Unique Aspects Of GLIDES’ Approach

1. GLIDES works at both ends of the decision support spectrum: knowledge generation activities, as well as CDS implementation. GLIDES has a good deal of practical experience; with processes, tools and methods that are relatively mature.

2. GLIDES is uniquely positioned in its focus on knowledge generation activities (especially guideline development)
   - Collaborating with medical specialty societies and other knowledge generators
   - Developing and using a wizard software tool to assist guideline developers to create more transparent and implementable products

3. GLIDES has considerable experience of practical CDS implementation (at Yale, Nemours, Geisinger and CHOP)
• Developed and implemented complex decision support for management of chronic disease (asthma) and obesity prevention, management of premature infants and low back pain
• Working to understand why decision support doesn’t work in some circumstances
• Recognize critical importance of local factors (e.g., Workflow integration) for successful decision support that may be difficult to solve when knowledge is distributed from a central resource
• Performing qualitative and quantitative evaluation of decision support

4. GLIDES has developed a standardized intermediate knowledge representation for guideline knowledge that is:
• Comprehensive i.e., capable of expressing all the knowledge contained in the guideline, flexible permit modeling at high and low levels of granularity, so that guidelines can be interpreted at different levels of abstraction
• Comprehensible i.e., it should match the stakeholders’ normal problem-solving language and allow domain experts to describe their knowledge with little effort
• Expressively adequate to convey the complexities and nuances of clinical medicine while remaining informationally equivalent to the original guideline
• Sharable across institutions
• Reusable across all phases of the guideline lifecycle
• Includes web-accessible tools to process, manipulate and display guideline knowledge
• With a history of successful use by many investigators.

5. The GLIDES knowledge representation model is proven and mature, with a third iteration of improvements implemented
• GEM III reflects insights and opportunities gleaned from the 50+ publications that reflect substantial experience of using GEM for guideline knowledge transformation
• Working to develop an international outlet from the National Guidelines Clearinghouse to supply parsed guidelines in GEM
• Planning to include meta-data describing implementation factors in upcoming releases

6. Other differentiators
• Focus on health issues affecting an AHRQ-priority population (infants, children, and adolescents) that is often overlooked
• Uniquely enthusiastic collaborators!