



CEU report

Editor in Chief team

Ruth Foxlee

Karla Soares Weiser

Sera Tort

David Tovey



Trusted evidence.
Informed decisions.
Better health.

1	Prioritization	3
2	Cochrane Review Support Programme	3
3	Cochrane Information Specialist (CIS) Support Team	4
4	Centralised Search Service (CSS)	5
5	Cochrane Register of Studies - Web (CRSW)	5
6	Cochrane Clinical Answers	6
7	Editorial process pilots	7

1 Prioritization

Prepared by:	Ruth Foxlee
Date:	14 March 2017
Operations or project?	Project
Strategy to 2020 target:	No
Status:	On track

Important outputs last 12 months

The Cochrane Priority Review List continues to undergo bi-monthly revisions. An audit was conducted in December 2016 and approximately 70 inactive titles were removed in February 2017. The list now contains approximately 250 commissioned titles. Over 160 priority reviews/updates have been published since the project began in January 2015. Four prioritization blogs were published on Cochrane.org in Q.4, 2016 and a further two in Q.1, 2017. In each case they were based on interviews with members of the Cochrane review group editorial base. The goal is to describe some real life examples from Cochrane Groups that might help and encourage other groups interested in engaging with external stakeholders.

Summary

Cochrane Priority Review List was audited in Dec 2016, 160+ priority reviews or updates have been published to date, an ongoing [Cochrane review group blog series](#) is available on Cochrane.org.

2 Cochrane Review Support Programme

Prepared by:	Ruth Foxlee
Date:	14 March 2017
Operations or project?	Project
Strategy to 2020 target:	No
Status:	On track

Important outputs last 12 months

Round 3 of the Cochrane Review Support Programme (CRSP) was completed in December 2016, with 10 awards offered to deliver 11 Cochrane reviews/updates. The delivery date for Round 1 was Jan 31st, 2017 - three reviews have been published, several extensions have been granted and one review was withdrawn because the authors advised they would not be able to publish on time. The fourth round will be announced at the end of March, 2017. The number of reviews to be funded overall in 2017 will fall from 20 to 16.

Trusted evidence.

Informed decisions.

Better health.

Summary

Extensions have been granted for several Round 1 reviews. The fourth round will be announced at the end of March, 2017. The number of reviews to be funded overall in 2017 will fall from 20 to 16.

3 Cochrane Information Specialist (CIS) Support Team

Prepared by:	Ruth Foxlee
Date:	14/3/2017
Operations or project?	Operations
Strategy to 2020 target:	No
Status:	On track

Important outputs last 12 months

The rollout of CRS Web has been a major focus for the team, supporting people through the transition, and testing the system, triaging development requests, helping to produce the training materials and facilitating training events and webinars. The team continues to support new CISs, with several new starters in 2016-17, in Australia, Canada and the Americas and the UK. They have also updated the Information Specialists Handbook, authored some of the new Cochrane Handbook Chapter 6 sections and contributed to the development of HarmoniSR guidance. The Information Specialists Portal has been updated with a fresh new look and content revision is underway. The CIS digest continues to be a popular current awareness source for the community. Since the end of January 2017 the team has reduced in size from three to four, so we will likely have to revise our work plan estimates for the remainder of the year.

Summary

The rollout of CRS Web has been a major focus for the team, but we continue to deliver vital support in other areas such a new CIS induction, the creation and maintenance of guidance documents and other resources, staffing the help desk and compiling the popular CIS Digest. Reduction in team size will likely mean revising work plan estimates for the remainder of 2017.

Trusted evidence.
Informed decisions.
Better health.

4 Centralised Search Service (CSS)

Prepared by:	Ruth Foxlee
Date:	10 March 2017
Operations or project?	Project
Strategy to 2020 target:	No
Status:	Not on track

Important outputs last 12 months

Whilst the team continues to work on a range of databases, many of these have proved far more challenging to search centrally than we had originally anticipated. The backlog of KoreaMed records has been added to CENTRAL and a routine feed mechanism will be in place by the end of March. A highly sensitive filter for CINAHL has been developed, which on its own will be of great value to the CIS community. After taking a few different approaches with CT.gov we've settled on using the RCT classifier (developed by James Thomas) and we hope that the feed will also be in place within the next month. We've negotiated access to the WHO International Clinical Trials Registry Platform –crawler and web services but the inconsistency in the quality of WHO ICTRP records has hampered progress. Finally, the Embase Project, although formally subsumed by Project Transform, began to take CSS resources in late 2016 as a result of changes made on the Ovid platform which we use as the source of our data feed. It was important to take remedial action but this meant that work on other datasets has been put on hold. We have also been blocked by staff shortages at Metaxis, our development partners, with CSS work queuing behind other more important projects such as CRS Web, the Gates/Linked Data Project and development of the new Cochrane Library platform.

Summary

Challenging data sets, resourcing issues and unforeseen problems have meant that the Centralised Search Service has not progressed at the pace we would like. The team continues to work on a range of resources simultaneously and hopes to have a feed of CT.gov records into CENTRAL within the next month.

5 Cochrane Register of Studies - Web (CRSW)

Prepared by:	Ruth Foxlee
Date:	14 March 2017
Operations or project?	Project
Strategy to 2020 target:	Yes
Status:	On track

Trusted evidence.
Informed decisions.
Better health.

Important outputs last 12 months

The Cochrane Register of Studies web version is approximately 75% of the way through development. We have taken a staged approach to development, prioritising essential features that would allow users who require basic features to convert early. The CRS Support Team have worked closely with Metaxis, our development partner, in the early stages of rollout, supporting groups as they make the transition. We currently have 17 CRGs live on CRS Web and 22 using the demo/training version. We delivered workshops in Seoul and Oxford and have run a number of Q&A style webinars. We are on track for complete conversion by the end of Q2 2017, at which point CRS standalone will no longer be supported. Requests for new functionality are managed through Cochrane Ideas, with the team evaluating all suggestions.

Summary

CRS Web rollout is proceeding according to schedule, development is 75% of the way through, we are currently on track for complete conversion by the end of Q2 2017 when CRS standalone will be formally decommissioned.

6 Cochrane Clinical Answers

Prepared by:	Sera Tort
Date:	1 March 2017
Operations or project?	Operations
Strategy to 2020 target:	No
Status:	On track

Important outputs last 12 months

The work related to creating Cochrane Clinical Answers (CCAs) based on Cochrane Reviews is ongoing. Last year the agreed target of reaching 1200 CCAs was achieved and a target of 350 new CCAs has been established for this year. Our priorities for 2017 are new or updated reviews, network meta-analysis, overviews and end user requests. Where we have additional capacity, we will select reviews screened from other sources (e.g. IPAD selections, most accessed reviews), ensuring that we select these from across medical disciplines to rectify any subject imbalances that the prioritizing schedule may have created.

The main highlights of the product at the moment are that CCAs will be offered to subscribers of the Cochrane Library once the new platform is in place and that BMJ has partnered with CCAs so that CCAs have been incorporated into BMJ Best Practice topics to provide the best available evidence to health professionals at the point of care.

Summary

Cochrane Clinical Answers, a derivative product of Cochrane Reviews, is increasing its coverage and stands out as a high-quality tool to provide point-of-care information to health professionals.

Trusted evidence.
Informed decisions.
Better health.

7 Editorial process pilots

Prepared by:	Karla Soares-Weiser (contact person), Ruth Foxlee, Sera Tort, Helen Wakeford
Date:	27 March 2017
Operations or project?	Project

Summary:

We are currently piloting ways of improving the editorial process and timeliness in Cochrane Reviews, and how we can better utilise the expertise of the CEU screening team. Our main goal is to identify ways of reducing the time to publication, and increasing review quality and author and CRG experience. Two pilot projects are current underway.

Fast-Track Service

The [Fast-Track Service](#) pilot was initiated at the request of the Governing Board with the aim of giving experienced authors of high-quality Cochrane reviews the option of a rapid editorial process, managed through the CEU. CEU staff will work closely with CRGs and the threshold of acceptance for this service is high, so only reviews requiring minor or no amendments are being admitted. There is no requirement for a published Cochrane protocol (although reviews with a Cochrane protocol can enter the pilot), but as a minimum the protocol must be registered in PROSPERO and contain sufficient detail to compare the planned approach to the actual used in the full review.

The Fast-Track Service is open to all CRGs. The pilot went live on February 3rd 2017 and applications close in December 2017. We have created a [webpage](#) containing information about the pilot and an [online application form](#).

Enhanced Screening Process

This pilot is looking at the feasibility of involving the CEU screening team earlier in the editorial process, and how this may provide some separation of editorial and development functions to improve review quality. As part of this program we are plan to work with other CEU teams members on a prototype Cochrane-wide 'approval for publication' policy.

Seven CRGs expressed an interest at the Coordinating Editors meeting of April 2016. The pilot commenced 6th March 2017 and we are awaiting applications from the participating groups.

More information is available in the [Cochrane community website](#).