In reply: I thank Hill and colleagues[1] for their interest in my article.[2] The approach of the Australian Living Evidence Collaboration (ALEC) is impressive and one that guideline developers should aspire to. It is my understanding that the ALEC receives considerable funding from federal and state governments and several charitable foundations. In contrast, the Paediatric Improvement Collaborative (PIC) receives a fraction of ALEC's budget to produce clinical practice guidelines (CPGs). The "iron triangle" refers to the three key constraints that can affect a project.[3] These are cost, time and quality. It is almost impossible to change one without affecting the others or damaging the quality of the overall project. The approach of PIC CPG development is based on evidence-based medicine (EBM), as described by Sackett and colleagues as the integration of clinical expertise with the best available clinical evidence from systematic research.[4] There are almost 150 PIC CPGs available as point-of-care guidelines for clinicians caring for children, and between 30 and 40 new and updated CPGs are published each year. Within the constraints of the current resources, it is not feasible to use GRADE methods and maintain this output. The current PIC approach to the development of national paediatric CPGs prioritises EBM, collaboration and quality. Significant investment in infrastructure and capacity is required to sustain, and ideally, enhance the process.

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1 Hill K, McGloughlin S, McGowan S, Turner T. Towards national paediatric clinical practice guidelines [letter]. *Med J Aust* 2024; https://doi.org/10.5694/mja2.52500

2 Starr M. Towards national paediatric clinical practice guidelines. *Med J Aust* 2024; 220; 392-393. https://www.mja.com.au/journal/2024/220/8/towards-national-paediatric-clinical-practice-guidelines

3 Atkinson R. Project management: cost, time and quality, two best guesses and a phenomenon, it's time to accept other success criteria. *International Journal of Project Management* 1999; 17: 337-342.

4 Sackett D, Rosenberg W, Gray J, et al. Evidence based medicine: what it is and what it isn't. *BMJ* 1996; 312: 71-2. ■