

## Podium and Poster Abstract Review Process and Rubric

### 2027 Call for Podium and Poster Abstracts and Preconference Workshop Proposals

#### The Peer Review Process

##### Double-Blind Review

Conference abstract submissions are managed under a double-blind, peer-reviewed process, meaning that both reviewer and author identities and institutions remain blinded throughout the review and selection process.

##### Scoring

Abstracts are evaluated using a standardized scoring rubric across six criteria. Each criterion is scored up to five points on a Likert Scale with a maximum total score of 30 points.

For any criteria scoring a 1, 2, or 5, reviewers are required to provide a brief rationale in the comments section. Each abstract is independently reviewed by a minimum of three peer reviewers. The final abstract score is calculated as the average of the reviewer scores.

#### Summer Call Abstract Scoring Rubric (Excluding Scientific Research)

The following criteria are used to evaluate abstract submissions for relevance, rigor, and potential impact on practice and professional development. The rubric for abstracts submitted to the Scientific Research track can be found in the next section.

##### 1. Clarity, Organization, and Adherence to Submission Guidelines

Is the abstract clear, well-organized, and compliant with the submission guidelines?

Scoring Criteria (Five Points Possible):

1. Poor: Lacks clarity, disorganized, or does not follow submission guidelines.
2. Fair: Makes some clear points but is disorganized, vague, or has noticeable formatting issues.
3. Average: Reasonably clear and follows basic guidelines but lacks precision or concision.
4. Good: Clear, well-structured, relatively precise and concise, and mostly adheres to guidelines.
5. Excellent: Exceptionally clear, well-organized, precise, concise, and fully compliant with submission guidelines.

## 2. Evidence-Based

Are the abstract's recommendations grounded in current scientific evidence?

Scoring Criteria (Five Points Possible):

1. Poor: Lacks credible evidence or reasoning. Recommendations are outdated, biased, or unsupported.
2. Fair: Some evidence is provided, but incomplete, or lacks clarity and balance in its presentation.
3. Average: Evidence is included but is limited or lacks depth.
4. Good: Supported by current evidence but with insufficient discussion of alternatives/counter evidence.
5. Excellent: Stands out as carefully supported by evidence with balanced and comprehensive analysis of counter evidence and alternative approaches.

## 3. Relevance to Hospice and Palliative Care (HPC)

Is the abstract relevant to the field of HPC? Does it reflect the field's foundational principles, priorities, and/or areas of focus?

Scoring Criteria (Five Points Possible):

1. Poor: Minimal or no connection to the field's foundational principles, priorities, and/or areas of focus.
2. Fair: Weak or indirect connection to the field. Key elements of HPC are not clearly addressed or integrated.
3. Average: Moderately relevant, touching on themes or issues related to hospice and palliative care without in-depth and/or clear articulation of HPC principles.
4. Good: Clear and direct articulation of how the abstract relates to HPC principles, priorities, and/or areas of focus while still lacking depth of connection.
5. Excellent: Highly relevant and deeply connected to the field. Demonstrates a strong understanding of key principles and clear explanation of how the presentation will incorporate them.

## 4. Contribution to Learner's HPC Competence, Performance, and/or Professional Development

Does the abstract clearly indicate how the presentation will contribute to the advancement of learner's competence, performance, and/or professional development?

Scoring Criteria (Five Points Possible):

1. Poor: No clear potential for impact on the learner's competence, performance, and/or professional development; lacks relevance, depth, or educational value.
2. Fair: Some potential for small impact on the competence, performance, and/or professional development but relevance and educational value are unclear, unsupported, or poorly developed.
3. Average: Potential for impact on learner's competence, performance, and/or professional development without clearly defining plan for implementation and/or outcomes to assess impact.
4. Good: Strong potential for meaningful impact on learner's competence, performance, and/or professional development
5. Excellent: Promises to advance learner's competence, performance, and/or professional development in ways that meaningfully impact their practice, academic work, or career trajectories.

**5. Importance / Influence in the Field of Hospice and Palliative Care**

To what extent does the abstract contribute to shaping the future of hospice and palliative care by providing cutting-edge educational content that drives meaningful change in competence, practice, and development. Does the abstract present a novel approach or innovation that has the potential to shape the future of the field?

Scoring Criteria (Five Points Possible):

1. Poor: Does not demonstrate a clear contribution; unlikely to inform or influence any aspect of the field.
2. Fair: Limited originality and/or depth; low likelihood of informing or influencing the field.
3. Average: Potential to contribute to ongoing discussions in the field without significant novelty/innovation/influence.
4. Good: Introduces new ideas for the field with clear articulation of plans for implementation.
5. Excellent: Presents compelling, original, and/or innovative contributions with strong potential to shape the future of the field across disciplines and settings.

**6. Overall Merit Score**

How strongly would you recommend this abstract be included as an Annual Assembly podium presentation?

*This score reflects the reviewer’s holistic assessment of the abstract and serves as a tiebreaker in cases where abstracts receive identical or very similar total scores. It is intended to capture the reviewer’s expert recommendation beyond the individual rubric criteria.*

Scoring Criteria (Five Points Possible):

1. Poor: Weak across multiple axes. Recommend against including presentation.
2. Fair: Though abstract has some strengths, overall quality (considering clarity, evidence, relevance, contribution, and importance/influence) is insufficient.
3. Average: Adequate abstract. Acceptable for inclusion if space allows, though does not stand out.
4. Good: Strong abstract. Well-aligned with conference goals and likely to be of interest to the majority of learners. Recommend including as podium presentation.
5. Excellent: Exceptional abstract. Innovative with ideal clarity, evidence base, and relevance. Highly likely to result in meaningful contributions for improvement in learner’s competence, performance, and/or professional development. Strongly recommend prioritizing for inclusion.

## Program Alignment Criteria Rubric

In addition to the scored review rubric, reviewers assess a set of Program Alignment Criteria that help shape the overall structure, balance, and educational flow of the Annual Assembly. While these criteria do not factor into an abstract’s acceptance score, they play an important role in informing session placement, audience alignment, and integration with overarching conference priorities.

### 1. Justice, Equity, Diversity, and Inclusion

The abstract includes diverse representation with a focus on historically minoritized and marginalized populations and/or is anchored in principles of justice, equity, diversity, and inclusion (JEDI).

Scoring Options: Yes or No

### 2. Interdisciplinary Collaboration

The abstract integrates interprofessional/multidisciplinary collaboration with a meaningful impact on hospice and palliative practice, team-based care, and/or professional development.

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**ASSEMBLY**

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Scoring Options: Yes or No