



Palliative Care Evidence Review Service (PaCERS)

Mala Mann













Outline



 To describe the progress and process of our Rapid Review Service









Introduction



Securing Health and Well-being for Future Generations

Principles of Prudent Healthcare:

- achieve health and wellbeing with the public, patients and professionals as equal partners through co-production
- care for those with the greatest health need first, making the most effective use of all skills and resources
- do only what is needed, no more, no less; and do no harm
- reduce inappropriate variation using evidence based practices consistently and transparently.















Palliative Care Evidence Review Service (PaCERS)

Pacers has been developed as a rapid review service funded by Welsh Government to support professionals and other decision-makers working in palliative care.

The service is unique in responding to external clinical/organisational calls for evidence rather than itself defining the review agenda.





Any health care professionals or other decision makers working in palliative and supportive care.

Palliative Care

- multiprofessional
- Small, time pressured
- Limited research experience













The Team





Dr Anthony Byrne



Dr Annmarie Nelson



Dr Amanda Woodward



Mala Mann









Peter Gee

Aim



- To deliver high quality evidence that is both timely and user-friendly:
 - To work in partnership with the requester
 - To provide training in research methodology relating to rapid reviews
- To maintain a repository of evidence reviews and circulate as appropriate.







It is not a systematic review



but it requires robust processes to be credible



Rapid review is defined as a review conducted within 7-10 weeks using modified systematic review methods with a highly refined research question, search carried out within limited set of databases and other sources and increasing the transparency of the methods used.













PaCERS progress

- Developed a rapid review request form
- Rapid Review Methodology A rapid systematic approach to identifying high quality evidence on palliative care

 Palliative and Supportive Care Rapid Review Workshop -14th December 2015









Palliative and Supportive Care Rapid Review Workshop



Making sense of the Rapid review request form

What would the results look like?

What does impact look like?



To get a consensus on how best PaCERS can serve the palliative care community in conducting rapid reviews.



Rapid Review Methodology Content



Stage 1 Defining the information need

Stage 2 Searching for information

Stage 3 Appraising and extracting data

Stage 4 Summarising the evidence

Stage 5 Reporting and communicating the evidence

Stage 6 Demonstrating impact

Overview of the rapid review process

Checklist of information sources

Critical appraisal checklists

Example data extraction form











Requestor Contact Details

Name of Requester or Group:	
(if a group please nominate a lead)	
Organisation:	
Contact address:	
Telephone number:	
E-mail address:	

Timeframe and relevance

Date of request:	
Deadline for completion:	
How important/relevant will	
the review be for practice	
across Wales?	
How are the review findings	
going to be used and what	
organisations will be	
disseminating the findings?	
Will you be able to identify and	
feedback to us on the impact	
the review has had?	

Details of Review

Please enter your Question:	
Please give a brief summary of the	
background for the review:	
Please describe the objectives of	
the review including the key issues	
you are trying to explore:	
Are you aware of any key papers?	

Canolfan Ymchwil Canser Cymru Wales Cancer Research Centre

Demonstrating impact



Questions	Before Review	Questions	Follow up
How are the review findings going to be used?		Did the review findings help to address how you were aiming to use them?	
How important/relevant will the review be for practice across Wales?		How important has the review findings been in changing practice across Wales?	
Will you be able to identify and feedback to us on the impact the review has had?		What are the specific impacts that have materialised from the review?	



Rapid Review Request

Caroline Usborne, Chair of the End of Life / Palliative Care Innovation Sub Group (Mid Wales Healthcare Collaborative)

Objectives of the review:

- To provide specific, innovative, examples of best practice service models for end of life and palliative care services (cancer and non cancer) in rural areas nationally and internationally.
- To explore the potential of new technology (tele-rehab, tele-health, telemedicine) in enhancing access to and the sustainability of rural services.
- To describe the characteristics and essential elements of effective models of end of life and palliative care services in rural areas.
- To identify the barriers to success.
- To describe the key themes of successful end of life / palliative care services from the perspective of patients, families and their carers.

What are best practice service models in rural areas for the delivery of end of life and palliative care?

Canolfan Ymchwil Canser Cymru Wales Cancer Research Centre

Review 1

EXAMPLE: What are best practice service models in rural areas for the delivery of end of life and palliative care?

- A narrow research question with a strict inclusion /exclusion criteria
- The search restricted in terms of:
 - databases and supplementary searches, limited date range
 - English language studies based in countries that are generalisable to a rural community
- Study selection, quality assessment and data extraction carried out by one reviewer, with independent verification by a second reviewer.

Review 2



In among cancer patients suffering from UGI bleeds, what is the most effective treatment in achieving early hemostasis and preventing or delaying re-bleeding?

MSc Thesis

Current review

Does advance care planning alter management decisions made by healthcare professionals?



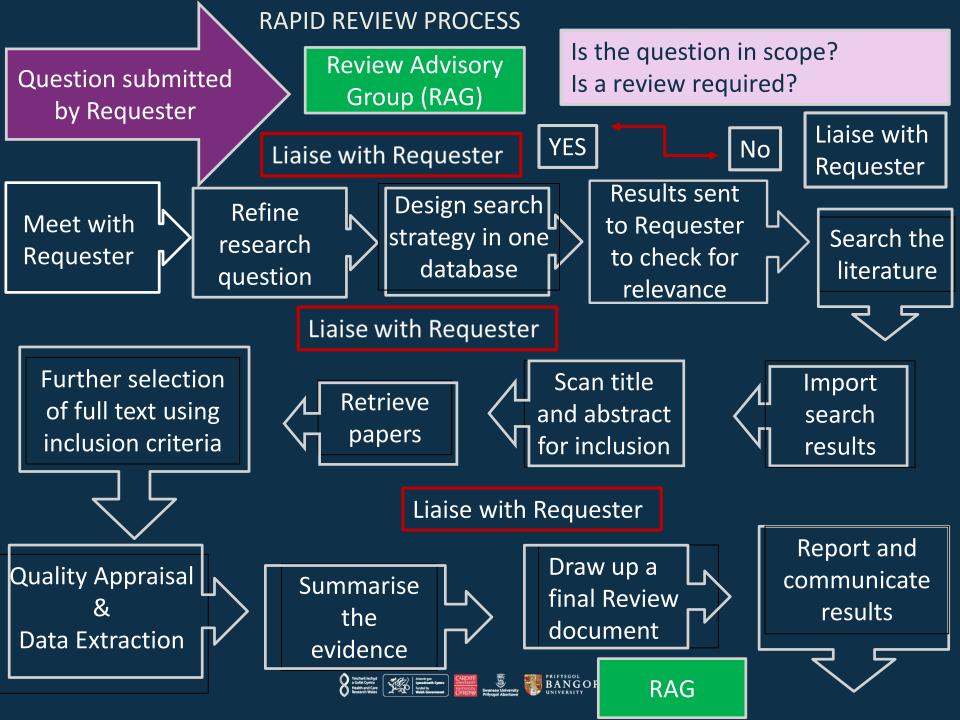












Lessons Learnt



Sometimes we have to say No.

How does pastoral, spiritual, and religious care impact outcomes for all patients (religious and non-religious) accessing palliative care services?

Challenges:

- Response time
- Bias











THANK YOU!!!





Mannmk@cardiff.ac.uk

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