



ANNUAL REPORT

October 2008 – October 2009

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 (October 2009)

95 organisations representing 38 countries

AFRICA

Healthcare Quality and Accreditation Unit of Alexandria Univ. Hospitals, EG
Sudan Evidence-based Association (SEA), SD

AMERICA

Brazilian Medical Association (AMB), BR
National Agency of Supplementary Health (ANS), BR
Québec Governm. Agency for Health Services & TA (AETMIS), CA
Canadian Partnership against Cancer (CPACC), CA
Canadian Thoracic Society (CTS), CA
Guidelines Advisory Committee (GAC), CA
National Center for Health Technology Excellence (CENETEC), MX
Agency for Healthcare Research and Quality (AHRQ), US
American Academy of Otolaryngology - Head & Neck Surgery Found., US
American College of Chest Physicians (CHEST), US
American College of Physicians (ACP), US
American Society of Clinical Oncology (ASCO), US
American Urological Association (AUA), US
Center for International Rehabilitation (CIR), US
Infectious Diseases Society of America (IDSA), US
National Kidney Foundation (NKF), US

ASIA

Prof. Devel. and Quality Assurance, Department of Health (PDQA-DoH), HK
Med. Inform. Netw. Distr. Serv. Center, Jap. Coun. for Quality Healthc., JP
Central Asian Network of EbM Centers (CAREBMC Network), KZ
Korean Academy of Medical Sciences (KAMS), KR
HTA Unit, Ministry of Health, Malaysia (HTA-DoH), MY
Center for Health Policy Res. & Develop., Nat. Health Res. Inst. (NHRI), TW

EUROPE

Health Austria, Federal Institute for Quality in Health Care (GOEG), AT
Vienna Medical Chamber (AEKW), AT
Belgian Centre for Evidence-Based Medicine (CEBAM), BE
Domus Medica; Flemish College of General Practitioners (DM), BE
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
Duodecim Medical Publications (DUODECIM), FI
Centre Léon Bérard (SOR), FR
French National Cancer Institute (INC), FR
French National Health Authority (HAS), FR
Association of Family Doctors of Georgia (AFDG), GE
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 Cancer Society (DKG), DE
German National Institute for Quality Measurement in Health Care (BQS), DE
German Society of Thoracic and Cardiovascular Surgery (DGTHG), DE
Federal Joint Committee (GBA), DE
Institute for Quality and Efficiency in Healthcare (IQWiG), DE
The Mental Health Commission (MHC), IE
Centre for the Evaluation of Effectiveness of Health Care (CEVEAS), IT
Italian Evidence-Based Medicine Group (GIMBE), IT
Italian National Institute of Health (ISS), IT

Regional Agency for Health in Tuscany, Quality Unit (ARS), IT
Regional Health Agency Emilia Romagna (ASR), IT
Public Health Agency of Latvia, LV
Dep. of Quality Management & Standards of Treatment, MoH (MS), MD
Dutch Association of Comprehensive Cancer Centres (ACCC), NL
Dutch College of General Practitioners (NHG), NL
Dutch Institute for Healthcare Improvement (CBO), NL
Netherlands Centre for Excellence in Nursing (LEVIV), NL
Royal Dutch Society for Physical Therapy (KNGF), NL
Trimbos-Inst. - NL Institute of Mental Health & Addiction, NL
Directorate for Health (SHdir), NO
Norwegian Electronic Health Library (NEHL), NO
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
Nat. School of Public Health and Health Services Management (INCDS), RO
Romanian-Swiss Centre for Health Sector Development (CRED), RO
Basque Office for HTA (OSTEBA), ES
Catalan Agency for Health Technology Assessment and Research (AATRM), ES
GuiaSalud-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), Univ. 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

Cari Guidelines (CARI), AU
Centre for Clinical Effectiveness (CCE), AU
Joanna Briggs Institute (JBI), AU
National Breast and Ovarian Cancer Centre (NBOCC), AU
National Health & Medical Research Council (NHMRC), AU
National Heart Foundation of Australia (NHFA), AU
Therapeutic Guidelines Ltd (TGL), AU
New Zealand 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)

G-I-N Partners

AGREE Research Trust (ART)
GRADE Working Group (GRADE)
The ADAPTE Collaboration (ADAPTE)
The International Network of Agencies for Health Technology Assessment (INAHTA)
World Medical Association (WMA)



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Chair's Foreword

Dear G-I-N Members

We are proud to present the sixth annual report of the Guidelines International Network. As you will see, G-I-N continues to go from strength to strength, with increasing numbers of members and a much more stable financial basis.

The annual conference in Helsinki last year was attended by more than 380 people from 27 countries. This meeting, like the ones that have gone before, had a great buzz about it, affording people an opportunity to meet others from the guideline world and discuss issues of real relevance to us all, about guideline development, implementation and use. I am sure this enthusiasm will continue and grow at our conferences in Lisbon in November this year and Chicago in 2010.



At the Annual General Meeting we were able to announce that we were in a positive financial position and this has continued, despite the worldwide recession. Our attractiveness to new members also means that we have funds to invest to make G-I-N even more useful to its members. In Lisbon we will launch our fantastic new website and you will all have the opportunity to meet Magali Remy-Stockinger, our full time Executive Officer.

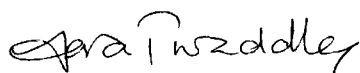
The Board has been very busy this year, strengthening our governance arrangements. We have formed three sub-committee of the Board – the Membership Committee, the Conferences and Promotion Committee, and the Finance and Risk Committee. Each of these committees has representation from across the network, making us more accountable to the membership. Most importantly, we are taking on board what you have told us – both at the AGM and in the survey- as we develop our strategies and direction for the future.

The G-I-N working groups have also been busy this year and we will shortly see the concrete outcomes of this work – watch ENG-I-NE for news!

We are continuing to forge links, to encourage multilateral collaboration with other players in the world of evidence based medicine – we signed a partnership agreement with INAHTA this year and are in the process of developing an agreement with WHO.

Finally, some words of thanks. Thanks to the Board for their hard work and commitment; to our Principal Officer, Angela Maienborn, who left us in March to move to new pastures; to the staff of G-I-N, Magali, Martina and Inga, who keep the show on the road; to Stuart Neville who physically produces ENG-I-NE and, most of all, to you all for supporting G-I-N and providing your support, ideas and encouragement. I am happy to pass on a thriving organisation to the next Chair of G-I-N.

I look forward to seeing you all in Lisbon.



Sara Twaddle
Chair
On behalf of the Executive Committee

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.

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.

Membership

Organisational Members

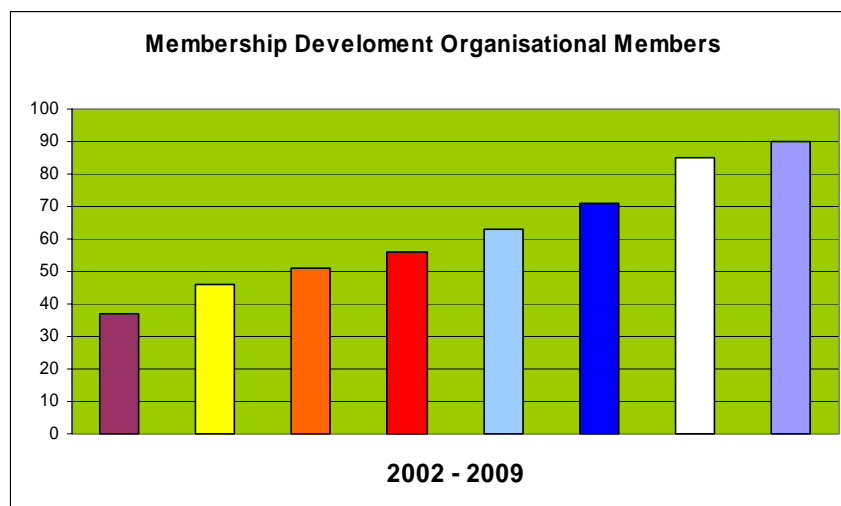
By October 2009 the Guidelines International Network had **90 Organisational Members**:

- 13 organisations joined the Network in the period (Table 1).
- 4 members left the Network in 2009 (Agency for Health Technology Assessment in Poland AHTAPol; Finnish Office for Health Care Technology Assessment (FinOHTA); Slovenian Guidelines Group (SGG) and the World Health Organization (WHO)).

Table 1: Organisations which joined G-I-N in 2009

Australia	• National Breast and Ovarian Cancer Centre (NBOCC)
Brazil	• Centre for Clinical Effectiveness (CCE)
Canada	• National Agency of Supplementary Health (ANS)
	• Canadian Partnership Against Cancer (CPAC)
	• Canadian Thoracic Society (CTS)
Egypt	• Healthcare Quality and Accreditation Unit of Alexandria University Hospitals (HQUA)
France	• Centre Léon Bérard, Cancer Centre (SOR)
	• French National Cancer Institute (INCa)
Georgia	• Association of Family Doctors of Georgia (AFDG)
Italy	• Centre for the Evaluation of Effectiveness of Health Care (CEVEAS)
Latvia	• State Agency "Public Health Agency" (PHA)
Netherlands	• Netherlands Centre for Excellence in Nursing (LEVV)
USA	• American Academy of Otolaryngology (AAO)

Chart 1: Organisational Members

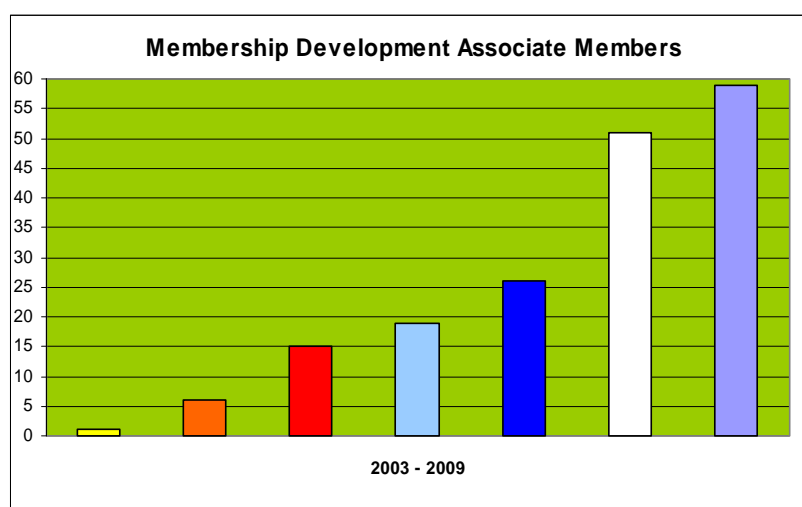


Associate Members

By October 2009 G-I-N had 59 associate members from 27 countries, 22 individuals joined the Network in the period (Table 2).

Table 2: Individuals who joined G-I-N in 2009

• Eva Blozik, DE	• Patriek Mistiaen, NL
• Wiley Chan, US	• Barbara Niel-Weise, NL
• Robert Cook, UK	• Cherdchai Nopmaneejumrulers, Thailand
• Hans de Beer, NL	• Keng Ho Pwee, Singapore
• Mario Delgado-Noguera, ES	• Craig Robbins, US
• Alida Estrella, PE	• Martin Scherer, DE
• Seonmi Ji, KR	• Harry Sumnall, UK
• Soo Young Kim, KR	• Henning Thole, DE
• Janust Laust Thomsen, DK	• Gladys Tom, US
• Sue Lukersmith, AU	• Mariska Tuut, NL
• Peter Maisel, DE	• Tobias Weberschock, DE

Chart 2: Associate Members

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 while this organisation can take profit of the G-I-N expertise. Furthermore, the partnerships enable wider communication on the activities of G-I-N and its partners as well as the development of activities shared with a partner organisation.

By October 2009, G-I-N had established an official partnership with five organisations:

- The ADAPTE Collaboration (ADAPTE)
- AGREE Research Trust (ART)
- GRADE Working Group (GRADE)
- International Network of Agencies for Health Technology Assessment (INAHTA)
- World Medical Association (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 Chair for one year after retirement.

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

The full Board had bi-monthly teleconferences and two face to face meetings, one in Helsinki, Finland during the 5th International G-I-N conference and a 3 day strategic meeting in Cologne, Germany.

The list of members of the Board of Trustees 2008-2009 is available at the end of the report (p. 27).

G-I-N Subcommittees

In 2009 three subcommittees have been developed by the Network to advise the Board on specific issues.

Membership subcommittee

Terms of reference have been defined for this subcommittee. They highlight the following main goals:

- Ensuring sustainability of the network through communicating the value of G-I-N
- Developing communication strategies to reach all possible membership categories and engaging non-members
- Advising the Board on acceptance of new members
- Overseeing work on the annual members' survey
- Contributing to the development of the G-I-N strategy

Members of the Membership Subcommittee are:

- | | |
|--------------------------|---------------------------|
| - Dave Davis, US (Chair) | - Amir Qaseem, US |
| - Cindy Farquhar, NZ | - Airtion Stein, BR |
| - Sue Huckson, AU | - Philip van der Wees, NL |
| - Ian Nathanson, US | |

Conferences and promotion subcommittee

Terms of reference have been defined for this subcommittee. They highlight the following main goals:

- Seeking engagement of organisations to host the annual conferences of G-I-N
- Identifying opportunities for building revenues of the network
- Participation in the conferences' scientific committees

- Working with members to identify opportunities to promote the network

Members of the Conferences and Promotion Subcommittee are:

- Catherine Marshall, NZ (Chair)
- Hans de Beer, NL
- Mary Hemming, AU
- Keng Ho Pwee, SG
- Richard Rosenfeld, US
- Sandra Zelman-Lewis, US
- Rick Shiffman, US

Finances and Risks subcommittee

Terms of reference have been defined for this subcommittee. They highlight the following main goals:

- Advising on, scrutinising and evaluating the draft annual budgets
- Scrutinising the draft annual report and accounts and advising the Board accordingly
- Developing and maintaining a risk register

Members of the Finances and Risks Subcommittee are:

- Rick Shiffman, US (Chair)
- Fergus Macbeth, UK
- Safia Qureshi, UK

Advisory Committee

In 2004 the Board established an Advisory Committee. In 2009 members of the Advisory Committee gave advice on strategic matters.

Table 3: G-I-N Advisory Committee

Lorne Becker, MD	Co-Chair, Cochrane Collaboration Steering Group Emeritus Professor Department of Family and Community Medicine SUNY Upstate Medical University, Syracuse NY, USA
Francoise Cluzeau, Dr.	Chair of the AGREE Research Trust London, UK
Niek S. Klazinga, Prof, Dr	Professor of Social Medicine, AMC – UvA, Dept. of Sociale Medicine Amsterdam, The Netherlands
David P. Stevens, MD	Editor, Quality and Safety in Health Care Adjunct Professor and Director, Quality Literature Program, Dartmouth Institute for Health Policy and Clinical Practice

Executive Officer

In 2009 a new G-I-N Executive Officer, Magali Remy Stockinger, was recruited to ensure the coordination of the Network's projects and administration. Main duties and responsibilities include overseeing the management of the network, connecting with the working groups and subcommittees, preparing and managing financial issues supported by the Treasurer, preparing and operating Board meetings / teleconferences, operating elections, Annual General Meetings and the production of the Annual Report.

The work of the EO also includes supporting the enhancement and redevelopment of the website together with the Webmaster and the Website Content Group. She officially represents 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

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

Financial Examiner

In 2009 Milne Craig, Chartered Accountants, Abercorn House, 79 Renfrew Road, Paisley PA3 4DA, UK were appointed as G-I-N's Financial Examiner .

Activities 2008 - 2009

The G-I-N Board had a 3 day meeting in Cologne in February 2009 to further define the Network's strategic plan for the years to come. Niek Klazinga, a member of the advisory committee participated in part of this meeting to provide advice. Furthermore, in order to clarify the members' requirements and to prioritise issues and projects according to the demands, a membership survey was carried out in June-July 2009 to plan for the future.

Table 4: Priority Issues and Projects

Issues	Projects
Sharing interests, exchange knowledge and experiences Connecting people and increasing dialogue	<ul style="list-style-type: none"> • Redeveloping the G-I-N website • Maintenance and enhancement of the International Guideline Library (www.g-i-n.net) • G-I-N conferences
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, Ibero-American network on clinical practice guidelines), developing partnership.
Promoting guideline development methodology	<ul style="list-style-type: none"> • Working groups established in specific areas to further reflect on guideline development methodology and tools to ensure development of quality guidelines
Promoting and strengthening the Network	<ul style="list-style-type: none"> • Outreach to new or prospective 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

G-I-N Website

The G-I-N website www.g-i-n.net continues to be the key tool supporting most of the Network's activities and communication. For this reason, a decision was taken by the Board to redevelop it to better reflect the activities of the Network as well as answer to the needs of the members. The website content group prepared a book of requirements used for a call for tenders at the end of 2008. Nine organisations answered to the call. Their propositions were assessed by a working group and webinars were conducted with the final two. Agreement on the new website provider was reached by the Board of Trustees in May 2009 and the contract awarded to Interaktiv GmbH, Hürth, Germany. Since then, to support efficient decision making, a small working group has been established to facilitate the launch of the new platform by the end of 2009. Redevelopment of the website should increase interactivity of the Network and user friendliness of the tools, as well as facilitate communication on activities and outcomes of G-I-N and its various working groups and subcommittees.

Presentation of the new website is planned early November at the annual conference and AGM of the Network in Lisbon.

In 2008, the Guidelines International Network www.g-i-n.net was audited again by the Health on the Net Foundation. It was reconfirmed that the G-I-N website meets several criteria and follows the principles of HON.

Decisions on content and format are prepared by the Network's Website Content / Editorial Steering Group and are approved by the Board of Trustees. Since November 2006 Inga Koenig from the AQUmed is the responsible Webmaster for G-I-N.

A 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 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) (Table 5). Presentation of the information and some of the content will slightly be modified in the new version of the website.

Table 5: Categories for Information on Guidelines from G-I-N Members

<ul style="list-style-type: none"> • Publication Title • English Translation • Countries • Website URL • Disease / Condition addressed (based on the National Library of Medicine's (NLM) Medical Subject Headings (Mesh) classification.) • 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) • Publication Status Details • Printed Version of Publication • Languages published in • Due for 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 September 2008 and October 2009 the **G-I-N International Guideline Library** has continued to expand with a total of over 6450 items of information (October 2009) from 27 language groups (Table 6).

To demonstrate the potential of the guideline database to non-G-I-N members the Health Topic Collection (HTC) provides an overview for selected topics where people can find guidelines and other publications from the Guideline Library (by October 2009):

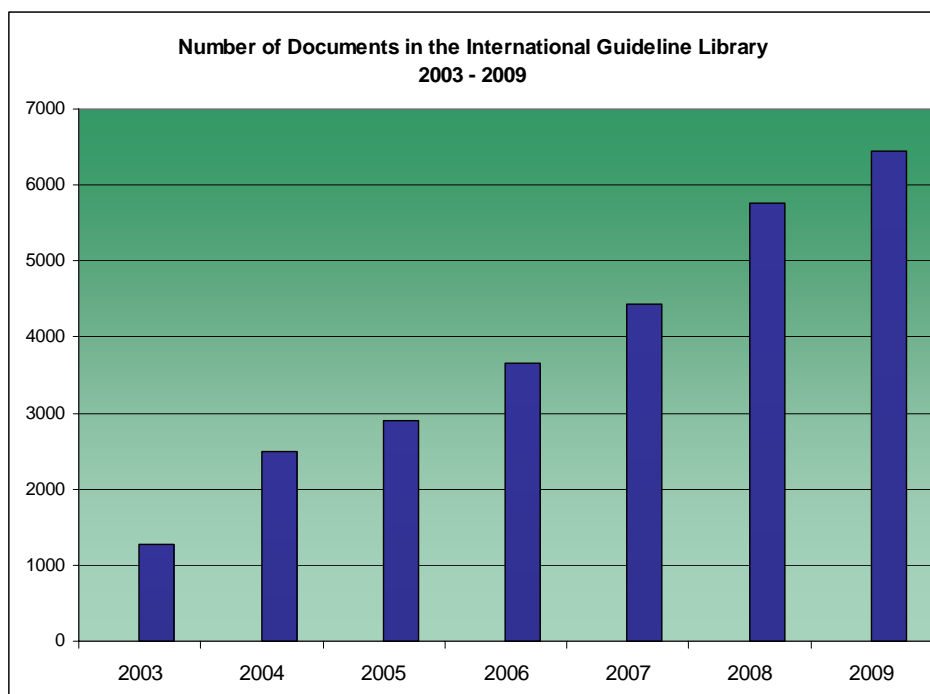
- Central Nervous System Diseases (MeSH C10.228)
- Emergency Treatment (MeSH E02.365)
- Emergency Medical Services (MeSH N02.421.297)
- Delirium, Dementia, Amnestic, Cognitive Disorders (MeSH F03.087)
- Psychotherapy (MeSH F04.754)
- Mental Health Services (MeSH F04.408)
- Pancreatic Neoplasms (MeSH C04.588.322.421)

Topics are changed at regular interval. HTC shows all documents from the G-I-N International Guideline Library under the mentioned MESH terms.

Table 6: Number of items of information in the G-I-N International Guideline Library (by October 2009)

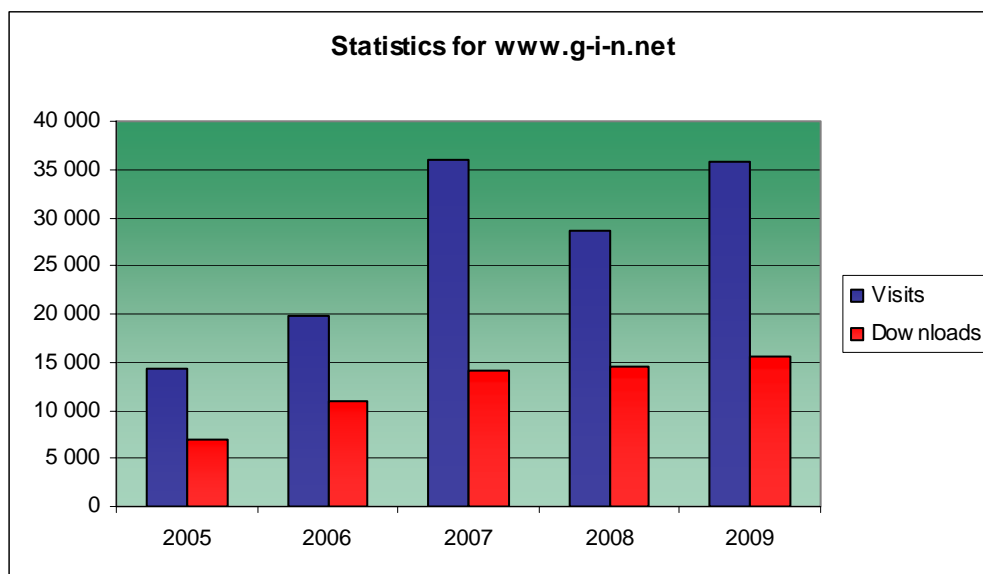
Language	Documents (n)	Language	Documents (n)
Burmese	4	Catalan	79
Danish	11	Dutch	354
English	4507	Estonian	31
Finnish	121	Flemish	37
French	367	German	471
Hungarian	2	Indonesian	1
Italian	97	Japanese	3
Korean	1	Mandarin	7
Norwegian	51	Polish	1
Portuguese	274	Romanian	12
Russian	18	Spanish	181
Swedish	25	Thai	15
Turkish	2	Ukrainian	1
Vietnamese	1		

Chart 3: Number of documents in the G-I-N International Guideline Library (by October 2009)



From the start of the G-I-N Website in 2003 the number of visits and downloads continue to increase and remain stable on a high level in 2009.

Chart 4: G-I-N Website Statistics Average visits and downloads per month 2005 - August 2009



G-I-N Working Groups

In 2009, the Network continued to support working groups to take forward different aspects of G-I-N's work. Information is also available on the G-I-N website.

The Board would like to express its deep gratitude to all those who have contributed with their ideas and input to a successful work especially the Speakers of the Working Groups and the Coordinator of the Community of Practice for their dedication and valuable support.

Evidence Tables Working Group

Aims and Objectives

The aim of the Evidence Tables Working Group (ETWG) is to define a minimum data set that should be included in all evidence tables. This could allow the creation of a database of evaluated studies with data presented in a consistent format that G-I-N members could use in their guideline development process to populate their evidence tables using the data directly as presented or slightly modified according to their specific needs.

To reach these objectives the ETGW agreed that a single format to address different types of questions (e.g. intervention, diagnosis accuracy, ...) is difficult to achieve. Hence, the ETWG group focused its work on identifying the data to be extracted from the considered studies for the addressed question and producing relevant templates¹. The templates have been built taking into account the below mentioned elements:

- ⇒ inclusion of most objectives and factual data that summarise the study, incorporating key data that allow quality/validity assessment and avoid second time review
- ⇒ provision of a set of explanatory notes about what should be considered for inclusion under each heading.

Progress of the Evidence Tables Working Group

The ETWG began its work by developing a minimum data set for summarising studies that evaluate interventions and produced a definitive template for describing them. This work was presented in a workshop at the Toronto conference in August 2007.

A proposal of template for summarising studies addressing diagnostic questions was then developed by the ETWG. Following finalisation of a protocol for the evaluation of the template, a subgroup was appointed to oversee the study. The evaluation study started in May 2008. Materials were sent to all the ETWG members and others who expressed their interest. The study subgroup met in late June 2008 to finalise the strategy for analysis of the data which was performed in August 2008. The results of the study were presented at the Helsinki Conference in October 2008. Thereafter, the template for summarising studies addressing diagnostic questions was finalised. Two publications presenting the work done so far are in preparation.

Currently, the ETWG is working on the specification for a database to store and retrieve studies evaluated using the templates already developed by the group. This database will also have a web interface for completing a new template for a study not already in the database through a log in. The preliminary specifications for the database will be presented in the

¹ Minimum data abstracted from a single study to allow consistent comparison across studies and to inform a group process in evidence synthesis

workshop scheduled at the Lisbon conference in November 2009. Discussions in Lisbon should support the development of the database and help its implementation.

Members of the ETWG:

- Najoua Mlika-Cabanne, HAS (FR) Joint Speaker
- Sara Twaddle, SIGN (UK) Joint Speaker
- Samar Aboulsoud-Hassona, Qatar
- Bernard Burnand, CepiC (CH)
- Rob Cook, Bazian (UK)
- Hans de Beer, CBO (NL)
- Robin Harbour, SIGN (UK)
- Kelvin Hill, Stroke Foundation, (AUS)
- Thomas Kaiser, IQWiG (DE)
- Eeva Ketola, CC (FI)
- Jorma Komulainen, CC (FI)
- Regina Kunz, Basel Institute for Clinical Epidemiology (CH)
- Stefan Lange IQWiG (DE)
- Michel Laurence, HAS (FR)
- Inger Natvig Norderhaug, INAHTA
- Alric Ruether, IQWiG (DE)
- Rick Shiffman, Yale Center for Medical Informatics (US)
- Sheamini Sivasampu, Ministry of Health (Malaysia)
- Craig Whittington, National Collaborating Centre for Mental Health (UK)

Patient and Public Involvement

Aims and objectives

The main objective of the G-I-N Working Group Patient and Public Involvement (G-I-N PUBLIC) is to support effective patient and public involvement in the development and implementation of clinical practice guidelines. G-I-N PUBLIC offers a forum for exchange between patient and public organisations, CPG developers, and researchers.

Specific objectives are to:

- Share experiences and evidence to support and promote the design of effective patient and public involvement programs;
- Foster international research collaboration;
- Propose standards on methods of involving patients and the public in specific contexts of CPG development and implementation.

G-I-N PUBLIC was established in August 2007. Three levels of participation in G-I-N PUBLIC activities are possible:

- *Public:* WIKI forum www.G-I-Npublic.net, mailing list and open activities: Anybody interested in the activities of G-I-N PUBLIC can share experiences within the WIKI forum.
- *G-I-N PUBLIC members:* Any G-I-N member can join G-I-N PUBLIC. Patient and public representatives, researchers, or CPG developers who are not G-I-N members may join the working group upon recommendation of G-I-N PUBLIC steering committee.
- *Steering committee:* The steering committee is responsible for all strategic decisions of the working group, including approval of recommendations and publications written on behalf of G-I-N PUBLIC. Since 2008 four consumer representatives are active members of the steering committee.

Products/deliverables:

During the 2008 G-I-N conference in Helsinki, G-I-N PUBLIC members organized two successful workshops on patient and public involvement:

- Integrating patient decision aids and information material in guidelines
- Defining strategies for the future: "How to support emerging patient and public involvement programs?"

A total of 53 people from 15 different countries participated in the workshop and we are preparing a workshop report for publication.

For the 2009 G-I-N conference in Lisbon members of the G-I-N workings group are preparing:

- Plenary “Involving public in guidelines: where next?”, Antoine Boivin
- Plenary “Public involvement in health care quality improvement: a consumer/advocate perspective”, Carol Sakala
- Workshop entitled: “EngaG-I-Ng with consumers around the world - Learning from the challenges and achievements of the Cochrane Collaboration Consumer Network”, Amanda Burls, Janet Wale
- Workshop entitled: “Thou shalt” or “you choose”. Evidence-based medicine meets preference-sensitive care”. van der Weijden T, Légaré F, Boivin A, Koelewijn M, Burgers J, Stiggelbout A, Pieterse A, Elwyn G
- Workshop entitled “What tools in the toolbox? Supporting effective patient and public involvement in guidelines” by Boivin A, Légaré F, van der Weijden T, Pakenham C, and Burgers J.

The G-I-N Board generously provided two travel grants to give consumer representatives the opportunity to join the conference with an active contribution.

Wiki forum

The G-I-N Patient and Public Involvement Group launched an internet site for our working group: www.G-I-Npublic.net, which will be closely linked with the G-I-N website. The site is built as a “Wiki forum” which will allow patient/public representatives, researchers, and guideline developers to add information directly on the site. Currently, the site contains information on existing patient and public involvement programs, practical tools such as development handbooks, and literature references to evaluation resources. Loes Knaapen from McGill University acts as the moderator of this site.

Research projects

In November 2008, two international research projects led by members of G-I-N PUBLIC were funded. The first one, co-led by France Légaré and Antoine Boivin in Canada, will synthesize existing knowledge and conduct an international consensus exercise on effective strategies for patient and public involvement in specific contexts of guideline development and implementation. Jako Burgers will represent G-I-N on this research team. The second project, led by Trudy van der Weijden in the Netherlands, will explore new ways to integrate patient decision aids in guideline development.

Teleconferences and Meetings during period under report: the steering committee of the working group held 6 teleconferences and a physical meeting.

G-I-N PUBLIC Steering Committee members:

- | | |
|---|--|
| • Antoine Boivin, Scientific Institute for Quality of Healthcare (CA) | • Amelia Mustafa, Centre for Mental health (UK) |
| • Kay Currie, NICS / NHMRC (AU) | • Carol Sakala, ChildbirthConnection (US) |
| • Béatrice Fervers, FNCLCC (FR) | • Sylvia Sängler, AEZQ, (DE) |
| • Javier Gracia, Unidad de Evaluación de Tecnologías Sanitarias (ES) | • Judi Strid, Strengthening Consumer Voices Group (NZ) |
| • Marian James, AHRQ (US) | • Victoria Thomas, NICE (UK) |
| • Albert Jovell, European Patient Forum (ES) | • Trudy van der Weijden, CAPHRI School for Public Health and Primary Care, Dept General Practice, Maastricht Univ (NL) |
| • Catherine Marshall, Independent Guideline Advisor (NZ) | |

SEARCH Group

The aim of the SEARCH group is to assess the methods used for the selection of evidence for guideline development by evidence-based guideline development organisations.

Two teleconferences were held in the past year. The 7th SEARCH teleconference took place on 29 September 2008, with participants from France, the Netherlands, Switzerland, and the United Kingdom. The purpose of the teleconference was to generate ideas and gain commitment towards projects in addition to the search filter testing that the group had previously begun. The group expressed the desire to continue the project of testing search filters. Some members were also interested in pursuing new work to design a search filter for adverse effects/harms. There was interest in developing training provision. To this end, proposals for workshops at the G-I-N conference were discussed.

The 8th teleconference on 24 June 2009 involved members from Canada, Colombia, France, the Netherlands, Switzerland, and the United Kingdom. The purpose of the teleconference was to discuss work in progress. We welcomed 4 new group members: We discussed a systematic review of search filters being led by Dr Reveiz. Group members subsequently provided commentaries on the paper prior to its submission for publication. A draft work programme was proposed to the group along the lines of the EU ERA-Net model, in order to better structure our work and focus on the production of deliverables.

Group members proposed two workshops for the 2009 G-I-N conference in Lisbon. The workshop "SEARCH filter testing: achievements thus far and next steps for the future" was accepted and will be delivered in Lisbon under the leadership of Kitty Rosenbrand, CBO, Netherlands.

Two new positions have been by the group in order to increase its sustainability. Anne Pittet, Institut universitaire de médecine sociale et préventive, Switzerland was elected Secretary of the group in September 2008.

Newsletters for members of the working group were produced and circulated in September 2008 and May 2009. Minutes of the teleconferences were added to the G-I-N website.

Members of the SEARCH working group:

- Michele Hilton Boon, SIGN (UK) Chair
- Linda Ayiku, NICE (UK)
- Lina Bakhshi, RCP (UK)
- Nathalie Billard, INCa (FR)
- Janette Boynton, NICE (UK)
- Dominique Broclain, La Revue Prescrire (FR)
- Bernard Burnand, IUMSP (CH)
- Mireille Cecchin, HAS (FR)
- Elise Collins, NCCC (UK)
- Béatrice Fervers, FNCLCC (FR)
- Jacob Franek, McMaster University (CA)
- Su Golder, University of York (UK)
- Malene Jensen, SST, National Board of Health (DK)
- Anne Pittet, IUMSP (CH)
- Debbie Pledge, National Collaborating Centre for Women's and Children's Health (UK)
- Marjo Poth, CBO (NL)
- Ludovic Reveiz, National University of Bogota (CO)
- Alison Richards, National Collaborating Centre for Chronic Conditions (UK)
- Gill Ritchie, RCGP (UK)
- Kitty Rosenbrand, CBO (NL)
- Joan Vlayen, University of Leuven and Bruxelles (BE)
- Susanne Weinbrenner, AQuMed /AEZQ (DE)
- Louise Zitzelsberger, CPAC (CA)

Disease Management

The aim of the Working Group “Guidelines and Disease Management” is to examine various aspects of the connections between guidelines and disease management.

Chronic diseases, such as diabetes, congestive heart failure, chronic obstructive pulmonary disease, depression and others, constitute a major burden for communities worldwide. Chronic Disease Prevention and Management is progressively making its place as a way to improving quality of care and reducing the existing care gap between collective knowledge and actual individual care. Modern disease management programmes relate heavily on coordinated health care interventions and communications among health care professionals and with individuals and populations with chronic conditions. Patient centeredness and self-care efforts are a significant component as well.

According to published statements that have been adopted by several disease management R&D groups: “Scientifically derived, peer-reviewed guidelines should be the basis of all disease management programs. These guidelines should be evidence based and consensus driven.” Thus, clinical guidelines are considered a key component of disease management programmes. They form the support for scientifically sound, evidence-based, interventions. They constitute the basis upon which the healthcare professionals involved in a disease management programme will agree on their respective roles and frame the inter-professional related training. In addition, they allow deriving the outcomes and process measures to be recorded and fed back to intervention recipients.

The Working Group “Guidelines and Disease Management” organised a workshop at the 2008 G-I-N Conference in Helsinki. The workshop was well attended and allowed to scope different aspects of disease management related issues. Progress since the workshop has been slow, but resources have now been secured at the Clinical Epidemiology Centre, University Hospital and University of Lausanne, Switzerland, to help the work progress. Members of the working group will meet at the 2009 G-I-N conference in Lisboa. They will revisit the group’s objectives and plan activities for the 2009-10 period.

Members of the Disease Management Group:

- Bernard Burnand, CepiC (CH) Joint Speaker
- Günter Ollenschläger, AEZQ (DE) Joint Speaker
- Heather Buchan, NICS/NHMRC (AU)
- Jako Burgers, CBO (NL)
- Nikita de Vernejoul, HAS (FR)
- Fadila Farsi, FNCLCC (FR)
- João Guerra, University of Lisboa (PT)
- André Morin, HAS (FR)
- Philip J van der Wees, KNGF (NL)
- Paul Wallace, Kaiser Permanente (US)
- Susanne Weinbrenner, AEZQ (DE)

G-I-N Emergency Care Community of Interest

Aims and Objectives

The aim of the Emergency Care Community is to support multi disciplinary collaboration across the field of international emergency care to improve the application of clinical guidelines.

The core objectives of the G-I-N Emergency Care Community are to:

- distil knowledge and recommendations from existing high quality clinical guidelines that can be contextualized in local settings
- undertake specific small-scale projects that could relate to guideline appraisal, implementation, dissemination or usability

- provide the membership with access to both clinical knowledge and expertise in guideline development and implementation
- provide a 'virtual' space for the sharing of resources, tools and knowledge that supports application of guidelines.

The G-I-N Emergency Care (EC) Community has established a unique partnership and collaboration between G-I-N, National Health and Medical Research Council (NHMRC) of Australia and the international emergency care sector. There is currently a membership of 44 people from 8 countries representing health practitioners (medical, nursing and paramedics), G-I-N staff and Executive, NHMRC staff and researchers.

In 2009 a steering group was established to provide guidance and assist in the prioritising of activities. A survey was undertaken in 2009 to identify both clinical and non clinic topics of interest. From this list, the steering group decided to focus on developing a framework or tool to assess the applicability of guideline recommendations. Work has been underway adapting the GLIA tool. To maintain a clinical focus the clinical topics are explored to identify the critical clinical question related to emergency care, current practice and potential gaps in practice.

Members of the Emergency Care Community Steering group:

- Dr Samar Abouloud, Cairo University Hospital and School of Medicine (currently based in the UK)
- Dr Marc Afilalo, McGill University, Emergency Department Jewish General Hospital (CA)
- Prof V Anantharaman, Department of Emergency Singapore General Hospital (SG)
- Mr Bill Barger, Operational Quality and Improvement, Quality and Educational Services Division of Ambulance Victoria (AU)
- Prof Maaret Castrén, Emergency Department, Södersjukhuset and Department of Clinical Science and Education, Karolinska Institute (SW)
- Prof Matthew Cooke, Warwick Medical School and Heart of England NHS Foundation Trust, UK & Warwick Clinical Systems Improvement (UK)
- Dr Rob Crouch, Southampton University Hospital NHS Trust and School of Health Sciences, University of Southampton, (UK)
- Prof Wyatt Decker, Mayo Clinic (US)
- Dr Barry Diner, St Luke's Episcopal Hospital (US)
- A/Prof Eddy Lang, McGill University, Emergency Department Jewish General Hospital (CA)
- A/Prof Peter Wyer, Columbia University, New York (US)
- Ms Sue Huckson, National Health and Medical Research Council's (AU)

Website Content / Editorial Steering Group

The Website Content Group is responsible for the regular review of the website design and maintenance. Additional details on the work of the group are available under the section Website of this report.

The group had meetings by teleconference in 2008 and exchanges by email in 2009. The year's major work and achievement was to prepare a book of requirements for the redevelopment of the website. Design and specific functionalities of the new website were also discussed to interact with the provider and ensure that the website meets with the expectations of the G-I-N membership.

Based on discussions and main points raised in the members' survey 2009, the requirements and design for the new G-I-N website focuses on:

- Improving search system and its functionality
- Creating more flexibility for the structure
- More dynamic front page, topics easy to be identified
- Possibility to integrate blogs and discussion forums in the future

Chart 5: New design for www.g-i-n.net



Members of the Website Content / Editorial Steering Group:

- Richard Shiffman, (US) – Speaker since March 2009
- Minna Kaila, FinOHTA (FI) – Speaker from October 2008 to February 2009
- Leonie Brunt, NZGG (NZ)
- Runar Eggen, (NO)
- Inga König, AQuMed / AEZQ (DE), G-I-N Webmaster
- Håkon Lund, SHdir (NO)
- Marjukka Mäkelä, FinOHTA (FI)
- Angela Maienborn, G-I-N Principal Officer until March 2009
- Ignacio Marin, REDEGUIAS (ES)
- Catherine Marshall, NZGG (NZ)
- Günter Ollenschläger, AEZQ (DE)
- Magali Remy-Stockinger, G-I-N Executive Officer since April 2009
- Kitty Rosenbrand, CBO (NL)
- Airton Stein, Grupo Hospitalar Conceição (BR)

Congresses, Workshops, Meetings

Conferences and workshops are the most important points of contact for members and opportunities to promote the Network.

● 5th G-I-N Annual Conference Helsinki (FI), 1st – 3rd October 2008

The 5th Guidelines International Conference was held in Helsinki, Finland. It has been organised in an excellent way by Current Care Guidelines and its parent organisation, the Finnish Medical Society Duodecim. The theme of this conference was: "Implementation in Practice".

The conference was attended by 380 registrants from 27 countries and continued in the successful line of previous conferences in Edinburgh (2003), Wellington (2004), Lyon (2005) and Toronto (2007). Many thanks go to the hosts of the conference and the Scientific Committee for pulling together the program and the exciting social events, and to the sponsoring agencies for their generous support.

The conference included three 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.

For the parallel sessions 184 abstracts were accepted in the format of brief presentations (69), lectures (10), workshops (15), and posters (90). The brief presentations and lectures were grouped into 10 themes, covering guideline implementation, electronic decision support, indicators, adaptation, quality of care, methods, guideline programmes, patient involvement, networking, and oncology. In total, 30 different parallel sessions and 3 plenary were scheduled.

In the last year, the Network was represented at several events (Table 7).

Table 7: G-I-N Activities 2008/2009 (G-I-N Congresses, presentations on behalf of the Network at national / international conferences/workshops/meetings)

Date	Country	Activity
Oct. 2008	Finland	G-I-N Annual Conference
Dec. 2008	Sweden	Presentation to the Scientific Consultation Group meeting of Pan-European Public Health Associations, Federations, Societies and Organisations 'Barriers to Implementation'; Sara Twaddle
Feb. 2009	Belgium	Presentation at UEMS conference; Angela Maienborn
June 2009	US	Presentation at US Cochrane Centre Conference 'G-I-N: An International Initiative to Promote Systematic Development of Clinical Practice Guidelines'; Jako Burgers
Sep. 2009	Spain	Presentation during the fifth Mediterranean Emergency Medicine Congress, at a special forum addressing guideline methodology and implementation in emergency care setting 'The G-I-N Perspective on Dissemination and Uptake'; Sara Twaddle
Oct. 2009	Singapore	Session at 17th Cochrane Colloquium 'Creating a Closer Working Relationship between Cochrane and Guideline developers.' Kay Currie from NHMRC chaired on behalf of G-I-N

Strategic Direction

It is only 7 years since G-I-N was founded in 2002. It aimed to meet the need, identified by the guideline developers and researchers who had formed the AGREE collaboration, for an ongoing forum where guideline developers, researchers and implementers from around the world could meet, share ideas and collaborate on joint activities involving guideline production, appraisal, implementation and research. In 2002 there were 37 founding organisational members from 20 countries – 7 years later G-I-N has 90 organisational members and 5 partners representing 38 countries from Africa, America, Asia, Europe and Oceania. This rapid growth shows the value that many organisations place on the kind of networking and exchange that G-I-N was formed to foster. However it also raises significant challenges for G-I-N in meeting the expectations of its members.

G-I-N does not receive infrastructure funding from any other sponsoring organisation or agency – to operate it relies on the income it receives from membership fees and from any profit it generates from meetings and conferences. The G-I-N Board has tried to keep membership fees and conference fees low so that as many groups and individuals as possible can participate in the network's activities. This means that, while G-I-N is able to support a small secretariat, it is still heavily reliant on an enormous amount of voluntary work from members to undertake the work that will allow it to achieve its stated aims.

The current worldwide financial uncertainties also pose challenges for G-I-N given its reliance on member subscriptions. Retaining members, increasing the participation of new members in G-I-N activities and providing ongoing value for G-I-N members are key issues for G-I-N in the coming years.

Future strategy for G-I-N was a focus of Board meeting in Cologne, Germany in February this year. We were enormously grateful to Niek Klazinga who led the discussion of future directions for G-I-N and helped the Board identify the ways the network could be best placed to lead and strengthen the community of professionals involved in guidelines. It was agreed that G-I-N would look to find ways to support a stronger involvement of individuals as well as organisations in G-I-N activities and that we should be seeking to actively recruit more individual members. The conference will continue to be a key area for attracting new members to G-I-N, and providing opportunities for members to develop professionally and form strong productive working collaborations. Membership surveys and feedback show that this is one of the most valued aspects of G-I-N and we will continue to use the suggestions provided by members about ways the conferences can be used strategically and can be tailored to improve interaction and networking opportunities. This year the meeting in Lisbon gives us a focus on Ibero-America, next year the conference will be held in North America, a region where there is also a lot of opportunity for G-I-N to expand membership and gain valuable perspectives and input from the broad array of guideline professionals working in this part of the world. Another key area for G-I-N focus into the future is to improve links to ongoing research and development in the field, helping members identify new research opportunities but also looking to ways we can be actively involved with partners whose main focus is guideline research and development of new tools and methods to improve guideline production and uptake.

There was considerable discussion about the role G-I-N should play in leading discussion and helping to set standards in important areas of guideline development, implementation and evaluation. One way to do this is through production of working papers and position papers. There are three general issues for G-I-N in producing position papers: the capacity to resource the research required and to deliver high quality products in a timely way; identification of key

issues where members would value the production of position papers, and the process that should be used to gain general agreement on the position G-I-N should take on key issues. This is an area where the Board is continuing to debate the best way forward and we would welcome your views on this topic. The final key strategic area for the future is our new web site and the redevelopment of the website now underway provides opportunities for more innovative networking as well as being a key service for members

The G-I-N Annual Meetings have always been a source of enormous inspiration and a reminder of the great value that comes from sharing ideas with others who are enthusiastic about improving health care delivery and health care outcomes through better use of evidence. G-I-N depends on its members and greatly appreciates your support and active involvement. This year, as we meet in Lisbon for the sixth G-I-N Annual Meeting, we aim to build on the substantial work already undertaken to make G-I-N continue as a strong and vibrant organisation into the future.

Heather Buchan, Vice-Chair of G-I-N

Finances

Financial Report 2008

(The following is an extract of the Financial Statements by the independent financial examiner Milne Craig, the complete report is available to members via the G-I-N Website and can be sent to others upon request).

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

Statement of Financial Activities - Period from 1 April 2008 to 31 March 2009

	Amounts
INCOMING RESOURCES	
Incoming resources from generating funds	
Voluntary Income	186 800,00 €
Investment income	2 146,00 €
Incoming resources from charitable activities	4 098,00 €
TOTAL INCOMING RESOURCES	193 044,00 €
RESOURCES EXPENDED	
Costs of generating funds	
Costs of generating voluntary income	13 603,00 €
Charitable activities	120 990,00 €
Governance costs	34 788,00 €
TOTAL RESOURCES EXPENDED	169 381,00 €
NET OUTGOING RESOURCES FOR THE YEAR	23 663,00 €
Total funds brought forward	43 323,00 €
TOTAL FUNDS CARRIED FORWARD	66 986,00 €

Budget Financial Year 2008

Budget 1.04.2008 till 31.03.2009 (financial year 2008)		
		EUR
	I. costs	
1.	Fees	
	1a) Principal Administration Officer	59 750
	1b) Admin. Secretariat	31 500
	1c) Webmaster	14 175
	1d) Office Secret. Scotl. / Fin. Controlling	5 700
2.	Website develop., maintenance	20 000
3	G-I-N Working groups	1 000
4	Administration	6 675
5	Annual report	1 000
6	Travel expenses	12 000
7	Promotion/Representation	2 000
8	Conferences	2 500
9	Bank Costs	500
	total costs	156 800
	II. income	
1.	Organisational Member Fee	147 300
2.	Associate Member Fee	4 200
3.	Interest	300
6.	G-I-N Annual Congress	5 000
	total income	156 800
	balance income/costs	0

The Board are grateful to Iain Grimmond for advice on financial issues relating to Scottish charities.

Board of Trustees 2008-2009

Sara Twaddle (UK)	Scottish Intercollegiate Guidelines Network <u>Chair, Member of the Executive Committee</u>
Heather Buchan (AU)	National Institute of Clinical Studies / National Health and Medical Research Council <u>Vice Chair, Member of the Executive Committee</u>
Günter Ollenschläger (DE)	Agency for Quality in Medicine <u>G-I-N Honorary Patron, Treasurer, Member of the Executive Committee</u>
Jean Slutsky (US)	US Agency for Healthcare Research and Quality <u>Member of the Executive Committee</u>
Jako Burgers (NL)	Dutch Institute for Healthcare Improvement
Dave Davis (US)	Association of American Medical Colleges
Béatrice Fervers (FR)	National Federation of Cancer Centres
Minna Kaila (FI)	National Institute for Health and Welfare
Catherine Marshall (NZ)	Independent Guideline Advisor G-I-N Honorary Patron
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Richard Shiffman (US)	Yale Center for Medical Informatics
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.

Abbreviations

AAO	American Academy of Otolaryngology
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
ACP	American College of Physicians, US
ADAPTE	The ADAPTE Collaboration
AEKB	Berlin Chamber of Physicians, DE
AEKW	Vienna Medical Chamber, AT
AETMIS	Québec Government Agency responsible for Health Services and Technology Assessment
AFDG	Association of Family Doctors of Georgia
AHRQ	Agency for Healthcare Research and Quality, US
AMB	Brazilian Medical Association, BR
ANS	National Agency of Supplementary Health, BR
ARS	Regional Agency for Health in Tuscany, Quality Unit, IT
ART	AGREE Research Trust
AQuMed / AEZQ	Agency for Quality in Medicine, DE
ASCO	American Society of Clinical Oncology, US
ASR	Regional Health Agency Emilia Romagna, IT
AUA	American Urological Association, US
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
CAREMBC	Central Asian Network of EbM Centers, KG, KZ, TJ, TM, UZ,
CARI	Cari Guidelines, Australia
CBO	Dutch Institute for Healthcare Improvement, NL
CCE	Centre for Clinical Effectiveness
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
CEVEAS	Centre for the Evaluation of Effectiveness of Health Care, IT
CHEST	American College of Chest Physicians, US
CIR	Center for International Rehabilitation, US
CNSMF	National Center for Studies in Family Medicine, RO
CPAC	Canadian Partnership Against Cancer
CPSS	Center for Health Policies and Services, RO
CRED	CRED Foundation - Romanian-Swiss Centre for Health Sector Development
CTS	Canadian Thoracic Society
DGTHG	German Society of Thoracic and Cardio-Vascular Surgery, DE
DKG	German Cancer Society, DE
DM	Domus Medica vzw; Flemish College of General Practitioners (formerly WVVH), BE
DUODECIM	Duodecim Medical Publications Ltd, FI
DUODECIM	Finnish Medical Society, FI
EHIF	Estonian Health Insurance Fund, EE
FMH	Swiss Medical Association

GAC	Guidelines Advisory Committee, CA
GBA	Federal Joint Committee, DE
GIMBE	Italian Evidence-Based Medicine Group, IT
GOEG	Health Austria, Federal Institute for Quality in Health Care, AT
GRADE	GRADE Working Group
HAS	French National Health Authority (formerly ANAES), FR
HQAU	Healthcare Quality and Accreditation Unit of Alexandria University Hospitals
HTA-DoH	HTA Unit, Ministry of Health Malaysia, MY
IACS	GuíaSalud-Health Sciences Institute of Aragón
IDSA	Infectious Diseases Society of America, US
INAHTA	The International Network of Agencies for Health Technology Assessment
INCa	French National Cancer Institute
INCDS	National School of Public Health and Health Services Management, RO
IQWiG	Institute for Quality and Efficiency in Healthcare, DE
ISS	Italian National Institute of Health, IT
JBH	Joanna Briggs Institute, AU
KAMS	Korean Academy of Medical Sciences, KR
KNGF	Royal Dutch Society for Physical Therapy, NL
LEVV	Netherlands Centre for Excellence in Nursing
MHC	The Mental Health Commission, IE
Minds Center	Medical Information Network Distribution Service Center, Japan Council for Quality Health Care, JP
MS	Department of Quality Management and Standards of Treatment, Ministry of Health, MD
NBOCC	National Breast and Ovarian Cancer Centre
NEHL	Norwegian Electronic Health Library, NO
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
PHA	State Agency "Public Health Agency"
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
SHDIR	Directorate for Health and Social Affairs, NO
SIGN	Scottish Intercollegiate Guidelines Network, UK
SOR	Centre Léon Bérard, Cancer Centre
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
WMA	World Medical Association
ZZQ	Agency for Quality in Dentistry, DE