**Attachment D5:**

**Online Deliberative Polling Facilitator’s Guide**

Online Deliberative Polling Facilitator’s Guide

**Objectives**

1. Lead participants in deliberation to address the topic of the use of evidence in healthcare decision-making
2. Support the participants to ask questions of experts
3. Ensure equal participation among participants
4. Provide information without expressing personal interest (be impartial)
5. Present balanced views (be balanced)
6. Promote active citizenship (promote engagement)
7. Ensure discussion and deliberation based on mutual respect (promote civil dialogue)
8. Let the participants build their own, deliberated opinions (promote individual thinking)

Characteristics

**Online Deliberative Polling**

|  |  |
| --- | --- |
| Hours | 5 hours |
| Group size | 12 |
| Experts | Up to 5, one generalist and 2 per case study |
| Breakouts | No |
| Staff | Facilitator, note taker |

Facilitator Role

The facilitators have a key role in the Deliberative Poll. They ensure the fruitful and civil exchange between participants, while they guarantee that all the participants have the same chance to talk and letting all points of views to emerge. With their help and support the participants can find their voices, discover their views and build their opinions. The Facilitators also serve as reference persons for the participants, as liaisons between the participants and the organizers of the Deliberative Poll.

**Summary of tasks for this deliberative event**

As a Facilitator, you will facilitate the sessions online:

* Facilitate the discussions
* Guide your group from one place to another
* Provide support for participants selected to pose questions to the experts
* At the end of the event, ensure your participants complete the departure questionnaire
* After filling the departure questionnaire, make sure participants understand instructions for receiving honorarium, any reimbursements and departure logistics
* Ensure that the external observers do not intervene in the discussion nor indicate their own positions through body language/facial expressions.

**Starting the deliberations**

* **Start with full attendance.** The session can be only started if everyone is in the room. (Unless participants are scheduled to arrive later.)
* **Silence mobile devices.** Before starting the session ask participants to silence their mobiles.
* **Present the rules.** Please list the basic discussion guidelines for the weekend. These guidelines (as listed below) are simple and straightforward. Points 1 through 3 are to ensure that participants feel comfortable sharing their opinions. Point 4 is critical for this weekend’s discussions. There is no need to reach any consensus in Deliberative Polling discussions, as all opinions will be captured in the questionnaire upon departure. The discussion is a time for participants to share their opinions, listen to each other and weight their own opinions.
  1. No one is expected to be an expert
  2. Everyone’s voice counts
  3. Respect and listen to each other’s opinions
  4. No consensus is needed; not everyone needs to agree or disagree, because participants will express their opinions in a confidential questionnaire
* **Agenda**. Briefly describe the agenda for the deliberative event.

**Managing the deliberations**

* **No need for agreement.** Again, participants are not here to try to convince others of their opinion; all should share their opinion on an equal basis and listen to the merits and drawbacks of all points of view.
* **More questions to facilitate your discussions.** As mentioned, some key questions for discussion are in the Discussion guides, but here are some additional questions you may consider using:
* What does this proposal affect if we implement it? What are its results?
* How do the participants feel about the possible proposal alternatives and their potential consequences? E.g. if a proposal increases social equality but reduces individual liberty - how important is it to the participants to increase social equality vs. individual liberty?
* What are the pluses and minuses?
* If this has not been covered completely, you can ask, “do you think there’s anything else than can be said in favor or against this alternative?” and then move on to another alternative “what’s good and what’s bad about it?”
* **Silence**. Don’t be afraid of silence. The first discussion will start a little slower that the subsequent ones. After introductions and after you have asked some general questions, there may be some silence. Don’t worry if there is some silence, someone will eventually talk, just don’t let it be you!
* **Less intervention is better.** The Facilitators have the power to destroy the continuity and content of the discussion. A good Facilitator says very little, but stimulates participants to take part.
* **Control frustration.** You can control the participants’ frustration e.g. if someone feels not prepared enough to express opinion on the certain question you can ensure that his/her opinion, based on her daily life experiences has the same value as the other’s opinions.
* **Create the climate.** The aim is to maintain a good atmosphere with mutual respect and the best possible interaction between the participants. Ensure civility and respect and help the participants to discover their voices.
* **Let everyone talk.** Ensure that everyone has the same chance to express his/her opinions. If some learners are dominating the discussion it decreases the efficacy of the process. If some participants don’t talk at all, turn to them and ask them to express their opinions. If somebody talks too much, invite others to talk, like ‘let’s hear everyone, we should give everybody a chance to talk’ or ‘thank you for your views, but we need to allow others also to talk’.
* **Ensure balanced opinion to emerge.** Ensure the balance of the discussion; ensure that arguments for both sides get considered. If nobody is arguing against, ask e.g. “what do the people against it say?”
* **Do not express your opinion.** The Facilitator should never convey his/her own viewpoints, not even with an expression of the face to shows approval or disapproval.
* **Handling false statements.** If a participant says something that is factually false, the Facilitator can ask for others’ opinion on the statement, or ask what the Discussion guide says about it, as well as offering the possibility to ask the question from the experts (but never say: “This is false”, if you correct the participant’s statement, you end up joining the discussion as a participant, which is not your task for this weekend.)
* **Talking to each other.** The participants should not talk to the Facilitator but to each other.
* **No show of hands.** Do not ask for a show of hands within a group. Do not permit a participant to ask for a show of hands. (The only exception is mentioned below is for the selection of a question for the plenary session.)

**Preparing the questions for the plenary sessions**

* **Task.** About 15-20 minutes prior to the end of the sessions, ask your group develop two questions to ask during the plenary session. The group should focus on the proposals, if those are good or bad ideas, and see if there are questions related to them.
* **Formulate the questions together.** The questions should be results of the discussion. Keep track of the topics people seem most interested in. Normally the best questions arise out of disagreement within the group. If the members of the group are disagreeing about the effects of a given proposal, you can say, “That might make a good question to put to the panel of experts”. Inform the group that only one of the two questions will likely be asked at the plenary, due to limited time.
* **Voting is okay here.** If there is no consensus on the questions (e.g. there are three options and they can’t choose), and there is no other way to solve the situation, but only in this case, the participants can vote.
* **Choosing someone for the plenary.** The chosen person is always the one who first mentioned the question, even if he is not the most educated or influential member of the group. If he/she is shy, encourage him like “The group would be very pleased if you…” If he/she explicitly refuses the request, find someone else.
* **Dealing with the questions.** When a group agrees on questions, make 2 copies of the questions, and put person’s name and group number on the question. The person who will ask the question keeps one copy; the other copy should be given to an identified staff member. (FYI, after all the questions are collected – the questions is then sorted by topic for overlap. During the plenary session the Facilitator of the Plenary Session will call on the person by name and group number to ask the question.)
* **Provide support for participants selected to ask the experts’ questions.** Let the participant clearly understand his/her task as the representative of the group, and make it sure that (s)he arrives to the right place before the beginning Plenary Session.

Plenary Leads Role

Introduce participants to the overall topic and deliberative polling process. Help facilitate discussion with experts during plenary sessions.

Expert Role

Experts address participants’ questions in the plenary sessions. Experts represent a particular point-of-view on the topic at hand, and the experts – as a panel – present a balanced range of perspectives on the topic.

Note taker Role

The note taker records notes on a laptop during the session and provides ad hoc support to the facilitator as needed.

Session Agenda

**Online Deliberative Polling**

| **Time** | **Activity** |
| --- | --- |
| **Session 1** |  |
| 6:30 – 6:40 pm | Introduction (10 minutes) |
| 6:40 – 7:30 pm | Discussion on obesity case study (50 minutes)   * Obesity treatment vignette discussion |
| 7:30 – 7:45 pm | Brainstorming on questions for experts (15 minutes) |
| **Session 2** |  |
| 6:30 – 7:45 pm | Plenary on obesity case study (1 hour, 15 minutes) |
| **Session 3** |  |
| 6:30 – 7:30 pm | Discussion on hospital case study (60 minutes) |
| 7:30 – 7:45 pm | Brainstorming on questions for experts (15 minutes) |
| **Session 4** |  |
| 6:30 – 7:45 pm | Plenary on hospital case study and wrap-up (1 hour, 15 minutes) |

Introduction 10 mins

**Objective**

* Orient participants to the day’s discussion

The session begins with introductions from a team member, whose message will focus on the entire Community Forum project. Another team member will introduce participants to the Deliberative Polling event and lay out expectations for the four weeks.

**Example team member script for introduction:**

Welcome to today’s Deliberative Polling event. This event is a part of Community Forum, which is a project sponsored by a federal agency called Agency for Healthcare Research and Quality or AHRQ or you may hear us say “ark.” AHRQ is interested in your views and opinions about healthcare and Community Forum, including today’s event, is an opportunity for AHRQ to learn about your thoughts and help government decision makers better understand your needs. Your input will help make healthcare better for you and your community.

Throughout today’s event and all of our Community Forum events, you will be discussing a number of important healthcare issues. An overarching issue is good quality healthcare. The discussion materials you received explain good quality healthcare more thoroughly, but, in brief, good quality healthcare is providing safe, effective, efficient, timely, equitable and patient-centered care. One factor, which plays a key role in good quality healthcare, is medical research and medical evidence. Medical research is conducted to find ways to treat people and with enough research, doctors and researchers will have medical evidence to carry out actual treatments for patients. When making medical decisions, we often have to compare the pros and cons of existing treatments. For example, patients with asthma have to decide what kinds of existing treatments can help them breathe more easily. Or, patients with cancer have to consider the tradeoff between surgery and radiation treatments. Making these considerations and comparisons for existing treatments to often called “comparative effectiveness research” or C-E-R. As a part of today’s discussions, you’ll be discussing C-E-R and thinking about the available options for two case studies, obesity and hospital quality.

In addition to the case studies, the discussion materials include information on healthcare costs and other information related to these topics.

On behalf of AHRQ, thank you for joining us today and I hope you enjoy the discussions.

Discussion of obesity case study 1 hour, 15 minutes

**Context-Setting for discussion**

**Objectives**

* Initiate deliberations
* Provide ground rules to participants for discussion
* Maintain open space for participants to discuss obesity case study

*Before beginning discussions, please be sure all participants are in the room and the necessary technical equipment is ready to go. To begin, read the following script (feel free to paraphrase):*

**Example facilitator script**

Thank you all for coming. My name is \_\_\_\_\_ and I will be your Facilitator today. I will also be accompanying you to the plenary sessions, breaks and meals. If you have any questions about the schedule or event, please feel free to ask me. I would like to start by making sure everyone has their materials and name badges. Also, please make sure your mobiles are off or on silent mode.

*PAUSE – Look around to make sure everyone has their materials and name badges.*

Before we begin, I would like to share some guidelines for discussion. This event is an opportunity for everyone to learn and voice their opinions. I want to encourage everyone to speak freely. Please respect and listen to each other’s opinions and try not to interrupt others. No one is expected to be an expert. Also, no consensus is necessary, not everyone needs to agree or disagree. Each of you will have the opportunity to express your opinions in a confidential questionnaire before departing today.

Lastly, we will have observers in and out the room. However, they are only allowed to observe. They are not allowed to participate in the discussions or even make any non-verbal gestures. I will ask them to leave if they become a distraction.

Again, my role is to facilitate your discussion. Let’s start by having everyone introduce him or herself. Please tell us your name and why you came this event or what you thought when you were invited.

REMINDER: As noted in the Facilitator guide, when introducing yourself as the Facilitator only share your name and nothing else. For further explanation on this reminder, please refer to the Facilitator materials.

**Starting the discussion**

You should start the discussion immediately after the introductions have concluded. To get the discussion started, here are some tips.

Sometimes participants will already have started getting into the substance of discussion issue while introducing themselves, in this case, you could say: “*Some of you have already touched on the discussion issue, let’s jump right in. What are your thoughts on this topic?”*

Otherwise, you may continue with:

*Now, let’s begin discussing the materials you received prior to attending today’s event*.

* + *What are some of your thoughts on the FDA lowering the BMI approval level for banding?*
  + *Would the lowering of the BMI approval level help people become less obese?*
  + *Or, would the lowering have the opposite effect?*
  + *What are some of your thoughts on helping people who are obese lose weight with nutritional instruction and exercise programs?*
  + *Should more effort be put in these nutritional and exercise programs rather than lowering the BMI approval level for banding?*

REMEMBER:

* As noted in the Facilitator guide materials, if participants misquote or misunderstand the discussion materials or share information you believe to be incorrect, you as the Facilitator cannot correct the participants’ statements. Typically, fellow participants will correct each other. If that does not happen and you, as the Facilitator, feel important information has been misquoted or misunderstood AND this information is available in the discussion materials, you can direct the attention of participants to the discussion materials by saying, for example, *“thank you for that information. Additional information about that issue is also available on page 10. Does anyone else have comments on this issue?”* If participants do not correct each other AND this information is NOT available in the discussion materials, you may suggest the issue as a possible question to the experts. You could say, for example, *“thank you for that information. We could consider that as something to ask experts for the plenary session. Let me jot it down for us.”*

**Continuing discussions, Obesity**

Less intervention is generally better. That is, let the discussion flow organically. If participants do get off track, direct the discussions back to the topics at hand. The Obesity discussion has two parts: Part A (Obesity Treatment) and Part C (Preventing Obesity). Be sure to keep track of time to ensure both parts are covered.

Just remember to ensure the group discussions cover the arguments for and against. If the group is focusing on arguments for, ask them what they think of the arguments against, whether the arguments have merit and whether they could think of other reasons why people would have opposing views. Here is a possible way to ask these questions:

* *Looking at the arguments presented in the discussion materials, you have discussed arguments against banding, what are some arguments in support of banding? What would supporters of banding say? Would you support banding for certain persons over others?*

Also, during the session you could take notes on interesting points or questions that could be turned into questions for the plenary session. You need only to take notes; the participants will form the questions. Your notes may assist the participants in remembering what discussions points they had.

REMEMBER:

* As noted in the Facilitator guide materials, participants and the Facilitator cannot ask for a *show of hands* to poll the group and *do not* correct participants if they make incorrect statements. See guide for more details on these two items.

Brainstorming on questions for experts 15 mins

**Objective**

* Prepare questions for experts about obesity case study

About fifteen minutes before the discussion ends, your group needs to come up with two questions to ask the experts in the plenary session. Information about the experts will be provided in the participants’ materials.

To start this part of the discussion, you could say, “*We only have about fifteen minutes left and your group needs to come up with two questions to ask the experts in the plenary session. Does anyone have any questions?”*

If no one has any questions, you could then say, “*I did jot down some questions your group had during your discussion; some of you had mentioned…would you want to turn those points [use those questions] into questions?”*

On a rare occasion, a group may not have any questions. You could then ask, “*Do you have any factual questions about the issues you would like clarified?”*

If your group still does not have questions, then your group does not need to generate any questions.

More often than not, groups will have too many questions. If your group has too many questions and can’t decide, your group can vote on each question– this is the ***only*** time a show of hands is allowed.

Your group *should formulate* the questions together; generally, one person will come up with a question, and then the group will modify or clarify the question. Remember, that the person who *comes up* with the question should ***ASK*** the question at the plenary. If s/he is shy, encourage them.

Remember to make **two** copies of question (or organizers may have prepared carbon copy paper, so only writing once is needed): one copy goes to the Facilitator (or designated assistant or person who will bring the question immediately to the plenary session Facilitator for sorting) and one copy goes to the participant.

Plenary Session, Obesity 1 hour, 15 minutes

**Objective**

* Enable participants to ask experts questions about the obesity case study

Make sure the person(s) asking the questions during the plenary session knows where to be seated. Since the plenary session will be simultaneously conducted with three locations, instructions will be provided closer to the event.

The plenary session will have experts and a plenary session Facilitator.

The plenary session is a crucial part of the Deliberative Polling process. Participants have carefully developed questions and often times are eager to ask their questions as it is the result of hours of deliberations. The group develops two questions and given time constraints, experts need to be extremely brief. The format of the session is as follows:

1. The plenary session Facilitator welcomes the participants
2. Facilitator will introduce the experts
3. Facilitator calls up the first participant by group number, location, and name

(Facilitator may call the second participant at the same time to ensure second participant is ready)

1. Participant reads his/her question and returns to his/her seat
2. Experts respond for **about TWO minutes**
3. At least TWO experts, if not all, will respond to each question
4. This process continues until the end

Note: Participants are allowed to ask follow-up questions, but the Facilitator will minimize follow-up questions as it takes time away from questions already developed.

Discussion on hospital case study 1 hour, 15 minutes

**Objective**

* Maintain open space for participants to discuss the hospital case study

You should start the discussions immediately. To get the discussion started:

1. If you feel your group is very energetic and does not need any questions to start, you may start with, “*What are your thoughts on this second topic?”*
2. Otherwise, you may continue as follows.
   * *What are some of your thoughts on high versus low volume hospitals?*
   * *Or, would it not matter at all? Would you choose a lower volume hospital regardless? Or, would you choose a higher volume hospital regardless?*
   * *What are some of your thoughts on the role doctors should play in making these decisions?*
   * *What about the low volume hospitals? If they have lower survival rates, should these hospitals be sending patients to higher volume hospitals?*

REMEMBER:

* As noted in the Facilitator guide materials, don’t be afraid of silence. Once you have done (a) and/or (b) wait for a participant to speak. Someone will speak eventually; just don’t let it be you.
* To reiterate, no consensus is needed in the discussions, *do not* share your opinions, and *do not* introduce any information not in briefing materials. Participants may share any information they have, but Facilitators cannot introduce any information not already specified in the briefing materials.

**Continuing discussions, hospital case study**

Again, less intervention is generally better. If participants do get off track, direct the discussions back to the topics at hand. Be sure to keep track of time to ensure all materials are covered.

Just remember to ensure the group discussions cover the arguments for and against. If the group is focusing on arguments for, ask them what they think of the arguments against, whether the arguments have merit and whether they could think of other reasons why people would have opposing views.

Also, during the session you could take notes on interesting points or questions that could be turned into questions for the plenary session. You need only to take notes; the participants will form the questions. Your notes may assist the participants in remembering what discussions points they had.

Brainstorming on questions for experts 15 mins

**Objectives**

* Prepare questions for experts on hospital case study

About fifteen minutes before the discussion ends, your group needs to come up with two questions to ask the experts in the plenary session. Information about the experts will be provided in the participants’ materials.

To start this part of the discussion, you could say, “*We only have about fifteen minutes left and your group needs to come up with two questions to ask the experts in the plenary session. Does anyone have any questions?”*

If no one has any questions, you could then say, “*I did jot down some questions your group had during your discussion; some of you had mentioned…would you want to turn those points [use those questions] into questions?”*

On a rare occasion, a group may not have any questions. You could then ask, “*Do you have any factual questions about the issues you would like clarified?”*

If your group still does not have questions, then your group does not need to generate any questions.

Plenary Session, Hospital Case Study & Wrap UP

1 hour, 15 minutes

**Objective**

* Enable participants to ask experts questions about the hospital case study
* Wrap up deliberations

Make sure the person(s) asking the questions during the plenary session knows where to be seated. Since the plenary session will be simultaneously conducted with three locations, instructions will be provided closer to the event.

The plenary session will have experts and a plenary session Facilitator.

The plenary session is a crucial part of the Deliberative Polling process. Participants have carefully developed questions and often times are eager to ask their questions as it is the result of hours of deliberations. The group develops two questions and given time constraints, experts need to be extremely brief. The format of the session is as follows:

1. The plenary session Facilitator welcomes the participants
2. Facilitator will introduce the experts
3. Facilitator calls up the first participant by group number, location, and name

(Facilitator may call the second participant at the same time to ensure second participant is ready)

1. Participant reads his/her question and returns to his/her seat
2. Experts respond for **about TWO minutes**
3. At least TWO experts, if not all, will respond to each question
4. This process continues until the end

Note: Participants are allowed to ask follow-up questions, but the Facilitator will minimize follow-up questions as it takes time away from questions already developed.

The conclusion of this session will allow participants to reflect on their experience in this method, over the four weeks. Since they will just have finished the plenary session for hospital volume, you may begin the reflection will the following question:

* *What are some of your thoughts about the plenary session we just finished?*
* *What did you think about the experts’ answers?*

After about 10 minutes, please move the discussion onto the Obesity topic.

* *What are some of your thoughts about the plenary session from earlier today?*
* *What did you think about the experts’ answers?*

After another 10 minutes, please move the discussion to a more general discussion about the day’s experience.

* *What did you enjoy about today’s deliberations?*

If participants do not have much to say, that is okay. No need to force the reflection discussion. You may proceed to wrap-up the discussion.

Details on the wrap-up will be provided closer to the event as it will involve logistic information.

**Before The Event:**

A ONE PAGE GUIDE FOR FACILITATORS OF THE DISCUSSIONS

* Read briefing materials
* Be familiar with the schedule

**Beginning the Discussions:**

* Start with full attendance
* Silent electronic devices
* Discussion Guidelines:
  + No one is expected to be an expert
  + Everyone’s voice counts
  + Respect and listen to each other’s opinions
  + No consensus is needed; not everyone needs to agree or disagree, because participants will express their opinions in a confidential questionnaire
* Start discussion with brief introductions
* See sample introduction
* Don’t be afraid of silence

**During the Discussions:**

* Do not express your own opinions/biases
* Do not take hand polls
* Do not add outside information
* Do not correct false statements
  + If the correct answer is in the materials, you can refer them to the materials
* No need for consensus
  + What if my group all agrees? If so, ask you group to consider what people who disagree would say. Use the materials, especially the table, to help guide your participants.
* Ensure balanced opinions
* Encourage everyone to talk
  + If some talk too much, kindly ask them to let others talk
  + If some talk too little, kindly ask them to voice their opinions
* Make sure participants are talking to *each other*, not you
* Less intervention is better, but you must maintain a good climate for deliberation
* Ask disruptive observers to leave

**Preparing For Expert Questions:**

* 15 minutes before the group discussion ends, your group needs to come up with 2 questions to ask the experts in the plenary sessions
* You should take notes of good questions or topics your group can use as questions
* Your group should formulate the questions together
* If your group has too many questions and can’t decide, your group can vote – this is the ***only*** time a hand poll is allowed
* The person who *comes up* with the question should ***ASK*** the question at the plenary
  + If s/he is shy, encourage them
* Make **2** copies of question: 1 copy goes to the Facilitator (who will bring the question immediately to the plenary session Facilitator for sorting); 1 copy goes to the participant

**Sample introduction to begin discussions**

Thank you all for coming. My name is \_\_\_\_\_ and I will be your Facilitator today. I will also be accompanying you to the plenary sessions, breaks and meals. If you have any questions about the schedule or event, please feel free to ask me. I would like to start by making sure everyone has their materials and name badges. Also, please make sure your mobiles are off or on silent mode.

PAUSE – *Look around to make sure everyone has their materials and name badges.*

Before we begin, I would like to share some guidelines for discussion. This event is an opportunity for everyone to learn and I want to encourage everyone to speak freely. Please respect and listen to each other’s opinions and try not to interrupt others. No one is expected to be an expert. Also, no consensus is necessary, not everyone needs to agree or disagree. Each of you will have the opportunity to express your opinions in a confidential questionnaire before departing today.

Lastly, we will have observers in and out the room. However, they are only allowed to observe. They are not allowed to participate in the discussions or even make any non-verbal gestures.

Again, my role is to facilitate your discussion. Let’s start by having everyone introduce him or herself. Please tell us your name and why you came this event or what you thought when you were invited.