



Strategy to 2020

2016 Targets

Trusted evidence.
Informed decisions.
Better health.

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Cochrane’s vision is a world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence.

Cochrane’s mission is to promote evidence-informed health decision-making by producing high-quality, relevant, accessible systematic reviews and other synthesized research evidence.

1. Summary of 2016 Targets:

GOAL 1: PRODUCING EVIDENCE

HIGH-QUALITY

1. **Quality strategy:** We will finalise and implement a strategy for quality assurance and quality improvement to ensure that Cochrane Reviews consistently reflect current best practice.

RELEVANT AND WIDE-COVERAGE:

2. **Prioritization list:** We will improve the Cochrane Review prioritization list by increasing the transparency of each new entry, incorporating more priorities identified by external parties to ensure that it reflects global needs, and providing more opportunities for competent potential author teams and individuals.

UP-TO-DATE:

3. **Updating strategy:** We will develop and begin to implement a comprehensive updating strategy for Cochrane content to ensure that high priority reviews are kept up-to-date.

EFFICIENT PRODUCTION:

4. **Timeliness pilot projects:** We will address the challenge of improving timeliness of review production by re-evaluating the Cochrane editorial process and supporting pilot projects that improve production efficiency, author and editor experience, and review quality.
5. **New authoring infrastructure:** We will revolutionize our authoring infrastructure by completing the move of RevMan and the Cochrane Register of Studies online with the release of beta versions into general use; and ensuring that 85% of reviews moving beyond the protocol publication stage use Covidence or EPPI-Reviewer from October 2016.
6. **Transform project:** We will improve the way people, processes, and technologies come together to produce Cochrane content by releasing the first phase of improvements from our *Transform* project, including live versions of the crowdsourcing platforms *Task Exchange* and *Getting Involved*, and the machine learning *Evidence Pipeline* for study identification; and piloting new production models.

GOAL 2: MAKING OUR EVIDENCE ACCESSIBLE

USER-CENTRED DESIGN AND DELIVERY:

7. **Cochrane Review PICO annotation:** We will make the content and data behind our reviews more useful and discoverable by completing the linked data annotation of reviews and protocols at question, included study, and analysis levels.
8. **Knowledge Translation strategy:** We will support the real-world application of Cochrane content by developing a Cochrane ‘Knowledge Translation’ strategy.

ACCESSIBLE LANGUAGE AND MULTI-LINGUAL:

9. **Translations pilot projects:** We will pilot new models to prioritize and support translation teams to improve the sustainability of their activities and ensure the quality of their translations.

GOAL 3: ADVOCATING FOR EVIDENCE

THE ‘HOME OF EVIDENCE’:

10. **Enhanced Cochrane Library:** We will work together with Wiley, our publisher, and a selected third party technology provider to build and deliver an enhanced Cochrane Library with greater functionality that makes it easier to discover and use Cochrane content.

GLOBAL ADVOCATE:

11. **REWARD campaign:** We will develop a plan for how Cochrane can contribute to the REWARD (REduce research Waste And Reward Diligence) campaign and play its part in improving efficiencies in the research lifecycle.

GLOBAL PARTNER:

12. **Partnerships and alliances:** We will implement our new partnerships strategy, and develop new partnerships with consumer networks, technology providers, and other organizations hosting the Global Evidence Summit in 2017.

GOAL 4: BUILDING AN EFFECTIVE & SUSTAINABLE ORGANIZATION

INCLUSIVE AND OPEN:

13. **Membership Scheme:** We will create a more inclusive organization by launching the Cochrane Membership Scheme and re-developing the Cochrane Community website around it.

EFFICIENTLY RUN:

14. **Organizational structure and function review:** We will implement changes to Cochrane Groups’ structure and functions to ensure our organizational structure is optimally aligned to Cochrane’s mission and goals.

INVESTING IN PEOPLE:

15. **Online learning:** We will improve our training resources by establishing a new online learning environment.
16. **Editor training and accreditation:** We will expand the support we provide to Cochrane editors by delivering a programme of training and accreditation for them.

TRANSPARENTLY GOVERNED:

17. **New governance structure:** We will improve the effectiveness of Cochrane’s governance by finalizing and implementing a new governance structure, including a newly re-formed Governing Board (formerly Steering Group).

2. Delivering the targets in 2016:

Strategy to 2020 aims to put Cochrane evidence at the heart of health decision-making all over the world.

2016 will take us into the third year of Cochrane’s *Strategy to 2020*. In 2014 our targets were foundational, marked by widespread consultation and detailed planning ahead of significant changes across the four Cochrane goals of producing evidence, making our evidence accessible, advocating for evidence, and building an effective and sustainable organization. Our 2015 targets built on the progress made in 2014, with improvements starting to be made to our production processes, global profile, and organizational structure in particular.

2016 will be a year of delivery and impact, but also of continuity, focusing particularly on the implementation and output phases of targets established in 2014 and 2015. Our focus will be on demonstrating to our stakeholders – the users of our evidence, our contributors, our partners and funders - the outcomes and tangible benefits that the implementation of *Strategy to 2020* is bringing to their experience with Cochrane year on year.

Cochrane’s Central Executive Team (CET), with the collaboration and support of Cochrane Groups, is in charge of delivering the *Strategy to 2020*. This document sets out what they will jointly be doing in 2016 to achieve this. It has been developed following initial consultation with the Steering Group and Group Executives between October and December 2015. It is for internal use only, but will be used as the basis of materials and resources that will widely communicate and promote the *Strategy to 2020* in 2016.

A reminder of the structure of the *Strategy to 2020*:

There are various ways in which strategic plans can be structured; and planning structures and terminology are used differently by different organizations. Cochrane’s *Strategy to 2020* has been developed with the following structure:

Vision > Mission > Goals > Objectives > **Targets** > Workplans:

- Vision: Outlines what the organization wants the world in which it operates to be.
- Mission: Defines the fundamental purpose of the organization, describing why it exists and what it does to achieve its vision.
- Goals: Establish the desired endpoints for achieving the mission.
- Objectives: Describe the ways in which goals will be operationalized and achieved.
- **Targets: Represent the tangible stepping-stones on the path towards the achievement of an objective. An objective may have one or many targets that must be fulfilled to achieve it.**
- Workplans: Set out how the targets will be achieved.

The objectives have been developed as overarching aims to 2020. SMART (Specific, Measurable, Attainable, Relevant & Time-Bound) targets – of which those for 2016 are set out in this document – and accompanying workplans are developed and reviewed on an annual basis to achieve these objectives.

Most of the targets are to be achieved in 2016, although some stretch into 2017. These targets establish the priority tasks the organization sets itself for the next year. Progress against the targets and the wider objectives and goals will be reported on regularly, including in the Cochrane Dashboard.

At the end of 2015 Cochrane’s Senior Management Team (SMT) assessed our progress in achieving *Strategy to 2020*’s 28 objectives to-date, set out what success would look like for each of them by 2020, and identified areas where further work is required. The results of the assessment have informed the development of the 2016 targets and will be presented to the Steering Group at its mid-year meeting in London, April 2016.

Central Executive ‘target leads’:

The SMT considers each target to be a project – and sometimes a programme of projects – that are managed according to standard project management methodologies. The development of workplans is the process by which a target is turned into a project, with the aim of delivering the desired outcomes to time and budget. Each target is given a CET lead, as listed below. They will ensure their project teams work with, and communicate to, Cochrane Groups about their involvement in delivering the targets.

2016 Target	Central Executive target lead	Email address
1. Quality strategy	David Tovey Editor in Chief Cochrane Editorial Unit Toby Lasserson Senior Editor Cochrane Editorial Unit	dtovey@cochrane.org tlasserson@cochrane.org
2. Priorization list	Ruth Foxlee Information Specialist Cochrane Editorial Unit	rfoxlee@cochrane.org
3. Updating strategy	Harriet MacLehose Senior Editor Cochrane Editorial Unit	hmaclehose@cochrane.org
4. Timeliness pilot projects	Karla Soares-Weiser Deputy Editor in Chief Cochrane Editorial Unit	ksoares-weiser@cochrane.org
5. New authoring infrastructure	Chris Mavergames Head of Informatics & Knowledge Management Ida Wedel-Heinen Review Production Manager Informatics & Knowledge Management Department	cmavergames@cochrane.org iwedel-heinen@cochrane.org
6. Transform project	Chris Mavergames Head of Informatics & Knowledge Management	cmavergames@cochrane.org
7. Cochrane Review PICO annotation	Chris Mavergames Head of Informatics & Knowledge Management	cmavergames@cochrane.org
8. Knowledge Translation strategy	Chris Champion Senior Programme Manager CEO’s Office	cchampion@cochrane.org
9. Translations pilot projects	Juliane Ried Translations Co-ordinator Communications & External Affairs Department	jried@cochrane.org
10. Enhanced Cochrane Library	Harriet MacLehose Senior Editor Cochrane Editorial Unit	hmaclehose@cochrane.org
11. REWARD campaign	Julie Wood Head of Communications & External Affairs	jwood@cochrane.org

12. Partnerships and alliances	Julie Wood Head of Communications & External Affairs	jwood@cochrane.org
13. Membership Scheme	Chris Champion Senior Programme Manager CEO’s Office	cchampion@cochrane.org
14. Organizational structure and function review	Mark Wilson CEO Chris Champion Senior Programme Manager CEO’s Office	mwilson@cochrane.org cchampion@cochrane.org
15. Online learning	Miranda Cumpston Head of Learning & Support	mcumpston@cochrane.org
16. Editor training and accreditation	Miranda Cumpston Head of Learning & Support	mcumpston@cochrane.org
17. New governance structure	Mark Wilson CEO Miranda Cumpston Head of Learning & Support	mwilson@cochrane.org mcumpston@cochrane.org

3. Outcomes and deliverables of the 2016 targets:

GOAL 1: PRODUCING EVIDENCE

To produce high-quality, relevant, up-to-date systematic reviews and other synthesized research evidence to inform health decision-making.

Goal 1 Objectives to 2020:

HIGH-QUALITY:

1.1 - We will continue to develop and implement comprehensive quality assurance mechanisms for editorial and methodological standards throughout our production and updating processes.

RELEVANT:

1. 2 - We will engage with patients and other healthcare consumers, health practitioners, policy-makers, guidelines developers and research funders to identify questions that are most relevant and important to them; and priorities the production and updating of Cochrane Systematic Reviews accordingly.

UP-TO-DATE:

1.3 - We will ensure that Cochrane Systematic Reviews represent the best evidence currently available by establishing and managing performance against updating targets, particularly for high priority reviews.

WIDE COVERAGE:

1.4 - We will continue to support the production of Cochrane Systematic Reviews across a broad range of questions in order to develop the widest possible body of reliable knowledge about health.

PIONEERING METHODS:

1.5 - We will ensure that established methods are applied consistently and appropriately in Cochrane Systematic Reviews; and continue to develop innovative methods for designing and conducting research evidence synthesis that help us to achieve our mission.

EFFICIENT PRODUCTION:

1.6 - We will improve our technology and revise our processes to create more timely, consistent and efficient editorial and production systems.

1.7 - We will expand our training and capacity-building programmes, promote innovation, and improve the experience of Cochrane Systematic Review production teams to retain and develop our contributor-base.

Goal 1 Targets in 2016:

1. HIGH-QUALITY: Quality strategy

We will finalise and implement a strategy for quality assurance and quality improvement to ensure that Cochrane Reviews consistently reflect current best practice.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will lead to changes in the existing review screening process to create a more flexible and responsive service. Cochrane Review Groups (CRGs) will become equipped with the capability to carry out the pre-publication screening process. <i>For Groups and contributors</i>	A referral screening service has been created for: <ul style="list-style-type: none">On demand referrals from CRGs (any stage)High impact reviews, e.g., for media release.	Groups have contributed to a report on the number and range of reviews referred and common issues identified.	Oct 2016
	A screening guide is delivered for CRGs in conjunction with webinars describing the process of screening, common errors and best practice.	A volunteer group of editors has developed guidance.	Dec 2016

2. RELEVANT: Prioritization list

We will improve the Cochrane Review prioritization list by increasing the transparency of each new entry, incorporating more priorities identified by external parties to ensure that it reflects global needs, and providing more opportunities for competent potential author teams and individuals.

This target will amend the existing processes for identifying new priority reviews and updates, seeking to make the rationale for inclusion more transparent, and increase the focus on externally derived priorities that explicitly address the needs of global decision makers. <i>For users, Groups and contributors, funders, and partners</i>	A paper explaining the rationale for revisions to list and proposed changes is published by March 2016.	Groups have contributed to the revised list and use it to prioritize review topics.	Mar 2017
	The list is evaluated to measure its effectiveness in leading to the commissioning and completion of targeted reviews by March 2017.		

3. UP-TO-DATE: Updating strategy

We will focus on developing and beginning to implement a comprehensive updating strategy for Cochrane content to ensure that high priority reviews are kept up-to-date.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will result in a comprehensive updating strategy that incorporates transparent decision-making about future plans to update each review, and explores and evaluates different models of how to update. It will be a two-year project. <i>For Groups and contributors</i>	An updating strategy that builds on the report of the 2014 Cochrane-sponsored updating meeting in Hamilton, Canada, is prepared.	Groups have contributed to an implementation plan for the updating strategy, with two areas in development.	Dec 2016
	An early evaluation of a targeted updating project is undertaken.	The report on the targeted updating project is presented to the CRG community. An audit of compliance is undertaken by the Editorial Unit in 2017 and will require Groups' participation.	Apr 2017

4. EFFICIENT PRODUCTION: Timeliness pilot projects

We will address the challenge of improving timeliness of review production by re-evaluating the Cochrane editorial process and supporting pilot projects that improve production efficiency, author and editor experience, and review quality.

This target will involve the exploration and piloting of changes to existing editorial process, and different models. It will ensure that our editorial policies continue to reflect best current practice. <i>For Groups and contributors</i>	At least two substantial changes to the editorial process (e.g., merged title and protocol phase) are identified in consultation with Groups; and pilot projects, with evaluation, are undertaken.	Volunteer groups from the Cochrane Group community are engaged in the work.	Dec 2016
	At least three new policy areas have been developed and implemented, including management of proven or suspected fraud, and peer review processes.	CRGs and other stakeholders are aware of, and have agreed to, the new policies.	Dec 2016

5. EFFICIENT PRODUCTION: New authoring infrastructure

We will revolutionize our authoring infrastructure by completing the move of RevMan and the Cochrane Register of Studies online with the release of beta versions into general use; and ensuring that 85% of reviews moving beyond the protocol publication stage use Covidence or EPPI-Reviewer from October 2016.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will move RevMan and the CRS online, which will enable further integration with Covidence, Transform tools, EPPI-Reviewer and other browser-based tools, forming a new ecosystem for more user-friendly and efficient review production in Cochrane. Cochrane has invested substantially in Covidence to be the primary, default tool to support study screening and data extraction. The use of Covidence or EPPI-Reviewer in the workflow will give us great efficiency and transparency in our pipeline. Covidence will function as the primary data extraction tool for Cochrane authors, streamlining the production of standard intervention reviews. <i>For Groups and contributors</i>	A beta test plan for RevMan Web has been approved and RevMan Web is being beta-tested in general use.	Cochrane Groups and review production teams are beta testing RevMan Web.	Dec 2016
	A plan has been agreed for the full transition to RevMan Web (in 2017) and phase out of the RevMan 5 desktop version.	Groups have committed to the RevMan Web transition plan.	Dec 2016
	CRS Web is live and a plan to phase out the desktop version has been agreed.	Groups beta-test and become familiar with RevMan Web and CRS Web functionality; Managing Editors and Information Specialists attend training sessions; CRGs assist with transition.	CRS Web live and in use by June 2016
	Covidence (default) or EPPI-Reviewer (if complex review methods) are in use on more than 85% of new reviews by from October 2016.	CRGs are being trained in using Covidence and/or EPPI-Reviewer for their authors and contributors. CRGs have begun to use CAST tools – at least 85% of new reviews from October 2016.	Dec 2016

6. EFFICIENT PRODUCTION: *Transform* project

We will improve the way people, processes, and technologies come together to produce Cochrane content by releasing the first phase of improvements from our *Transform* project, including live versions of the crowdsourcing platforms *Task Exchange* and *Getting Involved*, and the machine learning *Evidence Pipeline* for study identification; and piloting new production models.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
<p><i>Transform</i> will address four key challenges in content production through four project components:</p> <ol style="list-style-type: none"><i>Evidence Pipeline</i> - finding relevant research in a timely and reliable way.<i>Getting Involved</i> - developing pathways for potential new contributors.<i>Task Exchange</i> - increasing the efficiency of working collaboratively.Production Models - ensuring our content is relevant and up to date. <p><i>For Groups and contributors</i></p>	<p><i>Evidence Pipeline</i>:</p> <ul style="list-style-type: none">Citations triaged to CRGs.Soft launch of ‘beta’ platform and in use by 5 or more CRGs.Initial use by computer science community. <p><i>Getting Involved</i> (Cochrane Crowd):</p> <ul style="list-style-type: none">Launch of ‘beta’ platform for citation screening and in use by early adopters.Two tasks are available on platform. <p><i>Task Exchange</i>:</p> <ul style="list-style-type: none">Launch of ‘beta’ platform and in use by early adopters.Use by new Cochrane contributors. <p>Production models:</p> <ul style="list-style-type: none">Content production model assessment report published.Selection of model(s) for pilot completed.Pilot phase commenced.		Dec 2016

GOAL 2: MAKING OUR EVIDENCE ACCESSIBLE

To make Cochrane evidence accessible and useful to everybody, everywhere.

Goal 2 Objectives to 2020:

USER-CENTRED DESIGN AND DELIVERY:

- 2.1 - We will put the needs of our users at the heart of our content design and delivery.
- 2.2 - We will consult with our users to develop creative and flexible formats and delivery solutions for our content that make it more discoverable, accessible, useful and usable in diverse contexts and settings worldwide.
- 2.3 - We will engage with our users to bring the concepts and methodologies of evidence synthesis into mainstream use beyond the research and medical communities, so that people know why and how evidence should be used to inform their health decision-making.

OPEN ACCESS:

- 2.4 - We will achieve universal open access to Cochrane Systematic Reviews immediately upon publication for both new and updated reviews, and the archive of existing published reviews.

ACCESSIBLE LANGUAGE:

- 2.5 - We will simplify and standardize the language used across our content to improve readability and reduce ambiguity.

MULTI-LINGUAL:

- 2.6 - We will translate key content into at least the five other official languages of the World Health Organization (Spanish, French, Russian, Chinese and Arabic); and make it accessible in the same way as English-language content.

Goal 2 Targets in 2016:

7. USER-CENTRED DESIGN AND DELIVERY: **Cochrane Review PICO annotation**

We will make the content and data behind our reviews more useful and discoverable by completing the linked data annotation of reviews and protocols at question, included study, and analysis levels.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
Cochrane PICOs are short summaries of a clinical question addressed by one or more Cochrane Reviews. Target audiences for Cochrane PICOs are healthcare practitioners and professionals, and other informed users of health care (e.g. decision-makers). This target will complete the background work required to enable PICO views of Cochrane evidence in the Cochrane Library and elsewhere. <i>For users</i>	For all reviews and protocols, a complete set of PICO annotations have been developed at question, included study, and analysis levels.	CRGs are familiar with linked data tools and annotation work.	Dec 2016
	An annotation tool has been added to the workflow in Archie, RevMan, and the CRS.	TSCs are trained in annotation and there is engagement with the CET on governance of metadata.	Dec 2016
	Scoping of core APIs is in place for external business cases and data feeds.	TSCs begin annotating all new reviews in their Group and, in combination with HarmoniSR, PICO annotating studies in the CRS.	Dec 2016

8. USER-CENTRED DESIGN AND DELIVERY: **Knowledge Translation strategy**

We will support the real-world application of Cochrane content by developing a Cochrane ‘Knowledge Translation’ strategy.

This target will provide a clear understanding of what it means to undertake knowledge translation (KT) work in Cochrane. This will inform further developments of organizational the structure and function review as well as our future partnerships with other organizations. <i>For users, partners, and funders</i>	A strategy outlining where Cochrane should focus its efforts and approach in KT is published.		Oct 2016
	An implementation plan for the KT strategy is developed.		Dec 2016
		Cochrane Groups have a clear understanding of what it means to fulfil a KT function in Cochrane.	Dec 2016

9. ACCESSIBLE LANGUAGE AND MULTI-LINGUAL: **Translations pilot projects**

We will pilot new models to prioritize and support translation teams to improve the sustainability of their activities and ensure the quality of their translations.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
Cochrane established a translation strategy in 2014 which focuses on central support and co-ordination to support local translation teams, as well as sustainable translation approaches. The overall aim is to strengthen our impact in non-English speaking countries. This target will focus on the sustainability component of the work undertaken by those local teams, as well as ensuring the quality of their output. <i>For Cochrane Groups and contributors, and users</i>	Language priority criteria, benefits, support and responsibilities have been agreed, agreements signed with the different language teams and activity reported on a quarterly basis, including individual success indicators.		Mar 2016
	The existing translation management system has been reviewed, and a plan for adaption or new development agreed.		Sep 2016
	Cochrane.org pilot is launched in one language featuring locally adapted content, and editorial processes are in place.		Dec 2016
	Multi-language Cochrane Library is launched in Spanish.		Mar 2017
	A new translation management system is released.		Jun 2017

GOAL 3: ADVOCATING FOR EVIDENCE

To make Cochrane the ‘home of evidence’ to inform health decision-making, build greater recognition of our work, and become the leading advocate for evidence-informed health care.

Goal 3 Objectives to 2020:

GLOBAL PROFILE:

3.1 - We will clarify, simplify and improve the way we communicate to the world by creating an overarching ‘Cochrane’ brand.

THE ‘HOME OF EVIDENCE’:

3.2 - We will make Cochrane the ‘go-to’ place for evidence to inform health decision-making by offering a range of evidence-informed products and resources.

3.3 - We will build greater recognition of Cochrane’s role as an essential link between primary research and health decision-making.

GLOBAL ADVOCATE:

3.4 - We will advocate for evidence-informed health care and the uptake of synthesized research evidence in health policy-making and services planning.

3.5 - We will promote reliable, high-quality primary research that is prioritized to answer real world health questions and improves the evidence-base on which our work is built.

3.6 - We will campaign for transparency and integrity in scientific conduct, including the registration and reporting of results from all clinical trials, to ensure that the totality of evidence is available to those conducting research or making health decisions.

GLOBAL PARTNER:

3.7 - We will build international and local partnerships and alliances with organizations that help us to reach people making decisions in health, particularly guidelines developers, policy-makers, associations of healthcare practitioners and patient organizations.

GLOBAL IMPACT:

3.8 - We will demonstrate Cochrane’s value and impact to funders, users and other beneficiaries of our work.

Goal 3 Targets in 2016:

10. THE ‘HOME OF EVIDENCE’: Enhanced Cochrane Library

We will work together with Wiley, our publisher, and a selected third party technology provider, to build and deliver an enhanced Cochrane Library with greater functionality that makes it easier for users to discover and use Cochrane content.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will lead to a radically improved Cochrane Library for our users. For users	CET, Wiley, and the external technology supplier are working together to build and deliver an enhanced Cochrane Library.	Groups and/or individuals are consulted and are involved in user testing.	Jan-Dec 2016
	New Cochrane Library platform is launched.		Jan-March 2017

11. GLOBAL ADVOCATE: REWARD campaign

We will develop a plan for how Cochrane can contribute to the REWARD (REduce research Waste And Reward Diligence) campaign and play its part in improving efficiencies in the research lifecycle.

The REWARD (REduce research Waste And Reward Diligence) Campaign invites everyone involved in bio-medical research to critically examine the way they work to reduce waste and maximize efficiency. This target will provide a plan for how Cochrane can effectively contribute to it. For users, funders, partners, and Groups and contributors	An action plan on how Cochrane can further contribute to reducing waste in research in its review production processes is published.	Groups and individuals from the Cochrane community have contributed to the action plan.	Sep 2016
	A joint advocacy campaign is launched with a partner around issues raised by the REWARD campaign.		Dec 2016

12. GLOBAL PARTNER: Partnerships and alliances

We will implement our new partnerships strategy, and develop new partnerships with consumer networks, technology providers, and other organizations hosting the Global Evidence Summit in 2017.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
To achieve the <i>Strategy to 2020</i> we need to look beyond our organization and work with others. While Cochrane can do much on its own, by working in partnership we can achieve more with our resources. This target will improve our network of partnerships, helping us to deliver our other targets for the year. <i>For partners</i>	An agreement with all partners for the 2017 Global Evidence Summit has been developed. The GES will incorporate the Colloquium in 2017.	Cochrane South Africa will host the 2017 Global Evidence Summit in Cape Town.	Mar 2016
	A programme for Wikipedia interns to improve Cochrane evidence on Wikipedia has been developed for five health topic areas.		Jun 2016
	A new strategic relationship with a technology partner has been developed.		Sep 2016
	Partnerships with consumer organizations are being explored to increase the reach and impact of consumers on health agendas and campaigns.		Sep 2016

GOAL 4: BUILDING AN EFFECTIVE & SUSTAINABLE ORGANIZATION

To be a diverse, inclusive and transparent international organization that effectively harnesses the enthusiasm and skills of our contributors, is guided by our principles, governed accountably, managed efficiently and makes optimal use of its resources.

Goal 4 Objectives to 2020:

INCLUSIVE AND OPEN:

4.1 - We will establish a membership structure to improve our organizational cohesiveness and to reduce barriers to participation by creating a clear and open route into the organizations for people who want to get involved.

GLOBAL AND DIVERSE:

4.2 - We will become a truly global organizations by establishing a Cochrane organizational presence in all regions, building capacity in low- and middle-income countries; promoting gender, linguistic and geographic diversity; and enabling generational change.

FINANCIALLY STRONG:

4.3 - We will strengthen Cochrane’s financial position by diversifying and expanding our funding base, both at core and group level.

EFFICIENTLY RUN:

4.4 - We will review and adjust the structure and business processes of the organizations to ensure that they are optimally configured to enable us to achieve our goals.

INVESTING IN PEOPLE:

4.5 - We will make major new investments in the skills and leadership development of our contributors.

TRANSPARENTLY GOVERNED:

4.6 - We will increase the transparency of the organization’s governance and improve the opportunities for any contributor to participate in governing the organizations and/or to be appointed to a leadership position.

ENVIRONMENTALLY RESPONSIBLE:

4.7 - We will review and adjust our operations to reduce their environmental impact.

Goal 4 Targets in 2016:

13. INCLUSIVE AND OPEN: Membership Scheme

We will create a more inclusive organization by launching the Cochrane Membership Scheme and re-developing the Cochrane Community website around it.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will lead to a transformation in the ways new and existing contributors can become involved in Cochrane’s work. We will provide routes for getting involved through clear user journeys online and for the first time will have a range of tasks to suit the diverse interests of those wanting to contribute to Cochrane. Membership status will then be available for those who have demonstrated contribution to Cochrane’s work. <i>For Groups and contributors</i>	The Cochrane Community website is launched.		Mar 2016
	The membership scheme has undergone a ‘soft launch’ at the 2016 Colloquium in Seoul where delegates can sign up for membership.		Oct 2016
	10,000 members have signed up.		Dec 2016

14. EFFICIENTLY RUN: Organizational structure and function review

We will implement changes to Cochrane Groups’ structure and functions to ensure our organizational structure is optimally aligned to Cochrane’s mission and goals.

Cochrane’s Group structure is changing, expanding into new institutions, countries and regions around the world, and becoming more integrated and impactful in its work, particularly in relation to external audiences and stakeholders. <i>For Groups and contributors, and funders</i>	An implementation plan for overall S&F reform is completed.	Cochrane Groups have established new plans in line with their new functions, aims and ambitions and S&F implementation plan targets.	May-Dec 2016
	New accountability, reporting and support structures & processes are in place between the Central Executive Team & Groups.	Cochrane Groups are adapting/have adapted their structures in line with S&F implementation plan targets.	May-Dec 2016
	New managerial, reporting and support structures & processes are working well to support Cochrane Group transformation and normal work targets.	New Cochrane Groups previously waiting for recognition have been formally integrated within Cochrane’s structures or received clear development targets.	Dec 2016

15. INVESTING IN PEOPLE: Online learning

We will improve our training resources by establishing a new online learning environment.

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
Upgrading Cochrane’s online learning environment will have a direct impact on the quality and accessibility of learning, while also enabling better evaluation to inform our work, interconnection with Cochrane membership and review production platforms, and the commercialization of online learning for users. <i>For Groups and contributors</i>	Selection of environment platform complete and implementation has begun.	Groups and other contributors have contributed to user testing & feedback on the Cochrane Training website.	Mar 2016
	User testing of the redeveloped Cochrane Training website is complete and ongoing development plan is in place.	Methods Groups have updated content and contributed to online learning modules.	July 2016
	Upgrade of content and instructional design of online learning modules is complete.		Dec 2016
	Implementation of environment and integration with available systems is complete.		Dec 2016

16. INVESTING IN PEOPLE: Editor training and accreditation

We will expand the support we provide to Cochrane editors by delivering a programme of training and accreditation for them.

In close collaboration with the Editorial Unit quality assurance agenda, this target will establish best practice standards for the competencies of editorial teams and establish a programme of support for our editors to achieve these standards, ultimately leading to a formal system of accreditation to acknowledge their expertise. <i>For Groups and contributors</i>	A programme of existing and newly developed training resources is established to support Cochrane editors in meeting the core competencies.	The Ottawa Health Research Institute & Cochrane Editors have established a core set of competencies for Cochrane editors.	Dec 2016
	A system of accreditation for Cochrane editors is designed.	The Ottawa Health Research Institute & CRGs have conducted a trial to evaluate the effectiveness of the training programme.	Jul 2017
		The system of accreditation for Cochrane editors is implemented by CRGs.	Dec 2017

17. TRANSPARENTLY GOVERNED: New governance structure

We will improve the effectiveness of Cochrane’s governance by finalizing and implementing a new governance structure, including a newly re-formed Governing Board (formerly Steering Group).

Outcomes:	Indicators of success delivered by the Central Executive Team:	Indicators of success delivered by Cochrane Groups:	Delivery deadlines:
This target will deliver an updated, more open and externally focused Governing Board that retains close links to the community of Cochrane collaborators and Groups. <i>For Groups and contributors</i>	The Steering Group-led Governance reform plan is completed, considered and approved.	Cochrane Groups have been consulted about the changes.	Apr 2016
	Preparatory activities (such as amendments to the Articles of Association; Charity Commission approval for the changes; preparations for the AGM) have been implemented.	Changes considered and approved by Cochrane’s members at the Annual General Meeting.	Oct 2016
		Election of Governing Board members; and their confirmation by Extraordinary AGM (electronic) is completed.	Dec 2016



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