

MCI Guideline on Guidelines

The purpose of MCI guidelines is to set goals and define measures of success for QI activities in Mercy Clinics. They will be used to create standards for use across the organization and exist as much for the use of support staff as they do for providers. MCI guidelines are not designed to be used as a comprehensive resource of clinical best practices.

Guidelines may be triggered by:

- The needs of QI projects
- The desire to raise awareness of new issues important to MCI
- Controversy about a clinical issue
- Preventive health care and chronic disease care included in MCI population health management programs.

Format & Process:

- MCI Guidelines will, if at all possible, be limited to one side of one page.
- Guidelines will be approved by the Quality Committee then presented to the Council of Medical Directors for their approval before it becomes finalized as a MCI guideline.

Timeliness

- After a number of years the original reason that a guideline was created often will no longer exist (the issue is no longer new, or may no longer be controversial, or the QI project is completed). In these situations the guideline may be retired without continued updating.
- Guidelines must be reviewed by the quality committee at least every 5 years.
- Those guidelines that are not reviewed within 5 years will become inactive.

Vaccines

- Guidelines will be developed for new vaccines or changes in existing vaccines, especially if they are controversial.
- Once a vaccine is in general use the guideline will be allowed to expire and will be replaced by the standard MCI Immunization Schedule supplemented by the MMWR Immunizations Schedules.
- Vaccines not on the standard schedules may have a guideline on an ad hoc basis at the discretion of the Quality Committee, for example we have a Lyme Disease Vaccine guideline but no guideline for Yellow Fever Vaccine.