

Best Practice Paper Adaptation Guidance

April 2024

What is a Best Practice paper?

Best Practice Papers (BPPs) are summaries of evidence-based clinical best practice for healthcare professionals, developed by the Royal College of Obstetricians and Gynecologists' (RCOG) Centre for Women's Global Health.

The papers are aimed at service providers delivering healthcare on a daily basis; trainees and medical students; and advocates and policymakers — many of whom have limited time to read full-length guidelines and synthesise the content.

BPPs are generic and designed to be adapted to national country contexts. At the time of writing, the BPPs on abortion care and postabortion care have been adapted in Pakistan, Bangladesh, Kenya, Zambia, Zimbabwe, Rwanda and Nigeria.

There are currently four BPPs on:

- Abortion care
- Post-abortion care
- Telemedicine for abortion
- Post-abortion contraception

The papers are easy to understand, and very helpful. The outlining of key facts in bullet form makes it easy to read the key points when one is busy. The BPP are also not bulky like many guidelines hence easy to carry around.

(Dr Job Daniel Mwanza, Zambia)

Guidelines from the Faculty of Sexual and Reproductive Health, the RCOG, the National Institute for Health and Care Excellence and the World Health Organization were used to inform these BPPs.

Why adapt the paper?

In many countries, policies and guidelines that regulate abortion access are either not available or outdated. Where they do exist, they can be difficult to obtain and hard to use for decision making by service providers and policymakers alike (Johnson BR Jr, 2017). The BPPs are a useful tool to support clinicians to develop tailored, locally relevant clinical guidance. This guidance has the potential to:

- Inform the development of national policy and education programmes.
- Increase healthcare workers' knowledge and confidence in providing abortion and post-abortion care.
- Support educational institutions with the development and delivery of high-quality abortion education.

How can you adapt a Best Practice Paper?

If there is an acknowledged need for a BPP, the initial step would be to identify a lead/s to oversee the review process. Their role would be to edit the text to ensure it meets the requirements Kenya adapted the RCOG Best Practice Paper in CPAC in 2019 and based on the Post Abortion Care Pocket Guide that was developed, the Ministry of Health has also developed the Post Abortion Care Training Package, the Post Abortion Costed Implementation Plan and the Post Abortion Care Standards.

Adaptation of the RCOG
Comprehensive PAC has helped
Kenya to developed Policies,
Standards and Guidelines on
Post Abortion Care and now
we are using the developed
training materials to train service
providers in the public Health
Sector.

(John Nyamu, Kenya, 2021)

of their national laws, and remove any text not relevant to their context; for example, female condoms are not available in Pakistan therefore they would not be referenced in their adaptation. It is recommended that early in the process, the lead/s make contact with the Ministry of Health in their country to discuss the BPP adaptation and gain early ministerial endorsement. This will aid the process towards official ministerial validation of the adapted paper where appropriate. In addition, lead/s should also seek consensus from other relevant stakeholders, such as the OBGYN society, technical working groups, NGOs, etc., to encourage local ownership and aid dissemination. Please note that use of RCOG branding (co-badging) is only possible if the RCOG is involved from the beginning of the adaptation process.

A set of recommendations for adapting BPPs have been collated from the evaluation of the adaptation process in Zambia, Zimbabwe, Kenya, Pakistan and Bangladesh, and from the RCOG <u>Development of RCOG Green-Top Guidelines</u>: Consensus Methods for Adaption of Green-Top Guidelines (2010).

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Initiation stage

When you are thinking about adapting a BPP, it is useful to think through the questions outlined in the flowchart below:

Determine the need for adaptation

Consider the questions below:

- Is the topic of sufficient importance to the local setting?
- Is there evidence that actual care is at variance with evidence about appropriate care?
- Do up-to-date, locally valid guidelines already exist?
- Is there an adequate body of research about the topic concerned (in particular about the local situation)?



Lead Best Practice Paper Champion is identified

Lead Champion should have:

- Existing good relationships with key stakeholders within government
- The time and motivation to work on the paper independently
- Understand and follow the correct protocol both in regards to working with government, as well as local and international organisations.



ldentify stakeholder Group

Between 6 and 12 stakeholders is optimal to build consensus around the guideline. These should include:

- Those who are up to date with published evidence and have experience in writing clinical guidelines
- Those who can share experiences in service delivery
- Those impacted by the paper, including service users
- Those who can influence its implementation and who have the authority to approve the Paper
- The RCOG will need to be consulted from the outset if you intent to co-badge the adapted BPP.

Development stage

When you are at the development stage, it is useful to think through the questions outlined in the flowchart below:

Identify areas that require amendments

- Amend paper to develop first draft to present to stakeholder group/ government officials
- Identify available intervention options based on available resources, legal framework and expertise



Participatory consultation process

- Design an approach that works in your context in regards to who is involved, the timing of their involvement, how drafts are shared and feedback is gathered and how often stakeholders meet
- Identify the most likely barriers to implementation across all levels of the healthcare system and seek the best fit between barriers and best practice interventions



Stakeholder meetings

- Different approaches can be utilised for the adaptation process, including workshops, small group meetings, steering committees, email, virtual meetings etc.
- Seek resources for implementation and build buy in and partnerships for implementation and dissemination of the guidance through stakeholder meetings

Completion

When you are finalising your BPP adaptation, it is useful to think through the steps outlined in the flowchart below:

Peer review

- Send adopted version for peer review with wider stakeholders this could include: National OBGYN College, National Nursing and Midwifery College, partner organizations working on reproductive health
- Develop final version



Design and co-badging

- During initial meetings with partners and the MoH you should discuss how the guidance will be branded, for example the MoH logo alone, or logos of partner organisations involved.
- If you would like the RCOG logo to to be added to the paper please get in touch with cfwgh@rcog.org.uk as soon as possible to discuss, co-badging is only possible if the RCOG is involved from the beginning of the adaptation process.



Dissemination

- Develop a dissemination plan, consider the audience of the papers and how best to reach them in your context e.g. at conferences, CPD training, within health facilities, through professional associations, etc.
- Make the paper available online, send to relevant authorities in particular the stakeholders that were involved, and ask partners to put the guidance on their website and to circulate it to their partners.
- · Advocate for inclusion in medical, nursing and midwifery curricula

Call to Action

We encourage you to consider if adaptation of a BPP would be helpful in your country context. Using the best available evidence is a fundamental aspect of providing quality healthcare. Evidence-based, locally adapted and endorsed clinical guidance can provide knowledge and confidence for healthcare providers to improve the quality of their services. If you would like more information about previous adaptations or access to the previous adaptations as reference materials email: cfwgh@rcog.org.uk

We had many different guidelines including WHO, FIGO and Ipas, which were used sporadically. Now they are collated into one, after adapting the BPP we want to use it as a national guideline. (Prof Fawzia Hossain, Bangladesh)



Website: www.rcog.org.uk/global-network

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