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A national multidisciplinary guideline programme for youth care: prioritization, methodology and implementation

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Background: In 2009, several stakeholders (professionals, clients, government) started with the set up of a national multidisciplinary guideline plan for youth care in The Netherlands. Before starting with the development of guidelines, the parties organised several focus groups who decided on a methodology for prioritization of topics, the methodology of guideline development and maximal enhancement of the implementation of the guidelines to be developed. Professionals, clients, scientists and guideline developers participated in the focus groups and additionally a literature study was carried. The area of youth care is on the one hand characterized by significant variation in the approach between professionals, so guidelines can be an effective instrument to decrease this variation. On the other hand, youth care relies mainly on a long history of diagnosing and treatments for which there is little scientific evidence. This raises questions about which guideline methodology should be used and which innovative elements are to be integrated in national guideline development program for youth care.

Main goal: To discuss the approach and principles, including the prioritization of topics, the methodology of guideline development and implementation, of setting up a national multidisciplinary guideline programme for an area in which high quality studies are scarce.

Description: This area is characterized by significant practice variation between professionals. Guidelines can be an effective instrument to reduce variation and to promote a uniform approach. A challenging aspect is to deal with little scientific evidence, which raises questions about which guideline methodology should be used. Participants' input will be used to further shape the multidisciplinary guideline programme for youth care in The Netherlands.

Target group: Guideline developers, patient representatives, policy makers, healthcare managers and payers