GLIA

The GuideLine Implementability Appraisal is an instrument designed to identify obstacles to successful implementation of guideline recommendations [7]. It focuses on intrinsic impediments to implementability, i.e., those within the purview of the guideline authors. In addition to several items applicable to the guideline as a whole, GLIA explores nine dimensions of implementability that are related to individual guideline recommendations:

- Executability (exactly what to do)
- Decidability (precisely under what conditions, e.g., age, gender, clinical findings, laboratory results, to do something)
- Validity (the degree to which a recommendation reflects the intent of the developer and the strength of evidence)
- Flexibility (the degree to which a recommendation permits interpretation and allows for alternatives in its execution)
- Effect on the process of care (the degree to which a recommendation impacts upon the usual workflow in a typical care setting)
- Measurability (the degree to which the guideline identifies markers or endpoints to track the effects of implementation of a recommendation)
- Novelty/innovation (the degree to which a recommendation proposes behaviors considered unconventional by clinicians or patients)
- Computability (the ease with which a recommendation can be operationalized in an electronic information system; it is only applicable when an electronic implementation is planned)

Recommendations that do not pass criteria for decidability and executability will not be implementable until these deficiencies are addressed. The GLIA instrument was recently revised based on user's critiques and has been published as GLIA v2.0 (available at GEM.med.yale.edu/glia).

| Recommendation rec 3: With term premature rupture of membranes (P 24 to 72 hours for the onset of spontaneous labor. | Project: Project Test ROM), labor may be induce | d at the time of presentation or patients may be observed | d for up to |
|---|--|---|-------------|
| Effect On Process Of Care - the degree to which the recommendate | ion impacts upon the usu | al workflow of a care setting | |
| Question | Appraisal | Comments | |
| 20 Can the recommendation be carried out without substantial disruption in current workflov? | ○ Yes ○ No ○ NA ○ ? ○ Reset | This is a conment | |
| 21 Can the recommendation be pilot tested without substantial resource commitment? For example, buying and installing expensive equipment to comply with a recommendation is not easily reversible. | ● Yes ○ No ○ NA ○ ? ○ Reset | | |
| (Previous Dimension) | revious Recommendation Main Menu A last recommendation | Next Dimension | |

Figure 3. eGLIA appraisal screen showing a recommendation and potential responses.

eGLIA

eGLIA is a web-based version of the GuideLine Implementability Appraisal instrument. eGLIA facilitates the appraisal and reporting of potential obstacles to successful guideline implementation. Guideline appraisers can work efficiently and asynchronously to complete their

appraisals online (see Figure 3). The program then helps to focus discussion on areas of appraiser disagreement, thus increasing the efficiency of the appraisal process (see Figure 4). eGLIA provides reports with several levels of detail that may be useful to a guideline development team prior to its final publication or to an implementation team looking to select a guideline or to understand a priori the obstacles to implementation that are likely to be faced.

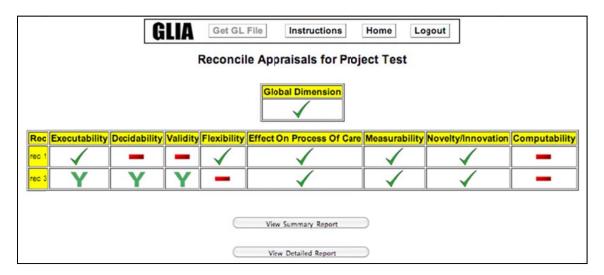


Figure 4. Summary screen for reconciling appraisals where "Y" indicate items on which all appraisers agreed, dashes indicate items on which appraisers disagreed, and checkmarks indicate items on which appraisers initially disagreed but reconciled after discussion. Clicking on cells in this matrix takes the user to a screen that displays details about individual appraisals.