

Cochrane Governing Board Paper

Agenda number:	
Agenda item:	Cochrane Membership Thresholds
Submitted for Governing Board meeting:	Geneva, April 2017
Submitted by:	Chris Champion (cchampion@cochrane.org) or Julie Wood (jwood@cochrane.org)
Sponsored by:	Chief Executive Officer
Access:	Open
Decision or information:	Decision
Resolution for the minutes:	The Board approves the proposed thresholds for the transition from Cochrane ‘supporter’ to ‘member’ status for the first wave of activities to be covered by the Cochrane Membership scheme, with a review after 12 months.
Executive summary:	<p>The Membership project was approved by the Board at previous meetings on a contribution-based membership model. The status of Cochrane ‘member’ will be awarded to people who have made a substantive contribution to the organisation, but equally important will be the new status of ‘supporter’, which we want to grow significantly. Supporters may not contribute anything substantive to the production of reviews or other core tasks of Cochrane, but they are important to promote Cochrane and evidence based decision-making more broadly.</p> <p>Having built the underlying systems for managing and measuring engagement for phase one of Cochrane Membership, we now need to clarify exactly what the thresholds are for people to move from ‘supporter’ status to ‘member’ status. This paper outlines the initial thresholds which we propose to use for attributing membership status, though we do acknowledge that these may need to change over time as we learn from the data we gather.</p> <p>In keeping with our inclusive approach, all existing collaborators in Archie will be offered a period of membership and then once that initial term ends they will need to meet these thresholds to continue being a member. For those involved in activities not covered by phase one thresholds (due to ongoing structure and function reviews) they will retain member status until we have defined thresholds for their area of activity, which we plan to discuss with those groups and roll-out by early 2018. This applies to Methods, Fields and Consumer members.</p>
Financial request:	None specifically associated with this decision

1 Background

1.1 What problem is Cochrane membership trying to solve?

- It is not easy for those who are new to Cochrane to get involved.
- There is no way to track contributions, particularly outside of the review production process, and so it is hard to recognize all those contributions or manage that resource effectively.

The solution to this is Cochrane Membership. It is the broad term used to describe our engagement strategy work. As part of *Strategy to 2020* we are seeking to open up Cochrane to anyone who wants to be a part of the organisation, and so, over recent years, we have been establishing new ways for people to contribute. The role of Cochrane Membership is to bring these new pathways together in a coherent way to make it easy for anyone to get involved in Cochrane, whether as a supporter of Cochrane’s work or as an active collaborator.

In addition, Cochrane Membership seeks to acknowledge the contributions that people make in a more transparent way. This is both to help people in their journey through Cochrane, but also as a means of rewarding them for their work.

Through clear pathways and new, exciting ways to get involved, we hope that Cochrane Membership will offer many people a way to contribute to Cochrane in which they can build up skills and offer great additional value to our work. This will provide us with the mechanism to develop and nurture the new talent needed for Cochrane’s future with a greater focus on learning skills and undertaking tasks before attempting to become a review author.

The status of ‘member’ will be awarded to people who have made a substantive contribution to Cochrane, but equally important will be the new status of ‘supporter’. We want this group to grow significantly. Supporters may not contribute anything “substantive” to the production of reviews or other core tasks of Cochrane, but they are important to promote Cochrane and evidence-based decision making more broadly. For more information on the development of Cochrane Membership please see the previous Board papers¹.

1.2 Why it is better for collaborators

- It will be easier to contribute to Cochrane’s work
- It will be easier to be recognized for that contribution

1.3 Why it is important to Groups

- It will provide better reporting about people’s skills, experience, areas of interest, contributions and training.
- It will reduce the burden of managing potential contributor queries (as this will be filtered automatically)
- It will reduce the burden of having to manage and maintain data protection compliance

1.4 Why it is important to the organization

- It will provide a better understanding of the human resource available to Cochrane, which is important if we are to respond to the external challenges the organisation faces.
- We will be able to provide an improved experience to people who come to us looking to get involved, as currently there is a fragmented and erratic response to newcomers, which is a considerable challenge for the organisation.

¹ <http://community.cochrane.org/organizational-info/resources/support-cet-csg/membership/resources>

- We will be able to communicate better with collaborators by targeting communications based on what we know about them. This means we can send more relevant content.
- Following the move from Group to individual voting, Cochrane Membership will allow us to implement clear definitions of engagement sufficient to qualify for membership and voting entitlement, as distinct from the broader community of less engaged supporters.
- This will be an important opportunity to improve our data protection compliance, which is an identified risk to the organisation.

1.5 The categories of support

Category	Description
Supporter	Anyone who signs up to Cochrane is automatically a supporter even if they only seek very minimal engagement, e.g., receiving newsletters.
Member	Members are those who make a substantive contribution to Cochrane’s work, e.g., peer reviewing, translating or authoring.
Lifetime member	A Lifetime Member is someone who has made a considerable contribution to Cochrane, for example, through holding a position of responsibility. The criteria will also seek to identify others who, whilst not in a position of authority, have made a lasting contribution to Cochrane’s work (e.g., the Chris Silagy prize winners are good examples of people who would be made Lifetime Members for their contribution to Cochrane).
Emeritus Member	Emeritus Member is a discretionary status that will be used to acknowledge a longstanding and outstanding contribution to Cochrane’s work. It is likely that such memberships will be awarded annually at the AGM. We expect the first wave of Emeritus Members to be announced in 2018.

1.6 Who is eligible

Any individual can sign up to join Cochrane as a supporter or potential member.

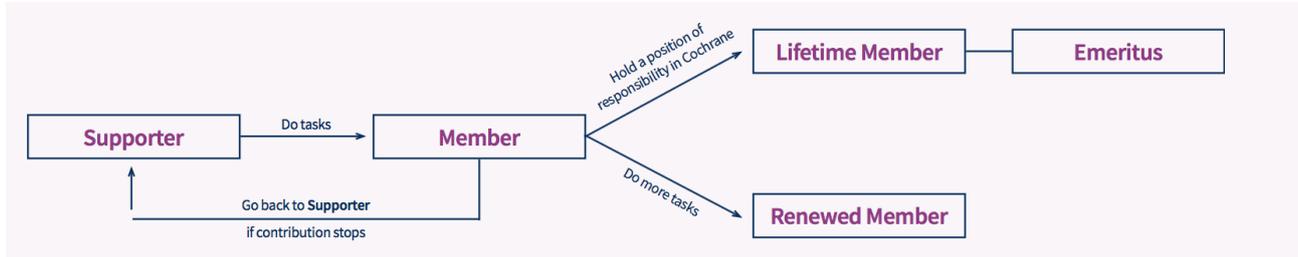
When someone achieves Member status they will be asked to agree to our terms and conditions of membership, which will state that Members should act in accordance with Cochrane’s principles and policies, and that Cochrane reserves the right to withdraw member status should a member contravene this.

There will not be any specific conflict of interest clause associated with being a member, though in practice most people reaching member status will have to comply with our conflict of interest policy associated with the work they have completed, e.g. as an author.

Groups or institutions will not be eligible for membership at first. In future, we have the option to implement an institutional membership scheme, but this won’t be available in 2017.

1.7 How someone becomes a member

Membership status can only be achieved by contributing to Cochrane’s work in a sustained and substantive way. There will be specific thresholds for contribution that will set rules for when a supporter transitions to being a member.



1.8 Membership terms

- Membership is time limited.
- Membership is not cumulative. If writing a review provides you with 5 years of membership, writing a subsequent review 2 years later will initiate the start of a new 5-year term, so that in total that author receives 7 years (not 10 years) of membership.
- Membership will be divided into three mechanisms:
 1. Rolling annual membership for task based activities;
 2. 5-year membership terms for authoring contributions;
 3. Role-based membership for as long as someone holds certain roles.

Rolling annual terms will be granted for activities such as peer review, translations, or crowd-sourced tasks. All activities will be counted and once the threshold has been reached the individual will qualify for membership.

If a person’s membership term expires, and they have made no further contribution to Cochrane, their membership will lapse and they will become a supporter again.

1.8.1 Initial transition to membership

At launch we will transition all existing collaborators to the membership system by offering them Cochrane Membership. Contact information for some people will be out of date, so we do not expect to convert all 40,000+ people in Archie to members, but anyone who has contributed previously and for whom we have active contact details will be offered membership.

For those people who fall into the categories of activity we are dealing with in phase one (Micro Task, Task, Translation, Authoring, Peer review), they will receive an initial year of membership, or, in the case of authoring, 5 years, and after that they will have to meet the membership thresholds to retain their status.

For groups who are not covered by the activities in phase one, e.g., methodologists, we will take an inclusive approach until we have worked out clear criteria for membership with those groups. So, in the case of methodologists, anyone who is a member of a Methods Group will be offered membership status until phase two of Cochrane’s Membership scheme begins, when we will establish thresholds for more contribution types. The same applies to Fields and Consumers. We will work with those Groups to agree how to measure this contribution. These additional ways to gain and retain membership will be available in early 2018. We expect that, in future, as Cochrane changes, new pathways will be created for membership.

2 Proposal

2.1 Proposed thresholds for phase one activities

These thresholds are essential to Cochrane Membership. We want to ensure that they are sufficiently low so that we are open and inclusive; but also that they are sufficiently high that they reflect the requirement to make a substantive contribution to Cochrane. Once we have successfully established these thresholds we will be able to appropriately reward people for their contribution to Cochrane through attributing membership status.

In phase one we will be measuring contributions in the following areas: Micro Task, Task, Translation, Authoring, Peer review. These have been chosen as they are activities that are measurable using our existing systems. For future phases we will need to establish new processes to allow us to track and measure other activities that are not currently recorded.

We propose the following thresholds for the transition from ‘supporter’ to ‘member’ status. These can be changed as we learn more about contributions by gathering actual data, but we would like the Board to approve these initial thresholds.

Task	Nature of task	No. completed	Time frame ²	Years of membership gained
Micro Task	Microtasks in crowd platform	3000	12 months	1 Year
Authoring tasks, e.g., data extraction, Risk of Bias	Task based detailed authoring work	5	12 months	1 Year
Translation tasks for author teams	Translation of studies as part of the review production process	5	12 months	1 Year
Translation of Cochrane outputs	Translation of Cochrane’s publications or other materials into other languages	5	12 months	1 Year
Author a protocol	Authoring work	1	N/A	3 Years
Author a review	Authoring work	1	N/A	5 Years
Author an update	Authoring work	1	N/A	5 Years
Update the classification status of a review	Authoring work	1	N/A	1 Year

² This is the time frame in which the tasks should be completed.

Task	Nature of task	No. completed	Time frame ²	Years of membership gained
Complete peer review of a manuscript	Reviewing (all types, e.g. statistical, consumer, clinical)	5	12 months	1 Year

2.1.1 Role-based membership

Individuals holding certain roles in Cochrane will automatically qualify for membership whilst they hold those roles. This includes the following:

- Board members
- Council Members
- Anyone who has a Group staff role, e.g. ME, Co-ed, Centre Director, Field Co-ordinator, Associate Centre Director, Affiliate Director
- Editors of Cochrane Groups
- Managers of translation projects
- Group Executive members
- Convenors of Methods Groups
- Central Executive team members
- Member of Scientific Committee
- Members of Cochrane Handbook Editorial team
- Funding Arbiter Panel members
- CLOC member

2.1.2 Lifetime Member

Criteria are yet to be developed for lifetime membership and it will be developed for phase 2.

2.1.3 Emeritus Member

Criteria are yet to be developed for emeritus membership. It is likely that the first opportunity to allocate emeritus membership will be in 2018.

2.1.4 People who contribute significantly, but fall outside of the thresholds

Anyone who is contributing to Cochrane in areas not covered by these thresholds will be offered membership until we have set thresholds for their area of contribution.

If, at any point, an individual feels they have contributed significantly to Cochrane, but they have not been offered membership, we will be happy to manage this on a case-by-case basis.

2.2 Measures of success:

Successfully implementing these thresholds will provide us with a framework for attributing membership to all individuals who make a substantive contribution to Cochrane.

If the thresholds are set appropriately this should be shown through:

- an ongoing population of new members qualifying; and
- not losing large numbers of members over time.

a. Issues and strategic implications:

i. Strategy Implications:

Cochrane Membership is a key strategic objective of *Strategy to 2020* and these thresholds for transitioning between supporter and member are important for establishing what constitutes a 'substantive contribution' to Cochrane.

ii. Resource implications:

There are no resource implications related to implementing these thresholds. Resources for the membership project are already approved and committed.

iii. Risks and dependencies:

There is a risk that people will be contributing significantly, but for some reason they will not reach one of our thresholds and thus not feel valued. We are mitigating this by offering membership to anyone involved in tasks not covered by the above thresholds and also offering a manual process in the case of exceptions.

iv. Impact and change management:

The change management required for the Cochrane Community is the same challenge faced by the membership project overall: i.e., adapting to new internal processes and providing information so that people understand the benefits of membership. We will be managing this through a comprehensive roll-out and communications plan. A key change for Groups is that they will need to manage all data about an individual through Cochrane systems and record contributions in Cochrane's systems, otherwise potential members lose out in having their contribution recorded.

v. Timelines:

We expect to implement these thresholds in April 2017 assuming they are approved by the Board.

vi. Management Responsibility:

Julie Wood has management responsibility for the implementation of Cochrane Membership.

vii. Consultation:

We have consulted throughout the past two years on the issue of membership and so these thresholds are informed by all of these meetings and discussions. We will be seeking feedback on this paper in Geneva at the Group meetings, and we will verbally update the Board on any feedback received.

3 Recommendation(s)

We recommend that the Board approves the thresholds for transition from supporter to member presented above.

We will review these thresholds as we have more data to work with, and we plan to bring an initial assessment and any revised thresholds to the Board in 12 months' time, as well as additional paths to membership.