

□ Consensus Meeting

A **consensus meeting** is a structured, face-to-face (or virtual) gathering of experts, stakeholders, or representatives from relevant fields aimed at reaching agreement on a specific issue where evidence may be uncertain, incomplete, or requires contextual interpretation.

□ Purpose

- Achieve agreement on clinical or policy decisions.
- Finalize recommendations developed through prior methods (e.g. Delphi rounds).
- Prioritize outcomes, indicators, or interventions.
- Resolve outstanding disagreements from previous consensus steps.

□ Common Contexts

- Development of:
 1. Clinical practice guidelines
 2. Core Outcome Sets (COS)
 3. Ethical frameworks
 4. Health technology assessments
- Consensus on:
 1. Definitions
 2. Diagnostic criteria
 3. Treatment appropriateness

□ Structure and Process

- **Participants:** Multidisciplinary experts, clinicians, patients, policymakers.
- **Chairperson:** Neutral moderator to guide discussion.
- **Format:**
 1. Presentation of background evidence
 2. Open discussion
 3. Structured debate
 4. Voting (anonymous or open)
 5. Consensus defined (e.g., $\geq 70\%$ agreement)
- **Documentation:** Minutes, consensus statement, list of unresolved issues.

□ Integration With Other Methods

- Often follows a **Delphi process**.
- Used to finalize outcomes of **RAND/UCLA** ratings.
- Can serve as the final stage in **COS development**.

□ Advantages

- Allows real-time clarification and negotiation.
- Facilitates understanding of differing viewpoints.
- Enables consensus through direct interaction.

□ Limitations

- Risk of dominant voices influencing decisions.
- Requires effective facilitation.
- Logistically complex and time-consuming.

□ Reporting Standards

- **COMET Handbook** – for core outcome set development
- **GRADE** – for guideline panels
- Clearly report:
 1. Participant selection
 2. Evidence used
 3. Consensus criteria
 4. Outcomes

See also: [Consensus Methodology](#) | [Delphi Method](#) | [RAND/UCLA Method](#)

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