

Short title: Professional document process BP

1. Introduction

The process for development of new professional documents and the review of existing professional documents is important to ensure that ANZCA Professional Documents are relevant, best evidence-based, and contemporaneous.

The process of document development has evolved over time. Originally most ANZCA Professional Documents were compiled and reviewed through a process co-ordinated by individual councillors. The process involved consultation with regional/national and other committees, and other experts to produce documents based on expert consensus, however there was no standardised process or presentation of background information.

In 2018, a review was undertaken as part of the regular professional document review cycle. Changes in governance and committee structures impacted on the process of document development to review. The formation of the Professional Affairs Executive Committee (PAEC) and changes to reporting hierarchy between ANZCA Council, PAEC, and the Safety and Quality Committee (SQC) necessitated review of the terms of reference for those committees and their delegations.

In 2010 a Director of Professional Affairs (Professional Documents) was appointed to facilitate the processes and since that time, there have been further refinements of organisational structure. In 2024 two Directors of Professional Affairs (Policy) [DPAs] were appointed, and the document development process is being updated to reflect contemporaneous processes and pathways.

2. Scope

The aim of the review of *CP24 Policy for development and review of professional documents* in 2024 was to synergise the professional document development and review process with *CP23 Policy for professional document framework* to remove duplication, clarify processes and optimise governance.

CP24 pertains to the process of development and review for professional documents, accompanying background papers and associated appendices.

It is not applicable to the endorsement of externally produce guidelines which are covered by *CP25 Policy on the endorsement of externally developed guidelines 2015*. It is not applicable to the endorsement of externally produced educational materials or apps, nor to corporate policies. It is not intended to apply to FPM specific documents which is covered in *PP01(PM) Policy for the development and review of professional documents*.

3. Discussion

3.1 Governance of document development and review

Delegated authority has been given by council at various points in document development to oversight committees and other groups for management of the processes. This work is supported by the DPAs and Policy Officer – Professional Documents in the policy unit.

3.2 Document development group

The document development group (DDG) is established by inviting expressions of interest (EOI) via ANZCA e-news. For non-anaesthetists, EOIs are sent directly to relevant organisations to seek a nominated representative. The contribution of fellows and other members of the DDG is recognised and valued. In 2024 a document was developed to clarify the CPD points opportunities afforded by participating in DDGs.

Face to face meetings of a DDG are unlikely to be required and work is usually completed electronically by video conference (zoom).

3.3 Reviews

Historically, documents were prioritised by the oversight committees on an annual basis with a view to reviewing every document within a five-year period. As the number of professional documents has increased, the timeframe for the review of existing professional documents needed to be reconsidered. Given that priorities in some areas may change, the evidence base takes time to be tested and accepted, and reviews require resources such as fellows' time, which is voluntary, it was agreed that a fixed interval may not be achievable or worthwhile.

The desire for new professional documents and the need to review existing professional documents needs to be balanced with resource capacity. The review process reflects the need for the documents to be contemporaneous, relevant, and useful. Review of documents should occur in a reasonable timeframe and are subject to the resource constraints required to undertake and oversee the reviews. The need should be prioritised based on the consideration of the level of significant knowledge or practice change that makes current recommendations outdated. This can include a change in scientific evidence or new college regulations. The DPAs will provide advice on a prioritisation schedule via the relevant oversight committees for council endorsement.

When a document becomes irrelevant or is superseded (for example by embedding into another document) the DPAs will recommend the withdrawal via the relevant oversight committee to council.

Where there is minimal change in scientific evidence or college policy, a professional document can undergo an internal review for less complex updates allowing review to proceed more efficiently. This process will be led by the DPAs, with the advice of experts as required. Based on the internal review, advice will be submitted to the relevant oversight committee. The advice will consider if the document should be withdrawn, accepted as reviewed, or undergo a comprehensive review following the professional document process in CP24.

The total period for the development or initial review of a professional document should be approximately six months. The stakeholder consultation period after initial drafting is usually four to six weeks and the pilot period is up to 16 weeks. The pilot document is publicly available on the ANZCA website and considered operational during the pilot period.

Web-based references and citations within the professional document and accompanying background paper and appendices will be reviewed every 2 years to ensure the weblinks are accurate. This will be completed by the policy unit with oversight by the DPAs (Policy).

3.4 References

References in the professional document should be to other professional documents or to relevant sources where strictly necessary. Otherwise, references should be included in the background paper.

3.5 Consultation

While the documents are the responsibility of ANZCA Council, wide consultation is desirable in the development and review of professional documents. The breadth of consultation in the early stages of document development may be focused in cases where material or feedback is considered sensitive.

4. Document development group 2018

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Professor David A Scott
Dr Leona Wilson
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5. Document development group 2024

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Professional documents of the Australian and New Zealand College of Anaesthetists (ANZCA) are intended to apply wherever anaesthesia is administered and perioperative medicine practised within Australia and New Zealand. It is the responsibility of each practitioner to have express regard to the particular circumstances of each case, and the application of these ANZCA documents in each case. It is recognised that there may be exceptional situations (for example, some emergencies) in which the interests of patients override the requirement for compliance with some or all of these ANZCA documents. Each document is prepared in the context of the entire body of the college's professional documents, and should be interpreted in this way.

ANZCA professional documents are reviewed from time to time, and it is the responsibility of each practitioner to ensure that he or she has obtained the current version which is available from the college website (www.anzca.edu.au). The professional documents have been prepared having regard to the information available at the time of their preparation, and practitioners should therefore take into account any information that may have been published or has become available subsequently.

While ANZCA endeavours to ensure that its professional documents are as current as possible at the time of their preparation, it takes no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.

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