**JBI Grades of Recommendation**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Grade A</strong></td>
<td>A ‘strong’ recommendation for a certain health management strategy where (1) it is clear that desirable effects outweigh undesirable effects of the strategy; (2) where there is evidence of adequate quality supporting its use; (3) there is a benefit or no impact on resource use, and (4) values, preferences and the patient experience have been taken into account.</td>
</tr>
<tr>
<td><strong>Grade B</strong></td>
<td>A ‘weak’ recommendation for a certain health management strategy where (1) desirable effects appear to outweigh undesirable effects of the strategy, although this is not as clear; (2) where there is evidence supporting its use, although this may not be of high quality; (3) there is a benefit, no impact or minimal impact on resource use, and (4) values, preferences and the patient experience may or may not have been taken into account.</td>
</tr>
</tbody>
</table>

The FAME (Feasibility, Appropriateness, Meaningfulness and Effectiveness) scale may help inform the wording and strength of a recommendation.

**F – Feasibility; specifically:**
- What is the cost effectiveness of the practice?
- Is the resource/practice available?
- Is there sufficient experience/levels of competency available?

**A – Appropriateness; specifically:**
- Is it culturally acceptable?
- Is it transferable/applicable to the majority of the population?
- Is it easily adaptable to a variety of circumstances?

**M – Meaningfulness; specifically:**
- Is it associated with positive experiences?
- Is it not associated with negative experiences?

**E – Effectiveness; specifically:**
- Was there a beneficial effect?
- Is it safe? (i.e. is there a lack of harm associated with the practice?)