

CDC Guideline Development Decision Tool

A CDC guideline document contains recommendations for practice that carries the *authority of the Agency*. To strengthen the process for developing CDC guidelines, the Office of Science (OS), Office of Science Quality (OSQ), Guidelines and Recommendations Team has updated the *CDC Guideline Development Decision Tool* (GDDT).

The GDDT consists of questions in two steps. Step 1 helps you determine whether *the proposed guideline is needed*. Step 2 helps you determine whether *CDC is an appropriate organization to develop the proposed guideline*. Information is provided under each question to help you answer those questions. Since guideline development can take many years and consume many resources, we encourage guideline developers to answer each question in their order before developing a guideline, and to justify their answers in the boxes provided. Respondents can attach a document, link, citation, or highlighted section as rationale. For a more informative process, we recommend that more than one guideline developer respond to the questions.

Step 1: Answer all four questions under “Step 1.” If you have answered all questions without any “reconsider” responses, a strong case exists for developing the proposed guideline. Proceed to step 2.

Step 2: Answer all questions under “Step 2.” If you have answered all questions without any “reconsider” responses, a strong case exists for CDC to be involved in developing the proposed guideline.

We recognize that this tool will be used for multiple and diverse public health guidelines, so not every question will be equally relevant. Although the primary use of the information is to inform decision-making, it may also be useful for providing background information in the guideline manuscript.

The Guidelines and Recommendations Team has other [resources](#) to assist developers in answering these questions. You may contact the Guidelines and Recommendation Team for a consultation at any stage of the guideline development process. For more information about guideline resources, tools, and training visit the Office of Science, [Guidelines and Recommendations](#).

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Step 1: Should the guideline be developed at all, regardless of whether CDC or an external party develops it?

PUBLIC HEALTH BURDEN OR OTHER JUSTIFICATION:

1.1 Will the guideline address a current or potential public health burden, gap in clinical care or laboratory practices, or other important need?

For example, the guideline could address a current or potential public health burden, an emerging public health hazard, important public health methods, best practices, safety guidelines, surveillance reports, lab practices, or meaningfully reduce the gap between current and optimal practice in clinical care.

Current or potential burden or hazard can be expressed in various metrics such as prevalence of mortality, morbidity, injury, disability, quality of life years (QALYs), Disability Adjusted Life Year (DALYs). Gaps can be reflected in deficiencies in knowledge, adherence, progress in a particular public health area, preventing, detecting, or treating a condition, reducing health disparities, or meeting health objectives.

If “Yes,” briefly describe the justification for the guideline.

Type description here.

If “No,” reconsider whether the proposed guideline should be developed.

SIMILAR GUIDELINES

1.2. Are there current, credible, and relevant guidelines that make the proposed guideline entirely duplicative?

For example, an existing guideline on the same topic would not be entirely duplicative if the plan was to adapt or update the guideline based on current evidence.

If “Yes,” reconsider whether the proposed guideline should be developed.

If “No,” describe differences between existing and proposed guideline.

Type description here.

EVIDENCE

1.3. Does an evidence base exist on which to develop the proposed guideline?

Potential sources of evidence to consider beyond direct and indirect research findings include epidemiological data, case reports, EHR data, and practice-based evidence from subject matter experts.

A preliminary scan of the literature can be helpful to determine whether published evidence is available to support the proposed guidelines.

If “Yes,” briefly describe available evidence and literature sources.

Type description here.

If “No,” reconsider whether the proposed guideline should be developed.

ASSESSMENT OF STAKEHOLDER INTERESTS:

1.4. Has your intended audience or other stakeholders expressed a need for new or updated guideline on the topic?

Audience or stakeholder needs can be communicated through different channels, such as conferences, meetings, focus groups, surveys, public hearings, or requests for information.

An assessment of stakeholder and end-user needs can inform decisions on whether to produce a guideline, what questions should be prioritized, and what communication and dissemination strategies may be needed to foster uptake. Consider additional stakeholder engagement if views of key stakeholders are not clear. For example, opinions can be collected from internal and external champions, subject matter experts, and partners interested in collaboration.

If “Yes,” briefly describe stakeholder feedback.

Type description here.

If “No,” reconsider whether the proposed guideline should be developed.

STEP 1 RESULTS: IF YOU HAVE REACHED THIS POINT WITHOUT ANY “RECONSIDERS” ALONG THE PATH, A STRONG CASE EXISTS FOR DEVELOPING THE GUIDELINE

Step 2: Should CDC develop the proposed guideline?

PRIMARY RESPONSIBILITY

2.1. Does CDC have primary responsibility (or is CDC mandated by legislation, policy, or other directives) to lead development of this guideline?

CDC has recognized expertise or responsibility for the topic; CDC is mandated to take the lead on this guideline; the topic aligns with CDC's mission; or if CDC doesn't develop the guideline, the guideline may not be developed at all.

If "Yes," briefly describe how the proposed guideline aligns with the CDC Centers, Institutes, and Offices (CIO) mission and goals.

If "No," reconsider whether CDC should develop the proposed guideline.

PARTNERSHIPS

2.2. Is it appropriate for CDC to partner with another organization to develop the proposed guideline?

For example, a partnership could increase support and reach of the proposed CDC guideline, inspire creative ideas, solutions, and greater potential for guideline use, or provide an opportunity to reduce staffing and financial burden. On the contrary, it may not be appropriate to partner with another organization due to anticipated challenges, e.g., lengthening the time, less control over the process, FACA requirements.

If "Yes," briefly describe the organization and the proposed approach for collaboration.

If "No," describe why it is not appropriate or feasible for CDC to partner with another organization to develop the proposed guideline.

RESOURCES AND TIME

2.3. Are there adequate resources and time available to develop the proposed guideline?

Resources for guideline development may include staff and manager time, and financial resources meetings, scientific and logistical support. Guideline developers can construct a work plan for guideline development to determine timeline and resources needed. The development of the proposed guideline can take a substantial amount of time. Determining whether adequate time is available, and ensuring that stakeholders are comfortable with that timeline, is important before embarking on a guideline development project. Consider adding partnerships or reducing the guideline scope or focus on a modular approach (i.e., one research question at a time) to make it more feasible to develop the proposed guideline.

Adequate consideration also needs to be given to planning guideline dissemination, communication/translation, and evaluation. That is, to maximize use of the guideline, consider staff availability and resources for distributing it through multiple channels (e.g., manuscripts, e-mails, webinars, websites, presentations, conferences, social media), communicating or translating the guideline into easy-to-use formats (e.g., charts, videos, briefs, Web applications, electronic protocols), and evaluating the guideline.

If “Yes,” briefly describe resources and time necessary to carry out these activities.

Type description here.

If “No,” reconsider whether CDC should be involved in developing the proposed guideline.

STEP 2 RESULTS: IF YOU HAVE REACHED THIS POINT WITHOUT ANY “RECONSIDERS” ALONG THE PATH, A STRONG CASE EXISTS FOR CDC TO BE INVOLVED IN DEVELOPING THE PROPOSED GUIDELINE.

References:

1. [World Health Organization \(WHO\) handbook for guideline development](#). 2nd Edition. Guidelines as Topic – standards. 2.Review. 3.Meta-Analysis. 4.Peer Review. 5.Evidence-Based Medicine. 6.World Health Organization. I.World Health Organization. ISBN 978 92 4 154896 0 (NLM classification: WA 39).
2. [Guidelines and Recommendations: A CDC Primer](#). CDC Guidelines and Recommendations Work Group. Version 1.0CDC Primer.
3. Thacker SB, Stroup DF, Carande-Kulis V, Marks JS, Roy K, Gerberding JL. Measuring the public's health. Public Health Rep. 2006 Jan-Feb;121(1):14-22.
4. Health, United States, 2011. [CDC National Center for Health Statistics](#).
5. [PDF\] CDC's Guiding Principles for Public-Private Partnerships](#).