UEG Activity Grant for Guideline Update 2025: Criteria for applicants and selection process

1. Grant details
- Support of max. € 30,000 per project.
- The project language must be English.
- The project starts in 2025 and ends in 2027 at the latest.
- Each application needs a lead applicant society and a lead coordinator (= person in charge of the application and project).
- The lead society who developed the original guideline must be involved in the guideline update.
- The initiative must be managed by either of the following groups:
  - The lead applicant is a UEG Specialist Member Society. Involvement of additional partner organisations or societies is encouraged.
  - The lead applicant is a UEG National Member Society. At least one UEG Specialist Member Society must be involved.
- Current members of the UEG Quality of Care Committee (QC) must not be involved in the application (neither as lead applicant nor as working group member).
- A methodologist must be involved in the initiative.
- The initiative must follow standard guideline development practices, in particular GRADE methodology.[1]
- A successful completion of the UEG Online Course 'How to develop guidelines' (https://ueg.eu/p/269) is mandatory for the lead coordinator. Further certification (e.g. INGUIDE Level 1, or similar) is an asset.

2. Application process
- Application must be submitted online using the provided templates and the online form.[2]
- Application and any additional material (documents, reports, etc.) or digital references stated in applications must be submitted in English.
- The application must provide:
  - Completed application form with a description of the planned initiative (use of UEG template is compulsory).
  - Gantt chart that defines timelines and milestones (https://en.wikipedia.org/wiki/Gantt_chart)
  - Budget (use of UEG budget template is compulsory).
  - COI of the lead applicant (use of UEG template is compulsory).
  - Proof of basic guideline development certification of lead applicant (upload of UEG Online Course 'How to develop guidelines' completion certificate; other certification if applicable).
  - Signed letters from all participating societies and partners to verify the collaboration.
- Only a completed application submitted within the deadline that adheres to the conditions set will be accepted for review.

- Application deadline: April 4, 2025.
- Shortlisted applicants must be available for online participation at the QC meeting on May 19, 2025 to defend their application.
- The final selection of awardees will be made by end of June 2025.

3. Review Process
Proposals for guideline updates are peer-reviewed by the UEG Quality of Care Committee. Members of the QC, whose society is part of the application, are excluded from reviewing the application. The scientific merit and quality of the proposals are assessed based on the following review criteria:

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[1] A list of recommended handbooks, checklists and methodologists is available here.
[2] Only one application can be submitted per myUEG account. In case you plan to submit more than one application for UEG Guideline Update 2025, please consult with Elisabeth Aumaître at e.aumaitre@ueg.eu beforehand.

a. **Qualifying criteria**
- The lead society who developed the original guideline is involved in the guideline update.
- A methodologist is involved in the working group.
- The initiative follows standard guideline development practices, in particular GRADE methodology.

b. **Overall impression of the application (5 points)**

c. **Motivation for conducting the initiative (10 points)**
- The guideline update is needed. (no = 0 | yes = 5 points)
- The guideline update addresses relevant new evidence, based on recent studies and improved knowledge since the latest edition of that guideline (or another guideline in the same field) was published. (no = 0 | yes = 5 points)

d. **Details of the initiative (15 points)**
- The PICOs are relevant, specific and formulated correctly. (no = 0 | yes = 3 points)
- The PICOs are related to the original guideline but also provide a genuine added value to the update. (no = 0 | yes = 3 points)
- The number of PICOs is manageable within the project scope (approx. 10 PICOs are recommended). (no = 0 | yes = 3 points)
- The direction and plan of the initiative are clearly described, feasible and realistic. (no = 0 | yes = 3 points)
- There are specific plans for disseminating the guideline update once it has been published. (no = 0 | yes = 2 points)
- There are processes in place to measure the outcome (e.g. uptake of guideline, clicks to website, presentation at meetings, citations). (no = 0 | yes = 1 point)

e. **Partners organising the initiative (13 points)**
- The key societies are involved and reasons for why they have been involved are given. (no = 0 | yes =3 points)
- The working group has appropriate regional diversity (involves people from different European countries). (no = 0 | yes =2 points)
- The working group includes members from a country with a low Human Development Index (see Annex 1) (no = 0 | yes = 1 point)
- The working group is gender balanced. (no = 0 | yes = 1 point)
- The working group has an appropriate balance between young (<40) and senior (40+) members. (no = 0 | yes = 1 point)
- The working group includes a primary care physician (if relevant with regards to the guideline topic). (no = 0 | yes = 1 point | not relevant for the topic = 1 point)
- Patient organisations (or representatives) are involved in the guideline update. (no = 0 | yes = 1 point)
- The involved methodologist is officially certified. (no or no details given = 0 | INGUIDE certification = 3 points | other certification = 1 point)

f. **Project management (10 points)**
- The milestones are realistic. (no = 0 | yes = 4 points)
- Risks are clearly identified, and risk mitigation plans are in place (e.g. what to do when working group does not deliver, if members are non-responsive, etc.) (no = 0 | yes =4 points)
- Roles of all members are clearly defined, and backups are in place. (no = 0 | yes = 2 points)

g. **Budget (11 points)**
- The budget covers the proposed plan. (no = 0 | yes = 2 points)
- The budget offers comments to explain the individual amounts (e.g. how many people are expected to attend meetings, monthly salary and full-time equivalent of research assistant, etc.) (no = 0 | yes = 2 points)
- The article publication charge (APC) for UEG Journal (or an explanation for a possible waiver) is included in the budget (no = 0 | yes = 1 point)
- The listed expenses are reasonable and necessary to complete the project. (no = 0 | yes = 3 points)
- The project is also supported through additional funding other than the UEG grant. (no = 0 | yes = 2 points)
- The project receives in-kind support from sources other than UEG. (no = 0 | yes = 1 point)

4. Reporting, payment and publication terms

Reporting
Successful applicants must provide the following reports according to the reporting timeline set by UEG:
- Three update reports (oral and/or written) per year (as per UEG reporting timeline)
- A final report (incl. budgetary reconciliation) upon completion of the project

Payment
- A Letter of Agreement (LOA) must be signed by UEG and the lead applicant society. Only upon the signing of the LOA by both parties, do all features of the grant become valid.
- The grant will be paid out in 4 instalments:

Payment 1 (25%)	- LOA signed by UEG and lead applicant society
Payment 2 (25%)	- Delivery of final PICO questions - Delivery of final working group composition - Delivery of COI forms of all working group members - Systematic literature review protocol registration with PROSPERO and submission of registration number to UEG
Payment 3 (25%)	- Completion of final consensus process (voting, discussion and documentation of results)
Payment 4 (25%)	- Manuscript submitted to UEG Journal - Final report & budget submitted to UEG - Approval of final report & budget by UEG Quality of Care Committee

- Payment will be made to the lead applicant society's bank account. If the lead applicant society agrees, payment can also be made to a university account. No payments to private accounts are possible.
- If any condition or requirement of the application is not fulfilled, UEG will not pay out the grant.

Publication
- All guideline updates developed with financial support by UEG are published exclusively in UEG Journal (provided that they receive a positive peer review and are accepted for publication).
- Open Access to all guideline papers will be guaranteed by UEG and the publisher of UEG Journal.
- The cost for the APC (€ 2,000) must be included in the budget.
- If the guideline update is co-funded, co-publication might be allowed in the society journal upon approval of the UEG Journal Editor in Chief. This request must be made with the application.
- The publication has to be prepared according to the UEG Journal author guidelines for guideline papers.
- While the UEG Quality of Care Committee reviews the applications and decides on their funding, they don't review any finished guidelines nor decide upon their acceptance for publication in UEG Journal. Submitted guideline papers will be reviewed by the Editorial Board of UEG Journal and will be accepted or rejected for publication following the peer review process.

Dissemination of initiatives
- Published guidelines will be made available for dissemination through UEG communications and publications in coordination with the organiser (UEG Journal, UEG Week, UEG e-learning platform, website, etc.).
- After publication, a shortened/app-friendly version of the guideline must be provided for inclusion of the guideline in the GI Guidelines app. Therefore, the grant recipient must:
  - Provide algorithm(s), list of related scores and calculators with references, summary recommendations of the guidelines (update)
  - Review and approve the app version once it has been programmed

- Initiatives that receive support from UEG will mention UEG's funding and endorsement on their website and in other publications referring to the initiative (e.g. scientific publications).

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Annex 1:
Ranking of countries according to the Human Development Index[3] 2023-2024

Table 1. Human Development Index

high HDI	Country	Human Development Index (HDI) 2022	low HDI	Country	Human Development Index (HDI) 2022
	Switzerland	0,967		Croatia	0,878
	Norway	0,966		Portugal	0,874
	Denmark	0,952		Slovakia	0,855
	Sweden	0,952		Türkiye	0,855
	Germany	0,950		Hungary	0,851
	Ireland	0,950		Montenegro	0,844
	Netherlands	0,946		Romania	0,827
	Belgium	0,942		Russian Federation	0,821
	Finland	0,942		Georgia	0,814
	United Kingdom	0,940		Serbia	0,805
	Luxembourg	0,927		Bulgaria	0,799
	Austria	0,926		Albania	0,789
	Slovenia	0,926		Armenia	0,786
	Israel	0,915		Bosnia and Herzegovina	0,779
	Spain	0,911		North Macedonia	0,765
	France	0,910		Moldova (Republic of)	0,763
	Italy	0,906		Azerbaijan	0,760
	Estonia	0,899		Algeria	0,745
	Czechia	0,895		Ukraine	0,734
	Greece	0,893		Tunisia	0,732
	Poland	0,881		Egypt	0,728
	Latvia	0,879		Morocco	0,698
	Lithuania	0,879			

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[3] Human Development Indices are listed in the Human Development Report which is published annually by the United Nations Development Programme (UNDP). The full report 2023-24, based on the figures of 2022, is available here: https://hdr.undp.org/content/human-development-report-2023-24.