

# The ACCORD checklist for reporting consensus: a practical writing exercise

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15:15 – 16:00

Conference Room 7

Abstract 110



THE UNIVERSITY OF BRITISH COLUMBIA



# Today's objectives

1. Discuss the importance of good reporting of consensus studies
2. Introduce ACCORD
3. Practice using ACCORD
4. Obtain feedback on ACCORD

# Introduction

Patricia Logullo and Niall Harrison

15 minutes

# How many of you have experience with ...



Consensus methods?



Reporting guidelines?

# Consensus: why?

When evidence is limited, you need consensus to decide what to do:



How to treat  
(interventions)  
- CPGs



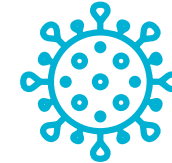
What to treat/  
study (outcomes)  
- COS



Priorities  
(service, health  
economy)



Patients'  
perspectives



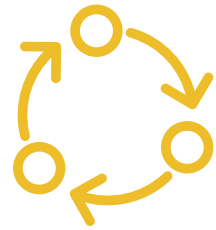
Disease  
classification



Formulating  
policy

# Consensus methods

- There is no gold standard – impossible to do it wrong – but there are many methods



Delphi



RAND/UCLA



Nominal group  
technique



Meetings and  
conferences

# Choosing a consensus method

Anonymity?

Time for expression?

Forcing agreement?

Preparation?

Mediation?

Iteration?

Different methods  
balance different  
advantages and  
disadvantages

# Report how you did it!

Who participated?

How many people participated?

How did they vote / express their views?

How did you summarise their views?

... and more!



# Developing a reporting guideline



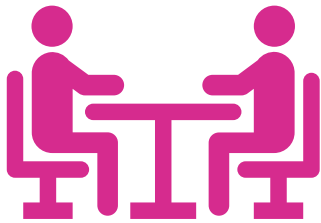
**STROBE**



**Statement + Checklist**  
**Explanation & elaboration document (E&E)**

# ACCORD: objective

- A reporting guideline relevant for ...



All types of  
consensus methods



All areas of health  
research



Researchers anywhere  
in the world

# ACCORD: steering committee



Will Gattrell  
*Bristol Myers Squibb*



Niall Harrison  
*OPEN Health*



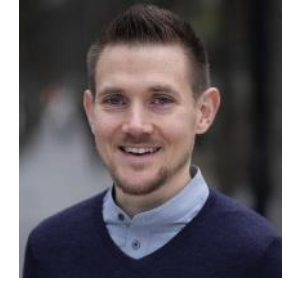
Patricia Logullo  
*University of Oxford and  
EQUATOR*



Esther J. van Zuuren  
*Leiden University  
Medical Centre*



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Canada*



Christopher C.  
Winchester  
*Oxford PharmaGenesis*



David Tovey  
*Journal of Clinical  
Epidemiology*



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*AbbVie*



Amrit Pali Hungin  
*University of Newcastle*



Ellen L. Hughes  
*OPEN Health*

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# ACCORD: initial publications

## Protocol guiding process<sup>1</sup>

## Systematic review informing preliminary checklist<sup>2</sup>

Gattrell et al. *Research Integrity and Peer Review* (2022) 7:3  
https://doi.org/10.1186/s41073-022-00122-0

Research Integrity and Peer Review

**STUDY PROTOCOL** Open Access

### ACCORD guideline for reporting consensus-based methods in biomedical research and clinical practice: a study protocol

William T. Gattrell<sup>1</sup>, Anneli Falli Langseth, Amy Price<sup>2</sup>, Christopher C. Winchester<sup>3</sup>, David Towse<sup>4</sup>, Ellen L. Hughes<sup>5</sup>, Esther J van Zuuren<sup>6</sup>, Keith Goldmann<sup>7</sup>, Patricia Legullo<sup>8</sup>, Robert Matthews<sup>9</sup> and Niall Lanyon<sup>1†</sup>

**Abstract**  
**Background:** Structured, systematic methods to formulate consensus recommendations, such as the Delphi process or nominal group technique, among others, provide the opportunity to harness the knowledge of experts to support clinical decision making in areas of uncertainty. They are widely used in biomedical research, in particular where disease characteristics or resource limitations mean that high-quality evidence generation is difficult. However, poor reporting of methods used to reach consensus – for example, not clearly explaining the definition of consensus, or not stating how consensus group participants were selected – can potentially undermine confidence in this type of research and hinder reproducibility. Our objective is therefore to systematically develop a reporting guideline to help the biomedical research and clinical practice community describe the methods or techniques used to reach consensus in a consistent, transparent, and consistent manner.  
**Methods:** The ACCORD (Accurate Consensus Reporting Document) project will take place in five stages and follow the EQUATOR Network guidance for the development of reporting guidelines. In Stage 1, a multidisciplinary Steering Committee has been established to lead and coordinate the guideline development process. In Stage 2, a systematic literature review will identify evidence on the quality of the reporting of consensus methodology, to inform potential areas for reporting checklist. In Stage 3, Delphi methodology will be used to reach consensus regarding the checklist items, first among the Steering Committee, and then among a broader Delphi panel comprising participants with a range of expertise, including patient representatives. In Stage 4, the reporting guideline will be finalized in a consensus meeting, along with the production of an Explanation and Elaboration (EEL) document. In Stage 5, we plan to publish the reporting guideline and EEL document in open access journals, supported by presentations at appropriate events. Dissemination of the reporting guideline, including a website linked to social media channels, is crucial for the document to be implemented in practice.  
**Discussion:** The ACCORD reporting guideline will provide a set of minimum items that should be reported about methods used to achieve consensus, including approaches ranging from simple unstructured opinion gathering to highly structured processes.

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Open access Original research

### BMJ Open Existing guidance on reporting of consensus methodology: a systematic review to inform ACCORD guideline development

Esther J van Zuuren<sup>1</sup>, Patricia Legullo,<sup>2</sup> Amy Price,<sup>3,4</sup> Zoya Fedorowicz,<sup>5</sup> Ellen L. Hughes,<sup>6</sup> William T Gattrell<sup>7</sup>

**Objective:** To identify evidence on the reporting quality of consensus methodology and to select potential checklist items for the Accurate Consensus Reporting Document (ACCORD) project to develop a consensus reporting guideline.

**Design:** Systematic review.

**Data sources:** Cochrane MEDLINE, Med of Science, PubMed, Cochrane Library, Embase, Academic Search Premier and PsycINFO from inception until 7 January 2022.

**Eligibility criteria:** Studies, reviews and published guidelines addressing the reporting quality of consensus methodology for improvement of health outcomes in healthcare or clinical practice. Reports of studies using or describing consensus methods but not commenting on their reporting quality were excluded. No language restrictions were applied.

**Data extraction and synthesis:** Screening and data extraction of eligible studies were carried out independently by two authors. Reporting quality items addressed by the studies were synthesised narratively.

**Results:** Eighty studies were included: five systematic reviews, four narrative reviews, three research papers, three conference abstracts, two research guidance papers and one protocol. The majority of studies indicated that the quality of reporting of consensus methodology could be improved. Commonly addressed items were: consensus panel composition, definition of consensus and the methods for achieving consensus. Items least addressed were: public patient involvement (PPI), the role of the steering committee, chair/co-lead, contact or interest of panelists and funding. Data extracted from included studies revealed additional items that were not captured in the data extraction form such as justification of deviation from the protocol or incentives to encourage panelist response.

**Conclusion:** The results of this systematic review confirmed the need for a reporting checklist for consensus methodology and provided a range of potential checklist items to report. The next step in the ACCORD project builds on this systematic review and focuses on reaching consensus on these items to develop the reporting guideline.

**Protocol registration:** <https://doi.org/10.1136/bmjopen-2021-029154>

**Check for updates**

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van Zuuren EJ, et al. *BMJ Open* 2022;12:e029154. doi:10.1136/bmjopen-2021-029154

1. Gattrell WT, et al. *Res Integr Peer Rev*. 2022;7(1):3. Epub 20220607
2. van Zuuren EJ, et al. *BMJ Open*. 2022;12(9):e065154. Epub 20220908.

# ACCORD: checklist submitted for peer review



# Today's exercise



Read the study  
scenario provided  
(handout)



In pairs, using  
ACCORD items M3  
and M4, write  
sentences reporting  
panelist identification  
and recruitment



Email your reporting to  
niallharrison@  
openhealthgroup.com  
for review and  
discussion

# Important note!

The scenario might not contain all of the information you need to fully report the item.

If you think additional information is needed, invent the detail and include it in your reporting.

# Writing time

15 minutes



# Evaluation and discussion

15 minutes

# Your proposals!

- [To be added during the workshop]

# Our proposal – M3

- **M3. Explain the criteria for panellist inclusion and the rationale for panellist numbers. State who was responsible for panellist selection.**

The Steering Committee appointed by the National Society of Xology was responsible for identifying panellists. Individuals were invited from five groups identified by the Society as key stakeholders in the management of disease X: clinicians, researchers, patients, carers, and policymakers. **The aim was to include at least 5 representatives from each group**

- ✓ Criteria – stakeholders in disease management
- ✓ Rationale for numbers – five groups, aimed for 5 representatives from each
- ✓ Who was responsible – the Steering Committee

# Our proposal – M4

- **M4. Describe the recruitment process (how panellists were invited to participate).**
  - Include communication/advertisement method(s) and locations, numbers of invitations sent, and whether there was centralised oversight of invitations or if panellists were asked/allowed to suggest other members of the panel.

Prospective panellists were identified from the Society membership list and invited directly by email by the Society. There was no general advertisement. In total 50 invitations were sent. If a prospective panellist declined, they were asked if they could recommend a potential replacement; the qualifications of potential replacements were reviewed by the Society before they were invited.

- ✓ How panellists were identified – Society membership list
- ✓ How panellists were invited – by email
- ✓ Who invited them – the Society
- ✓ How many invitations were sent – 50
- ✓ Was there wider advertisement – no
- ✓ Were panellists allowed to suggest replacements – yes

# Discussion questions

- Why it is important to describe the criteria for panelist selection?
- Did the reporting guidance help you?
- Was this asking for more information than you would have provided in the past?
- Were any aspects of reporting this information challenging?
- Are you currently involved in a consensus study and able to help pilot the full checklist?