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| **GGC LogoNHS Greater Glasgow & Clyde**  **Clinical Guidelines**  **Guidance for Lead Authors/Clinical Leads** |
| Development |
| * Draft guideline as a word document if possible. This is the preferred format for draft guidelines. * Clinical guidelines should conform to the principles outlined in AGREE detailed in the [[NHSGGC Clinical Guideline Framework and Toolkit](https://clinicalguidelines.nhsggc.org.uk/clinical-guideline-toolkit/)](https://clinicalguidelines.nhsggc.org.uk/clinical-guideline-toolkit/) when being developed * Consult with key stakeholders (other clinical experts in specialties guideline is applicable to) * Consider any potential cost implications (include pharmacy if medicine related) * Consult with applicable local level clinical governance groups * Complete relevant sections of the appropriate Clinical Guideline checklist (for new or updated guideline) which can be found on the [[NHSGGC Clinical Guideline Framework and Toolkit](https://clinicalguidelines.nhsggc.org.uk/clinical-guideline-toolkit/)](https://clinicalguidelines.nhsggc.org.uk/clinical-guideline-toolkit/) and email to CGSU with word version of guideline to [ggc.clinical.guidelines@nhs.scot](mailto:ggc.clinical.guidelines@nhs.scot)   Review and Update   * Clinical guidelines should be kept under continuous review particularly to reflect new evidence * The lead author will receive an email to prompt a review of the guideline, approximately 90 days prior to the review date specified * Lead author should consider how the guideline is operating in practice – have there been any adverse events or clinical incidents, and if so, has any learning been considered as part of the update of the guideline * L:ead author should consider whether there is any variation in practice and how this might be addressed by the updated guideline * Lead author should consider whether the updated guideline will have wider implications, and if so, should ensure that any appropriate key stakeholders are made aware of these, and that any other work is progressed. * Lead authors should advise of any changes to clinical advice when guidelines are updated * A more formal review should not exceed 3 years from guideline development * For guidelines which do not require any changes, advise the CGSU of the date for next review * Should the review of a clinical guideline not be concluded prior to the expiry of the current review date, then the lead author will receive an email to advise that the clinical guideline has breached the review date, and asking them to advise of the next steps to be taken. A reporting and escalation framework is in place to highlight to the appropriate clinical governance structures those clinical guidelines which have breached their review date |