



GOOD PRACTICES TASK FORCES

ISPOR Good Practices Task Forces develop expert, consensus guidance reports on international good practice standards for conducting outcomes research (clinical, economic, and patient-reported outcomes) or for using outcomes research in health care decisions. These reports are highly cited and among ISPOR's most important work products.

Inherent in these reports is a focus on methods and approaches to conduct research to inform healthcare decisions and improve health. ISPOR Task Force reports include not only design and approaches of conducting research, but also how studies or analyses should be performed and how results should be disseminated. These reports address areas where there is consensus and issues where there are gaps or controversies that have not been resolved or integrated in the HEOR literature. Overall, they inform the HEOR community about the current state of good practices in a domain and state-of-the-art techniques.

TASK FORCE PROPOSAL FORMAT

1. **TITLE OF TASK FORCE:** The title of the task force should reflect the topic and type of task force activity.
2. **BACKGROUND:** Provide foundational information on the proposed topic in sufficient detail to permit an assessment by the ISPOR Health Science Policy Council members. Describe the methods and/or their application to healthcare as well as current issues. It may be reasonable to describe how the methods have been used by other disciplines.
3. **OBJECTIVE:** Clearly define the purpose of the good practices task force. The objective statement articulates specifically what the task force is going to

achieve.

4. **RATIONALE:** The proposal must include a statement why this good practice guidance is important to the HEOR community. Why is this an important area to establish an ISPOR Good Practices Task Force? What is the impact it will have or how will it impact the scientific community?

The rationale should be supported by empirical studies that resolve or identify underlying uncertainty about research methods. These studies / evidence will be part of your bibliography (#8).

Specifically, the rationale should address the following criteria:

- a. **Necessity:** Why is this task force required? What are the controversies, issues, or concerns the task force will address?
It should be noted that proposals to update an existing task force report will be evaluated by the same criteria. The justification for an update must be clearly described just as in a new proposal.
- b. **Methodology Oriented:** Inherent in ISPOR Good Practices Task Force reports is a focus on methods and approaches to conducting research to inform healthcare decisions and improve health. This includes not only the methods of conducting research, but how analyses should be performed, as well as how the results of studies should be disseminated.
- c. **Relevance to ISPOR's mission and its members:** The task force must be relevant to ISPOR's mission: Promoting health economics and outcomes research excellence to improve decision making for health globally. Furthermore, the report should be of broad interest to ISPOR members.
- d. **Durability:** The topic of interest should not be a passing trend. It should be able to stand the test of time.
- e. **Broad applicability** - The task force should not focus on a particular product, technology or program, but rather be applicable to a wide array of technologies, situations and geographic areas. ISPOR is a global organization.
- f. **Evidence-based** – The rationale should be supported by empirical studies that resolve or identify underlying uncertainty about research methods. The rationale should also discuss the implications of using differing approaches to study the phenomena and the expected outcomes from the task force in terms of obtaining consensus or providing recommendations. If insufficient studies are available to resolve

uncertainty for most issues facing the task force, then the emerging task force designation is appropriate.

5. **PRIORITY:** The proposal must include a statement why this good practice guidance should be *a priority specifically for ISPOR*. Because substantial resources are consumed with task force activities, the proposal should articulate why the task force should be conducted.

Please include whether and how the proposal addresses the ISPOR Science Strategy. For example, if the proposal falls in the patient-centered research category, please review that category and explain how the proposal addresses one of those stated focus areas. <https://www.ispor.org/strategic-initiatives/science-strategy>. Please note that it is not mandatory that your proposal address a Science Strategy topic – new ideas are always welcome – but this may help determine its priority.

If other groups outside of ISPOR are working on related recommendations or guidance documents, the proposal should clearly state why those activities are not sufficient to address the issue and what the ISPOR activity would add to those efforts.

6. **OUTLINE FOR THE REPORT:** Please provide a detailed outline for the report.

7. **CONTENT:** Task force reports contain specific recommendations and recommendation support information.

- Provide a detailed overview of the issues to address. (See sample task force proposals for level of detail.)
- Please note that the length of the report should be 4,000 words prior to addressing comments received during the two rounds review. Maximum report length is 5,000 words with up to 6 tables and figures.
- Please keep scope in mind. It must be fairly narrow for a 5,000-word report.
- A task force should expect to produce 1 manuscript of no more than 5,000 words. If initiators propose more than one manuscript or a longer

manuscript, it must be well-justified and agreed to in advance.

- If, during the course of the task force's work, a compelling need emerges to increase the number of manuscripts, this change must be agreed to **a priori** by the TFRC based on a written justification from the task force co-chairs.

8. **TASK FORCE MEMBERSHIP:** Typically, it consists of 8-10 leadership members including co-chairs.

- Members should be selected with expertise in the topic and represent the various stakeholders involved (academia, research organizations, government, regulatory agencies and commercial entities).
- Diversity in opinion / perspective is important for ISPOR consensus task force reports. Membership is limited to two members per organization. *This holds for academic training as well.*
- Please note that task force membership should include *international representation*.
- At least one decision maker / payer / regulator / assessor (as appropriate for the proposal topic) should be included on the task force. *There is no limit on the number of decision makers that can be invited to join a task force.*
- For each proposed member of the task force, please include the name, degrees, title, affiliation, city, state / country and an email address PLUS a brief description of their expertise in relation to the task force topic and a link to their online profile.
- Please compile an international list of designated primary reviewers with subject matter expertise in the topic. Please include the name, degrees, title, affiliation, city, state / country and their email address.

Designated primary reviewers add to the diversity of perspective, and their feedback improves the manuscript. *There is no limit on the number of designated primary reviewers.*

- Your bibliography will be useful for task force membership selection and the compiling the list of designated primary reviewers.
- Please note that voluntary service on a task force is prestigious, but it can also be demanding. All task force members are expected to actively participate in ALL stages of report development, writing, reviewing, revising, and addressing comments, as well as attending monthly teleconferences for co-authorship.

If an invited task force member cannot commit to actively participate, they should be invited as designated primary reviewers and be acknowledged as such.

- If assistance is needed with member selection, please contact the ISPOR Health Science Policy Council Task Force Committee Liaison at taskforce@ispor.org

9. **BIBLIOGRAPHY:** Provide a solid selection of seminal articles on the proposal topic. The bibliography should contain the relevant evidence that supports the need for the task force's formation. In addition to your bibliography, the ISPOR Scientific Presentations Database and ISPOR conference released presentations are good resources for identifying subject matter experts at either the task force member or designated primary reviewer level.
10. **TIMELINE:** Define specific work activities from the outline. It should include abstract submission and presentation planning at ISPOR Annual and/or European conferences and 2 formal review rounds for consensus development. The timeline should extend to submission to *Value in Health*. Please see the proposal example (#11) for a sample timeline.
11. **PROPOSAL EXAMPLE:** The ISPOR Health Science Policy Council (HSPC) Task Force Review Committee (TFRC) Liaison will provide a previously submitted proposal to follow as an example.
12. **ASSISTANCE:** In the early stages of task force proposal development, the HSPC TFRC Liaison can answer questions and provide feedback on proposal drafts for clarity, scope and completeness. The liaison can also assist with the task force's membership. The liaison can be reached at: taskforce@ispor.org

13. **SUBMISSION:** Please submit your proposal to the HSPC TFRC Liaison at taskforce@ispor.org

Please note that proposal submissions are *rolling* (ongoing); *there is **no due date** for submissions*. However, it is useful for planning purposes to stay in contact with the staff liaison regarding proposal status and an estimated submission month.

Note: Task Force proposals are evaluated in the order in which they are submitted to ISPOR.