



Briefing Note: Guidance vs Guidelines

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Background

The term guidance is an umbrella term used to describe the range of publications used by healthcare professionals and public health professionals which provide information and considered advice. Guidance requires a form of collective agreement, as outlined in the detailed methodologies used to develop them. Therefore, individual professional opinion falls outside the scope. The different categories indicate the relative reliability of the evidence on which the recommendations have been based.

Evidence-Based Guideline (EBG)

The term 'evidence-based guideline' (EBG) is reserved to describe the highest standard of guidance document. These documents incorporate predominantly evidence-based recommendations, derived mainly from published peer-reviewed literature, and are intended to improve the quality and consistency of practice in Scotland. A suitable evidence base must already exist to allow use of a full EBG development methodology. The process for EBG in particular is resource intensive and can be relatively lengthy. There are a number of recognised standards for reviewing evidence and producing guidelines already developed by leading organisations e.g. the Cochrane Collaboration, National Institute for Clinical Excellence (NICE), and the Scottish Intercollegiate Guideline Network (SIGN).

Good Practice Guidance (GPB)

Good Practice Guidance (GPG) aims to provide information and considered advice. This advice is produced by a group of practitioners using predominantly personal expertise and experience, with or without additional expert knowledge, via a defined methodology (e.g. Delphi Method). These are produced when a higher standard EBG is not readily available, for example, where published evidence is lacking (or conflicting) but where there is practice based knowledge, experience, and expertise. They require a consensus-based approach, and suitability is based on collective professional judgement, therefore individual professional opinion is not sufficient. The process used to derive recommendations for this category of guidance will also involve a review of existing published evidence, but will require relatively more emphasis on consensus-based approaches, involving topic experts and practitioners. It is likely that much of the material used in everyday health protection practice will fall into this category.

Formal approaches commonly used include: the Delphi Method, RAND / UCLA Appropriateness Method, the Nominal Group Technique (NGT), and Consensus-Development Conference. An informal approach will still require the development group to document how they moved from the available evidence to each recommendation, and should document the decision-making process. If this is not documented in the guidance document itself, it should be recorded in the development group meeting records. It is recommended that the group document the quality of the considered evidence, any identified uncertainties, and other issues around context (e.g. resources, training needs) that were elements of judgement.