Document Framework Policy – Background Paper

1. Introduction

In 2018 the college noted that a number of ANZCA professional documents were overdue for review and identified the need for a policy that would assist in addressing the backlog.

In addition, it was recognised that across existing college documents there were potentially conflicting or outdated statements, and stand-alone 'orphan' documents devoid of document management processes. These posed a risk, and highlighted the need to develop a policy governing the process for development and review across all college documents.

As a result, the Documents Working Group (DWG) was established with the intention of attending to the backlog of documents to be reviewed, as well as co-ordinating the development and review of ANZCA/FPM documents. The culmination of the DWG's work has led to the accompanying Document Framework Policy (DFP).

2. Purpose

The aim of the DFP was to examine all college documents with a view to ensuring clarity and consistency between documents, as well as the development of transparent and consistent processes including all aspects of document management for the range of documents.

3. Scope

There was considerable discussion surrounding which documents should be included within the policy. It was agreed that the policy should apply to both corporate and professional documents. However, a number of document types were considered out of scope. The reasons for their exclusion included the presence of processes already inherent in their development such as scientific publications, governance documents (ANZCA Council and FPM Board), and education and training documents (Curricula and handbooks).

4. Discussion

4.1 Professional documents

A definition of these documents has been included in Appendix 2: Glossary of Terms and has been broadened beyond guidelines and position statements (generally referred to as professional documents).

Historically, these originated with the intention of promoting standards of practice in accredited training institutions. However, with time, it was recognised that these documents could serve to promote standards of practice across the whole range of institutions in which anaesthesia services and pain medicine services are provided. The process for development and review of ANZCA/FPM professional documents has evolved and is described in the respective policies CP24(G)/PP01(PM). These policies mandate rigorous and robust procedures, which require time and resources.

The DWG became aware of ongoing confusion regarding the standing of professional documents despite the hierarchy published within CP24(G). This was particularly so with regard to the variable interpretation among stakeholders of standards, and misunderstanding of guidelines, position statements, and policies. This led to agreement that the existing hierarchy of policies, guidelines and position statements better resides in CP24(G) with Appendix 2 being limited to definitions.

4.2 Corporate documents

Definition of corporate documents did not entail much debate and those considered out of scope have been listed in the accompanying policy.

4.3 Document management

It was acknowledged that there needs to be a strict process for document management, which includes ownership/custodianship, development/review/withdrawal, indexing/classification, and storage/retrieval of relevant college documents.

There was discussion around the importance of identifying ownership and the responsibilities that accompany ownership. It became evident that responsibilities of ownership and custodianship differ, and with a clearer understanding of the differences between the two terms the roles and responsibilities were able to be defined in Appendix 2. While the responsibility of allocating document custodians is not included in the policy it was suggested that it should reside with the Senior Leadership Team (SLT).

Classification and indexing of documents were considered at length resulting in the table describing coding/labelling of documents. There was extensive discussion surrounding inclusion of labelling for "standards". The reason for including standards was that documents titled as standards exist on the college website and as such, warrant inclusion.

Development and review of documents initiated some debate. The development processes for ANZCA/FPM professional documents are well outlined in CP24(G)/PP01(PM) but there is scope for flexibility depending upon topic and urgency. CP25(G) outlines the process for externally developed guidelines. It was agreed that some sort of consistent process should exist for other relevant documents.

The issue that raised most debate was on the frequency of reviews. While a recommendation for at least 3 yearly reviews was accepted for corporate documents this seemed impractical and at times possibly unwarranted for guidelines and position statements, which may be better suited to 5 yearly reviews, unless there is an indication for earlier review.

Given that the evidence base takes time to be tested and accepted, and that reviews consume resources such as fellows' time, which is voluntary, it was agreed that 5-yearly cycles would be applicable to professional documents, with the option of earlier review as indicated. In this context there was support for promoting the recommendation contained in item 6.2 of CP24(G) suggesting that a preliminary review may be appropriate to determine whether a full review or an abbreviated review is required. While CP24(G) suggests that this should be the oversight committee, the DWG felt that this could be more efficiently achieved by a smaller group consisting of the document custodian, Chair plus one member of the oversight committee, and the DPA. Should this be accepted then CP24(G) will need to be amended.

4.4 Labelling of documents

With the broad range of existing documents and their sheer numbers, storage and retrieval with a view to ready and rapid accessibility is dependent on the document classification and its unique identifying code. The governing principle was that of simplicity with avoidance of excessively long codes and use of letters linked to the document type. The hope was that such a code would become intuitive and facilitate searching and accessing documents.

4.5 Glossary of terms

In developing the glossary, it was decided that there were elements that applied to document development and management terms and those that applied to clinical type documents. Consequently, for clarity and simplicity the glossary was divided into two sections, one for document development terms, and one for clinical terms.

Section 1 identifies and highlights the relevant aspects of document management along with clarification of the different types of professional documents and their purpose.

Items of note include:

- Preference for the term "Position Statement" over "Statement" as a more accurate reflection of the intent of the document.
- Removal of the hierarchy "Policy, Statement, Guideline' due to potential confusion that may arise when these terms are inappropriately interchanged with 'standards'. The hierarchy is relevant to 'professional documents' and consequently, is retained in CP24(G).
- The definition of a 'standard' was extensively discussed and it was decided to adopt a definition that includes minimum, a range, and excellence (aspirational).

Section 2 attempts to address the relevant clinical terms encountered in the range of professional documents. It is recognised that this section of the glossary will require updating as other terms arise that may be subject to interpretation and require clarification.

Where regulatory authorities provided definitions that were clear and distinct these were adopted to ensure avoidance of any conflict and potential risk.

Where necessary other expert sources were consulted as with the definition of cultural competency and cultural safety.

To engage all relevant areas of the college and oversee implementation of the DFP college-wide, a Project Manager was appointed.

5.   Summary

The DWG project was undertaken over an 18-month period which included the covid-19 pandemic. The DWG has fulfilled its purpose, as listed in the terms of reference, through the development of the DFP, which has been a significant project and pivotal to existing and future college document management.

6.   Membership of the DWG

Milton Cohen AM, FRACP, FFPMANZCA - Director of Professional Affairs – FPM
Clea Hincks – Executive Director, Policy and Communications
Vanessa Hille – Policy Officer - Professional Documents
Phillipa Hore FANZCA – Member of Safety and Quality Committee
Penny McMorran – FPM Professional Affairs Coordinator
Lindy Roberts AM, FANZCA, FFPMANZCA, FAICD – Director of Professional Affairs, Deputy Assessor
Peter Roessler FANZCA – Director of Professional Affairs - Professional Documents (DWG, Chair)
Leona Wilson ONZM, FANZCA, FAICD – Executive Director, Professional Affairs
Anthony Wall – Operations Manager, Policy, Safety and Quality

ANZCA Business Representative Experts

Cassandra Gorton – Business Records Officer
Anne Ritchie – Operations Manager, Knowledge Resources

Stakeholders Consulted

ANZCA SLT
FPM PAEC ⎪ANZCA PAEC
ANZCA SQC
FPM PSC
Business unit managers