ELEMENTS OF SUCCESS FOR AN EVIDENCE-BASED GUIDELINE AND CLINICAL QUALITY IMPROVEMENT PROJECT: Kaiser Permanente Hawaii (KPHI): Prevention of Venous Thromboemobolism (VTE) in Total Hip and Total Knee Replacement

Conversation with Karen Ching MD, EBM Director & Nephrologist
Kaiser Permanente Hawaii
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Karen Ching MD
...short story... EBM director & nephrologist

Delfini: Can you provide a little background about the project? Why it was started, etc.

Karen: The VTE prophylaxis project was started because there was so much variation in way VTE prophylaxis was administered, even within a department of a single hospital. This variation and controversy was in part fueled by a body of medical evidence that does not provide conclusive answers. Kaiser Permanente Hawaii supports a culture of evidence-based practice where the best evidence from the medical literature, along with clinical judgment and patient preferences, help guide decision-making. This project was a perfect opportunity to gather surgeons, hospitalists and allied health personnel in a room to go through the work of reviewing the evidence collaboratively and in detail. The common goal was to make an evidence-based guideline that everyone could endorse. It also was a terrific educational opportunity to teach evidence-based medicine principles and to illustrate that even published guidelines on this subject have pitfalls.

Delfini: What are some of the potential barriers to doing this kind of work and what are some ways to address them?

Karen: This project had been proposed in our institution in years past, but it had been difficult to get the key players together to even discuss the issues. Institutional readiness as well as recruiting engaged participants are very important. It took persistence as well as the support of leadership, particularly Dr. Grant Okawa, to provide time for the participants to work on the project. Having Dr. Okawa communicate his support was very important since schedules are very full, and his support would have helped to highlight that this work is a priority, resulting in accommodations being made for their time.

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Delfini: This was such a successful project. What made things work?

Karen: This was an important project, and it was successful because each of the members of the workgroup was engaged in the process and participated fully. It was also helpful to have group leaders representing orthopedic surgery and hospital medicine to represent differing viewpoints. It was also successful because we were able to overcome the barriers we mentioned earlier with the right support. It also can be intimidating to approach a vast body of medical literature, especially one that is controversial. Having facilitators like you, Mike and Sheri, really made the difference; you did an incredible amount of work behind the scenes. You guided the group through the process and made the work of EBM easy and fun.

Delfini: Do you have advice for how to deal with participants who may have some reluctance in being involved?

Karen: I think a frank approach, trying to address some of the underlying reasons for not participating may be helpful. It might be an issue of time or accountability.

Once the workgroup gets underway and discussion on the topics that are important to the participant, I think that the hesitation fades. Each person has a voice in how the guidelines are made.

Delfini: What are your plans for implementation?

Karen: The guideline has been endorsed by the hospital Quality Committee as well as the Pharmacy and Therapeutics Committee. We are in the process of developing an order set based on the VTE guidelines. This order set will be incorporated into the electronic medical record for inpatient use. There will also be regional grand rounds on this topic to be presented jointly by orthopedic surgery (Dr. Rob Shin) and hospital medicine (Dr. Zamir Moen).

Delfini: What advice would you give to medical leaders who are interested in doing a similar kind of project?

Karen: This project was an important investment to our institution. At the most fundamental level, the project encourages evidence-based practice and thinking. For the hospital, it means a focus on quality and patient-related outcomes.