Abstracts

professionals and guideline developers; 6. Processing results and preparation of field tests: sorting, selection and reduction of instruments for domains and concepts by using the framework and criteria for feasibility and use in daily practice; 7. Implementation- and dissemination planning.

Results A Conceptual framework based on the structure of clinical reasoning and International Classification of Functioning. An inventory of domains that are relevant for physiotherapy and feasibility criteria for the selection of instruments. A guide for the selection and reduction of recommended instruments in guidelines and use in daily practice.

Conclusions The framework gives professionals and guideline developers the same structure and a clearer understanding about the selection of instruments for daily practice. It helps professionals to learn when to use which instrument for what patient.

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ISCHEMIC STROKE: THROUGH ADAPTED CLINICAL GUIDELINE TO LOCAL CLINICAL PROTOCOLS

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Background The health care system of Ukraine required improvement in treatment of stroke patients based on evidence present in GIN.

Objectives To compare Ukrainian treatment practices with the best strategies for stroke management and to improve quality of health care on the basis of the identified differences.

Methods Multidisciplinary working group has prepared adapted guidelines "Modern principles of diagnosis and management of patients with acute ischemic stroke and TIA", "Recommendations for the management of patients with ischemic stroke and TIA", "Rehabilitation, prevention and management of complications and discharge planning in ischemic stroke" with regard of the evidence-based strategies for stroke treatment. Simultaneously, unified clinical protocols of medical care "Ischemic stroke" and "Systemic thrombolysis for stroke" were developed on the basis of the guidelines and then approved by the Ministry of Health of Ukraine in August 2012.

Results There were identified differences in the stroke treatment in Ukraine compared to the best practice, which resulted in amendments to the corresponding regulations in health care. In order to integrate these changes into clinical practice local protocols and critical pathways for management of stroke are developing in all healthcare facilities taking into account peculiarities of the region and available resources of the hospitals.

Discussion Local protocols comprise evidence-based statements which represent the best practice from clinical guidelines from GIN and other databases.

Implications for Guideline Developers/Users Measures enabling changes in existing medical practice are identified to ensure effective treatment of stroke patients within 4.5 hours after symptoms onset.

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REGISTRY OF MEDICAL TECHNOLOGICAL DOCUMENTS FOR SUPPORTING GUIDELINES ACCESSIBILITY

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Background The Ministry of Health of Ukraine has approved the methodology for development of medical and technological documents on the basis of evidence. The first documents on the basis of evidence were developed by multidisciplinary working groups in recent years. We can witness the process of guidelines adaptation and their implementation into health care practice.

Context It is necessary to ensure the availability of new documents for doctors, health care providers, and public. Transparency at all stages of medical and technical documents development is also very important.

Description of Best Practice The website of the registry of medical and technological documents has been created and posted at http://www.dec.gov.ua/mtd/index.html. The website includes: - Adapted clinical guidelines and unified clinical protocols of medical care developed by multidisciplinary working groups; - Draft documents submitted for public discussion; - Information on clinical topics under consideration; - Methodological materials for developers - members of multidisciplinary working groups; - Links to international sources of evidential information. The development of the content of the website continues.

Lessons for Guideline Developers, Adaptors, Implementers, and/ or Users Creating a specialised website that integrates methodological materials, adapted clinical guidelines, unified clinical protocols, and information about the documents under consideration provides accessibility of documents, convenience for users, and improves confidence of professionals and the public in new documents.

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ADOPTING NICE GUIDELINES IN OTHER COUNTRIES

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Background Although NICE guidelines are developed to inform clinical practice in England and Wales, they attract interest from researchers, clinicians and healthcare organisations all over the world. This has generated discourse about whether, and to what degree, recommendations from NICE guidelines are applicable to different countries.

Objectives To consider if NICE recommendations should be adapted for use in other countries in terms of differences in health care systems, values and needs? - To discuss the varying approaches to adopting NICE guidelines and recommendations Methods Using the NICE Intrapartum Care clinical guideline, we will select illustrative examples of recommendations. Factual data and information from one developing country - Islamic Republic of Iran - will be used to evaluate the ease with which these could be implemented. We will consider the Iranian health care setting; economic situation; social values; geographical issues; cultural issues and priority health care policies.

Results We will present the findings in three categories corresponding to the ease with which NICE recommendations can be implemented in another country.

Discussion A focused discussion will centre on - whether adopting NICE guidelines and recommendations outside of England and Wales is feasible - what additional work may be need to carried out to facilitate this process - the ethics of such activity in terms of self-reliance and research capacity.

Implications for Guideline Developers/Users This project will identify areas where existing guidance can be shared across borders thereby reducing duplication of effort; facilitating