WHO recommendations

Optimizing health worker roles to improve access to key maternal and newborn health interventions through task shifting

Annex 4

The criteria used in moving from evidence to recommendations (the DECIDE framework)
## ANNEX 4: CRITERIA INCLUDED IN THE DECIDE FRAMEWORK FOR GOING FROM EVIDENCE TO RECOMMENDATIONS

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Question</th>
<th>Explanation</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Seriousness of the problem</strong></td>
<td>Are the consequences of the problem serious (i.e. severe or important)?</td>
<td>The more serious a problem is, the more likely it is that an option that addresses the problem will be a priority (e.g. diseases that are fatal or disabling are likely to be a higher priority than diseases that only cause minor distress)</td>
<td>Note 1: for the Optimize4MNH guideline, questions have already been selected because they relate to serious and widespread problems. This information is therefore not presented for each question, but may be discussed by the guideline panel</td>
</tr>
<tr>
<td><strong>Number of people affected</strong></td>
<td>Are a large number of people affected by the problem?</td>
<td>The more people who are affected, the more likely it is that an option that addresses the problem will be a priority</td>
<td>See note 1 above</td>
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<tr>
<td><strong>Desirable effects (benefits)</strong></td>
<td>Are the anticipated desirable effects of the option large (taking into account the severity or importance of the beneficial consequences and the number of people affected)?</td>
<td>The larger the benefit, the more likely it is that an option will be recommended</td>
<td>Including health and other benefits</td>
</tr>
<tr>
<td><strong>Undesirable effects</strong></td>
<td>Are the anticipated undesirable effects of the option small (taking into account the severity or importance of the adverse effects and the number of people affected)?</td>
<td>The greater the risk of undesirable effects, the less likely it is that an option will be recommended</td>
<td>Including harms (to health) and other disbenefits</td>
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<tr>
<td><strong>Certainty of evidence (confidence in effect estimates)</strong></td>
<td>What is the certainty of the anticipated effects?</td>
<td>The less the certainty in the anticipated impacts, the less likely that an option will be recommended</td>
<td>- Focusing on the certainty of evidence for critical outcomes (those that are driving a recommendation) - If low certainty evidence is the main reason for not recommending an option, consideration should be given to a pilot study or impact evaluation</td>
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<tr>
<td><strong>Balance of desirable effects and undesirable effects?</strong></td>
<td>Are the desirable effects large relative to the undesirable effects?</td>
<td>The larger the desirable effects in relation to the undesirable effects, the more likely it is that an option will be recommended</td>
<td></td>
</tr>
<tr>
<td><strong>Resource use (costs)</strong></td>
<td>Are the resources required small?</td>
<td>Considers whether the option requires a small investment of resources or may save resources. The greater the cost, the less likely it is that an option will be a priority</td>
<td>From a government perspective</td>
</tr>
<tr>
<td><strong>Value for money</strong></td>
<td>Is the incremental cost small relative to the benefits?</td>
<td>The lower the cost per unit of benefit, the more likely it is that an option will be a priority</td>
<td>From a societal perspective, taking into account the robustness of the estimate (sensitivity analyses)</td>
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<tr>
<td><strong>Impacts on equity</strong></td>
<td>Would the option reduce</td>
<td>Policies or programmes that reduce</td>
<td>Note 2: for the Optimize4MNH</td>
</tr>
</tbody>
</table>
### Acceptability

**Is the option acceptable to most stakeholders (given the relative importance they attach to the desirable and undesirable consequences of the option and their moral values)?**

The less acceptable an option is to key stakeholders, the less likely it is to be recommended. Unacceptability may be due to:

- Some stakeholders attaching more value (relative importance) to the undesirable consequences than to the desirable consequences of an option (either because of how they might be affected personally or because of their perceptions of the relative importance of consequences for others)
- Moral approval or disapproval (i.e. in relationship to ethical principles such as autonomy, nonmaleficence, beneficence or justice)

Taking into account:
- Who benefits (or is harmed) and who pays (or saves)
- When the benefits, adverse effects, and costs occur (and the discount rates of key stakeholders; e.g. politicians may have a high discount rate for anything that occurs beyond the next election)

### Feasibility (implementability)

**Is the option feasible to implement?**

The less feasible (capable of being accomplished or brought about) an option is, the less likely it is that it will be recommended (i.e. the more barriers there are that would be difficult to overcome)

### Balance of consequences

**What is the balance between desirable and undesirable consequences?**

Based on the evidence presented, consider whether the desirable consequences outweigh the undesirable consequences, or vice versa

### Recommendation

For each question (PICO), the guideline panel is asked to choose one of the following options:

- Recommend against the option
- Suggest considering the option
- Recommend the option

### Justification

The guideline panel provides a justification for the recommendation made in relation to each question (PICO)

### Implementation considerations

Factors that should be considered at regional, national and sub-national levels when deciding how / whether to implement the recommended option

### Monitoring and evaluation

Key indicators for monitoring and evaluation of the recommended option

**Note 3:** for the Optimize4MNH guideline, this information is not presented for each question but may be considered by the panel

### Research priorities

Key research priorities in relation to the guideline question, based on findings from the systematic reviews informing
the guideline; on input from stakeholders; and on the guideline panel deliberations