

Guidelines on Policy Development

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Canadian Paediatric Society Policy: An overview

A brief overview of Canadian Paediatric Society policy, including: categories, authorship, review process, duration and length.

Position statements written by CPS committees are the main vehicle for communicating CPS policy. However, there are others. This section provides an overview of policy options available through the CPS.

Categories of Policy

Position Statements

CPS committees develop position statements for health care practitioners and/or policy makers on topics of concern or issues relevant to the health and well-being of children and youth, that convey the opinion and recommendations of the CPS. The opinions and recommendations should be as evidence-based as the literature allows, recognizing that in many cases, a position statement may be required or desirable on issues for which definitive data are lacking.

Practice Points

CPS committees or sections write practice points to address advocacy issues or topics on which information is not readily available (eg., Paediatric Infectious Disease Notes). These documents are focused, topical and provide a short discussion of important points for good paediatric care. Depending on the topic, the editors of *Paediatrics & Child Health* (PCH) may request external peer review. For a quick reference on the differences between position statements and practice points, see **Appendix 1**.

Information for parents and caregivers

Based on CPS policy, Information for parents and caregivers (parent handout) are written by the Manager, Public Affairs in collaboration with the Public Education Subcommittee or another expert CPS committee(s). These documents have their own development process and are reviewed annually. They are posted on www.caringforkids.cps.ca / www.soinsdenosenfants.cps.ca

Books for health professionals or the public

Developed by a committee or section on a topic of concern, books for health professionals provide extensive background research and in-depth knowledge of the subjects(s). The development of books generally involves an expert CPS committee or a distinct editorial/advisory board struck for this purpose. Books may include information or recommendations not necessarily found in CPS position statements or practice points.

Motions

A motion supporting the health and well-being of children and youth may be approved by the Board of Directors or by the membership at the Annual General Meeting. These are considered official CPS policy.

Authorship

- The principal author—who must be a member of the committee—is the individual assigned to develop, or revise, a position statement or practice point in the name of the committee. The CPS Committee Manual details who is eligible to be principal author.
- Non-committee members cannot co-author a document without expressed approval from the Board of Directors (or Executive). A committee should submit this request in writing **before the potential co-author is engaged**.
- The complete committee membership for the year in which the statement was finalized is listed at the bottom of the document and the principal author(s) are identified.
- For revised position statements, only the current committee membership will be listed. **However, the original document, including the name(s) of the principal author(s) must be referenced.**
- Annual reviews and revisions of position statements and practice points are the responsibility of the current membership of the committee.

Intellectual property

- The CPS owns copyright of all documents produced by its committees or sections and bearing the CPS logo.

Duration of CPS position statements and practice points

CPS position statements and practice points undergo annual review by the authoring committee 3 years following publication to reaffirm, retire, or revise the policy. If appropriate, position statements and practice points may be reviewed sooner. For details on the process for the annual review, see page 8.

Length of CPS documents

Position statements should be no more than 3000 words, and practice points should be no more than 1500 words.

Due to space constraints, documents longer than the specified words may not be published in their entirety in *Paediatrics & Child Health*. The author(s) may be asked to write a summary for publication, with the full-length statement made available on the CPS website.

Development and Review Process

Step 1: Intent

This is the mechanism by which the BoD approves initiation and coordination of policy development on child and youth health issues within the CPS. The Intent identifies the topic of the document, the need, the methodology to be used, and reviewers (internal and external). When feasible, the Intent should reflect or be related to current goals and objectives of the CPS.

- Committee identifies lead author(s), performs a preliminary literature search, and prepares a draft outline.
- Principal author completes the Intent form, [available online](#) in the CPS Member Centre.
- Committee Coordinator verifies the form is complete and forwards it to the Committee Chair for review.
- Once approved by the Committee Chair, the Committee Coordinator circulates the completed Intent to the BoD for approval.
- Once the BoD has approved the Intent, the 2-year time limit for development begins (**Consult Appendix 2 for development flowchart**).
- To withdraw a Board-approved Intent, the committee must inform the BoD by sending an e-mail message to Committee Coordinator, stating the reason for withdrawal.

During the development of a document, the Committee Chair will be asked for approval at each step of the way.

This includes:

- the Intent form
- the draft to be circulated to other groups for review
- the draft to go to the CPS Board of Directors
- the final draft

If the documents do not come directly from the chair, or if the principal author does not explicitly indicate that the chair has approved, the CPS Committee Coordinator will hold the material until this is clarified. These extra steps could result in unnecessary delays.

How long do committees have to write a statement or practice point?

Pre-final drafts (ie., for Board approval) must be submitted to the CPS within 2 years of the Board-approved Intent. Otherwise, a letter of justification for the delay, a new Intent, or a request to withdraw the Intent must be submitted to the board.

Step 2: Writing and Review (In Committee)

The process for revising an existing document is the same as for developing a new one.

- A first draft of the document should be circulated for committee review **within 6 months** of the Intent approval. The committee may review several drafts before the document moves on to the next step.
- Statements should be no more than 3000 words
- Practice points should be no more than 1500 words

ITEMS TO INCLUDE	Statement	Practice Point
Title: Must reflect the purpose clearly and concisely. Short is better. Should be modified to identify a revised document.	✓	✓
Abstract: No more than 150 words, includes reason/purpose and anticipated outcomes and 3-6 keywords.	✓	
Background information: Sets the context for the document, and references the original statement or practice point (in the case of a revision). Can include methods of development and statement of problem.	✓	✓
New information	✓	✓
Recommendations: Must be consistent (non-conflicting) with established policy unless recommended for retirement.	✓	
Levels of evidence: Where appropriate, committee should indicate the levels of evidence for each recommendation. If no studies are available, this should be specified as well.	✓	
Conclusion	✓	✓
Acknowledgements: Lists the internal and external groups that reviewed prior drafts of the document.	✓	✓
References: Must be verified by the committee and should not reflect committee bias. They should be numbered in the order in which they appear in the text and formatted according to PCH style (Appendix 3).	✓	✓
Committee list: A list of the current committee members, identifying the principal author(s), will be appended and the Committee chair will be asked to review and confirm.	✓	✓
Tables and figures: Authors are responsible for identifying the source of the materials. The CPS office will obtain permissions required on behalf of the Society. (Appendix 3)	✓	✓

Step 3: Internal/External Review

Depending on the nature and complexity of the topic, the authoring committee may suggest that the document be reviewed by internal groups, including other CPS committees or sections, or by an external organization. These groups should be listed on the Intent form. The reviews occur before the final document is submitted to the BoD. It may go through several reviews at this stage, which the Committee Coordinator generally coordinates. Comments from these reviewing groups are then addressed in the document and the reviewing groups are acknowledged in the published version of the document.

Internal Review Process (CPS committees and sections)

- The draft document, approved by the chair, is submitted to the CPS Committee Coordinator for circulation.
- Committee Coordinator circulates the draft to CPS groups identified on the Intent, who will be given **2 weeks** to return comments to the coordinator.
- The coordinator forwards all comments to the chair(s) of the reviewing committee(s), who will be given **1 additional week** to respond.
- Final comments are forwarded to the author, chair and Board representative of the authoring committee with a **2- to 3-week** deadline to provide a response, approved by the chair. (This response addresses the reviewing committee's comments, either by incorporating changes into the document or by addressing the comment directly.)
- Author's response is sent to the chair(s) of the reviewing committee(s), who will be given **1 week** to provide any additional comments.

External Review Process (organizations outside the CPS)

- Author revises the document and forwards it to the Committee Chair for approval. The chair submits the final draft to the CPS Committee Coordinator.
- Committee Coordinator circulates the draft to external groups identified on the Intent, who will be given **4 weeks** to submit comments.
- The coordinator forwards comments to the Author, Chair and Board representative of the authoring committee with a **2- to 3-week** deadline to provide a response to the reviewing group's comments.
- Author's response, approved by Chair, will be forwarded to the external group, who will be given **2 weeks** to provide any additional comments.

ACKNOWLEDGEMENTS: These reviewing groups (both internal and external) will be acknowledged in the published version of the document.

Step 4: Review by CPS Board of Directors

- Once all comments are incorporated/addressed, the committee reviews the document for final approval.
- When the final document is sent to the Committee Coordinator, it must be approved by the Committee Chair.
- The Committee Coordinator verifies references and forwards the final document to the Senior Editorial Coordinator of PCH to circulate to the BoD for approval.
- Individual board members have **2 weeks** to provide comments directly to the Senior Editorial Coordinator (not to be shared at this point with other board members).
- They may: **approve** the document for publication, **approve with changes**, **not approve**, or reply that the topic is **not within their area of expertise**.
- After the 2-week deadline, comments are sent back to the entire board for review. Anyone with further comment must respond **within 1 week**.
- The Senior Editorial Coordinator forwards all comments to the committee author, Committee Chair and Board representative.

Step 5: Final revisions

- The author(s) must provide a response to the feedback from the BoD, which will be returned to the BoD, after approval by the Committee Chair, with the revised document. Reasons for not incorporating the suggestions must be justified.
- The Committee Chair and Board representative will review the documents and provide their sign-off to the Senior Editorial Coordinator.
- The author's response to the feedback is returned to the BoD, with the revised draft that shows the changes.
- If a concern is not addressed, the Board member who raised the issue should immediately communicate with the Board representative. This may require discussion with/among the chair and/or author. If the issue is resolved, the document can proceed with publication.
- If the issue cannot be resolved, the Board representative will bring the revised draft document to the full board.
- The Committee Chair and Board representative must provide a written sign off of the document to the Senior Editorial Coordinator before it is scheduled for publication.

Process for Dispute Resolution

Disagreement among committees

When a committee is asked to review and comment on a statement or practice point by another CPS committee and disagrees with the document, the following will occur:

- Step 1:** Recommendations and comments from the reviewing committee will be sent to the principal author and originating Committee Chair, who will be asked to determine whether the differences can be resolved.
- Step 2:** If the issues cannot be resolved through e-mail, a teleconference will be held with the two Committee Chairs, principal author, Board representatives and CPS staff to discuss the differences. Ideally, this discussion will resolve any differences.
- Step 3:** If differences persist following the teleconference, the BoD will be asked for an opinion. If needed, the Committee Chairs will be invited to address the BoD to explain the differences. If necessary for reasons of time (the BoD meets in June and November), the issue will go to the Executive, which meets monthly by teleconference.
- Step 4:** The BoD will make a final decision as to whether or not the document will be published, and what changes need to be made. If necessary, the BoD will also decide who should be credited as principal author(s) of the statement or practice point.

Disagreement among committee members

When an individual committee member disagrees with a statement or practice point produced by his or her own committee, the Board representative will be asked to mediate the differences. If the differences cannot be resolved, the Board representative, with the Committee Chair, will make a recommendation to the BoD. If the difference of opinion is between the author and the Board representative, the following will occur:

- Step 1:** A teleconference with the principal author, the Committee Chair, the Board representative and CPS staff will be held to determine whether differences can be resolved.
- Step 2:** Should a difference in opinion persist, the document will be sent to the BoD, with the comments from the Board representative and the principal author's reasons for not incorporating them. The BoD will make a final decision about whether or not it will be published, and what changes will be made. If necessary, the BoD will also decide who should be credited as principal author(s) of the statement or practice point.

Annual Review of Policy

All committees must conduct an annual review of their statements and practice points older than 3 years (from publication date) and each year thereafter. This usually occurs during the winter committee meetings. Occasionally, policy may be reviewed sooner in light of new emerging information.

Committees may choose to reaffirm, revise or retire a statement or practice point. They may also elect to develop addendum to an existing document.

- **Reaffirmation:** Indicates that the statement or practice point continues to reflect the current state of knowledge in the medical literature. In some cases, committees may decide that a formal literature review is required to be certain that reaffirmation without revision is appropriate. The date of the reaffirmation (month and year of committee meeting) will be added to the current version of the document posted on the CPS website.
- **Revision:** Requires the BoD approval of a completed intent form. The intent should indicate whether the existing document should be retired (ie., removed from circulation and the CPS website) while the revision is in progress. If the existing document stays on the CPS website, a note will be added to indicate that it is under revision.
 - Revised statements and practice points are submitted for BoD approval.
- **Retirement:** To retire a statement or practice point, the committee must inform the BoD by sending an e-mail message to Committee Coordinator, stating the reason for withdrawal
 - A list of statements and practice points that are retired will be published annually in the *CPS News*.
- **Addendum:** Appropriate only when the information in the existing document remains valid and unchanged, and it requires additional information or recommendations. This process begins with the submission of an intent and follows the same procedure as outlined above. Addendums are generally short (300-500 words). An addendum may also be produced prior to the required 3-year review if circumstances warrant.

Addendum or revision?

Making substantial changes to the body of the statement or practice point is considered a revision.

Publication

- Position statements and practice points are published in English and French in PCH, provided they are the appropriate length or as space permits, at the discretion of the Editor-in-chief. They will also be posted on the CPS website in html and pdf formats.
- Medical editors at Pulsus (publishers of PCH) edit statements and practice points for style and clarity. The principal author reviews and approves the page proofs. Once the English is finalized, it is sent for translation. It is then reviewed by 2 external reviewers before it is finalized and published. The same translator is used to ensure consistency with the terminology used by the CPS.
- Recommendations may be published in *CPS News*. Recommendations of an urgent nature that have a significant and direct impact on paediatric practice may be disseminated to the membership through the electronic newsletter.
- Because of copyright and reprint concerns, position statements and practice points will not be published in other journals before PCH. Exceptions are made if it is previously agreed that a joint document (ie, usually a joint position statement) will be published simultaneously in PCH and the journal of the co-authoring entity.
- Revised statements and practice points that are not republished in their entirety will be updated on the CPS website, indicating the date of revision. They are listed in *CPS News* annually.

Appendix 1

Position Statement or Practice Point? A quick reference

Position Statement	Practice Point
Characteristics	Characteristics
<p>Will drive the Canadian Paediatric Society's activities, and/or represent the organization's position on a particular issue</p> <p>Will help the CPS accomplish its objectives</p> <p>Expresses a definite course/method of action in light of given conditions to guide and determine present/future directions</p> <p>SHOULD contain recommendations</p>	<p>Drives the paediatrician/family physician/child and youth health professional in the clinical setting</p> <p>Can be a stand-alone document</p> <p>SHOULD NOT contain recommendations</p>
Authorship	Authorship
<p>Authoring entity is a CPS committee</p> <p>Lead author must be a committee member</p> <p>Non-committee members must have Executive approval to co-author a statement</p>	<p>Authoring entity is a CPS committee or section</p> <p>Lead author must be a committee member</p>
Format	Format
<p>Submitted within 2 years of intent approval</p> <p>Maximum 3000 words</p>	<p>Submitted within 2 years of intent approval</p> <p>Maximum 1500 words</p>
Evidence Base	Evidence Base
<p>Describes the level of evidence-based data and review on which the policy is based</p> <p>Uses formal rules of evidence in development</p>	<p>Uses formal rules of evidence in development</p>
Reviewers	Reviewers
<p>Board of Directors</p>	<p>Board of Directors</p>
Publication	Publication
<p>Published in <i>Paediatrics & Child Health</i> and on www.cps.ca, in English and French</p>	<p>Published in <i>Paediatrics & Child Health</i> and on www.cps.ca, in English and French</p>

Appendix 2

Flow chart for development and review

Step 1: Intent	Committee discusses potential topics and assigns a principal author, who completes the Intent form available online
	Committee Coordinator verifies the form for completeness and forwards it to Committee Chair for approval Once approved by the Committee Chair, the Committee Coordinator circulates the intent to BoD for approval
	Once the BoD approves the intent, the 2 year time limit begins
Step 2: Writing and review (in committee)	First draft circulated for committee feedback within 6 months of approved intent (multiple drafts as needed)
	Committee Chair submits the finalized document to the Committee Coordinator
Step 3: Internal/external review	Committee Coordinator circulates the document to the internal/external review groups identified on the intent form
	Committee Coordinator collates and forwards the feedback received to the Author, Committee Chair and Board representative
	Principal author addresses the comments received and submits the revised document to the Committee Chair
	Committee Chair reviews the author's response and ensures all comments have been addressed and submits all documents to the Committee Coordinator, who returns this response to the reviewing groups
Step 4: Review by CPS Board of Directors	Committee Coordinator checks the references and formats the text and submits the document to the PCH Senior Editorial Coordinator
	Senior Editorial Coordinator circulates the document to the BoD for approval, collates comments and forwards them to the principal author, Committee Chair and Board representative
Step 5: Final revisions	Principal author addresses the feedback received and submits the final revised document to the Committee Chair and Board representative
	Committee Chair reviews the author's response and ensures all comments have been addressed and submits all documents to the Senior Editorial Coordinator, who returns this response to the BoD.
	Once written sign-off is received from the BoD, the document can be scheduled for publication

Last revised: April 7, 2011

Appendix 3 References, tables, figures and photographs

REFERENCES

The style of references is that of Index Medicus, National Library of Medicine. Do not use periods after authors' initials. Journal references should contain inclusive page numbers. Abbreviations of journal names should conform to those used in Index Medicus.

Personal communications, manuscripts in preparation and other unpublished data should not be cited in the reference list but may be mentioned in the text in parentheses. Identify abstracts with the abbreviation 'Abst' and letters to the editor by 'Lett' in parentheses; abstracts should not be cited if they are more than 2 years old.

The style and punctuation of references are as follows:

Periodicals

List all authors, if 6 or less. Otherwise list the first 3 and add 'et al'.

Example,

Arnold LE, Stoff DM, Cook E Jr, et al. Ethical issues in biological psychiatric research with children and adolescents. *J Am Acad Child Adolesc Psychiatry* 1995;34:929-39.

Books

Example,

Svensson LG, Crawford ES. *Cardiovascular and Vascular Disease of the Aorta*. Toronto: WB Saunders Company, 1997:184-5.

Chapter in book

Authors of chapter. Chapter title. In: Authors of book (eds). Book Title, number of edition. Publisher's city: Publisher's name, year:page numbers.

Example,

Klein U. Oral medicine & dentistry. In: Hay W Jr, Levin MJ, Deterding RR, Sondheimer JM (eds). *CURRENT Diagnosis & Treatment in Pediatrics*, 20th Edition. New York: McGraw-Hill Professional, 2010:427-36.

Websites

Web site references should contain the date of last update, if available, and date of access (references to other types of electronic documents should include the format of the document).

Example,

Canadian Task Force on Preventive Health Care. New grades for recommendations from the

- Type the reference list doubled spaced starting on a separate page.
- Each reference should be numbered consecutively in the order that it is cited in the text.
- Use Arabic numerals in parentheses on the line.
- DO NOT superscript
- DO NOT use endnote or footnote functions.

Canadian Task Force on Preventive Health Care.

<www.canadiantaskforce.ca/recommendations/2003_04_eng.html> (Accessed on April 7, 2011).

TABLES

Typed on a separate page from the rest of the text with the table number above the table and explanatory notes below. Table numbers should appear in Arabic numerals and should correspond to the order of the tables in the text. If abbreviations are used, an alphabetical listing must be included in the footnote.

FIGURES

All figures have to be submitted in their original formats. The lettering, decimals, lines and other details on the figures should be sufficiently large to withstand reduction and reproduction.

PERMISSIONS

Authors are responsible to identify the source of materials used. The CPS office will seek permission on behalf of the Society.

Figure Legends

Typed separately from the rest of the text, with figure numbers corresponding to the order in which figures are presented in the text. Identify all abbreviations appearing on figures in alphabetical order at the end of each legend. Enough information should be given to allow interpretation of the figure without reference to the text.

GRAPHS

Graphs **must** be created using Microsoft Word (.doc), Microsoft Power Point (.ppt), Microsoft Excel (.xls), Corel Draw (.cdr), or Adobe Illustrator (.ai or .eps).

PHOTOGRAPHS

Any photographs imported into your figure must be scanned at a resolution of no less than 360 dpi and saved as a .tiff file. Place crop marks on photomicrographs to show the essential field and designate special features with arrows (which must contrast with the background).