options. The cost-effectiveness of each chosen option will then be assessed.

Conclusions We have developed a provisional framework for developing policy options, initially for the prevention of CVD and diabetes. This is based on local epidemiological data, an assessment of the socio-political-cultural context and cost effectiveness. Policy makers are involved throughout, and will be presented with costed policy options along with their potential consequences. Implemented options will then be evaluated. The framework represents a “policy effectiveness-feasibility loop”, analogous to Tugwell’s clinical effectiveness loop. The impact of this approach, and its potential generalisability, will be rigorously evaluated.