

Developing an Evidence-Based Process for Validation of Health Care Practices and Technologies Within a Workers' Compensation Setting

A.

Background

The last decade or so has seen an ever increasing amount of new health technologies (used in the broadest sense to include diagnostics, assessment tools, surgical/medical procedures and various other treatment modalities) being made available to clinicians, patients, governments and various institutions. In response to this, the Workers' Compensation Board of British Columbia has developed, within its' clinical services department a working group devoted to assessing many of these new health care practices and technologies. This is an interdisciplinary group (presently called the Evidence Based Group (EBG). The main outcome to be assessed by the group is that of improved health status or the potential for improved health status of injured workers should the Board accept these new technologies as valid health care practice(s). Recognizing that the Board funds over \$200 million/year on health care related payments and is frequently asked to expand these payments, it is anticipated that this formal, evidence based process will provide a foundation on which to make ongoing decisions regarding health care payments on behalf of injured workers and the employers of the province. The following poster presentation is a synopsis of the groups structure, function and general day to day workings.



B.

WCBofBC's Evidence Based Group

Process to establish The Evidence Based Group (EBG)

- Establish Terms of Reference
 - Steering Committee formation (clinical services, rehabilitation services, compensation services and pension services executives)

Workings/Process flow within the EBG

- Solicitation and Consultation with Internal and External Stakeholders re Potential Health Care Practices/Technologies to be Reviewed
- Prioritization of Topics via Predetermined Algorithm/Selection Criteria
- EBG meets/reviews topics according to Table I and puts forth a list to be presented to Steering Committee
- Steering Committee Approval of prioritized topic(s)

Table 1: Prioritizing Criteria

- determine the number of potential users of health service/technology
- identify potential change in health outcome(s)
- calculate acquisition and operating costs to the health care system within WCB
- determine potential to influence provider and consumer behaviour as a result of a review
- assess availability of accurate information and appropriate resource skills to undertake a review



C.

Nature of Critical Review

Nature of Review to be Undertaken			
Using available WCB resources. i.e. EBG members	Using available WCB resources in conjunction with external resources i.e. BC Office of Health Technology Assessment, University of BC	'Out sourced' review ... (University of British Columbia, VGH, Consultants)	Funding of specific studies

Comprehensive Collection of Information/Literature

- Medical/scientific databases i.e.; Dialogue, PubMed, Embase, Scisearch, etc.
 - existing health practices/health technology reviews (national and international)
 - fugitive or 'gray' literature review when indicated
- Using established techniques of evidence based medicine (Stevens, Mulrow, Cochrane and others)
 - quality of evidence; strength of evidence

Conducted Externally

Critical Appraisal/Topic Analysis

Review Process

- | | |
|---|---|
| a) <u>External</u> scientific review of document
- sent for appropriate 'external' scientific review | b) <u>Internal</u> review of draft document
- sent to all major 'internal' stakeholder/departments |
|---|---|

Reviews Returned to EBG

EBG meets/refines draft document as required)

Steering Committee

- Reviews draft documents
- Discussion re further input (external stakeholders?)

External stakeholder input as required

- Review/refined document after EBG input

Steering Committee Approval

Production, Communication and Dissemination of Document

Internal Stakeholder

External Stakeholder

The above process will undoubtedly be 'topic dependent'. i.e.: an issue with major/significant policy and practice implications would require wider input and dissemination of the product. 'Smaller' issues would likely not have to be as inclusive or widespread in its circulation.

D.

Examples of Completed Reviews

- Extracorporeal Shockwave Therapy for Tendinopathies
- Post operative Rehabilitation Protocols for Rotator Cuff Repairs, Acromioplasty, Meniscectomy, Anterior Cruciate ligament Reconstruction
- Craniosacral Therapy
- Spinal Cord Stimulator Use in Chronic Pain Disorders
- Intramuscular Stimulation
- Pulsed Signal Therapy
- Cryotherapy

Outcomes/Results

To date outcomes achieved have been numerous including:

- Contributions to the literature in the form of published, evidence based reviews.
- Consistency of WCB 'in house' medical advice when addressing a particular topic within our compensation setting
- Reduced health care costs
- Enhanced worker, patient, health care provider and employer knowledge on topics of importance to the WCB.

References:

Stevens A et al. The Advanced Handbook of Methods in Evidence Based Healthcare. Stevens A, Abrams A, et al. Eds. London : SAGE publications. 2001

Mulrow C, Cook C, Eds. Systematic Reviews. Synthesis of Best Evidence for Health Care Decisions. Am.Coll. Phys. Philadelphia, PA. 1998

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