Background & Objective

The RAND/UCLA modified Delphi panel method is a formal group process that systematically and quantitatively combines expert opinion and evidence to arrive at consensus, which traditionally includes an in-person meeting. Experts (physicians, advocates) meet in person at a panel meeting to discuss results of a first-round survey before the repeat survey. The COVID-19 pandemic made such meetings impossible.

We examined the impact on achieving consensus when moving from in-person to virtual panel meetings.

Methods

The RAND/UCLA modified Delphi panel process is illustrated in Figure 1. We conducted 5 virtual panels over 13 months and compared them to 4 pre-pandemic, in-person panels.

- We report the number of panelists, items rated, meeting duration, and percent disagreement in first- and second-round surveys.

Results

- Both the in-person and virtual panels included a mean of 11 panelists (Table 1).
- Panelists joined virtual meetings for 6-7 hours across 2-4-hour sessions. In-person meetings lasted 6-9 hours plus up to 10 hours of travel.
- Panelists rated a mean of 488 and 453 items in the virtual and in-person panels, respectively.
- Disagreement was higher in first-round surveys (range 13-67% virtual, 34-67% in-person) than in second-round surveys (range 1-32% virtual, 10-43% in-person) (Figure 2). Mean decreases in disagreement were 19% (virtual) and 27% (in-person).

![Figure 1. The RAND/UCLA Modified Delphi Panel Process](image)

**Figure 2. Percent Disagreement from First- to Second-Round Ratings**

|---|---|---|---|

**Table 1. Virtual versus In-Person Delphi Panel Characteristics**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Number of Panels</th>
<th>Length of Meeting</th>
<th>Number of Items Rated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virtual panels Use of On-Demand Treatments for Off Episodic in Patient's Disease: Guidance from a RAND/UCLA Modified Delphi Panel [1]</td>
<td>12</td>
<td>7.5 hours</td>
<td>432</td>
</tr>
<tr>
<td>RAND/UCLA Modified Delphi Panel Process</td>
<td>10</td>
<td>6 hours</td>
<td>624</td>
</tr>
<tr>
<td>Estimation of Stage-Specific Proximal Sump Time across 21 Cancer Types [4]</td>
<td>10</td>
<td>6 hours</td>
<td>624</td>
</tr>
</tbody>
</table>

Conclusions

Virtual panels:
- Maintained many aspects of the original panel method (e.g., review of existing evidence, number of panelists, number of survey items).
- Found similar decreases in disagreement between first- and second-round surveys.
- Engaged a diverse group of experts, including those with busy clinic schedules who may not have traveled to an in-person meeting.
- Unable to recreate the social interactions that built rapport among panelists during in-person meetings.
- Completed panel discussions in less time.

Transitioning from in-person to virtual meetings was not without challenges, but there were also unexpected advantages. This virtual Delphi panel method can be an effective and efficient alternative for researchers and clinicians.

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