SURE Rapid Response Guides

1. Question clarification guide

- What type of question is it?
  - Does the question relate to **how big a problem is** (e.g. the prevalence of a risk factor or condition, limited access to a service, or the under- or over-utilisation of a service)? If so, it is necessary to clarify the settings or populations of interest and the outcomes of interest (e.g. the risk factor, condition, access or utilisation)

  - Does the question relate to **the causes of a problem** (e.g. why there is a high prevalence of a condition or why a service is not accessible)? If so, it is necessary to clarify the settings or populations of interest, exposures (the likely causes of the problem) and the outcomes of interest

  - Does the question entail **identifying options to address a problem** (e.g. what the options are for improving the delivery of an effective clinical intervention or what the options are for improving access to a service)? If so, it is necessary to clarify the settings or populations of interest, the range or types of interventions of interest (and any specific interventions of interest), and the outcomes of interest (including desired outcomes and any particular concerns about adverse effects or resource utilisation). What are the primary (most important) outcomes of interest and what are secondary outcomes?

  - Is the question about **the effects of a specific option** (or options) (e.g. how effective is a specific programme or service, or what are the advantages and disadvantages of a change in who delivers a service or where it is delivered)? If so, it is necessary to clarify the settings or populations of interest, the specific interventions of interest (including what is currently being done), and the outcomes of interest (including desired outcomes and any specific concerns about adverse effects or resource utilisation). What are the primary (most important) outcomes of interest and what are the secondary outcomes?

  - Is the question about **barriers to change** (e.g. the reasons why an intervention is not being delivered, or the challenges of implementing a health system change)? If so, it is necessary to clarify the settings or populations of interest, any specific potential barriers or facilitators of interest, and the outcomes of interest (i.e. the desired change and any particular concerns about adverse effects or resource utilisation)

  - Does the question entail **identifying implementation strategies to address a problem** (e.g. what are the options for increasing the utilisation of a service, improving the adherence of health workers to guidelines, or changing a health system arrangement)? If so, it is necessary to clarify the settings or populations of interest, the range or types of interventions of interest (and any specific interventions of interest), and the outcomes of interest (including the desired change and any particular concerns about the adverse effects or resource utilisation). What are the primary (most important) outcomes of interest and what are secondary outcomes?
- Is the question about the effects of a specific implementation strategy (or strategies) (e.g. how to increase the utilisation of a service, how to improve health workers’ adherence to a guideline, or how to change a health system arrangement)? If so, it is necessary to clarify the settings or populations of interest, the specific interventions of interest (including what is currently being done), and the outcomes of interest (including desired changes and any specific concerns about adverse effects or resource utilisation). What are the primary (most important) outcomes of interest and what are secondary outcomes?

- Is the question about monitoring or evaluation (e.g. how to monitor or evaluate the implementation of a health system change)? If so, it is necessary to clarify the settings or populations of interest, the specific interventions of interest (including what these are being compared to – for example, what is currently being done), and the outcomes of interest (including the desired outcomes and any specific concerns about adverse effects or resource utilisation). What are the primary (most important) outcomes of interest and what are the secondary outcomes?

- If the question does not fit into any of the above categories and is within the scope of the rapid response service, how would you characterise the type of question?

- What is the clarified question?
  - The clarified question should specify the setting(s) and or population(s) of interest, the interventions or exposures if relevant, and the outcomes of interest in a single sentence
  - This question will be used to establish criteria to decide which research is relevant, develop a search strategy, and assess the research that is found
  - It is important to confirm with the user that the clarified question is correct and that it has not been distorted by trying to focus it in an inappropriate way

- Is the clarified question within the scope of the rapid response service?
  - To be within the scope of the rapid response service, the question should be about arrangements for organising, financing or governing a health system; or about strategies for implementing changes
    - Questions about clinical or public health interventions are generally outside of the scope of the service
    - Questions that do not need to be answered within one month are also outside of the scope of the rapid response service
    - If a question does not meet either of these two criteria, the reason should be noted and explained to the user
    - If possible, alternative sources of information or support should be suggested; e.g.
      - Sources of systematic reviews of the effects of clinical and public health interventions (The Cochrane Library and PubMed)
      - Sources of local or national data (based on the inventory that we will develop)
      - Note any resources that would be helpful to the user and should be considered for inclusion in the clearing house that we will develop

- When is the response needed?
  - Note the time and date by which a response is needed
What is the reason for the deadline (e.g. a meeting, a need to respond rapidly to something that was in the media or to a question from parliament, or an emergency situation)

- Agree on a practical time and date for delivering a response that meets user needs

**What does the person asking the questions think the answer to the question is?**

- After determining that a question is within the scope of the rapid response service and agreeing the deadline, ask the user what he or she thinks the most likely answer to the question will be, without having or providing access to any additional information at the time
- Be as specific as possible and try to get a response that is as specific as possible, but do not push the user to guess
  - If an answer is elicited, ask the user how confident she or he is regarding their answer. Use the following categories: ‘Very Confident’, ‘Confident’, ‘Neither Confident Or Unconfident’, ‘Unconfident’, ‘Very Unconfident’
- Ask the user what she or he thinks would be decided if a choice had to be made immediately. Again, no additional information should be provided
  - If an answer is elicited, ask the user how confident she or he is regarding their answer. Use the following categories: ‘Very Confident’, ‘Confident’, ‘Neither Confident Or Unconfident’, ‘Unconfident’, ‘Very Unconfident’
2. Guide for searching, critically appraising and summarising evidence

- **Develop a search strategy**
  - Decide what type/s of evidence is/are needed, e.g.
    - Local or national indicators (and comparators) to estimate how big a problem is (See SURE Guide 3. Clarifying the problem)
    - Qualitative research addressing how important a problem is to people or their perceptions of a problem (See SURE Guide 3. Clarifying the problem)
    - Analyses of the causes of a problem (See SURE Guide 3. Clarifying the problem)
    - An analytic framework for identifying options to address a problem (e.g. in a systematic review or an overview of reviews) (See SURE Guide 4. Deciding on and describing policy options)
    - Systematic reviews of the effects of options (See SURE Guide 4. Deciding on and describing policy options)
    - Qualitative or quantitative studies of barriers to change and facilitators (See SURE Guide 5. Identifying and addressing barriers to implementing policy options)
    - An analytic framework for identifying implementation strategies (See SURE Guide 5. Identifying and addressing barriers to implementing policy options)
    - Systematic reviews of the effects of implementation strategies
    - Research or methodology related to monitoring and evaluation (See SURE Guide 6. Clarifying uncertainties, and needs and priorities for monitoring and evaluation)
  - Decide what databases or other sources to search, e.g.
    - For local or national indicators (and comparators) – (See SURE Guide 3. Clarifying the problem)
    - For qualitative research – PubMed and local experts
    - For analyses of the causes of a problem – PubMed and experts
    - For analytic frameworks for identifying options to address a problem – experts, a systematic review or overview of reviews, and PubMed
    - For systematic reviews of the effects of options – Health Systems Evidence, The Cochrane Library or PubMed
    - For studies of barriers to change and facilitators – PubMed
    - For analytic frameworks for identifying implementation strategies – experts, a systematic review or overview of reviews, and PubMed
    - Systematic reviews of the effects of implementation strategies – CADTH Rx for Change, The Cochrane Library, and PubMed
    - For research or methodology related to monitoring and evaluation – PubMed, Cochrane Methods Register, and methodologists
    - Develop a search strategy using boolean logic including text words and keywords for
      - (settings or populations of interest – connected with OR) AND
      - (interventions of interest, if relevant – connected with OR) AND
      - (the outcomes of interest – connected with OR) AND
      - (the types of research of interest – e.g. using hedges in PubMed)
    - Use relevant articles to identify search terms, to search for ‘Related articles’ in PubMed, or to search for articles that cite key references (e.g. using Google Citation)
    - Narrow or broaden the search strategy if there are too many or too few hits
- Screen the hits and flag the articles as follows: those that are likely to provide relevant evidence and should be retrieved; those that are likely to provide useful background information (e.g. an analytic framework) and should be retrieved; those that may provide relevant evidence or background and should only be retrieved if there is a need and sufficient time is available; and those that are not relevant.

- Search for systematic reviews and overviews of systematic reviews first. Only search for primary studies if a good quality, up-to-date review cannot be found.

- Critically appraise the reliability of the evidence using a checklist for assessing a systematic review or a primary study (See SURE Guide 4. Deciding on and describing policy options).

- Prepare a summary of findings for the most relevant and reliable evidence using the Worksheets for summarising the findings (See SURE Guide 4. Deciding on and describing policy options).
3. Guide for summarising and reporting responses to questions

- Use the SURE rapid response template
- The title should reflect the clarified question that was asked.
- The **Background** should not be more than one or two paragraphs
  - It should clarify the motivation for asking the question / preparing the rapid response.
  - It should only provide key important background information that is essential for the response to be understandable, including explanation of the following if these are not obvious or may be confusing:
    - The people, settings or problem
    - The intervention(s) or policies
    - The comparison
    - The outcomes or goals of the interventions or policies
  - The background should not repeat information included in the summary of findings
- The **key messages** should be succinct
  - There should not be more than 4-5 key messages summarising the most important messages from the summary of findings. There should also be a key message regarding the relevance of the review
  - The key messages should not extend beyond the bottom of the first page
- The **summary of findings**
  - If necessary, subheadings can be used, e.g. if there are several key comparisons, or if the question can best be answered by splitting it into two or more sub-questions.
  - The first paragraph should be no more than one or two sentences in length, and summarise the key information contained in the table entitled ‘About the Review’. This table, which is located on the last page, will contain, for example, details related to the total number of included/relevant studies, where the studies were conducted, and the specific types of interventions for which studies were found
  - The second paragraph should provide information needed to understand the findings. It should not repeat what is included in the ‘Background’ section and should not include details about study designs
  - The bullet points should highlight key findings from the ‘Summary of Findings’ table
  - These bullet points should be qualitative statements using wording that is consistent with the suggestions for summarising findings that can be found at the end of the Worksheets. These guidelines are adapted from the Cochrane plain language summaries
  - Do not say “no difference”!
- The **summary of findings table** should be prepared using the Worksheets for summarising the findings
  - If the table is largely empty (e.g. because there are no studies) or not informative (e.g. only very low quality evidence has been found), it should be deleted
  - Ideally, the table should follow the standard format. This can be changed, however, if it helps to clarify the findings. For example, a column for comments
may be added or the ‘Impacts’ column could be relabelled (or split) if the findings can be reported in a standard way across outcomes

- **Relevance of the research to the question being asked**
  - The ‘Findings’ column should state in as few words as possible the evidence (or lack of evidence) that provides the basis for the interpretation. (See the SUPPORT Summaries for examples)
  - The interpretations should be guided by the checklists for applicability in the box below:

<table>
<thead>
<tr>
<th>Checklists for applicability</th>
</tr>
</thead>
</table>

**Are the results likely to be applicable?**

1. Are there important differences in the structural elements of health systems (i.e., governance, financial and delivery arrangements) between where the research was done and where it could be applied that might mean an intervention could *not* work in the same way?
   - e.g., Research on the effectiveness of bulk purchasing arrangements in lowering prices for prescription drugs was done in countries with no concentration in the ownership of pharmacies, whereas you may work in a country where a pharmacy monopoly exists

2. Are there important differences in on-the-ground realities and constraints (i.e., governance, financial and delivery arrangements) between where the research was done and where it could be applied that might substantially alter the potential benefits of the intervention? And can these challenges be addressed in the short-term to medium-term?
   - e.g., Research on the effectiveness of a team-based approach to maternity care in reducing both maternal and child morbidity was undertaken in countries with midwives and traditional birth attendants, whereas you may work in a country where neither type of health provider is common

3. Are there likely to be important differences in the baseline conditions between where the research was done and where it could be applied? If so, this would mean that an intervention would have different absolute effects, even if the relative effectiveness was the same.
   - e.g., Research on the effectiveness of a strategy for promoting HIV testing among pregnant women was completed in countries where less than 10% of pregnant women were offered HIV testing, whereas you may work in a country where 85% of pregnant women are offered HIV testing

4. Are there important differences in the perspectives and influences of health system stakeholders (i.e., political challenges) between where the research was done and where it could be applied that might mean an intervention will not be accepted or taken up in the same way? And can these challenges be addressed in the short-term to medium-term?
   - e.g. Research on the effectiveness (and safety) of nurse practitioners in substituting for physicians when providing routine medical care for children, was based in countries with shortages of physicians and weak medical associations, whereas you may work in a country with a surplus of physicians and a very strong and vocal medical association
• **About the research underlying this response**
  - Delete or re-label rows that are not relevant
  - The ‘What we searched for’ column should clarify the selection criteria used. If the Response is based on a single systematic review, the heading can be changed to ‘What the review authors searched for’ and the column should reflect the selection criteria for the specific review
  - The ‘What we found’ column should summarise the characteristics of the studies that were found. If relevant, include the number of studies for each different type of:
    - Intervention
    - Participants
    - Setting (e.g. country)
    - Primary outcome reported
    - Study design
  - The date of most recent search should either be when the searches were conducted for the response or, if the response is based on a single systematic review, when the searches for the review were conducted
  - Limitations should be based on the checklist for assessing the reliability of a system review ([See SURE Guide 4. Deciding on and describing policy options](#)) and state succinctly either the limitations of the review that was done for the response or, if the response is based on a single systematic review, the limitations of the systematic review
    - This should either state “This Response is based on a systematic review with only minor limitations” OR
    - Any important limitations should be noted. For example:
      - “This is a reliable systematic review with only minor limitations. However, it has not been updated since 1999” OR
      - “This was an exhaustive review of the available research, but few rigorous evaluations were found” OR
      - “We were unable to find a systematic review that addresses this question. Therefore this response is not based on a systematic review and it was not possible to conduct an exhaustive search for relevant research.”

• **References**
  - This should include the systematic review(s) and any primary studies (not included in a systematic review) that met the selection criteria and were assessed.
  - If relevant, add a subheading such as ‘Related literature’, which includes key references with information that can help people understand the problem, provide details about the interventions, or help to put the results of the Response in a broader context.

• **Conflicts of interest**
  - Typically, this should state “None declared” or “None known” or “None”

• **Acknowledgements**
  - Include people who peer reviewed the Response and anyone consulted in preparing the response, provided they have given permission to be acknowledged

• **For more information contact**
- This can be the name and email address of the person who prepared the Response, a fixed email address for the Rapid Response Service, or the person responsible for the Rapid Response Service