

## Application form for Evidence-Based Repository in Osteoporosis Adoption

Instructions to applicants: please answer the following questions and complete the column 'applicant response' overleaf and return to <a href="mailto:ero.health@keele.ac.uk">ero.health@keele.ac.uk</a>.

\*indicates mandatory questions

ERO eligibility		
I confirm this resource(s	s) is evidence-based (i.e developed	
through research).*		Yes□/No□
Intended audience:*	Patients	
	Healthcare professionals	
	Researchers	
	Others, please state	
Applicant details		
Name*		
Email address*		
Host organisation(s):		
what was the lead		
organisation involved		
in the development of		
the resource*		
Resource details		
Name of resource *		
Brief description to be		
included on ERO		
website on heath		
professional page		
(max 150 words):*		
Please write this in lay		
language and include a		
description of the		
resource and intended		
audience. this will affect		
word and pdf versions of form		
Do you wish your	Yes□/ No□	
resource(s) to be	1652/1162	
accessible on patient		
page? *	If yes please provide brief lay descr	iption to be included on ERO website
1 2001	on patient page (max 150 words):	iption to be included on the website
Current URL if	parame page (ax 250 110105).	
available:		
OR Upload here	1	
(option to upload		
document/resource)		



If adopted to ERO would you want to keep your existing URL?*	Yes□/ No□/ Not Applicable□	
Request from ERO*	Adoption onto ERO website embedded within ROS Quality Hub*	Yes□/No□
	Impact metrics	Yes□/No□ If Yes please give details
	Advice on impact metrics	Yes□/No□ If yes, please add details of your intended impact measures
	Advice on dissemination and implementation	Yes□/No□ If yes, please add details of your current dissemination plan
Are you willing/able to amend resource wording or layout with ERO committee advice, following quality assessment?*		Yes□/No□ Please give details
Do you have any case studies of use of this resource you would like included on the website		Yes□/No□  If yes, please give details
Please add a few sentences/paragraph of wording that could be used to advertise your resource being available on social media.*		
Relevant keywords to tag on website eg: Bone density scans Bisphosphonates, Calcium, communication,		
Decision making, Denosumab Diagnosis, Drug treatments, DXA, Exercise, Falls, Fracture Liaison Service, Hip fractures, Risk, Spinal fractures, Vitamin D		
Please provide any link	ed publications or outputs:	



## Criteria to assess the quality of Evidence-Based Resources in Osteoporosis<sup>1</sup>

Please complete as many boxes as possible. Enter N/A if not applicable. Adoption may be considered without a favourable assessment in each box.

Note this completed quality assessment form will be uploaded alongside the resource on the website.

\*Questions are mandatory

Quality assessment	Applicant response	ERO panel
		assessment – any points of concern or
		importance to bring to panel discussion
General		
<ul> <li>Briefly describe how</li> </ul>		
the resource was		
developed and by		
whom* (max 300		
words)		
<ul> <li>Was the work that</li> </ul>	Yes□/No□	
underpinned the	If yes describe	
resource peer		
reviewed?* by		
competitive		
fundings or		
otherwise		
<ul> <li>Who funded the</li> </ul>		
development/testing		
of the resource*		
<ul> <li>Were patients and</li> </ul>	Yes□/No□	
public were	If yes describe	
involved.* If yes give		
details* (max 300		
words)		
<ul> <li>Describe any</li> </ul>		
regulatory approvals		
for development		
and/or testing of the		
resource*		
Royal Osteoporosis Society		
involvement		

<sup>&</sup>lt;sup>1</sup> These standards were obtained from a synthesis of quality assessment tools (patient information quality standards (m-IPDAS) and IPDAS), and recommendations in Crawford-Manning F, et al. Evaluation of quality and readability of online patient information on osteoporosis and osteoporosis drug treatment and recommendations for improvement. Osteoporos Int. 2021 Aug;32(8):1567-1584. doi: 10.1007/s00198-020-05800-7. Epub 2021 Jan 27. PMID: 33501570; PMCID: PMC8376728.



Were the Royal Osteoporosis	Yes□/No□	
Society involved in the	If yes describe	
development of the		
resources?* (max 300		
words)		
Inclusivity and Diversity		
How have the needs of		
underserved communities		
been considered when		
developing the resource?*		
(max 300 words)		
How has accessibility been	Yes□/No□	
considered?* (e.g. provision	Details	
of Alt Text for images, tables		
and hyperlinks, provision of		
alternative versions) (See		
ERO accessibility guidelines		
{link} for details)		
la tha a canada constitue at a	V	
Is the resource written at a level that can be understood	Yes□/No□	
by the intended audience?*	Details	
(max 300 words)		
Resource content		
Does the resource content	Yes□/No□	
align with current clinical	Details	
guidelines? (National	Details	
Osteoporosis Guideline		
Group, Scottish		
Intercollegiate Guideline		
Network)*		
Does the resource explicitly	Yes□/No□	
state the target audience?*	Details	
Does the resource cite	Yes□/No□	
sources of evidence?*	Details	
Does the resource cite	Yes□/No□	
sources of funding?*	Details	
Does the resource include	Yes□/No□	
any necessary disclosure	Details	
statements?*		
Does the resource include a	Yes□/No□	
date of completion?*	Details	
Are there plans for the	Yes□/No□	
resource to be updated?*	Details	



Testing of the resource		
Has the resource been	Yes□/No□	
explored for acceptability	Details*	
amongst the target		
audience?* If yes, please		
provide detail* (max 300		
words)		
Has the resource been	Yes□/No□	
tested for effectiveness?* If	Details*	
yes, please provide detail*		
(max 300 words)		



TO COMPLETE FOR PATIENT INFORMATION RESOURCES ONLY				
If describing osteoporosis, does the resource				
use recommended terms, e.g. 'weak	Yes□/No□/NA□			
bone' and avoid unrecommended terms				
such as 'spongy' and 'honeycomb' <sup>2</sup>				
explain anyone can be affected by	Yes□/No□/NA□			
osteoporosis (i.e. is inclusive of men,				
younger people and people of colour)				
avoid contradictory statements about	Yes□/No□/NA□			
absence or presence of symptoms				
include discussion of the physical, social	Yes□/No□/NA□			
and psychological impact of				
osteoporotic fractures				
use labelled images or animations	Yes□/No□/NA□			
where possible				
If describing osteoporosis drug treatmen	t, does the resource			
Balance the amount of information	Yes□/No□/NA□			
about benefits and risks of drugs				
Use probabilities or simple event rates	Yes□/No□/NA□			
rather than percentages				
Avoid misleading terms such as	Yes□/No□/NA□			
'prevent', 'renew' and 'restore' <sup>3</sup>				
Provide accurate information about the	Yes□/No□/NA□			
practical aspects of treatment and why				
these procedures are important				
Summary of Panel Discussion				
Summary of Famer Discussion				

<sup>&</sup>lt;sup>2</sup> Recommended terms – less strong or weaker bone Unrecommended terms – spongy, fragile, honeycomb, weaker than average, established, idiopathic. Osteopenia should not be described as a diagnosis or condition

<sup>&</sup>lt;sup>3</sup> Recommended terms – lower fracture risk, strengthen bone Unrecommended terms – prevent fracture. Renew, restore