Name:	
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Conduct a quality and local applicability assessment of the Cochrane review conducted by Gruen et al. about specialist outreach clinics, using Table 1 and Table 2 (below) to document your work then describe any points of disagreement from the results of your assessments		
	Description of any points of disagreement	
In Table 1 below, assess the quality of the Cochrane review conducted by Gruen et al.* using the AMSTAR criteria, and compare the instructor's assessment to your assessment. We have provided the AMSTAR criteria and the instructor's assessment in Table 1. After completing your appraisal, provide a description of any points of disagreement and summarize them in the adjacent box.	Summary of the points of disagreement from Table 1:	
*The full text of the article is freely available at the following url: http://onlinelibrary.wiley.com/doi/10.1002/146518 58.CD003798.pub2/pdf		
In Table 2 below, assess the local applicability of the Cochrane review by Gruen et al., and compare your results to the results provided by the instructor. We have provided the local applicability assessment criteria and the instructor's assessment in Table 2.	Summary of the points of disagreement from Table 2:	

If you are completing this task as part of the Health Systems Learning online training course, remember to copy and paste your answers into the online form for instructor review

Table 1: Summary of the assessment of quality for the review by Gruen et al.

Assess the quality of the Cochrane review conducted by Gruen et al.* using the AMSTAR criteria, and compare the instructor's assessment (provided below) to your assessment. State whether you agree or disagree with the instructor, and provide a description about why you agree or disagree.

*The full text of the article is freely available at the following url: <u>http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD003798.pub2/pdf</u>

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Health Systems Learning >> Finding and Using Research Evidence | Task 8 - Assess

Instructor's assessment of the quality of the Cochrane Review conducted by Gruen et al.	To conduct your assessment, type your answer (yes, no, can't answer or N/A) to each question below, then provide your points of disagreement.
1. Was an 'a priori' design provided?	1. Was an 'a priori' design provided?
The research question and inclusion criteria should be established before the conduct of the review. • Yes • No	Points of disagreement:
X <u>Can't answer</u> N/A	
Explanation: Unfortunately there is no mention of a protocol in the review so we have to say 'Can't answer.' However, all Cochrane reviews must have a protocol established before the conduct of the review.	
2. Did the authors undertake duplicate study selection and data extraction? There should be at least two independent data extractors	2. Did the authors undertake duplicate study selection and data extraction?
and a consensus procedure for disagreements should be in place. X <u>Yes</u>	Points of disagreement:
 Can't answer N/A 	
Explanation : See page 4 of the Gruen et al. review, left column, bottom of page. Reviewers worked in three pairs each evaluating one third of comparative studies. In each pair, both reviewers independently assessed the studies for inclusion as well as the quality and findings of the study. Any discrepancies between reviewers were resolved through discussion.	
3. Was a comprehensive literature search performed? At least two electronic sources should be searched. The	3. Was a comprehensive literature search performed?
<pre>report must include years and databases used (e.g. Central, EMBASE and MEDLINE). Key words and/or MESH terms must be stated and where feasible the search strategy should be provided. All searches should be supplemented by consulting current content, reviews, textbooks, specialized registers, or experts in the particular field of study, and by reviewing the references in the studies found. X <u>Yes</u> No Can't answer</pre>	<u>Points of disagreement:</u>
□ N/A	

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Explanation: See page 3, right column, bottom of page and page 4, left column, top of page. Five general electronic databases and two topic-specific databases (i.e., specialized registers) were searched and the years for the search are provided. The search strategy is provided for MedLine. The reference list of each retrieved article was scanned. 4. Was the status of the publication NOT used as an inclusion criterion? The authors should state that they searched for reports regardless of their publication type. The authors should state whether or not they excluded any reports (from the systematic review), based on their publication status, language, etc. Yes No X Can't answer	4. Was the status of the publication NOT used as an inclusion criterion? <u>Points of disagreement:</u>
 N/A <u>Explanation</u>: Could not identify a statement in the review to answer this question. 5. Was the list of studies (included and excluded) provided? A list of included and excluded studies should be provided. 	5. Was the list of studies (included and excluded) provided? Points of disagreement:
X <u>Yes</u> No Can't answer N/A Explanation: See pages 15-16 for a list of included	<u>romts of disagreement.</u>
studies and pages 16-19 for a list of excluded studies. 6. Were the characteristics of included studies	6. Were the characteristics of included
provided? In an aggregated form such as a table, data from the	studies provided?
 original studies should be provided on the participants, interventions and outcomes. The ranges of characteristics in all the studies analyzed (e.g. age, race, sex, relevant socioeconomic data, disease status, duration, severity, or other diseases) should be reported. X <u>Yes</u> No Can't answer N/A 	Points of disagreement:
Explanation : See pages 21-25 for the characteristics of included studies and see pages 25-26 for the characteristics of excluded studies.	

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 7. Was the scientific quality of included studies assessed? 'A priori' methods of assessment should be provided (e.g., for effectiveness studies if the author(s) chose to include only randomized, double-blind, placebo controlled studies, or allocation concealment as inclusion criteria); for other types of studies alternative items will be relevant. X <u>Yes</u> No Can't answer N/A 	7. Was the scientific quality of included studies assessed? Points of disagreement:
Explanation : See page 4, right column, middle-to- bottom of page for the reference to the quality criteria used to assess the three eligible study types (randomized controlled trials, interrupted time series, and controlled before/after studies).	
8. Was the scientific quality of included studies used appropriately in formulating conclusions? The results of the methodological rigour and scientific quality should be considered in the analysis and the	8. Was the scientific quality of included studies used appropriately in formulating conclusions?
 conclusions of the review, and explicitly stated in formulating recommendations. Yes X <u>No</u> Can't answer N/A 	<u>Points of disagreement:</u>
Explanation : See page 8, right column, top of page and page 10, left column, bottom of page for a general description of the quality of studies. Also, see page 14, left column, bottom of page for the implications, which do not mention scientific quality as explicitly as one might have hoped.	
9. Were the methods used to combine study findings appropriate? For the pooled results, a test should be done to ensure	9. Were the methods used to combine study findings appropriate?
<pre>the studies were combinable, to assess their homogeneity (i.e. Chi-squared test for homogeneity, I²). If heterogeneity exists, a random effects model should be used and/or the clinical appropriateness of combining should be taken into consideration (i.e. is it sensible to combine?). X <u>Yes</u> No Can't answer N/A</pre>	Points of disagreement:

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 Explanation: See page 9, left column, end of each paragraph (2, 3 and 4) for the tests of homogeneity. However, it's important to point out that for many health system interventions/arrangements, it will not be possible to combine the findings of studies quantitatively. 10. Was the likelihood of publication bias assessed? An assessment of publication bias should include a combination of graphical aids (e.g., funnel plot, other available tests) and/or statistical tests (e.g., Egger regression test). Yes X No Can't answer N/A Explanation: Not assessed (at least not in the pages provided). 	10. Was the likelihood of publication bias assessed? Points of disagreement:
 11. Did the authors include a statement about any conflicts of interest? Potential sources of support should be clearly acknowledged in both the systematic review and the included studies. X <u>Yes</u> No Can't answer N/A 	11. Did the authors include a statement about any conflicts of interest? <u>Points of disagreement:</u>
Explanation : See page 15, left column, middle of page for a description of the involvement of some of the reviewers in an included study and how this was addressed. Also see page 15, right column, middle of page for the sources of support for the review. However, sources of support were not identified for the included studies.	
Overall score = 7/11 (medium-quality review)	Your final score after considering agreements and disagreements with the instructor's assessment: As a reminder: • High quality = 8-11 • Medium quality = 4-7 • Low quality = 0-3

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Assess the local applicability of the Gruen et al. review, and compare your results to the results provided by the instructor		
Instructor's assessment of the local applicability of the Gruen et al. review	Description of your assessment and disagreements	
Were the studies included in a systematic review conducted in a different setting or were the findings not consistent across settings or time periods? Instructor's assessment The review included studies from a limited number of countries, which were conducted over several decades, during which time the health systems may have changed dramatically.	Assessment of whether the studies included in the systematic review were conducted in a different setting or were not consistent across settings or time periods , as well as your points of disagreement with the instructor's assessment:	
 Countries in which the included studies were conducted: United States (4) United Kingdom (3) Australia (1) Holland (1) The years in which data were collected were provided only for four countries, and these years spanned a fairly broad range: 1978-85 (U.K. study), 1986-91 (U.S. study), 1992-93 (U.S. study), and 1993-99 (Australia study). 		
Are there important differences in on-the-ground realities and constraints that might substantially alter the feasibility and acceptability of a policy or program option? Instructor's assessment The review does not provide information that allows for this type of assessment.	Assessment of whether there are important differences in on-the-ground realities and constraints that might substantially alter the feasibility and acceptability of a policy or program option, as well as your points of disagreement with the instructor's assessment:	

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Are there important differences in health system arrangements that may mean an option could not work in the same way? Instructor's assessment See page 11, left column, middle-to-bottom part of page. The three studies examining the effects on the risk of a psychiatric disorder persisting for six months were all done in a similar urban Seattle-based health maintenance organization (HMO) population, and this complex intervention, which relies heavily on collaborative care, patient and physician education, and protocol-driven management, may not work in the same way outside an HMO setting.	Assessment of whether there are important differences in health system arrangements that may mean an option could not work in the same way, as well as your points of disagreement with the instructor's assessment:
Are there important differences in the baseline conditions that might yield different absolute effects even if the relative effectiveness were the same? Instructor's assessment See page 10, right column, bottom of page for the statement about how the available high-quality evidence is skewed to urban, non-disadvantaged populations, and page 11, left column, top of page for the statement about how most of the high-quality research is done in populations where the potential to benefit is marginal, and there is little evidence about the effectiveness of outreach in settings that have the most to gain (the same point is made on page 11, right column, bottom of page).	Assessment of whether there are important differences in the baseline conditions that might yield different absolute effects even if the relative effectiveness were the same, as well as your points of disagreement with the instructor's assessment:
What insights can be drawn about scaling up, implementation and monitoring and evaluation? Instructor's assessment This is context dependent. What insights can be drawn for your setting?	Assessment of what insights can be drawn about scaling up, implementation and monitoring and evaluation:

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