

Cochrane Editorial Unit Quality Assurance and Editorial Process Integrated Plan - Executive Summary

The Cochrane Steering Group (CSG) has identified quality as one of its highest priorities. Recent audit work and the Cochrane Editorial Unit (CEU) Screening Programme have demonstrated a year-to-year improvement in many aspects of methodological quality. However, some aspects of review quality and timeliness continue to need improvement. We have identified a number of CRGs who are at risk of signing off reviews that do not meet our Methods Expectations of Cochrane Intervention Reviews (MECIR) standards. Additionally, we continue to see reviews from a much wider subset of groups that include elements such as inconsistent reporting, poor application of the GRADE methodology, unit of analysis errors and inappropriate over reliance on an arbitrary measure of statistical significance. We are particularly concerned about the quality of updated reviews coming to publication, and the number of protocols that contain issues that then feed through into the final review.

Given the importance of review quality to the sustainability of Cochrane, we must now engage in a concerted, collective effort to implement the learning points and build on the best practice examples we have identified. This must include further consideration of solutions aimed at ensuring consistent quality across Cochrane. Such solutions need to be consistent with Cochrane's ethos and principles and we want to ensure that we energise our contributors rather than demotivate them.

The CEU integrated plan will be carried out over the next four to five years. Within this plan, we aim to ensure that CRG teams, review authors, and others have the materials, support and environment necessary to be able to produce reviews that are of consistently high quality. This requires us to focus our attention on a re-evaluation of the editorial process, while continuing to attend to quality assurance. The following Action Points have been identified for implementation:

To develop an advisory committee to support the CEU team in implementing the integrated plan.

We will convene a Quality and Standards Advisory Committee (QSAC) comprised of senior Cochrane editors and methodologists. Its main function will be to provide advice to the Editor in Chief, alongside existing executive groups. QSAC will oversee the progress of the integrated quality strategy, provide guidance, support and advice in relation to the management of CRGs identified as being at high risk of producing reviews that do not meet agreed standards, and act as 'quality advocates' within Cochrane in support of the strategy.

To develop a management plan for each of the Groups at risk of signing off on reviews not meeting MECIR standards that successfully addresses the problems identified.

Our goal is to create an individualised plan for each of the "at risk" CRGs, including components such as: regular teleconferences between CRG team and members of CEU team, early intervention in the review process, assessment of the protocol and reviews with a methodologist external to the CRG, and development of a transparent mechanism that describes the support to be provided and potential sanctions if milestones are not reached.

To work with CRGs to identify a range of metrics that reflect performance appropriately and fairly, and to ask them to provide transparent and regular feedback on these metrics.

We have undertaken several projects (e.g., the *Screening Programme* and the *CRG Review Metrics* project) designed to deal with issues of review quality and we intend to discuss further developments with CRGs based on what we have learned so far from these projects.

To continue CEU screening of high priority and referred reviews.

To pilot screening mechanisms for review updates and protocols.

The CEU Quality Team has adapted the screening programme to assess those reviews that have been referred by CRGs, either because the CRG has methodological concerns or because the review has been identified as being of high priority. The CEU team will create a transparent policy of accepting and rejecting referred reviews, and will provide support in the dissemination of high-priority reviews. We will screen high-priority reviews that are likely to have particular impact, or some media effort, but will aim to appraise them at an earlier stage, perhaps even at the protocol or first submission.

To develop a screening guide for CRG teams and to deliver targeted training to CRGs in conjunction with Learning and Support (L&SD).

The Cochrane L&SD is designing an active training programme to support editorial teams, and we will work closely with L&SD to ensure that the lessons learned from the CEU Screening Project are incorporated into the strategy. We intend to pilot activities such as webinars, a screening guide, and teleconferencing.

To explore and pilot initial changes to the editorial process, including title registration, empty reviews, and centralized peer review process for reviews involving CRG team members as authors.

We are exploring ways to further separate the development/support roles from the ‘editorial’/publishing process. For 2016 we will explore: ways to increase transparency of title registration; creation of transparent criteria for rejecting titles, protocols, and reviews using a traffic light system; discussion of simplifying the end-deliverable for empty reviews with Groups and; creation of alternative processes for peer review when one or more members of the editorial team are active authors for a review.

To sign a memorandum of understanding (MOU) with CRG leaders and host institutions.

Substantial progress was made in drafting a MOU for CRGs in 2015. We are now working to ensure that this MOU for CRGs is consistent with other, similar MOUs being prepared between Cochrane and other Cochrane group types and their leaders, and plan to start consultation and implementation early in 2016.

To develop agreed-upon policies for peer review and fraud management and periodically update the Cochrane Editorial and Publishing Policy Resource.

The CEU is working with Cochrane colleagues to develop a peer review policy and supporting guidance aiming to clarify how and when Cochrane Reviews are peer reviewed, what processes we use for peer review, and who does peer review. We have developed a draft policy and have contacted the Executives (and other groups) for a small number of volunteers to join an advisory panel in 2016 to support the development of the policy. The team has a list of other policy areas that it intends to pursue over the next 12 months, including the management of suspected or known scientific fraud and ‘authorship and credit’.

To consult on a revised structure, based on a ‘Scientific Committee’ model, that facilitates decisions to be made regarding the implementation of proposed changes to review methods.

Over the next 12 months, the key priority for the CEU’s methods portfolio will be completion and implementation of the recommendations of the Methods Structure and Function Review, particularly related to changes in methods. We propose development of a ‘Scientific Committee’ to consider methodological changes and determine whether – and under what circumstances – they should be used.