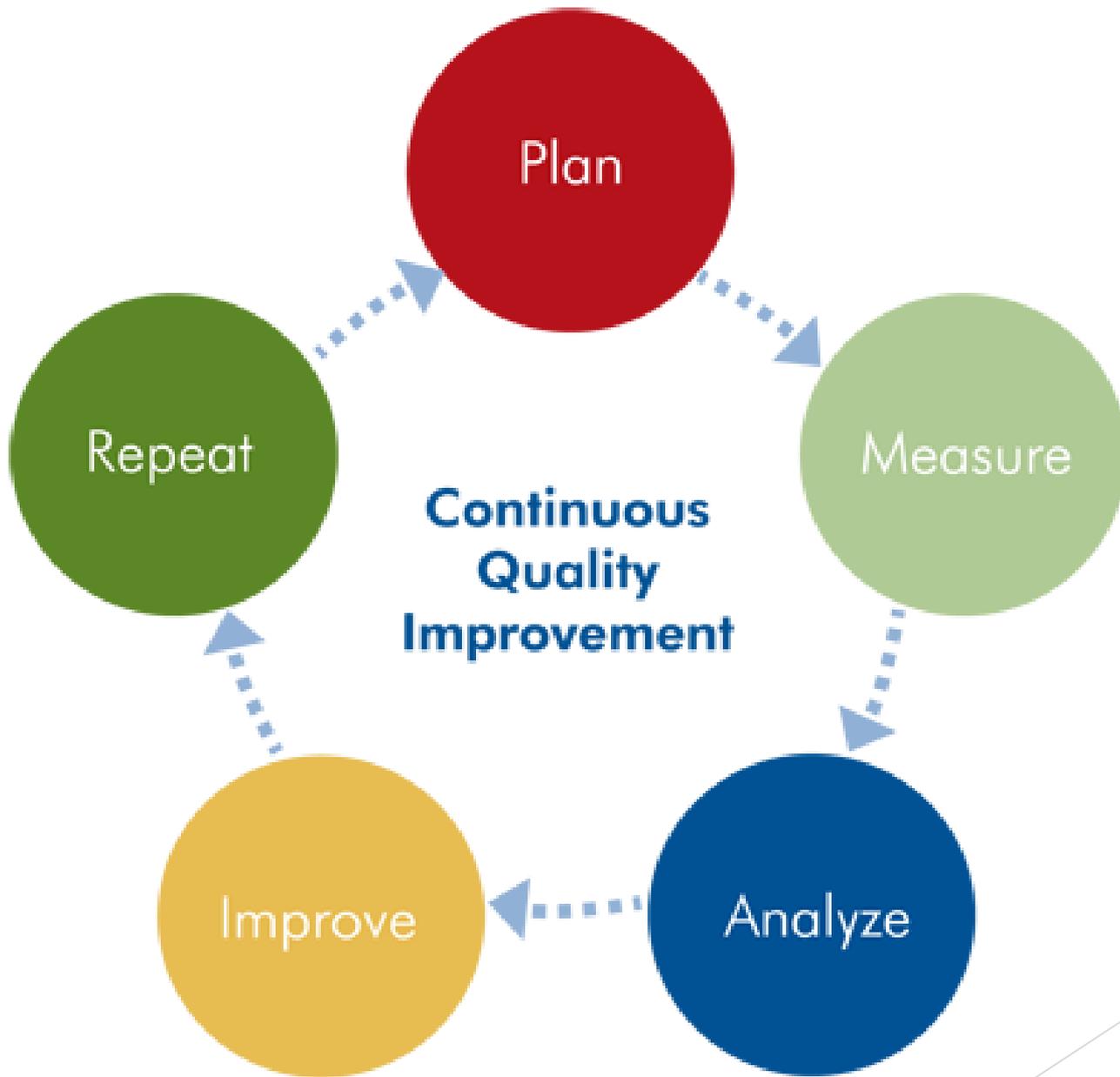


The Conference Call

# Models in action

- ▶ A value-based approach is designed around patients. The team coordinates patients' care, and technology connects the patient with providers, information, evidence in order to provide the right care across the health care system, in an evidence-based, cost-effective way. This includes the care for health at all, not only the treatment.
- ▶ The transition from fee-for-services to one based on value is one of the greatest financial challenges for health systems. In between, is the system pay-for -performance.
- ▶ Each of these systems has specifics, and the challenges have to be solved.

- 
- ▶ Cost-effective healthcare of good quality mainly is based on these pillars:
  - ▶ Health Technology assessment
  - ▶ Research in health and gathering the evidence
  - ▶ Evidence-based practice
  - ▶ Continuous improvement of the healthcare quality



challenge: low level of clinical research

# Evidence-based practice in the region

- ▶ Over the last decade, Clinical guidelines are recognized as particularly important in the context of the current challenges facing the overall health care systems, such as the rising costs of health care, introduction of expensive new technologies, increased demand for care combined with an ageing population, the variations in clinical practice and service delivery patterns among health care professionals, institutions and geographical regions.
- ▶ Although target users of the clinical guidelines are usually considered the physicians, other groups may benefit too, including nurses and midwives, paramedical professions, health managers, policymakers and patients. All of them perceive increasingly clinical guidelines as relevant tools for making health care more efficient, consistent, safer and for eliminating the differences between what clinicians do and what scientific evidence has demonstrated.

# Evidence-based practice in the region

**Clinical guidelines** are used for the following purposes:

- ▶ To inform health care policy for prioritization of needs and support rational and evidence-based health care decisions;
- ▶ To help develop standards for improving quality of care, change the provision of health care, help assess the clinical practice and improve outcomes for patients;
- ▶ To provide information on cost effectiveness and ensure efficient use of resources which is pertinent to modelling health economics;
- ▶ To educate and train health care professionals to deliver high-quality care;
- ▶ To strengthen the position of the patient and enhance patient-provider partnership;
- ▶ To reduce litigation costs by reducing poor clinical practice.



# Major actions taken

- ▶ The concept was introduced more than ten years ago
- ▶ Highly professional working groups established for each clinical field
- ▶ Adopted and adapted the most relevant Clinical Guidelines in all disciplines, period for update predefined
- ▶ Legal obligation for health care practitioners stated and published in “Official Gazette of the Republic of Macedonia”
- ▶ Clinical pathways created in accordance with the Clinical Guidelines
- ▶ Monitoring and evaluation of the implementation through the Health Insurance Fund and Agency for Quality and Accreditation of Healthcare Institutions

# Additional important steps completed

- ▶ Established School for practicing Evidence Based Medicine - different models
- ▶ UN Agencies supported activities:
  - ▶ Regional workshop on Guidelines adoption/adaptation and roll out national trainings were continued
  - ▶ Skills for proper management of the process of adaptation were acquired (currently: ongoing process for adaptation of the CG for PPH)
  - ▶ Introduction of the BTN methodology for maternal deaths review
  - ▶ The overall goal of this initiative was to contribute towards improving quality of care in the country and the region. Furthermore, practical issues around implementation of new national guidelines into clinical practice would be identified and solutions would be proposed.

# Clinical guidelines

- ▶ In the region, the international definitions for Guidelines, protocols, pathways and algorithms are completely accepted
- ▶ For the term “Clinical guidelines” the updated definition is used to reflect the essential defining characteristics: “clinical practice guidelines are statements that include recommendations intended to optimize patient care that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options”.
- ▶ Broadly defined, clinical guidelines make recommendations for the health care professionals based on the best available evidence, for the care of patients.

- ▶ Evidence-based clinical guidelines have become an integral part of health care systems and are considered to be essential tools for improving the quality of primary, secondary and tertiary health care. They have been developed to achieve value for money.
- ▶ The principal aim of evidence-based clinical guidelines is to improve the effectiveness and efficiency of clinical care, as well as patient safety by supporting and promoting good clinical practice in the best interest of patients.
- ▶ Although guidelines provide mainly evidence-based advice for clinical care, they can also be used to set standards of care, improve training and influence the research portfolio.
- ▶ Policy makers can also use the recommendations made in the guidelines for commissioning services.
- ▶ Implementation of guidelines also helps to improve communication and shared decision-making between patients and health care professionals.

# Clinical protocols/clinical pathways

▶ Clinical protocols set out precise rules and sequences of activities to be adhered to in the management of specific clinical conditions. They set out specifically what should happen, when and by whom in the care process. Clinical pathways are tools used to guide health professionals at local (institution, department or clinic) health care level, with the aim to improve the quality of care throughout the patient journey. There is still no standardized definition of what a “clinical pathway” actually constitutes.

## ▶ Algorithm

▶ An algorithm is a flow chart of the clinical decision pathway described in the guideline. The algorithm forms the basis of a shorter form of the guideline, intended for quick reference. It is only a summary of the recommendations and should not include any further detailed information or advice.

▶ It could prevent of doing unnecessary investigations, and treatments.

WOW! YOUR CHOLESTEROL HAS ME REALLY WORRIED!

GACK!

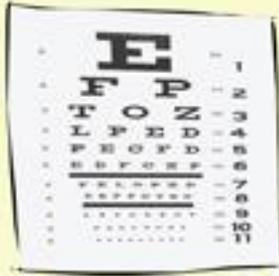
UH... YOU MIGHT WANT TO ACTUALLY LOOK AT THE PATIENT ...



# Standards

- ▶ The term standard may be used to define the exact quantity or the degree of fulfilment of a criterion for an adequate, acceptable or optimal level of quality. Used in this sense, it indicates an objective set to be achieved or considered as being achievable.
- ▶ A standard of care is a statement which provides an overview of relevant evidence in areas that have some influence or effect on day-to-day clinical practice, but does not provide specific recommendations. It expresses the quality of care provided and focuses on care that is effective, safe and provides a good patient experience.

Donar



# Agency for Quality and Accreditation of HC Institutions in Republic of Macedonia and similar institutions

- ▶ The standards are based on high level of evidence
- ▶ Procedures, process of implementation...
- ▶ Principles of the International Society for Quality of Care (ISQua)
- ▶ Close collaboration with hospital management
- ▶ Interinstitutional collaboration (MoH, HIF, State Sanitary Health Inspectorate)
- ▶ Monitoring the healthcare indicators (WHO and ECHI)

# What is health technology assessment?

Health technology assessment (HTA) is a multidisciplinary activity that systematically examines the safety, clinical efficacy and effectiveness, cost-effectiveness, organizational implications, social consequences, legal and ethical considerations of the application of a health technology - usually a drug, medical device or clinical/surgical procedure.

HTA acts as 'a bridge' between evidence and policy-making.

It seeks to provide health policy-makers with accessible, useable and evidence-based information to guide their decisions about the appropriate use of technology and the efficient allocation of resources.

Different sectors in the country jointly address specific priorities, develop and use specific skills to assess research evidence and to integrate them in policy briefs

# HTA in the region

## ► Activities related to:

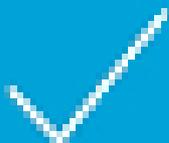
- Continuous medical education since 2000
- Improvement of procedures in pharmaceutical sector - regulatory and ethical aspect (procedures assessed and appropriately updated)
- Established Drug and Therapeutics Committees (DTC) in tertiary health care level
- Establishing Drug expenditure control system Database - ongoing
- Introduced pharmacoeconomic analysis for drugs subject to reimbursement
- Since 2011 - Established ISPOR (International Society For Pharmacoeconomics and Outcomes Research) Macedonia Chapter



QUALITY REVIEW &  
ACCOUNTABILITY



PERFORMANCE  
& PROCESS  
IMPROVEMENT



REGULATORY &  
ACCREDITATION



POPULATION  
HEALTH & CARE  
TRANSITIONS



PATIENT  
SAFETY



HEALTH DATA  
ANALYTICS

# Joining EVIPnet in the region

- EVIPNet promotes partnerships at the country level between health system policy-makers and other stakeholders including researchers, civil society, funders, and health professionals to enhance the profile of research evidence as a central input to policy-making.
- Purpose: To provide background on knowledge translation: the synthesis, exchange and application of knowledge by relevant stakeholders to accelerate the benefits of innovation in strengthening health systems and improving people's health

# What is EVIPnet?

- ▶ Evidence briefs for policy, formerly known as policy briefs, are one in a core set of tools used to support evidence-informed policy-making.
- ▶ Existing evidence syntheses, such as the gold standard systematic review, are of limited use for policy-makers since they require evidence to be adapted to a local context.
- ▶ Evidence briefs go beyond the systematic review by not only addressing the question, but also framing the research evidence in conjunction with information that is specifically relevant for health system policy-makers and stakeholders.

# Objectives

- ▶ improve the culture for and practice of research evidence creation, adaptation and use;
- ▶ influence processes and mechanisms supporting the prioritization of timely and relevant research evidence;
- ▶ package and disseminate research evidence;
- ▶ support the development of evidence brief for policy in public health
- ▶ convene national dialogues about priority public health challenges;
- ▶ enhance capacity to find and use research evidence and to develop evidence brief for policy
- ▶ catalyze KT at the global level.



# Priority topics for SEEHN

- Human resources for Health
- Vaccine and Immunization
- Health Insurance coverage
- Access to health services
- Quality of primary health care services-  
Nutrition
- Patient safety
- Mental health
- Tobacco control
- Rare diseases
- Maternal and neonatal mortality
- Gender and health systems

# Continuous Quality Improvement in Healthcare

## What's in It for You!



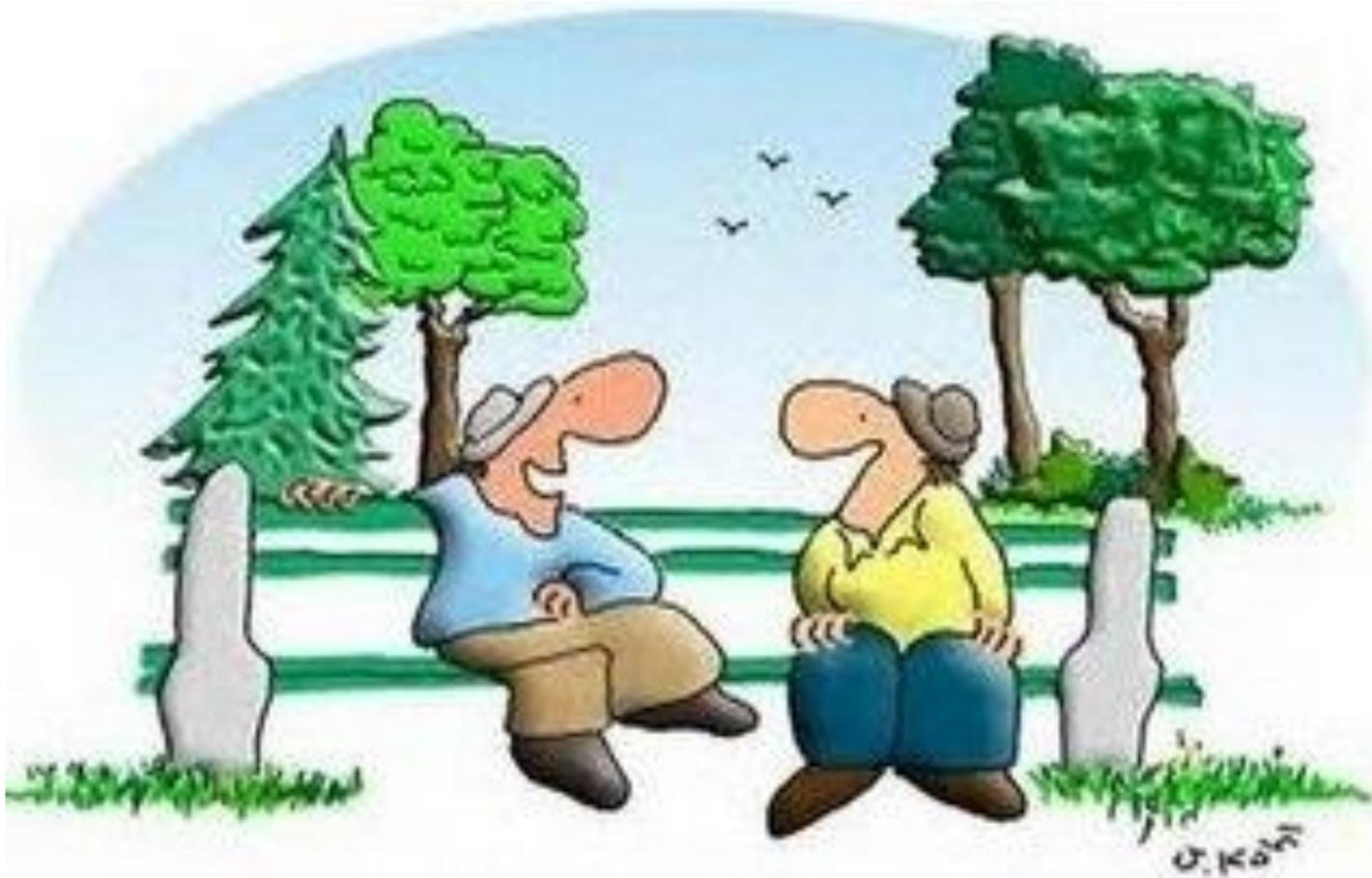
[www.iPatientCare.com](http://www.iPatientCare.com)

[Agency for Quality and Accreditation of  
Healthcare Institutions, Macedonia](#)

[www.akazum.gov.mk](http://www.akazum.gov.mk)

[elizabetha.zisovska@zdravstvo.gov.mk](mailto:elizabetha.zisovska@zdravstvo.gov.mk)

[elizabetha.zisovska@ugd.edu.mk](mailto:elizabetha.zisovska@ugd.edu.mk)



**"My doctor told me to avoid any unnecessary stress, so I didn't open his bill."**