The process for seeking PCCN endorsement of clinical documents

The Endorsement Standing Sub-Committee (ESSC) was established in June 2011 as a sub-committee of the Palliative Care Clinical Network. The ESSC have developed several documents to assist palliative care consortia, organisations, and other health care providers in making decisions regarding submission of clinical guidance documents for endorsement at a statewide level in Victoria.

The ESSC requires all clinical guidance documents meet the following criteria:

1. That the document has relevance to palliative care at a statewide level.

2. That the document is applicable across a variety of settings. Documents must be relevant to the clinical settings of palliative care inpatient, community, and consultancy services. If documents predominantly relate to another clinical setting e.g. renal, cardiac, etc, the submitting author should provide evidence that the document is supported by that network. The author may also request the document be considered by both networks collaboratively.

3. That the document has relevance to one or more disciplines traditionally providing palliative care e.g. medicine, nursing, social work, pastoral care, psychology, etc.

4. There is a strong preference that the document is submitted through the regional consortia prior to submission to ESSC. This will not apply for statewide programs. Submissions by an individual will not be accepted.

5. That there is evidence of a literature review with appropriate referencing and documentation of the level(s) of evidence the submitted documents present (according to the National Health & Medical Research Council) – see Attachment 1. A comprehensive search of other organisational or clearing house portals is demonstrated. For example CareSearch and the National Institute of Clinical Studies Clinical Guidelines portal may have existing endorsed relevant documents.

6. That the document has been developed or produced by public or private health organisations; non-government or government agencies; palliative care consortia; peak bodies and/or relevant professional organisations/societies.

7. That the document meets the relevant organisational quality processes and/or ethics approvals. For example, it is expected that a document including pharmacological information would be reviewed by the organisation’s pharmacy committee.

8. That two organisational/agency contacts are provided for current and future reference. This contact information will be used to notify of endorsement; seek further information prior to endorsement; for ongoing accuracy and relevance during the period of endorsement; and to review, update and re-submit the document at the conclusion of the endorsement period.

9. That the document has background information that includes the context and scope for this particular clinical guidance document. This may also include specific limitations or exclusions.
The process of submission

The submitting author/organisation
- confirms the clinical guidance document meets the criteria as above
- completes the form for Submission of clinical documents for endorsement
- submits the completed forms, the clinical guidance document and all related attachments electronically to the Palliative Care Clinical Network (PCCN) secretariat as per details below

The Palliative Care Clinical Network secretariat
- enters the application for endorsement details in the Endorsement Standing Subcommittee (ESSC) Submissions Register
- lists the application for endorsement on the next PCCN agenda
- lists the application for endorsement on the next ESSC agenda
- submits the application for endorsement and all related attachments to the Endorsement Standing Subcommittee members
- provides the Endorsement Standing Subcommittee members with the ESSC review of submission/application form
- following endorsement, maintains the Endorsement Standing Subcommittee (ESSC) Submissions Register
- following endorsement, lists the endorsed document on the PCCN agenda, a minimum of three months prior to the end of endorsement period

The Endorsement Standing Subcommittee
- confirms the clinical guidance document meets the submission criteria as above
- members complete the ESSC review of submission/application form independently and submit to the ESSC secretariat by email
- makes a decision on reviewers, for example, ESSC review or requirement for Expert Review Panel
- review all ESSC review of submission/application form comments and recommendations at the next ESSC meeting
- submit recommendations to the next PCCN meeting
- may request further information from the submitting author/organisation to inform decisions
- will establish an Expert Review Panel when required for specific clinical guidance documents
- if the document does not meet the submission criteria the application will be returned to the submitting author/organisation with corresponding detail and recommendations for re-submission if appropriate

The Expert Review Panel
- use the ESSC process and documents for reviewing clinical guidance documents

The Palliative Care Clinical Network
- participates in the decision process regarding requirement for Expert Review Panel (ERP) through ‘e-decision’ protocol
- considers the ESSC recommendations
- submits final recommendations to the Department of Health, including:
  - endorsement period
  - proposed method of dissemination
  - PCCN disclaimer
  - process for review at the completion of the endorsement period and resubmission for endorsement

The Department of Health
- advises the submitting author/organisation of endorsement process outcomes
- includes advice regarding submitting author/organisation responsibilities related to above final recommendations
ATTACHMENT 1

NHMRC levels of evidence


<table>
<thead>
<tr>
<th>Level</th>
<th>Intervention</th>
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<tbody>
<tr>
<td>Level I</td>
<td>A systematic review of level II studies</td>
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<tr>
<td>Level II</td>
<td>A randomised controlled trial</td>
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<tr>
<td>Level III-I</td>
<td>A pseudo-randomised controlled trial</td>
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<tr>
<td>Level III-2</td>
<td>A comparative study with concurrent controls:</td>
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<tr>
<td></td>
<td>• Non-randomised, experimental trial</td>
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<td></td>
<td>• Cohort study</td>
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<td>• Case-control study</td>
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<td>• Interrupted time series with a control group</td>
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<tr>
<td>Level III-3</td>
<td>A comparative study without concurrent controls:</td>
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<td></td>
<td>• Historical control study</td>
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<td></td>
<td>• Two or more single arm study</td>
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<td>• Interrupted time series without a parallel control group</td>
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<tr>
<td>Level IV</td>
<td>Case series with either post-test or pre-test/post-test outcomes</td>
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</tbody>
</table>

Referencing
Please record the full bibliographic details and relevant page numbers of the source from which information is taken. Insert the citation at the appropriate place in the text of your document using either author-date or notational referencing. Include a reference list that includes all in-text citations at the end of your document.

Author-date referencing style
Harvard (no longer produce a referencing guide)

Notational referencing style
EndNote http://www.endnote.com/
Footnote

ACCOMPANYING DOCUMENT

Process chart for endorsement of clinical guidance documents