



Theme 4: Building Trust in Science and Transforming Health Systems through Guidelines

Mapping the use of clinical guidelines by policymakers: insights and implications

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Policymakers are an important stakeholder group in the development of ACE Clinical Guidances

Priority setting

- Policymakers are invited to submit topics for prioritisation
- ACE's advisory committee includes representatives from Ministry of Health (MOH) services divisions and Chiefs

Identify target audience and scope

Policymakers identified as sponsors advise on target audience and scoping of topic

Develop recommendations

- Inform ACE's considerations of implementation, feasibility, and resource use
- Invitation to observe guideline group meetings +/- regular staff-level meetings if required

Dissemination and implementation

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ACE leaned into coffee chats to understand more...



Informal, in-person conversations (Oct-Nov 2024) with 12 representatives from 6 policy and services divisions were chosen over formal online interviews to encourage a more casual exchange and understand:

1. Reasons for nominating a topic for national clinical guideline development
2. Applications of ACE clinical guidelines

Applications of clinical guidelines reflect a diversity in functions and expected deliverables, where recommendations may or may not be a primary focus

Methods

- Field notes were taken after the coffee chats and coded by one interviewer.
- Topic request submissions from past years were read and coded.
- Two co-authors discussed and agreed on the codes.

Limitations

- Did not reach data saturation
- Limited ability to probe more complex decision making processes

Reasons for submitting guideline topic

- To standardise care
- To upskill primary care providers
- To know what is evidence-based treatment for policy decision making
- To signal national importance of a topic to clinicians



Policymakers

Translation and integration into other references for healthcare professionals (HCPs)

Adapt into clinical protocols, practical guides, or other tools for national disease management programmes

Authoritative reference on best practices

- Adjudicate appropriateness of claims for treatment
- Respond to public enquiries
- Engage with committees on issues in clinical management

Enabler

- *Of national strategies*: List as a knowledge tool to enhance capability of service providers
- *Of coverage decisions*: Support decision to expand subsidies to a chronic disease; set the diagnostic criteria for a condition to be claimable

Other applications

Implementation support: Request for supplementary evidence advisory support to implement the recommendations

Clinical Guideline

Recommendations

Supplementary evidence reviews



Guideline team

As ACE continues to expand its portfolio, the interface with policymakers is expected to increase

- Guideline use can be established and strategic, however in most cases (within a limited but diverse sample), the utility for policy and services work emerged opportunistically.
- Potential issues were identified: lack of awareness about the implication of strength of recommendation, equal weightage of supporting text and recommendations, evolving nature of policy questions.

Tailored engagement with policymakers could be enhanced by...

1. Being flexible to varying needs, expertise, and decision-making processes.

- The recent evidence-to-recommendation (ETR) document published by ACE provides a common starting point for policymakers to overlay additional judgements.

2. Education on the strength of recommendation and other principles of trustworthy guidelines.

- Strength and implications for policymakers more clearly explained in meetings.
- Training sessions on how ACE undertakes the ETR process has been conducted.

3. Improved understanding of the connection to HCPs and patient care through policymakers, which can inform ACE's design of implementation strategies and evaluation of guideline impact.

Thank you



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