

Guideline 1.3 - Process for Developing Resuscitation Guidelines

When developing or revising a guideline the ANZCOR will undertake the following:.

1. Guidelines will be developed in accordance with the Grading of Recommendations Assessment, Development and Evaluation (GRADE) approach¹ and the 2016 NHMRC Standards for Guidelines.² Whilst ANZCOR is finalising the transition to this approach for all guidelines, a hybrid model may be used, combining the GRADE approach and the previous approach used by ANZCOR, which was based on the National Health and Medical Research Council statements on developing clinical guidelines.³
2. Contributions in electronic format for the development of guidelines may be received from member organisations and other interested groups or individuals: they should reach the secretariat 28 days before a Council meeting, and will be placed on the agenda for the meeting.
3. Preparation of draft guidelines may be delegated to ARC sub-committees, member organisations, working parties, State Branches, or other organisations as considered appropriate by Council.
4. Members of working parties and committees developing guidelines should confine their attention to the substance, content and format of the draft consistent with point 1 above. Minor editing of documents at such meetings shall be delegated to an appropriate individual or group.
5. A draft version of the guideline document will be distributed to all member organisations of Council, including State Branches for comment.
6. After consideration and, where appropriate, incorporation of all responses, a final draft guideline is prepared for distribution to all member organisations of Council, including State Branches for comment.
7. Council will solicit responses from community groups as appropriate.
8. Council will ratify the final draft guideline where consensus has been reached and then publish the guideline on the ARC/NZRC websites as appropriate.
9. Where Council considers it is not in a position to ratify the final draft guideline the above process is repeated until an acceptable guideline is achieved.
10. Guidelines will be reviewed within 5 years or at anytime where further evidence requires such a review.

Evaluation of the Science

The ARC, as a founding member of the International Liaison Committee on Resuscitation (ILCOR), has been extensively involved in the international evaluation of the resuscitation science. The most recent resuscitation science review process culminated with publication by ILCOR of the Consensus on Science and Treatment Recommendations (CoSTR) in 2015.⁴ CoSTR represents an extensive synthesis of the evidence related to resuscitation to date. A detailed description of the evaluation process is described in the CoSTR publication.⁵

A fundamental philosophy underpinning this process undertaken by ILCOR is that while guidelines published by the national resuscitation councils may vary, (due to national or regional factors) the science on which these guidelines are developed should be common. Accordingly ANZCOR has relied extensively on the evidence and recommendations published in CoSTR in developing and revising its guidelines. Furthermore, where possible the ANZCOR has adopted an approach to achieve international consistency and ease of teaching.

ANZCOR will continue its process of continual reviewing of the resuscitation science literature and where appropriate, develop or revise its existing guidelines.

References

1. Schünemann H, Brozek J, Guyatt G, Oxman A. GRADE handbook; 2013. <http://gdt.guidelinedevelopment.org/app/handbook/handbook.html/> (accessed Nov 19, 2016).
2. 2016 NHMRC Standards for Guidelines. National Health and Medical Research Council. <https://www.nhmrc.gov.au/guidelines-publications/information-guideline-developers/resources-guideline-developers> (accessed Mar 1, 2017)
3. NHMRC additional levels of evidence and grades for recommendations for guidelines developers. 2009. National Health and Medical Research Council. https://www.nhmrc.gov.au/_files_nhmrc/file/guidelines/developers/nhmrc_levels_grades_evidence_120423.pdf (accessed Mar 4, 2017)
4. Nolan JP, Hazinski MF, Aickin R, Bhanji F, Billi JE, Callaway CW, et al. Part 1: Executive summary: 2015 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science with Treatment Recommendations. *Resuscitation*. 2015;95:e1-e31.
5. Morley PT, Lang E, Aickin R, Billi JE, Eigel B, Ferrer JM, et al. Part 2: Evidence evaluation and management of conflicts of interest: 2015 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science with Treatment Recommendations. *Resuscitation*. 2015;95:e33-e41.