



ANNUAL REPORT

October 2006 – August 2007

Guidelines International Network

is a Scottish Guarantee Company, established under Company Number SC243691
and is also a Scottish Charity, recognised under Scottish Charity Number SC034047.

Registered Office: J. & H. Mitchell W.S., 51 Atholl Road, Pitlochry, Perthshire PH16 5BU, Scotland

Administrative Secretariat: Agency for Quality in Medicine, Wegely Str. 3, 10623 Berlin, Germany

G-I-N Members and Partners

August 2007

70 organisations
representing 35 countries



AFRICA

Sudan Evidence-based Association (SEA), SD

AMERICA

Brazilian Medical Association (AMB), BR
Guidelines Advisory Committee (GAC), CA
Québec Government Agency responsible for Health Services and Technology Assessment (AETMIS), CA
National Center for Health Technology Excellence (CENETEC), MX
Agency for Healthcare Research and Quality (AHRQ), US
Center for International Rehabilitation (CIR), US
National Kidney Foundation (NKF), US

ASIA

Hospital Authority, Hong Kong Special Administrative Region (HA), HK
Professional Development and Quality Assurance, Department of Health (PDQA-DoH), HK
Medical Information Network Distribution Service Center, Japan
Council for Quality Healthcare (Minds Center), JP
ZDRAV Plus Project (ZPLUS), KZ
HTA Unit, Ministry of Health, Malaysia (HTA-DoH), MY
Center for Health Policy Research and Development, National Health Research Institutes (NHRI), TW

EUROPE

Vienna Medical Chamber (AEKW), AT
Belgian Centre for Evidence-Based Medicine (CEBAM), BE
Domus Medica; Flemish College of General Practitioners (DM, formerly WVVH), BE
Danish National Board of Health (SST), DK
Estonian Health Insurance Fund (EHIF), EE
Centre for Pharmacotherapy Development (ROHTO), FI
Current Care; Finnish Medical Society DUODECIM, FI
Finnish Office for HTA (FinOHTA), FI
French National Health Authority (HAS formerly ANAES), FR
National Federation of Cancer Centres (FNCLCC), FR
Agency for Quality in Dentistry (ZZQ), DE
Agency for Quality in Medicine (AEZQ/AQuMed), DE
Association of Scientific Medical Societies (AWMF), DE
Berlin Chamber of Physicians (AEKB), DE
German National Institute for Quality Measurement in Health Care (BQS), DE
Federal Joint Committee (GBA), DE
Institute for Quality and Efficiency in Healthcare (IQWiG), DE
The Mental Health Commission (MHC), IE
Italian Evidence-Based Medicine Group (GIMBE), IT
Regional Health Agency Emilia Romagna (ASR), IT
Dutch Association of Comprehensive Cancer Centres (ACCC), NL
Dutch College of General Practitioners (NHG), NL

Dutch Institute for Healthcare Improvement (CBO), NL
Royal Dutch Society for Physical Therapy (KNGF), NL
Trimbos-Inst. - NL Institute of Mental Health & Addiction, NL
Directorate for Health and Social Affairs (SHdir), NO
Agency of Health Technology Assessment in Poland (AHTAPol), PL

Center for EBM, Univ. of Lisbon School of Medicine (CEMBE), PT
Center for Health Policies and Services (CPSS), RO
National Center for Studies in Family Medicine (CNSMF), RO
National School of Public Health and Health Services Management (INCDS), RO
Romanian-Swiss Centre for Health Sector Development (CRED), RO
Slovene Guidelines Group (SSG), SI
Basque Office for HTA (OSTEBA), ES
Catalan Agency for Health Technology Assessment and Research (AATRM), ES
GuíaSalud-Health Sciences Institute of Aragón (IACS), ES
Spanish Network for Research on Guidelines (REDEGUIAS), ES
National Board of Health and Welfare, Socialstyrelsen (SOS), SE
Clinical Epidemiology Centre (CePiC), University Hospital Lausanne, CH
Swiss Federal Office of Public Health (BAG), CH
Swiss Medical Association (FMH), CH
National Institute for Health and Clinical Excellence (NICE), UK
Royal College of Nursing (RCN), UK
Scottish Intercollegiate Guidelines Network (SIGN), UK
Sowerby Centre for Health Informatics at Newcastle (SCHIN), UK

OCEANIA

Joanna Briggs Institute (JBI), AU
Nat. Health & Medical Research Council (NHMRC), AU
National Heart Foundation of Australia (NHFA), AU
Therapeutic Guidelines Ltd, (TGL) AU
NZ Accident Compensation Corporation (ACC), NZ
New Zealand Guidelines Group (NZGG), NZ

INTERNATIONAL

European Region of the World Confederation of Physical Therapy (WCPT)
European Union of Medical Specialists (UEMS)
World Health Organisation (WHO)

G-I-N Partner

AGREE Research Trust (ART)
World Medical Association (WMA)





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Abbreviations

AATRM	Catalan Agency for Health Technology Assessment and Research, ES
ACC	New Zealand Accident Compensation Corporation, NZ
ACCC	Dutch Association of Comprehensive Cancer Centres, NL
AEKB	Berlin Chamber of Physicians, DE
AEKW	Vienna Medical Chamber, AT
AETMIS	Québec Government Agency responsible for Health Services and Technology Assessment
AHRQ	Agency for Healthcare Research and Quality, US
AHTAPol	Agency of Health Technology Assessment in Poland
AMB	Brazilian Medical Association, BR
ART	AGREE Research Trust
AQuMed / AEZQ	Agency for Quality in Medicine, DE
ASR	Regional Health Agency Emilia Romagna, IT
AWMF	Association of Scientific Medical Societies, DE
BAG	Swiss Federal Office of Public Health, CH
BQS	German National Institute for Quality Measurement in Healthcare, DE
CBO	Dutch Institute for Healthcare Improvement, NL
CEBAM	Belgian Centre for Evidence-Based Medicine, BE
CEMBE	Center for EbM, Univ. of Lisbon School of Medicine, PT
CENETEC	National Center for Health Technology Excellence
CePiC	Clinical Epidemiology Centre, University of Lausanne, CH
CIR	Center for International Rehabilitation, US
CNSMF	National Center for Studies in Family Medicine, RO
CPSS	Center for Health Policies and Services, RO
CRED	CRED Foundation - Romanian-Swiss Centre for Health Sector Development
DM	Domus Medica vzw; Flemish College of General Practitioners (formerly WVVH), BE
DUODECIM	Finnish Medical Society, FI
EHIF	Estonian Health Insurance Fund, EE
FINOHTA	Finnish Office for Health Care Technology Assessment, FI
FMH	Swiss Medical Association
FNCLCC	National Federation of Cancer Centres, FR
GAC	Guidelines Advisory Committee, CA
GBA	Federal Joint Committee, DE
GIMBE	Italian Evidence-Based Medicine Group, IT
HA	Hospital Authority, Hong Kong Special Administrative Region
HAS	French National Health Authority (formerly ANAES), FR
HTA-DoH	HTA Unit, Ministry of Health Malaysia, MY
IACS	GuíaSalud-Health Sciences Institute of Aragón
IQWiG	Institute for Quality and Efficiency in Healthcare, DE
JBH	Joanna Briggs Institute, AU
KNGF	Royal Dutch Society for Physical Therapy, NL
MHC	The Mental Health Commission, IE

Minds Center	Medical Information Network Distribution Service Center, Japan Council for Quality Health Care, JP
NHFA	National Heart Foundation of Australia, AU
NHG	Dutch College of General Practitioners, NL
NHMRC	National Health and Medical Research Council, AU
NHRI	Center for Health Policy Research and Development, National Health Research Institutes
NICE	National Institute for Health and Clinical Excellence, UK
NKF	National Kidney Foundation, US
NZGG	New Zealand Guidelines Group, NZ
OSTEBA	Basque Office for Health Technology Assessment, ES
PDQA-DoH	Professional Development and Quality Assurance, Department of Health, HK
RCN	Royal College of Nursing, UK
REDEGUIAS	Spanish Network for Research on Guidelines, ES
ROHTO	Centre for Pharmacotherapy Development, FI
SCHIN	Sowerby Centre for Health Informatics at Newcastle, UK
SEA	Sudan Evidence-Based Association, SD
SGG	Slovene Guidelines Group, SI
SHDIR	Directorate for Health and Social Affairs, NO
SIGN	Scottish Intercollegiate Guidelines Network, UK
SNSPMS	National School of Public Health and Health Services Management, RO
SOS	National Board of Health and Welfare Socialstyrelsen, SE
SST	National Board of Health, DK
TGL	Therapeutic Guidelines Ltd., AU
TRIMBOS	Trimbos-Institute - Netherlands Institute of Mental Health & Addiction, NL
UEMS	European Union of Medical Specialists
WCPT	European Region of the World Confederation of Physical Therapy
WHO	World Health Organisation
WMA	World Medical Association
ZPLUS	Zdrav Plus Project - Kazakhstan, Kyrgyzstan, Uzbekistan, Tajikistan, Turkmenistan
ZZQ	Agency for Quality in Dentistry, DE

Chairpersons' Foreword



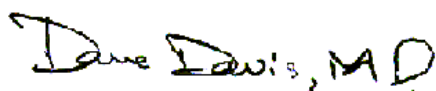
For the most part, annual reports like this one are rather stale, dry documents. They list facts, names of people and organizations, financial matters, some of our broad goals and achievements, among other facts. In many ways, they are like patient records: they show brief, abstracted data from a patient's history or management plan, but they cannot convey the whole patient. Like these charts or health records, G-I-N's annual report for 2007 just shows those things which are measurable and easily recorded, but not the full picture. To be complete, that picture would describe two additional items.

The first of these is the membership of G-I-N. The people of G-I-N, at least in our experiences as Board Chairpersons this year, possess many similar traits – enthusiasm, energy, commitment, and an ability to create and sustain the guideline enterprise nationally and internationally. This is true for virtually every one we have met this year - from the Board, to the Principal Officer, to the members themselves. And it's been a great year.

The second of these is the shared desire to achieve the dual, intertwined mission of G-I-N – to make the Network function better (more collaboration, more communication by vehicles such as the newsletter or communities of practice, increased conference planning, just to name a few) and to devote considerable time and energy to the science of guidelines (by working groups, increasing the capacity of the website and other routes).

And so, colleagues, as you read this report, think of it as just the surface of a growing and energetic enterprise. If you are a member, think about how your work and efforts can be added to that of G-I-N's. If you are not a member, think of joining us. In either event, please use this annual report as a stimulus to enter the guideline movement. You are an important and valued part of that effort.

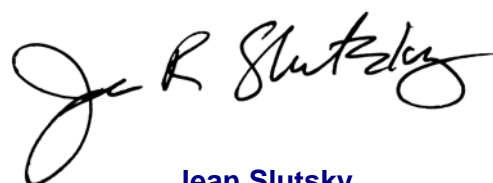
Best wishes,



Dave Davis
Chair



Jako Burgers
Vice-Chair



Jean Slutsky
Vice-Chair

G-I-N Objectives and Aims

The Guidelines International Network is an international not-for-profit association of organisations and individuals involved in clinical practice guidelines. G-I-N seeks to improve the quality of health care by promoting systematic development of clinical practice guidelines and their application into practice, through supporting international collaboration ⁽¹⁾.

The Network aims at:

- promoting the systematic development, dissemination, implementation and evaluation of clinical practice guidelines
- improving and harmonising guideline methodologies
- developing and maintaining an international Guideline Library, enabling the systematic search, comparison and dissemination of clinical practice guidelines from all G-I-N members
- promoting international collaboration in guideline activities and improving coordination with other health care quality initiatives
- support research relating to clinical practice guidelines and to facilitate the implementation of research findings into practice
- organise and promote trans-national project groups, training courses, events and conferences
- preparing and publishing articles on guidelines.

G-I-N Background

Clinical practice guidelines are regarded as powerful tools to achieve effective and efficient health care. Many consider that they bridge the gap between the growing streams of research findings and actual clinical practice. Many countries have built up experience in the development, appraisal, and implementation of guidelines at professional, organisational, regional, and national levels. Active cooperation between national and international guideline organisations could reduce duplication of effort. This could occur with the exchange of existing guidelines, systematic reviews and evidence reports, by joint development of methodology, collaboration in literature searches for revision of guidelines, and organising joint peer review of draft guidelines. This led to a proposal for an international guidelines network built on existing partnerships in 2001. A structured questionnaire was issued in spring 2002 to all known national organisations working in the guideline field. The survey confirmed a strong demand for an international guideline network⁽²⁾. In November 2002 a steering committee agreed the main objectives, areas of interest, and possible working agenda for the network and founded the forum under the name of "Guidelines International Network (G-I-N)". Between December 2002 and March 2003 a total of 37 organisations became founder members of G-I-N. The Network was formally constituted as a Scottish Guarantee Company and recognised as a Scottish charity in February 2003.

By August 2007, 68 organisations representing 35 countries had joined the Network as members or official partners including institutions from Africa, America, Asia, Europe, and Oceania, and WHO.

¹ G-I-N Memorandum and Articles of Association:
www.g-i-n.net/index.cfm?fuseaction=about&fusesubaction=docs&documentID=5

² Ollenschläger G, Marshall C, Qureshi S, Rosenbrand K, Burgers J, Mäkelä M Slutsky J. Improving the Quality of Health care: Using international collaboration to inform guideline programmes - by founding the Guidelines International Network G-I-N. *Qual Saf Health Care* 2004;13:455-460

Membership

Organisational Members

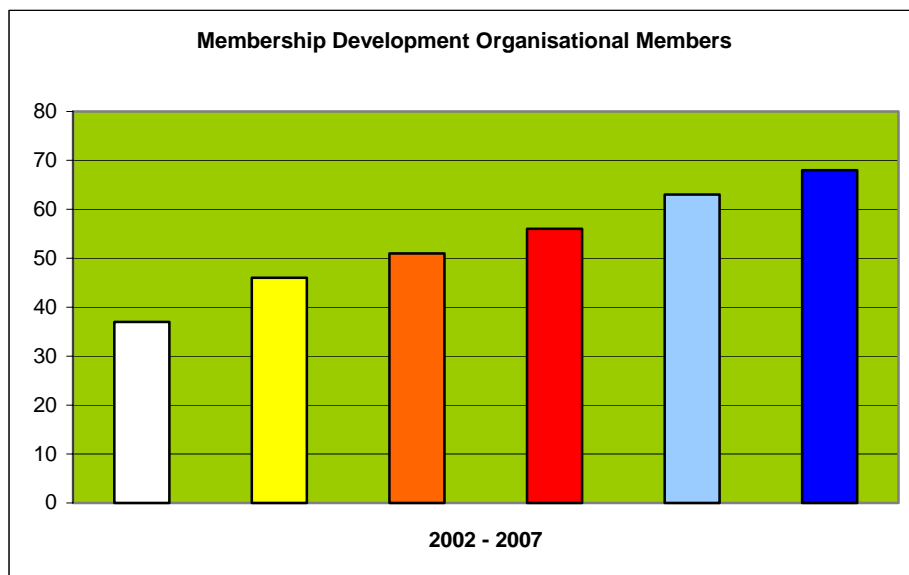
As at August 2007 the Guidelines International Network had 68 **Organisational Members**³:

- Till August 2007, 9 further organisations joined the Network in 2007 (cf Table 1).
- 4 organisations resigned their membership, 1 organisation became an Institute of another organisational member

Table 1: Organisations which joined G-I-N in 2007

Canada	• Québec Government Agency responsible for Health Services and Technology Assessment (AETMIS)
Hong Kong	• Hospital Authority, Hong Kong Special Administrative Region (HA)
Mexico	• National Center for Health Technology Excellence (CENETEC)
Poland	• Agency of Health Technology Assessment in Poland (AHTAPol)
Romania	• CRED Foundation - Romanian-Swiss Centre for Health Sector Development (CRED)
Spain	• GuíaSalud-Health Sciences Institute of Aragón (IACS)
Sudan	• Sudan Evidence-Based Association (SEA)
Taiwan	• Center for Health Policy Research and Development, National Health Research Institutes (NHRI)
International	• European Region of the World Confederation of Physical Therapy (WCPT)

³ **Organisational Members:** Any corporate body or unincorporated association (or equivalent internationally) which is: a non-profit-distributing body or association, involved in developing, disseminating, implementing, or evaluating clinical practice guidelines, or otherwise active in the guidelines field, committed to adopting evidence-based practice as the guiding principle for its processes, working in accordance with international standards for clinical practice guidelines, transparent about its sources of funding.

Chart 1: Organisational Members

Associate Members

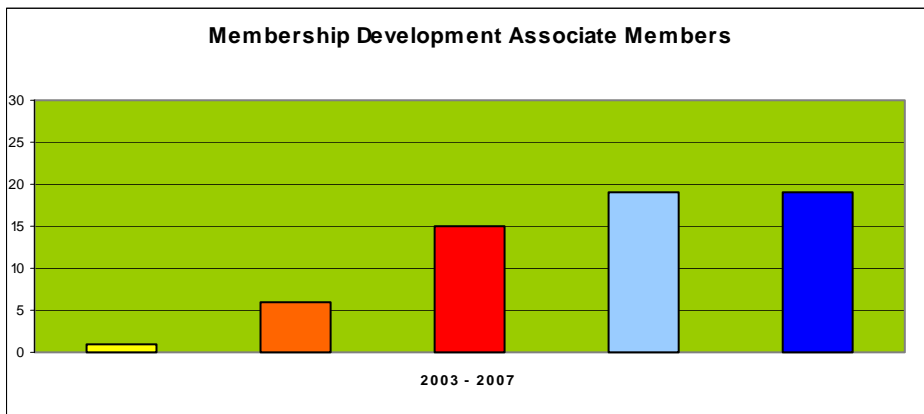
As at August 2007 G-I-N had 19 associate members⁴ from 13 countries, 3 individuals joined the Network in 2007 (cf Table 2), 3 members left the network.

Table 2: Individuals who joined G-I-N in 2007

- Carmel Parnell, IE
- Kelvin Hill, AU
- Karla Soares-Weiser, IL

Chart 2: Associate Members

⁴ Any other corporate body or unincorporated association which does not fulfil the criteria for organisational members and any individual who is active in the field of clinical practice guidelines. Associate Members are not eligible either to stand for election to the Board or to vote.



G-I-N Partners

In 2005, the Board decided to create a new membership category "G-I-N Partner" which is awarded to organisations with a special interest in G-I-N. G-I-N Partners are not members according to the Articles of Association. This partnership aims at a "win-win" situation for both partners, to promote G-I-N among members of the partner organisation and on the other hand this organisation can take profit of the G-I-N expertise.

As at August 2007, G-I-N had established an official partnership with two organisations:

- **AGREE Research Trust (ART)**
- **World Medical Association (WMA)**

More detailed information about the specific aims and goals of these partnerships are available on www.g-i-n.net (search for ART or WMA).

Organisation and Management

Board of Trustees, Executive Committee

The affairs of G-I-N are directed and managed by a Board of Trustees comprising

- up to 12 individual persons elected by the Organisational Members; and
- up to 3 individual persons co-opted by the Board; and
- the Treasurer appointed by the Board; and
- the immediate past Chairman for one year after retiral.

The Executive Committee manages and implements the Board's strategies comprising the Chairperson, Vice-Chairperson, Treasurer, the Principal Officer of the Network and up to 3 Trustees appointed by the Board.

Table 3: G-I-N Board of Trustees 2006-2007

Heather Buchan National Institute of Clinical Studies, AU	
Jako Burgers Dutch Institute for Healthcare Improvement, NL	Vice-Chair, Member of the Executive Committee
Dave Davis Association of American Medical Colleges, US	Chair, Member of the Executive Committee
Regina Kunz Basel Institute for Clinical Epidemiology, CH	
Marjukka Mäkelä Finnish Office for Health Technology Assessment, FI	
Catherine Marshall, NZ Independent Guideline Advisor	Member of the Executive Committee G-I-N Honorary Patron
Najoua Mlika-Cabanne French National Health Authority, FR	Member of the Executive Committee
Günter Ollenschläger Agency for Quality in Medicine, DE	Treasurer, Member of the Executive Committee, G-I-N Honorary Patron
Jean Slutsky Agency for Healthcare Research and Quality, US	Vice-Chair, Member of the Executive Committee
Airton Stein Grupo Hospitalar Conceição, BR	
Sara Twaddle Scottish Intercollegiate Guidelines Network, UK	Member of the Executive Committee
Antonio Vaz Carneiro Center for EBM, University of Lisbon School of Medicine, PT	

The full Board had three teleconferences and a reunion in Vienna (AT) on 8th October 2006. The Executive Committee additionally convened 4 times by telephone conference and had a meeting on 7th February 2007 in Toronto.

Advisory Committee

In 2004 the Board established an Advisory Committee. In 2007 members of the Advisory Committee assisted the Board in arrangements for the G-I-N conference and gave advice on strategic matters.

Table 4: G-I-N Advisory Committee

Minna Kaila MD, PhD	Paediatric Allergologist Chief Physician, Unit of General Practice Pirkanmaa Hospital District, Finland
Richard Shiffman Yale Center for Medical Informatics, US	Associate Director, Yale Center for Medical Information, New Haven, CT Associate Professor of Pediatrics, Yale School of Medicine

Principal Officer

The Network's projects and administration have been co-ordinated by the G-I-N Principal Officer, Dr. Angela Maienborn. Main duties and responsibilities include:

- Overseeing the management and administration of the network
- Building up and maintaining an effective relationship and information management between the existing and prospective members of G-I-N
- Preparing and managing financial issues together with the administrative secretariat and supported by the Treasurer
- Implementation of policies and decisions set or made by the Executive Committee and/or the Board of Trustees
- Preparing, operating and post processing Board/Executive meetings / teleconferences
- Operating elections, annual general meetings, creation of the Annual Report
- Development and improvement of the website (guideline library) together with the webmaster and the website content group
- Support of working groups
- Representing G-I-N at international meetings and negotiations.

G-I-N Office

G-I-N has its Office at the German Agency for Quality in Medicine, Berlin with the Administrative Secretary, Martina Westermann.

Company Secretary, Financial Examiner

The Network has a Company Secretary in Scotland: Colin Liddell, J. & H. Mitchell W.S., 51 Atholl Road, Pitlochry, Perthshire, PH16 5BU, UK.

WALTON KILGOUR, Chartered Accountants, 13 Marshall Place, Perth PH2 8AH, UK have been working as G-I-N's Financial Examiner since 2004.

Activities 2006 - 2007

Between October 2006 and August 2007, the G-I-N Board of Trustees worked on prioritising the Network's issues and projects according to the demands of its membership. In order to clarify the members' requirements, a membership survey was carried out.

Table 5: Priority Issues and Projects for G-I-N 2007

Issues	Projects
Information sharing	<ul style="list-style-type: none"> Maintenance and enhancement of the International Guideline Library (www.g-i-n.net)
Supporting international collaboration	<ul style="list-style-type: none"> Promotion of international networking between organisations, research institutions, clearing houses and other agencies producing and using evidence-based medical information (e.g. Cochrane Collaboration, HTA community).
Promoting and strengthening the Network	<ul style="list-style-type: none"> Outreach to new or prospective members Outreach visits to G-I-N members
Collaboration between members	<ul style="list-style-type: none"> Sharing evidence review work Sharing implementation and audit tools
Education on guideline methodology and use	<ul style="list-style-type: none"> Promoting development and use of evidence based guidelines Advising on adaptation of existing guidelines

Membership Survey 2007

In 2004 the G-I-N Board decided to perform a yearly survey to gather the expectations and opinions of G-I-N members. This year a specific survey concerning the G-I-N website was carried out during April/May 2007. The regular membership survey is planned for the end of August to provide a better opportunity for the Board to take up suggestions from members for the yearly planning.

G-I-N Website

G-I-N being primarily a virtual network, the website www.g-i-n.net (cf. Table 6) is the key tool supporting most of the Network's activities and communication.

In May 2007 Guidelines International Network www.g-i-n.net was awarded the Health on the Net Foundation's HON accreditation. The website proved to meet several criteria and agreed to follow the principles of HON. The HON code of conduct was developed by the Health on the Net Foundation, a leading organization promoting and guiding the ethical deployment of useful and reliable online medical and health information, and its appropriate and efficient use.

Table 6: Contents of www.g-i-n.net (for members only parts are *italicized*)

Homepage	
<i>Your Profile</i>	<i>Organisation Short Profile</i> <i>Organisation Full Profile</i> <i>Organisation Contacts</i> <i>Organisation Programmes</i>
Welcome	
About G-I-N	G-I-N Activities Organisation & Management Board of Trustees Memorandum & Articles G-I-N History Join G-I-N! Link to our Website
Membership	Become a G-I-N member List all members Search for Member Organisations by Location and Activity
News & Events	G-I-N Annual General Meeting 2007 4th G-I-N Conference, Toronto, Canada; August 2007 G-I-N Network Meeting 2008, Helsinki The Engine June 2007 – G-I-N Newsletter News from G-I-N Members G-I-N Newsletter Meetings and Events G-I-N Conference Archive
International Guideline Library	<i>Guideline Tools Inventory (New)</i> Development & Training Resources Health Topics Collection Patient and Consumer Resources
FAQS	
Related Links	
Website Updates	
Site Search	
Contact Us	Contact Form Technical Contact Form Website Feedback Form
Join G-I-N! Membership Campaign 2007	

The cornerstone of the website is the G-I-N International Guideline Library - a searchable database which provides G-I-N Members with the ability to search and review the programmes for published and planned guidelines, systematic reviews, evidence reports, guideline clearing reports of all member organisations, as well as related documents (e.g., evidence tables, search strategies, patient information) – (cf. Table 7).

Table 7: Categories for Information on Guidelines from G-I-N Members

<ul style="list-style-type: none"> • Publication Title and URL • Disease / Condition addressed (based on the National Library of Medicine's (NLM) Medical Subject Headings (Mesh) classification.) • Date of Publication • Languages published in • Publication Scope (Screening, Prevention, Assessment / Diagnosis, Management, Rehabilitation) • Publication Status (published, in development, planned, under review) • Publication Type (Guideline, Systematic Review, Evidence Report, Guideline Clearing Report, Guideline Methodology, Implementation Tool) • Organisation producing publication • Countries that the publication applied to • Planned Review • Date of Review • Primary Contact • Associated Documents, Terms of reference, Key questions, Group membership, Search strategy, Critical appraisal documents, Evidence tables, Algorithms, Consultative drafts, Consumer resources, Considered judgement forms, Implementation tools and/or strategies, Economic analysis, Methodology description, including selection criteria, Video clips, Power Point presentations, Electronic tools / quizzes, Summary Document(s), Other, e.g. indicators, remit, press releases)
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Between November 2006 and August 2007 the **G-I-N International Guideline Library** has been developed to the largest web-based guideline database worldwide - with a total of about 4,440 items of information (August 2007) from 18 language groups (cf. Table 8).

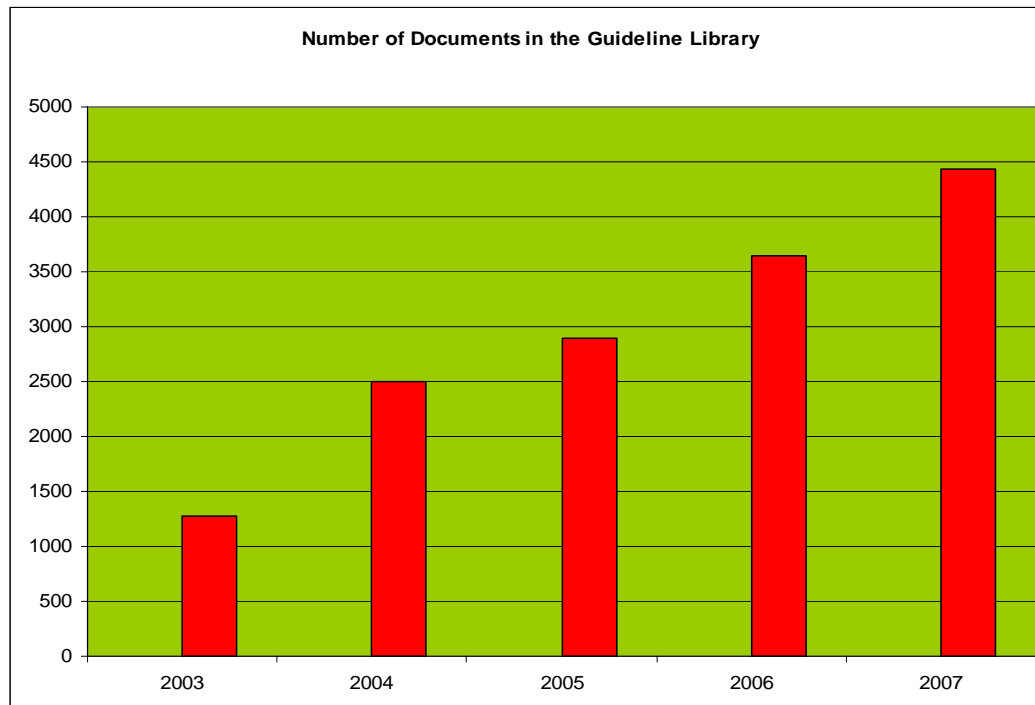
In addition a number of our G-I-N resources have been made freely available to the public - including:

- Guideline Tools Inventory (NEW) – 2 chapters out of 25 are freely available to the public.
- Development & Training Resources
- Patient and Consumer resources from G-I-N Members – assembled into different language collections (Dutch, English, French, German)
- Health Topics Collection with guidelines and other resources from G-I-N members for specific health topics (by August 2007):
 - Nursing (MeSH G02.478)
 - Mood Disorders (MeSH F03.600)
 - Heart Failure, Congestive (MeSH C14.280.434)
 - Myocardial Ischemic Disorders / Myocardial Ischemia (MeSH C14.280.647)
 - Asthma (MeSH C08.381.495.108)
 - Pulmonary Disease, Chronic Obstructive (MeSH C08.381.495.389)
 - Diabetes Mellitus, Type II (MeSH C19.246.300)
 - Back Pain (MeSH C23.888.646.172)

Table 8: Number of items of information in the G-I-N International Guideline Library (by August 2007)

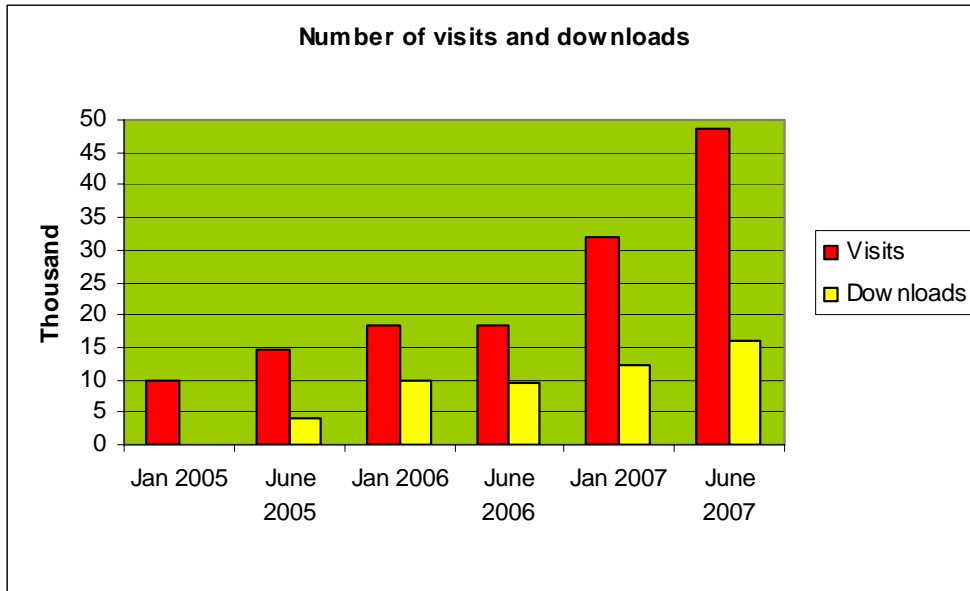
Language	Documents (n)	Language	Documents (n)
Danish	11	Dutch	379
English	2881	Estonian	8
Finnish	135	Flemish	34
French	140	German	466
Italian	22	Moldavian	2
Norwegian	9	Polish	5
Portuguese	154	Romanian	9
Russian	16	Spanish	110
Swedish	16	Turkish	10

Chart 3: Number of documents in the G-I-N International Guideline Library (by August 2007)



From the start of the G-I-N Website in 2003 the number of visits and downloads increased continuously.

Chart 4: G-I-N Website Statistics: Visits and downloads 2005 - 2007



During the last 12 months more than 338,000 unique visitor sessions were recorded and an increasing demand to download documents from the website (cf Chart 5, 6).

Chart 5: G-I-N Website Statistics: Unique visits 2006 - 2007

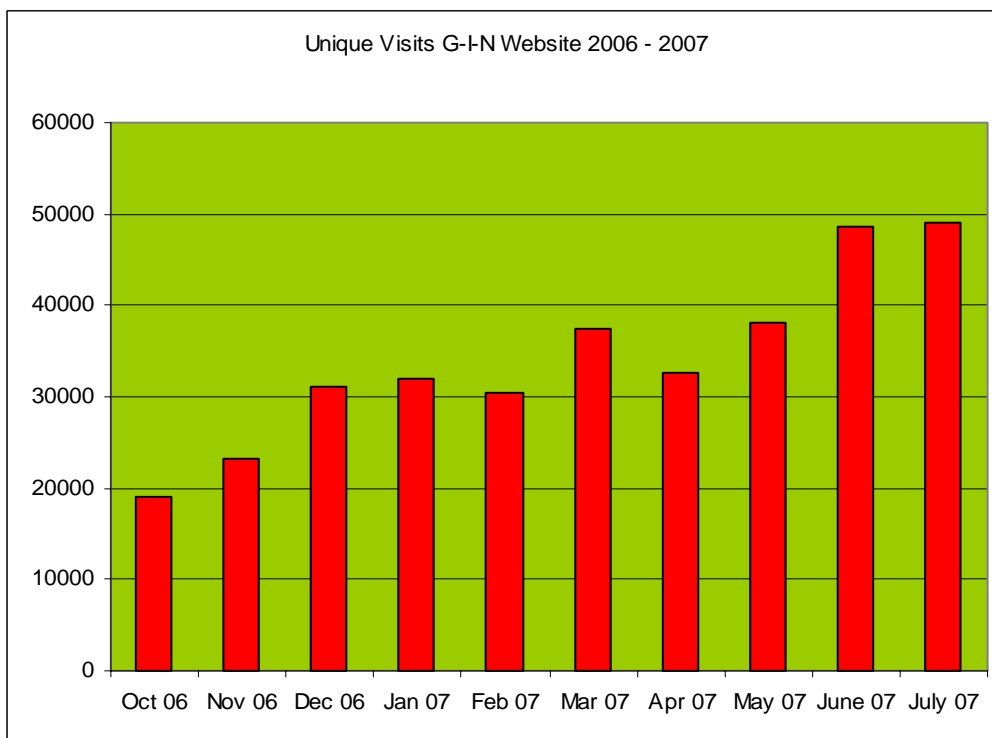


Chart 6: G-I-N Website Statistics: Downloads November 2006 - August 2007

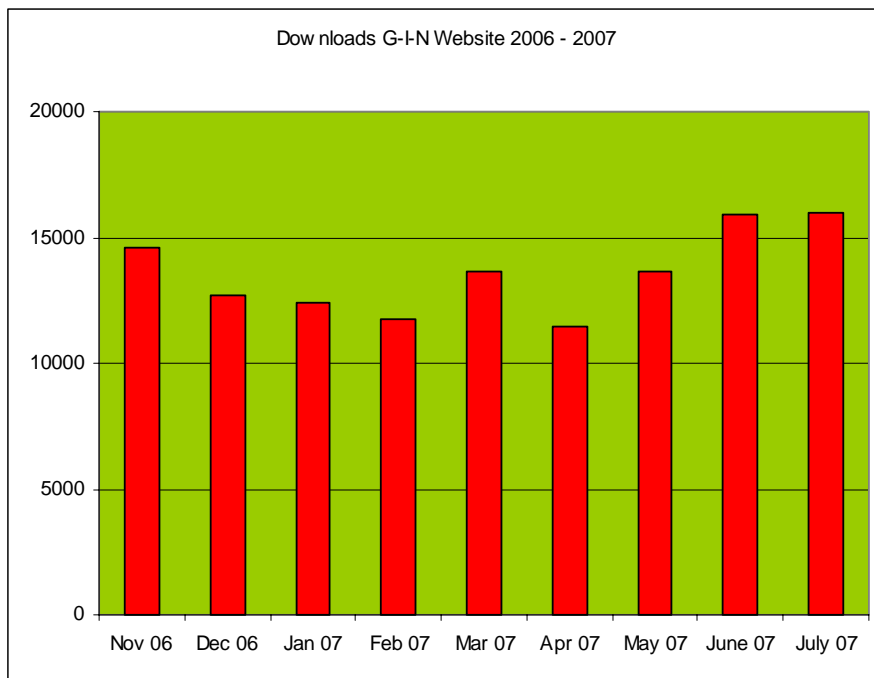
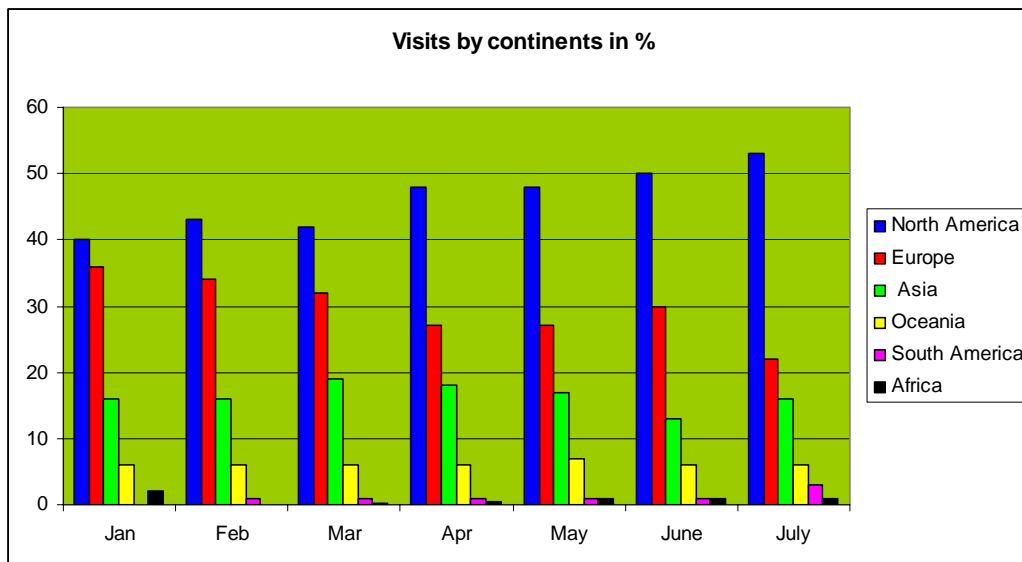


Chart 7: G-I-N Website Statistics: Visits by continents in 2007



Decisions on content and format are prepared by the Network's Website Content / Editorial Steering Group and are approved by the Board of Trustees. From May 2006 till October 2006 Henrike Trapp from the German Agency for Quality in Medicine (AEZQ) in Berlin held the role of G-I-N webmaster who went on parental leave. G-I-N would like to express its deep gratitude to Henrike for her excellent work and

valuable input. From November 2006 control for the G-I-N website content has been taken over by Inga Koenig also from the AEZQ.

ENIGMA Publishing Ltd, Auckland, New Zealand is the technical provider of the G-I-N database.

G-I-N Working Groups

In 2007, the Network continued to support working groups to take forward different aspects of G-I-N's work (cf. Annual Reports 2004 and 2005). Detailed information is also available on the G-I-N website:

<http://www.g-i-n.net/index.cfm?fuseaction=about&fusesubaction=article&documentid=24&articleID=119>.

Evidence Tables Working Group

The aim of the Evidence Tables Working Group is to define a maximum data set that should be included in all evidence tables. This could allow the creation of a database of evaluated studies with data in a consistent format that G-I-N members could use to populate their own evidence tables.

A meeting was held of the working group in Vienna in October 2006 which discussed the findings of the feasibility study of the proposed minimum data set for intervention studies. A final version is now ready for discussion at the workshop at the GIN conference in Toronto. The group's attention is now moving on to considering a draft minimum data set for diagnostic studies. A survey of GIN members has taken place and the results will be discussed at the workshop.

In addition the group has made links with colleagues from INAHTA, which has had a project to look at items to be included in evidence tables. A proposal for intervention, diagnostic and prevention studies was agreed by INAHTA quality assurance group two years ago. It was agreed that working together would be beneficial and to this end an INAHTA representative will present at the workshop in Toronto.

Members of the ETWG are:

- Sara Twaddle, SIGN (UK) Joint Speaker
- Najoua Mlika-Cabanne, HAS (FR) Joint Speaker
- Hans de Beer, CBO (NL)
- Bernard Burnand, CePiC (CH)
- Rob Cook, Bazian (UK)
- Robin Harbour, SIGN (UK)
- Margaret Haugh (FR)
- Stefan Lange IQWIG (DE)
- Michel Laurence, HAS (FR)
- Eeva Ketola, CC (FI)
- Jorma Komulainen, CC (FI)
- Regina Kunz, Basel Institute for Clinical Epidemiology (CH)
- Rick Shiffman, Yale Center for Medical Informatics (US)
- Sadasivan Sivalal, (MY)
- Craig Whittington, National Collaborating Centre for Mental Health (UK)

Nordic Language Group

The Nordic Group of Guidelines International Network organised together with the Finnish Office for Health Technology Assessment and the University of Copenhagen a Nordic invitational workshop "Production and use of clinical guidelines" on Sept 21-22, 2006, in Copenhagen. 50 participants

discussed the methodology and effects of clinical guideline implementation and presented current and ongoing research in the area.

The Nordic Language Group had its yearly meeting during the workshop, and expressed a wish for making it a tradition to arrange a workshop linked to the yearly meeting of the network. Current Care in Finland volunteered to arrange the next workshop in 2008.

Spanish Language Group

This group has maintained a great effort inside the group, not well reflected in GIN or its web site. However, there has been an increase of new GIN members from this language community, and an increase of participants in GIN activities like Annual or Regional meetings and workshops, most of them stimulated from the Spanish GIN Language Group

The Spanish Language Group has developed 2 main activities:

- 1.- Maintenance of the IBEROAMERICAN- CPG NETWORK
- 2.- Contribution to the initiative of the NHS Guidelines Program in Spain

1.- The IBEROAMERICAN NETWORK hold a meeting in Havana, by December 2006

There were people from 12 countries and OPS.

The main activities of the network were.

- Progress in 2 cooperative surveys were reviewed
- A comparative study of Guidelines quality across Latin America
- A Cooperative methodology for a formal translation of CPG related tools from English to Portuguese and Spanish
- Set-up of a group to develop cooperative transnational guidelines. This group is currently considering to develop CPG for tropical diseases prevalent in Latin America.

Courses: Almost 250 health professionals from 18 American countries participated in two on-line courses on AGREE INSTRUMENT and Basic on CPG.

The next meeting will be held on 29-31 October-07 in Cartagena de Indias, Colombia

2.- The Spanish Health Authority started a formal program of national CPG, and commissioned the Regional HTA Agencies to develop it, led by GUIASALUD.

GUIASALUD, a former guidelines clearinghouse, is evolving in the role to accomplish with this charge. GUIASALUD become a new member of GIN, and is currently the main actor on guidelines in Spain, instead of the former network REDEGUIAS.

During the last year two hits must be highlighted:

A common methodological instructions on CPG development have been approved by the Health Authority in Spain (Now in press). The new standards could be demanded to all professional CPG to be able for public funding.

According with this new standards, twelve National Guidelines are now on development.

Website Content / Editorial Steering Group

The Website Content Group is responsible for the regular review of the website design and maintenance. Members of the Website Content / Editorial Steering Group are:

- Günter Ollenschläger, AEZQ (DE) Interim Speaker since February 2007
- Catherine Marshall, NZGG (NZ) Speaker until February 2007
- Leonie Brunt, NZGG (NZ)
- Håkon Lund, SHdir (NO) (as speaker of the Nordic Language Group)
- Marjukka Mäkelä, FinOHTA (FI)
- Angela Maienborn, G-I-N Principal Officer
- Ignacio Marin, REDEGUIAS (ES) (as speaker of the Spanish Language Group)
- Airon Stein, Grupo Hospitalar Conceição (BR)
- Henrike Trapp /Inga König, AQUmed / AEZQ (DE) Webmaster

The group had two meetings by teleconference in 2007. Major issue was how to implement ideas and enhancements raised by members in the survey and suggestions from an independent review. Work was focussed on reviewing the website concerning its technical functionalities, searching abilities and user friendliness.

Changes performed and new pages on www.g-i-n.net

1. NEW Page: G-I-N Guideline Tools Inventory
2. New Page "Welcome Section"
3. New order of the navigation frame and page structure
4. Re-Order of all fields/columns of the pages "Guideline Library", "Library Updates", "Development and Training resource" to have better search abilities
5. New column "Last Modification" added to the 'Guideline Library' and 'Development and Training' pages
6. Link policy and disclaimer and privacy policy updated
7. Finalising process to fulfil HON criteria

Future plans:

1. Improve the reliability of the mesh indexing in the search function
2. Improve the search function in general. Start with introducing the possibility to add the title in English for all guidelines. Add a Boolean search function.
3. Realise plans for language mirrors starting with Spanish.

The Board would like to express its deep gratitude to all members of the working groups for their dedication and valuable support.

Congresses, Workshops, Meetings

Conferences and workshops are the most important points of contact for members and opportunities to promote the Network. The first three annual congresses (Edinburgh 2003, Wellington 2004, Lyon 2005) have been well attended.

During the reporting period, the Network was represented at several events (cf. Table 12).

• Regional G-I-N Symposium Europe Vienna/Budapest (AT/HU), 9th and 11th October 2006

The joint symposia “Guidelines on the Danube” in Austria and Hungary were organised by Roland Schaffler, evidence.at and Andrea Rita Horvath, University of Szeged. The G-I-N meeting in Vienna provided a frame for the first Austrian guideline symposium. 123 participants from 19 countries attended a lively exchange of views with specialists and health professionals over current conditions and guideline activities in the health systems.

Main topics presented and discussed in Vienna:

- The role of governments, authorities and health care providers in developing guidelines
- Implementation of guidelines
- Medical Decision Making
- Adaptation of guidelines
- Clinical guideline for and from patients
- International Guideline activities

Main topics in Budapest:

- Developing and implementing guidelines
- Adaptation of external guidelines to local/national use
- Consumer involvement in guideline development
- WHO guidelines
- Grading recommendations
- Guidelines and cost-effectiveness

After the G-I-N Regional Symposium the Hungarian TUDOR Network and the Ministry of Health under the auspices of G-I-N and WHO organised a three day G-I-N-WHO Workshop on Guideline Development in Budapest, Hungary. Themes were: Guideline development methods, formulation of recommendations and using guidelines in practice.



Participants G-I-N WHO workshop in Budapest 2006

- **4th G-I-N Conference Toronto (CA), 22nd – 25th August 2007**

The 4th Guidelines International Conference has been organised by the University of Toronto and the Guidelines Advisory Committee, Ontario. The theme is: "Collaboration in Clinical Practice Guidelines" - local, national and international cooperation in synthesizing and applying best evidence. In a changing society with increasing demands for transparency and efficiency, collaboration between relevant stakeholders and organisations is necessary for avoiding duplication of efforts and successful implementation.

The conference includes five plenary sessions with chairs and keynote speakers from different continents, presenting recent experiences and examples with guideline development and implementation in the broader context of the healthcare system in their country. Debate and interaction between the speakers and the audience is stimulated in 15 minutes discussion time after the presentations.

For the parallel sessions, 265 abstracts were received. All abstracts were reviewed by at least two reviewers. Decisions about acceptance and format were taken according to criteria of quality and relevance. This resulted in 251 abstracts accepted in the format of brief presentations (114), lectures (15), workshops (18), thematic discussion sessions (8), networking sessions (5) and posters (90). The brief presentations and lectures were grouped into 26 themes, covering guideline methodology, implementation, evaluation, adaptation, updating, patient involvement, and case studies. In total, 57 different sessions were scheduled.

The conference has more than 400 registrants from more than 30 countries and is expected to repeat the success of previous conferences in Edinburgh (2003), Wellington (2004) and Lyon (2005). With many thanks to the University of Toronto and the Guidelines Advisory Committee for hosting the conference, the Office of Continuing Education & Professional Development for pulling together the program and the exciting social events, and the generous support from our sponsoring Canadian and US agencies.

Table 9: G-I-N Activities 2007 (G-I-N Congresses and national / international workshops presentations on behalf of the Network)

	Country	Activity
February	USA	Chair, participant in the development of evidence-based guidelines regarding CME, the American College of Chest Physicians
	Canada	Joint meeting of the Guidelines Advisory Committee, Ontario and the Ontario Guidelines Collaborative
March	Australia	GLIA training workshop (35 participants) in Melbourne (with Catherine Marshall and Rick Shiffman)
April	USA	Chair, visit to the University of Michigan Health System
May	Scotland	Vice Chair, CoCanCPG First Annual Meeting.
June	USA	Vice Chair, ATS/ERS Integrating and Coordinating in Guideline Development Conference and Workshop: COPD as a case in point.
July	Brazil	Trustee, presentation at International conference on Primary Health Care and address on Clinical Strategies in Primary Health Care. Presentation about GIN's role on the development and implementation of Guidelines
	Singapore	SIGN runs guideline training for Singapore Department of Health
	Malaysia	Guideline Implementation workshop run by the Ministry of Health and WHO in Kuala Lumpur
August	Canada	4 th G-I-N Conference Toronto attended by representatives from more than 20 G-I-N members
November	Taiwan	Vice Chair will attend Asian Pacific Conference on Evidence Base Medicine and Clinical Practice Guidelines.

Strategic Direction

Strategic Considerations - Between Maintenance and Growth

Almost five years after its founding in 2002, G-I-N has outgrown its infancy. More than 70 organisations and a fast growing number of individuals from 36 countries are member of G-I-N. It has built up a tradition of organising successful annual conferences, regional meetings, and workshops, attracting more and more people each year. Professionals working in the field of clinical guidelines share the same interests, face similar problems and feel the same excitement when 'their' guideline has been endorsed, published or successfully implemented. They are happy to communicate their questions, problems and successes with people in the same field. G-I-N facilitates this communication and connects people across the world. It serves as the cement binding together organizations and individuals across very diverse settings around providing the best guidance for clinical care.

Building links with other networks in knowledge implementation and quality improvement

Guidelines are tools for translating research findings into practice. They help to make evidence-based and informed decisions in healthcare - considering pros and cons - and to communicate different options for management with patients explicitly and transparently. They are part of the toolbox needed to improve the quality of healthcare and reduce unnecessary interventions. The production of guidelines is, however, not a goal in itself but should be considered in the context of knowledge implementation and quality improvement. This connects G-I-N with other networks and organizations, bringing together different stakeholders, such as healthcare professionals, policy makers, managers and even information technology experts. Therefore, G-I-N will continue to seek collaboration with networks, organizations, working groups (formal or informal) that are active in the field of summarising research evidence, knowledge translation, health technology assessment, indicator development, performance assessment and patient activation. Whereas clinical guidelines traditionally target doctors, G-I-N will also seek collaboration with organizations of professionals other than clinicians, such as nurses and allied health professionals, promoting the idea of multidisciplinary in health care services.

Supporting harmonisation of guideline methodology and guideline research

As an organization, G-I-N will serve as a facilitator and collaborator on issues that are important to developers and users of guidelines, including managing conflicts of interest, new methodological approaches, addressing co-morbid and complex patients, and harmonization where it makes sense. To ensure effective collaboration between organizations, development of standards and consensus on methodology are needed. Several research working groups are active in harmonising methods and setting standards covering almost all phases of guideline development, such as systematic literature search, appraisal of literature, summarising and grading the evidence, translation of evidence in recommendations and adaptation of recommendations to local context. G-I-N will support all these groups and facilitate the dissemination of their findings through the G-I-N website and G-I-N Newsletter. In addition, it will continue to work on the international guideline database and guideline tools inventory by providing definitions, quality criteria and additional search categories, in close collaboration with the US National Guideline Clearinghouse.

Encouraging links and discussion between member organisations and individual members

In 2007, G-I-N started with setting up communities of practice on specific health topics. A pilot on emergency care has recently started, using wiki facilities to encourage discussion. This pilot fits in with our ambition to connect people with similar interests and to explore the usefulness of communication tools other than email to support discussion in an easy and user-friendly way. G-I-N will evaluate the use of wiki and look forward to learning about member's experiences. Other topics of interest for communities of practice are for instance primary care, diabetes care and safety. We will continue exploring the needs of our members to exchange knowledge and experiences on certain health topics. Furthermore, we will continue providing a forum for special interest groups in different languages and exploring the possibility of creating mirror websites in more than one language. Close collaboration will be sought with existing guideline networks such as the Spanish-Iberian Guidelines Network.

Finally, G-I-N is always open for any other suggestions from our members on how the network can best realise its mission, i.e. improving the quality of health care by clinical practice guidelines and their application into practice. G-I-N greatly appreciates your support and involvement and looks forward to many years of continued collaboration.

Jako Burgers & Jean Slutsky, Vice-Chairs of G-I-N

Finances

1. Financial Report 2006

(The following is an extract of the Financial Statements by the independent financial examiner Walton Kilgour, the complete report is attached at the end of the Annual Report).

The charity has no recognised gains or losses other than the results for the year as set out above. All of the activities of the charity are classed as continuing.

Statement of Financial Activities - Period from 1 April 2006 to 31 March 2007

INCOMING RESOURCES		Euro
Incoming Resources from generating funds:		
Voluntary Income		172,772
TOTAL INCOMING RESOURCES		172,772
RESOURCES EXPENDED		
Costs of generating funds:		
Costs of generating voluntary income		(38,965)
Governance costs		(138,790)
TOTAL RESOURCES EXPENDED		(177,755)
NET OUTGOING RESOURCES FOR THE YEAR		(4,983)
Total funds brought forward		7,024
Total funds carried forward		2,041

2. Budget Financial Year 2007

version number: 07.2



updated: 30.01.2007
 prepared by: PAO, Treasurer
 date of approval: 12 March 2007
 approved by: Board

Budget 1.04.2007 till 31.03.2008 (financial year 2007)		
		EUR
	I. costs	
1.	Fees	
	1a) Principal Administration Officer	59.000
	1b) Admin. Secretariat	30.000
	1c) Webmaster	13.500
	1d) Office Secret. Scotl. / Fin. Controlling	5.500
2.	Website develop., maintenance	14.000
3.	G-I-N Annual Congress	0
4.	G-I-N Working groups	1.000
5.	Administration	4.500
6.	Annual report	2.000
7.	Travel expenses	17.000
8.	Promotion/Representation	2.000
9.	Conferences	2.500
10.	Provision for investments 2008	8.000
11.	Bank Costs	500
12.	Other Costs	150
	total costs	159.650
	II. income	
1.	Organisational Member Fee	145.000
2.	Associate Member Fee	3.500
3.	Interest	150
4.	Opening balance (from 2006)	6.000
5.	Sponsorship	0
6.	G-I-N Annual Congress	5.000
7.	Other income	0
	total income	159.650
	balance income/costs	0

Board of Trustees 2006-2007

Dave Davis (US)	Association of American Medical Colleges <u>Chair, Member of the Executive Committee</u>
Jako Burgers (NL)	Dutch Institute for Healthcare Improvement <u>Vice Chair, Member of the Executive Committee</u>
Jean Slutsky (US)	US Agency for Healthcare Research and Quality <u>Vice Chair, Member of the Executive Committee</u>
Heather Buchan (AU)	National Institute of Clinical Studies
Regina Kunz (CH)	Basel Institute for Clinical Epidemiology
Marjukka Mäkelä (FI)	Finnish Office for Health Technology Assessment
Catherine Marshall (NZ)	Independent Guideline Advisor <u>Member of the Executive Committee</u> G-I-N Honorary Patron
Najoua Mlika-Cabanne (FR)	French National Health Authority
Günter Ollenschläger (DE)	Agency for Quality in Medicine <u>Treasurer, Member of the Executive Committee</u> G-I-N Honorary Patron
Airton Stein (BR)	Grupo Hospitalar Conceição
Sara Twaddle (UK)	Scottish Intercollegiate Guidelines Network <u>Member of the Executive Committee</u>
Antonio Vaz Carneiro (PT)	Center for EBM, University of Lisbon School of Medicine, PT

All members of the Board of Trustees signed a declaration of interest.

COMPANY REGISTRATION NUMBER SC243691

THE GUIDELINES INTERNATIONAL NETWORK
COMPANY LIMITED BY GUARANTEE
FINANCIAL STATEMENTS
FOR THE YEAR ENDED
31 MARCH 2007

Charity Number SC034047

WALTON KILGOUR

Chartered Accountants

13 Marshall Place

Perth

PH2 8AH

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

FINANCIAL STATEMENTS YEAR ENDED 31 MARCH 2007

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Trustees Annual Report	1
Accountants' report on the unaudited accounts	6
Statement of Financial Activities (incorporating the income and expenditure account)	7
Balance sheet	8
Notes to the financial statements	9

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

TRUSTEES ANNUAL REPORT

YEAR ENDED 31 MARCH 2007

The Trustees, who are also directors for the purposes of company law, present their report and the unaudited financial statements of the charity for the year ended 31 March 2007.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered charity name The Guidelines International Network

Charity registration number SC034047

Company registration number SC243691

Registered Office J & H Mitchell, W S
51 Atholl Road
Pitlochry
Perthshire
PH16 5BU

The Trustees

The Trustees who served as Directors of the Guarantee Company and Charity Trustees of the Charity during the period were as follows:

Prof D Davis
Dr J Burgers
Ms J Slutsky
Dr H Buchan
Prof A V Carneiro Appointed 12 October 2006
Dr M Haugh Retired 10 April 2006
Dr R Kunz
Prof M Mäkelä
Ms C A Marshall
Dr N Mlika-Cabanne
Prof G Ollenschläger
Dr R Shiffman Retired 12 October 2006
Dr S Sivalal Retired 12 October 2006
Prof A Stein
Dr S Twaddle

**Company Secretary
and Legal Advisers** J & H Mitchell, W S

Accountants Walton Kilgour
Chartered Accountants
13 Marshall Place
Perth
PH2 8AH

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

TRUSTEES ANNUAL REPORT *(continued)*

YEAR ENDED 31 MARCH 2007

STRUCTURE, GOVERNANCE AND MANAGEMENT

The organisation is a charity and company limited by guarantee registered in Scotland.

OBJECTIVES AND ACTIVITIES

It is the objective of the charity to protect the health of the general public by seeking to improve the quality of healthcare.

ACHIEVEMENTS AND PERFORMANCE AND PLANS FOR FUTURE PERIODS

Guidelines International Network (G-I-N)

Chair's report, 2006-07

2006 has been another year of change. G-I-N has attempted in every way possible to meet the goal of protecting the health of the general public by seeking to improve the quality of healthcare. To do so, G-I-N facilitates collaborative work between guideline organisations, experts and their partners.

To achieve this goal the G-I-N provides services to its members by various means. Here is a short recounting of our activities in 2006-2007.

The website: www.g-i-n.net

International in the extreme, G-I-N is primarily a virtual network. In such a virtual word, the website www.g-i-n.net is the key tool supporting most of the Network's activities and communication.

Our main task in 2006 was to oversee the re-development and improvement of the G-I-N website and to develop methods to allow sharing of resource-intensive systematic reviews and evidence tables.

The cornerstone of the website is the G-I-N International Guideline Library - a searchable database which provides G-I-N Members with the ability to search and review the programs for published and planned guidelines, systematic reviews, evidence reports, guideline clearing reports of all member organisations, as well as related documents. By December 2006, with 4000 resources from 19 language groups, the G-I-N International Guideline Library became the world's largest web-based guideline atabase.

In addition a number of our G-I-N resources have been made freely available to the public - including:

- * Patient and Consumer resources from G-I-N Members - assembled into different language collections (Dutch, English, French, German)
- * Training materials
- * Health Topics Collection with guidelines and other resources from G-I-N members for specific health topics

In spring 2007, G-I-N provided a temporary free access to all G-I-N resources for interested people for four months.

In the last year more than 338,000 unique visitor sessions were recorded and an increasing demand to download documents from the website was registered.

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

TRUSTEES ANNUAL REPORT *(continued)*

YEAR ENDED 31 MARCH 2007

For the next years G-I-N plans to build up the following sections on the G-I-N website:

- * an international glossary of terms and definitions used in the field of guideline development, implementation and evaluation
- * establish a broader collection of training tools from members
- * collect an inventory of Guideline Manuals, providing direct links to methodology and processes used by G-I-N members.
- * establish "communities of interest" for people with shared interest in the implementation of guidelines. See below for more details. The topics will include Type 2 Diabetes, Emergency Care and Cancer.

The Annual General Meeting

The AGM in Vienna 2006 provided the opportunity for members to meet guideline professionals from other member organisations and discuss selected topics. The Chair provided an overview about the activities of the network and the priorities and plans for the next year were presented by the Vice-Chair. The financial issues of the network and the financial statements of the independent financial examiner were discussed by the members. Finally the annual subscriptions were fixed by the members; members used the opportunity to articulate their needs and ideas.

Building on the success of the Vienna meeting, and its predecessors, the G-I-N 2007 meeting in Toronto looks at this stage to be another successful event in the life of G-I-N. It is the 4th Guidelines International Conference, organised by the University of Toronto and the Guidelines Advisory Committee, Ontario.

In 2008 the Annual General meeting will be held in Helsinki, Finland.

Congresses, Workshops, Meetings

While the annual G-I-N conference is the most important point of contact for members and opportunity to meet international experts, in 2005 the Board decided large meetings will take place every other year, while smaller local workshops with an attached network annual meeting take place on alternate years. The first three annual congresses (Edinburgh 2003, Wellington 2004 and Lyon 2005) have been well attended.

* The Regional G-I-N Symposium Asia/Pacific Region was held during the 3rd Annual Meeting of Health Technology Assessment International in July 2006 and consisted of two G-I-N events. A parallel panel session organised by Dr. S. Sivalal, Monash University Malaysia and a satellite symposium: Clinical Practice Guidelines - How can we better implement them?- organised by Prof. A. Pearson from the Joanna Briggs Institute. Both events were attended by over 50 people from Australia, South America, Brazil, Japan, Malaysia, Singapore, Sri Lanka, Jordan, the UK and Mexico.

* The Regional G-I-N Network meeting Europe Vienna/Budapest (AT/HU) October 2006 linked two CPG-symposia open to health professionals interested in CPGs in Vienna, Austria and in Budapest, Hungary.

* After the G-I-N Regional Symposium there was a three day G-I-N-WHO Workshop on Guideline Development organized by the Hungarian TUDOR Network and the Ministry of Health under the auspices of G-I-N and WHO in Budapest, Hungary.

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

TRUSTEES ANNUAL REPORT *(continued)*

YEAR ENDED 31 MARCH 2007

G-I-N Working Groups

Much of the work of G-I-N is done by its members in a variety of 'working groups'. While not a very imaginative name, the interest, enthusiasm and product of these groups is remarkable. Here are some of the working groups' areas of interest:

- * Evidence Tables Working Group
- * Nordic Language Group
- * Spanish Language Group
- * Website Content / Editorial Steering Group

Communicating and working with our members

G-I-N, despite, or perhaps because of its mission - needs active input from its members in order to grow and succeed. In fact, it really is 'all about' its members. We have tried to engage this process in several ways:

*** The annual survey**

This is another way for G-I-N to clarify the members' requirements and how they appraise the current work of G-I-N and rate future priorities for G-I-N. In 2006 40 organisations (66% response rate) participated in the annual member survey. The results of the survey were published on the G-I-N website.

*** The newsletter, the enGINE**

In the reporting period members were informed 6 times about the news and activities of the network by the G-I-Newsletter. For 2007 an new editorial board will take care of the newsletter, now named the enGINE.

*** Future plans**

The major part of our activity in the future - and any achievement of our main mission - can only occur through working together on the following priority areas:

- * Promoting the systematic development, dissemination, implementation and evaluation of clinical practice guidelines
- * Promoting international collaboration in guideline activities to avoid duplication of effort and to facilitating information sharing and knowledge transfer
- * Building links between member organisations and individuals to improve coordination and learning
- * Offering mentoring and professional development opportunities (e.g. 'buddy' systems between agencies and individuals).

Dave Davis
Chair Board of Trustees 2006/7

RESPONSIBILITIES OF THE TRUSTEES

The Trustees are responsible for preparing the Trustees Annual Report and the financial statements in accordance with applicable law and regulations.

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

TRUSTEES ANNUAL REPORT *(continued)*

YEAR ENDED 31 MARCH 2007

Company law requires the Trustees to prepare financial statements for each financial year. Under that law the Trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). The financial statements are required by law to give a true and fair view of the state of affairs of the charity and of the surplus or deficit of the charity for that period.

In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and which enable them to ensure that the financial statements comply with Companies Act 1985. The Trustees are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

REPORTING ACCOUNTANTS

Messrs Walton Kilgour will continue in office as reporting accountants for the ensuing year.

Registered office:
J & H Mitchell, W S
51 Atholl Road
Pitlochry
Perthshire
PH16 5BU

Signed by order of the Trustees

J & H MITCHELL, W S
Company Secretary and Legal Advisers

26 July 2007

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

ACCOUNTANTS' REPORT ON THE UNAUDITED ACCOUNTS TO THE MEMBERS OF THE GUIDELINES INTERNATIONAL NETWORK

YEAR ENDED 31 MARCH 2007

We report on the accounts for the year ended 31 March 2007 set out on pages 7 to 12.

RESPECTIVE RESPONSIBILITIES OF DIRECTORS AND REPORTING ACCOUNTANTS

As described on page 8 the charity's Directors (who also act as Trustees for the charitable activities of the Guidelines International Network) are responsible for the preparation of the accounts, and they consider that the charity is exempt from an audit. It is our responsibility to carry out procedures designed to enable us to report our opinion.

BASIS OF OPINION

Our work was conducted in accordance with the Statement of Standards for Reporting Accountants, and so our procedures consisted of comparing the accounts with the accounting records kept by the charity, and making such limited enquiries of the officers of the charity as we considered necessary for the purposes of this report. These procedures provide only the assurance expressed in our opinion.

OPINION

In our opinion:

- (a) the accounts are in agreement with those accounting records kept by the charity under section 221 of the Companies Act 1985;
- (b) having regard only to, and on the basis of, the information contained in those accounting records:
 - (i) the accounts have been drawn up in a manner consistent with the accounting requirements specified in section 249C(6) of the Act; and
 - (ii) the charity satisfied the conditions for exemption from an audit of the accounts for the year specified in section 249A(4) of the Act as modified by section 249A(5) and did not, at any time within that year, fall within any of the categories of companies not entitled to the exemptions specified in section 249B(1)(a) to (f).

13 Marshall Place
Perth
PH2 8AH

26 July 2007

WALTON KILGOUR
Chartered Accountants

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING THE INCOME AND EXPENDITURE ACCOUNT)

YEAR ENDED 31 MARCH 2007

		Total Funds 2007	Total Funds 2006
	Note	€	€
INCOMING RESOURCES			
Incoming resources from generating funds:			
Voluntary income	2	172,772	126,148
Investment income	3	–	300
Other incoming resources	4	–	5,865
Sundry income	4	–	9,116
TOTAL INCOMING RESOURCES		<u>172,772</u>	<u>141,429</u>
RESOURCES EXPENDED			
Costs of generating funds:			
Costs of generating voluntary income	5	(38,965)	(40,484)
Governance costs	6	(138,790)	(118,099)
TOTAL RESOURCES EXPENDED		<u>(177,755)</u>	<u>(158,583)</u>
NET OUTGOING RESOURCES FOR THE YEAR/NET EXPENDITURE FOR THE YEAR	7	(4,983)	(17,154)
RECONCILIATION OF FUNDS			
Total funds brought forward		<u>7,024</u>	<u>24,178</u>
TOTAL FUNDS CARRIED FORWARD		<u><u>2,041</u></u>	<u><u>7,024</u></u>

The Statement of Financial Activities includes all gains and losses in the year and therefore a statement of total recognised gains and losses has not been prepared.

All of the above amounts relate to continuing activities.

The notes on pages 7 to 30 form part of these financial statements.

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

BALANCE SHEET

31 MARCH 2007

	Note	2007 €	€	2006 €
FIXED ASSETS				
Tangible assets	9		–	698
CURRENT ASSETS				
Debtors	10	5,750		21,825
Cash at bank		4,482		–
		<u>10,232</u>		<u>21,825</u>
CREDITORS: Amounts falling due within one year	11	<u>(8,192)</u>		<u>(15,499)</u>
NET CURRENT ASSETS			2,040	6,326
TOTAL ASSETS LESS CURRENT LIABILITIES			<u>2,040</u>	<u>7,024</u>
NET ASSETS			<u>2,040</u>	<u>7,024</u>
FUNDS				
Unrestricted income funds	12		2,040	7,024
TOTAL FUNDS			<u>2,040</u>	<u>7,024</u>

The trustees are satisfied that the charity is entitled to exemption from the provisions of the Companies Act 1985 (the Act) relating to the audit of the financial statements for the year by virtue of section 249A(1), and that no member or members have requested an audit pursuant to section 249B(2) of the Act.

The trustees acknowledge their responsibilities for:

- (i) ensuring that the charity keeps proper accounting records which comply with section 221 of the Act, and
- (ii) preparing financial statements which give a true and fair view of the state of affairs of the charity as at the end of the financial year and of its profit or loss for the financial year in accordance with the requirements of section 226, and which otherwise comply with the requirements of the Act relating to financial statements, so far as applicable to the charity.

These financial statements were approved by the members of the committee on the 26 July 2007 and are signed on their behalf by:

Prof G Ollenschläger
Treasurer

The notes on pages 8 to 30 form part of these financial statements.

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2007

1. ACCOUNTING POLICIES

Basis of accounting

The financial statements have been prepared under the historical cost convention and in accordance with applicable United Kingdom accounting standards, the Statement of Recommended Practice "Accounting and Reporting by Charities" issued in March 2005 (SORP 2005) and the Companies Act 1985.

Cash flow statement

The trustees have taken advantage of the exemption in Financial Reporting Standard No 1 (revised) from including a cash flow statement in the financial statements on the grounds that the charity is small.

Fixed assets

All fixed assets are initially recorded at cost.

Depreciation

Depreciation is calculated so as to write off the cost of an asset, less its estimated residual value, over the useful economic life of that asset as follows:

Foreign currencies

Assets and liabilities in foreign currencies are translated into sterling at the rates of exchange ruling at the balance sheet date. Transactions in foreign currencies are translated into sterling at the rate ruling at the date of the transaction. Exchange differences are taken into account in arriving at the operating profit.

2. VOLUNTARY INCOME

	Unrestricted Funds	Total Funds 2007	Total Funds 2006
	€	€	€
Subscriptions	<u>172,772</u>	<u>172,772</u>	<u>126,148</u>

3. INVESTMENT INCOME

	Total Funds 2007	Total Funds 2006
	€	€
Bank interest receivable	<u>—</u>	<u>300</u>

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2007

4. OTHER INCOMING RESOURCES

	Total Funds 2007 €	Total Funds 2006 €
Sundry income	–	9,116
Conference income	–	5,865
	<u>–</u>	<u>14,981</u>

5. COSTS OF GENERATING VOLUNTARY INCOME

	Unrestricted Funds €	Total Funds 2007 €	Total Funds 2006 €
Costs of generating subscriptions	<u>38,965</u>	<u>38,965</u>	<u>40,484</u>

Included in the total costs of generating voluntary income are €24,361 (2006 - €32,261) for website development and €10,165 (2006 - NIL) of discounts given for early payment of member subscriptions.

6. GOVERNANCE COSTS

	Unrestricted Funds €	Total Funds 2007 €	Total Funds 2006 €
Accountancy fees	3,213	3,213	2,922
Consultancy	85,000	85,000	78,500
Legal fees	891	891	5,743
Costs of trustees' meetings	1,354	1,354	3,069
Interest payable	3	3	–
Bank charges	971	971	1,009
Depreciation	698	698	930
Travel and subsistence	15,410	15,410	15,555
Provision for doubtful debts	12,000	12,000	–
Bad debts written off	19,250	19,250	10,000
Other costs	–	–	371
	<u>138,790</u>	<u>138,790</u>	<u>118,099</u>

7. NET OUTGOING RESOURCES FOR THE YEAR

This is stated after charging:

	2007 €	2006 €
Depreciation	<u>698</u>	<u>930</u>

THE GUIDELINES INTERNATIONAL NETWORK COMPANY LIMITED BY GUARANTEE

NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2007

8. STAFF COSTS AND EMOLUMENTS

No salaries or wages have been paid to employees, including the members of the committee, during the year.

9. TANGIBLE FIXED ASSETS

	Equipment €
COST	
At 1 April 2006 and 31 March 2007	<u>2,790</u>
DEPRECIATION	
At 1 April 2006	2,092
Charge for the year	<u>698</u>
At 31 March 2007	<u>2,790</u>
NET BOOK VALUE	
At 31 March 2007	—
At 31 March 2006	<u>698</u>

10. DEBTORS

	2007 €	2006 €
Subscriptions receivable	<u>5,750</u>	<u>21,825</u>

All debtors are repayable within one year of the balance sheet date.

11. CREDITORS: Amounts falling due within one year

	2007 €	2006 €
Bank loans and overdrafts	—	1,505
Trade creditors	3,580	2,172
Accruals	<u>4,612</u>	<u>11,822</u>
	<u>8,192</u>	<u>15,499</u>

12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Net current assets €	Total €
Unrestricted Income Funds	<u>2,041</u>	<u>2,041</u>
Total Funds	<u>2,041</u>	<u>2,041</u>

**THE GUIDELINES INTERNATIONAL NETWORK
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2007

13. COMPANY LIMITED BY GUARANTEE

The company is limited by guarantee.

The liability of the members in the event of a winding up is limited to £1.