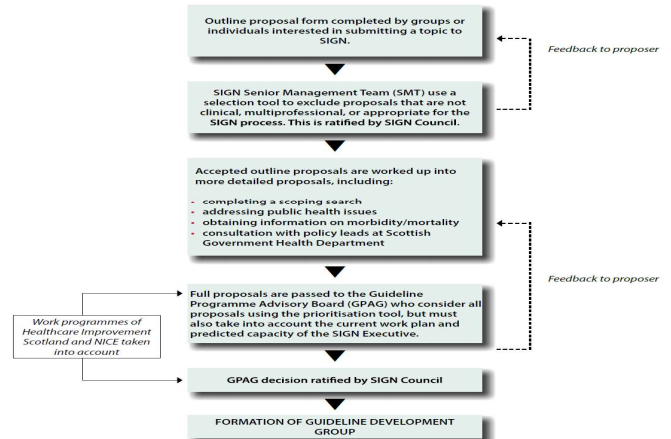# SIGN 50

A guideline developer's handbook

由 **sign 50**部門核可是否能發展指引之流程圖

TOPIC SELECTION PROCESS

- Guidelines International Network (www.g-i-n.net)
- National Guideline Clearinghouse (www.guideline.gov)
- National Institute for Health and Care Excellence guidance (www.nice.org.uk)
- National Institute for Health and Care Excellence Evidence Search (www.evidence.nhs.uk)
- In addition, a search for existing systematic reviews is carried out in the Cochrane Library. This covers the
- reviews produced by the Cochrane Collaboration and the Database of Abstracts of Reviews of Effectiveness
- (DARE).

USING EXISTING GUIDELINES

- There is an existing guideline that addresses some of the questions in a new guideline, or there is a well produced guideline that is now out of date. If the guideline development group can access the original evidence tables used to develop that guideline, these can be updated and reviewed before being used to form the basis for new recommendations. For example, NICE evidence tables were used by the group developing the SIGN obesity guideline.

DEFINING KEY QUESTIONS

- **P**atients or population to which the question applies
- **I**ntervention (or diagnostic test, exposure, risk factor, etc) being considered in relation to these patients
- **C**omparison(s) to be made between those receiving the intervention and another group who do not receivethe intervention
- **O**utcome(s) to be used to establish the size of any effect caused by the intervention

IDENTIFYING AND SELECTING THE EVIDENCE

- systematic reviews
- randomised controlled trials
- observational studies
- diagnostic studies
- economic studies.

Assessing the quality of evidence

- If a reviewer evaluates a guideline using the AGREE instrument they will expect both of these aspects to be clearly addressed. These aspects also need to be addressed properly to comply with the standards set out by the Institute of Medicine.1 As from June 2014, this is also a requirement for all guidelines included in the National Guidelines Clearinghouse database.

EXISTING SYSTEMATIC REVIEW

- Where there are multiple existing reviews, an evidence table summarising the findings of all existing reviews, is provided.
- Consideration of the evidence in relation to different outcomes is considerably simplified if a summary of findings (SoF) table is available

CONSIDERING THE QUALITY OF EVIDENCE

- *SIGN is committed to following the principles of the GRADE methodology which complies with the standards covered in section 5.1. The process for assessing the overall quality of evidence using GRADE, is described in the Journal of Clinical Epidemiology (JCE) series on GRADE.*

Making recommendations

- *The integration of best research evidence with clinical expertise and patient values.*
- This section is based on the Evidence to Decision (EtD) tool developed as part of the DECIDE project, whichis in turn based on the work of the GRADE group.

strong recommendation is made

- the evidence is of high quality estimates of the effect of an intervention are precise (ie there is a high degree of certainty that effectswill be achieved in practice)
- there are few downsides of therapy
- there is a high degree of acceptance among patients

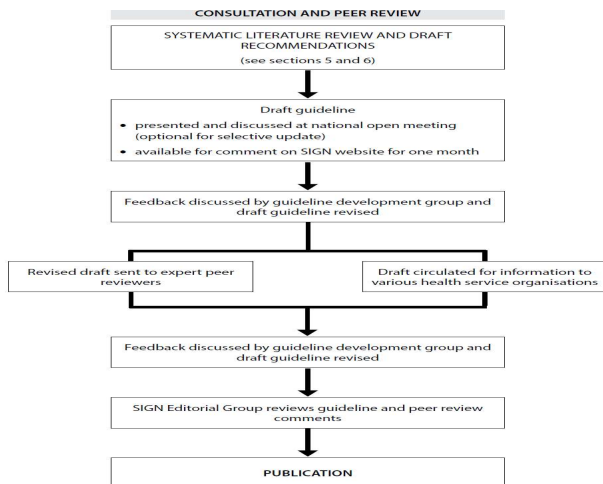## A conditional recommendation is made

- there are weaknesses in the evidence base
- there is a degree of doubt about the size of the effect that can be expected in practice
- there is a need to balance the upsides and downsides of therapy
- there are likely to be varying degrees of acceptance among patients.

BALANCING BENEFITS AND HARMS

- Fundamental to making any recommendation is the need to ensure that any benefit to the patient outweighs, preferably by a substantial margin, any risks or harms associated with the treatment.

Consultation and peer review

- NATIONAL OPEN MEETING
- PEER REVIEW

CONSULTATION AND PEER REVIEW

SYSTEMATIC LITERATURE REVIEW AND DRAFT RECOMMENDATIONS
(see sections 5 and 6)

Draft guideline
- presented and discussed at national open meeting (optional for selective update)
- available for comment on SIGN website for one month

Feedback discussed by guideline development group and draft guideline revised

Revised draft sent to expert peer reviewers

Draft circulated for information to various health service organisations

Feedback discussed by guideline development group and draft guideline revised

SIGN Editorial Group reviews guideline and peer review comments

PUBLICATION

Presentation and publication

- GUIDELINE APP
- PATIENT VERSION

Implementation

- GETTING GUIDELINES INTO PRACTICE
- DISSEMINATION
- IDENTIFYING BARRIERS TO IMPLEMENTATION
- IMPLEMENTATION SUPPORT STRATEGIES

Involving patients and their representatives

- PATIENT INVOLVEMENT IN GUIDELINE DEVELOPMENT
- IDENTIFYING PATIENTS' VIEWS
- PATIENT ORGANISATIONS AND THE SIGN PATIENT NETWORK
- OTHER NHS ORGANISATIONS
- DIRECT FEEDBACK FROM USERS OF THE SERVICE
- PRESENTING THE FINDINGS

National Guideline Clearinghouse

Guideline Syntheses

- Syntheses are systematic comparisons of selected guidelines that address similar topic areas. Key elements of each synthesis include a discussion of areas of agreement and difference, the major recommendations, the corresponding strength of evidence and recommendation rating schemes, and a comparison of guideline methodologies. Also included are the benefits/harms of implementing the guideline recommendations and any associated contraindications.

Guideline Synthesis Template

- A list of guidelines included in the synthesis in alphabetical order by developer. Also provided is the complete bibliographic source of each guideline with a link to the NGC summary.
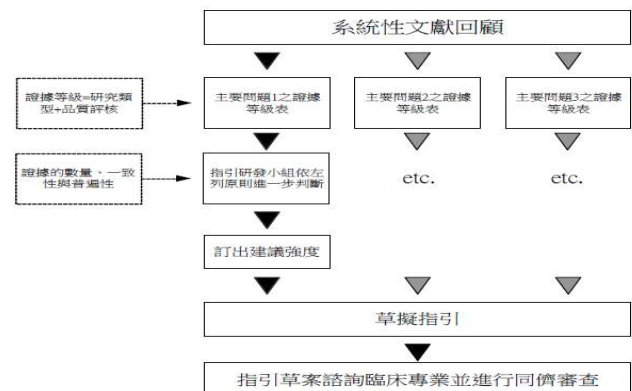
- 經查NGC網頁無特殊介紹指引方法學

國家衛生研究院

臨床診療指引發展手冊

其來源參照SIGN 50

- 指引主題及範圍
- 工作小組
- 草案
- 外部檢核
- 最後草案
- 核定及公布
- 執行意見收集及成效評估

指引建議形成流程圖

如何撰寫臨床指引

- 建構臨床問題
- 搜尋證據
- 臨床評估與建立證據表
- 共識決策程序
- 德菲法共識決策程序
- 醫療經濟學
- 提出建議
- 稽核
- 評估
- 宣傳與執行