

A proposal to update the UK Ambulance Services Clinical Practice Guidelines

The current version of the UK Ambulance Services Clinical Practice Guidelines was released in 2013 to replace the 2006 version. Following the release there was a minor update (version 1.1) on the second print run and AACE is now in a position to develop a new process for updating the guidelines which is set out in this document. In summary it is proposed that there is a move towards a continuous update process with individual guidelines being released as they are finalised, the introduction of a new document sharing and control process and the increased use of technological publishing options. The purpose of this paper is to seek approval to develop the guidelines as set out below.

Strategic Planning

AACE will act as the strategic lead for the development of new and existing guidelines. They will be responsible for timetabling the clinical conditions that need to be addressed, recruiting and supporting the guideline development group, facilitating the liaison between the JRCALC committee and NASMeD, ensuring that new guidelines are signed off by NASMeD and providing and maintaining a document control system to ensure governance. AACE will also be responsible for the publication of the new guideline material and any commercial innovations required to fund guideline development.

Identification of clinical priorities

It is proposed that NASMeD (National Ambulance Service Medical Directors) and the ALPG (Ambulance Lead Paramedic Group) identify both those clinical guidelines which need updating and clinical conditions which need a specific guideline developing for. By utilising these two groups clinical topics would be identified through the monitoring of serious incidents within individual Trusts, preventing future death directives issued by coroners and national service reconfiguration e.g. the move to major trauma centres and networks. It would also enable the update process to be linked to the NASMeD strategy document thus meeting the present and future demands of Ambulance Trusts and their patients. In addition the JRCALC committee will be able to provide their expertise and perform a horizon scanning role to ensure that the guidelines capture latest practice innovations.

The Guideline Development Group

It is proposed that the structure of the Guideline Development Group is redefined to become a small focused group that recruited for the specific guideline under development. Each group would consist of a chair and a small number of members who would be expert advisors and would be drawn from expert representatives from the JRCALC committee (or other clinicians with specialist knowledge of the subject matter nominated by them) practicing ambulance paramedics, and academic experts as appropriate. The group would be responsible for reviewing the current evidence base and formulating a best practice guideline suitable for use by UK Ambulance Services.

Supporting Infrastructure

AACE will provide each guideline development group with access to a software system for content and document control. This will guarantee that a robust audit trail of guideline development will exist, document control will be maintained and time lines for publication will be appropriately managed. The software system will enable each new guideline to be developed using the same methodology and constructed around a common template that will ensure a consistent layout across all content.

Clinical sign off

All clinical guidelines developed through this process must be signed off by NASMeD before they can be released for publication. This process will be facilitated by AACE and audited using the software system. If NASMeD require further improvement of a proposed new guideline before it can be signed off it will be returned to the particular guideline development group for enhancement. Following sign off by NASMeD the new guideline can be released for publication.

Publication

It is proposed that any updated guidelines or new guidelines are to be produced in both a paper and electronic format. Additionally the current guidelines will be moved into an electronic format. A physical publication will be made available and it will consist of both new and updated material. AACE will explore commercial opportunities to fund this format which will run until the end of 2015. From 2016 onwards the guidelines will be held solely in an electronic format and AACE will develop a system with commercial publishers that will provide a subscription service that will allow access to the guidelines via the internet across multiple platforms. This will enable updates to be instant, reduce the cost of publication and by using a web based system the possibility of copyright infringement can be reduced as much as possible. In 2016 AACE will also produce a new physical version of the pocket book and it is proposed that the pocket book is updated every two years.

