# **Guideline appraisal -** an international viewpoint



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## **BACKGROUND**

#### **UK work**

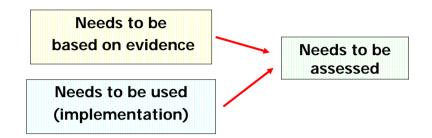
- Appraisal instrument developed and validated in the UK (funded by national R&D Programme)
- Used in the UK, Europe & Canada

#### EU funding

✓ Funding obtained from the 4th Framework of EU Programme for 3 years (1998-2001)

#### WHAT IS A 'GOOD' GUIDELINE?

A 'good' guideline is one that leads to improved outcomes for patients





## PURPOSE OF THE AGREE INSTRUMENT

- ✓ To provide a systematic framework for appraising the quality of clinical guidelines
- ✓ To help *policymakers* decide which guideline to recommend for use in practice
- ✓ To help guideline developers follow a structured and rigorous methodology
- ✓ To help health care providers assess guidelines before adopting recommendations in practice

#### **DEFINITION**

- 'Quality of clinical guidelines' is the confidence that:
- the potential biases of guideline development have been addressed adequately
- the recommendations are both internally and externally valid, and are feasible for practice

#### **DEVELOPMENT PROCESS**

# U U U U U

Subgroup reviews literature

First draft circulated for comments

First workshop, instrument modified

First validation study

Second workshop, instrument revised

Final validation study

#### **AGREE INSTRUMENT**

## Six domains

- > 23 items
- 4-point Likert Scale

Overall assessment

User guide

- 1. Scope & purpose (3)
- 2. Stakeholder involvement (4)
- 3. Rigour of development (7)
- 4. Clarity & presentation (4)
- 5. Applicability (3)
- 6. Editorial independence (2)

## DOMAIN 1. SCOPE AND PURPOSE

- 1. The overall objective(s) of the guideline is(are) specifically described.
- 2. The clinical question(s) covered by the guideline is(are) specifically described.
- 3. The patients to whom the guideline is meant to apply are specifically described.

# DOMAIN 3. RIGOUR OF DEVELOPMENT (1)

- 8. Systematic methods were used to search for evidence.
- 9. The criteria for selecting the evidence are clearly described.
- 10. The methods used for formulating the recommendations are clearly described.
- 11. The health benefits, side effects and risks have been considered in formulating the recommendations.

## DOMAIN 2. STAKEHOLDER INVOLVEMENT

- 4. The guideline development group includes individuals from all the relevant professional groups.
- 5. The patients' views and preferences have been sought.
- 6. The target users of the guideline are clearly defined.
- 7. The guideline has been piloted among target users.

# DOMAIN 3. RIGOUR OF DEVELOPMENT (2)

- 12. There is an explicit link between the recommendations and the supporting evidence.
- 13. The guideline has been externally reviewed by an expert panel prior to publication.
- 14. A procedure for updating the guideline is provided.

## DOMAIN 4. CLARITY AND PRESENTATION

- 15. The recommendations are specific and unambiguous.
- 16. The different options for management of the condition are clearly presented.
- 17. Key recommendations are easily identifiable.
- 18. The guideline is supported with tools for application.

## DOMAIN 6. EDITORIAL INDEPENDENCE

- 22. The guideline is editorially independent from the funding body.
- 23. Conflicts of interest of guideline development members have been recorded.

## DOMAIN 5. APPLICABILITY

- 19. The potential organisational barriers in applying the guideline have been discussed.
- 20. The potential costs implications of applying the recommendations have been considered.
- 21. The guideline presents key review criteria for monitoring and/or audit purposes.

## **RESPONSE SCALE**

Strongly Agree Strongly Disagree

#### **CALCULATING DOMAIN SCORES**

Standardised guideline domain scores are calculated by:

 summing up all the scores of individual items in a domain

#### and

 by standardising the total as a percentage of the maximum possible score for that domain

## **EXAMPLE DOMAIN SCORE (1)**

	Item 1	Item 2	Item 3	Totaal	
Appraiser 1	2	3	3	8	
Appraiser 2	3	3	4	10	
Appraiser 3	2	4	3	9	
Appraiser 4	2	3	4	9	
Total	9	13	14	36	

Max. possible score = 4 (strongly agree) x 3 (items) x 4 (appraisers) = 48

Min. possible score = 1 (strongly disagree) x 3 (items) x 4 (appraisers) = 12

## **EXAMPLE DOMAIN SCORE (2)**

The standardised domain score will be:

obtained score - min. possible score = max. possible score - min. possible score

$$\frac{36-12}{48-12} = \frac{24}{36} = 0.67 \times 100 = 67\%$$

## **OVERALL ASSESSMENT (1)**

Would you recommend these guideline for use in practice?

- Strongly recommend
- ✓ Recommend (with provisos or alterations)
- Would not recommend
- ✓ Unsure

## **OVERALL ASSESSMENT (2)**

- Do not aggregate the six domain scores into a single quality score!
- ✓ Take each appraisal criteria into account
- ✓ Use common sense as well

## **OUTCOMES**

- ✓ The AGREE Instrument has been translated into 10 European languages, Russian, Chinese and Japanese
- ✓ All EU-funded projects requested to assess guidelines with the AGREE Instrument
- The Council of Europe has formally recommended its use
- ✓ WHO has endorsed the AGREE Instrument

#### **CONCLUSIONS AGREE PROJECT**

- AGREE is the first appraisal instrument for clinical guidelines to be developed and tested internationally
- It can be used consistently by a wide range of professionals from different cultural backgrounds
- It can be used to compare quality of guidelines across countries and disease areas.
- It provides standards for reporting of clinical guidelines published in medical journals.