Dear Cochrane Colleagues,

As a long-time supporter of Cochrane's mission, vision and systematic review products, I am excited to submit this letter as my formal application for a position as an External Member of the Cochrane Board.

I am currently the Senior Manager of the Evidence-Based Medicine Services Unit within the Southern California Permanente Medical Group, a partnership of physicians which contracts exclusively with the Kaiser Foundation Health Plan to provide medical services for more than 4.1 million members in Kaiser Permanente's Southern California Region. In this position, I manage a staff of 11 evidence specialists who review and critically appraise scientific evidence for Kaiser Permanente's clinical practice guideline, medical technology assessment, rapid evidence review, and health system implementation programs. For the past 20 years, I have been a leader in the advancement of evidence-based medicine and methodology standards for guideline development and technology assessment at Kaiser Permanente's national and regional levels, particularly facilitating more effective use of high-quality evidence sources (such as Cochrane) in technology assessments, guidelines and health system implementation efforts. For many years, I have served as a member of the KP Southern California Medical Technology Assessment Team and Deployment Strategy Team, the KP Interregional New Technologies Committee (INTC), the KP National Guideline Directors, and the KP Guideline Quality Committee.

In addition to my professional responsibilities at Kaiser Permanente, I am a founding member of the Guidelines International Network/North America (G-I-N NA). While serving as the Chair Elect, Chair and (currently) the Immediate Past Chair, I have provided direction and leadership in multiple areas, including the group's governance structure and development of a participant base of more than 700 North American (Canada, Mexico, USA) guideline developers, implementers, systematic reviewers, consumers and public policy groups. I also lead the development and coordinated a successful webinar series, with more than 30 webinars (including an introduction to Cochrane and the Cochrane Library) hosted between 2012 and 2015. In addition, I was integrally involved in the development and coordination of two North America regional conferences, "Evidence-Based Guidelines Affecting Policy, Practice and Stakeholders" (E-GAPPS I and II in 2012 and 2015, respectively), a joint effort between G-I-N/ North America and The New York Academy of Medicine.

As an active organizational member of the Guidelines International Network and a long-time attendee of Cochrane Colloquia (having presented at a plenary session in Freiberg, as well as colloquia in Madrid, Quebec City and Auckland), I have been an advocate of strengthening the relationship between the G-I-N and Cochrane organizations. At the 2012 G-I-N Conference in Berlin, I worked with Cochrane's John Hilton to organize a meeting to explore potential partnerships/efforts between G-I-N and Cochrane. As a supporter of Cochrane's efforts, I have participated in stakeholder interviews to provide feedback on numerous Cochrane initiatives and products (e.g., Strategy to 2020, Cochrane Library design and products, Targeted Updates, etc.). In 2015, I invited Mark Wilson and David Tovey to give a presentation on Cochrane and the Cochrane Library as part of G-I-N/ NA's webinar series, attended by 100-plus guideline developers, implementers, systematic reviewers and consumer advocates. During conversations leading up to the webinar, I provided input on linking the priority topics of guideline developers with Cochrane's priority updates list, a strategy to facilitate greater relevance and use of Cochrane reviews by quideline developers. At the recent Cochrane Colloquium in Vienna and the G-I-N Conference in Amsterdam, I met with Rachel Churchill and Julie Polisena to discuss Cochrane's new Targeted Updates product and its marketing potential

among guideline development organizations. Based on my 20 years of experience in developing and producing rapid evidence reviews, I have also been involved in discussions with various Cochrane folks around the potential for a rapid (systematic) review methodology group, with the hope of clarifying the muddy methodological challenges and potential opportunities for such reviews. Finally, in 2014, Kaiser Permanente (via my staff in Southern California) registered its first Cochrane protocol, "Implantable miniature telescope (IMT) for vision loss due to end-stage age-related macular degeneration," which is nearing completion.

I have a long history of collaboration with other healthcare organizations, medical and professional societies, systematic reviewers and accreditation groups, in the areas of systematic review methodology, evidence-based clinical guideline development and implementation, technology assessment, performance measurement and integrating evidence-based interventions into electronic health systems. I was a member of the Institute of Medicine's Committee on Standards for Systematic Reviews of Comparative Effectiveness Research which published the report, Finding What Works in Health Care: Standards for Systematic Reviews, and served as a reviewer of the IOM Report, Clinical Practice Guidelines We Can Trust. In addition, I have routinely served on expert panels including, most recently, for grants associated with the Patient-Centered Outcomes Research Institute (e.g., PCORI Dissemination and Implementation Toolkit; Integrating Multiple Data Sources for Meta-Analysis to Improve Patient-Centered Outcomes Research (MUDS); and By Consumers, for Consumers: Building Capacity and Partnerships to Enhance Patient-centeredness). I have been an active advocate of and participant in the efforts of Consumers United for Evidence-based Healthcare (CUE), affiliated with the U.S. Cochrane Center, and obtained grant funding for 20 consumer representatives to attend the E-GAPPS II conference in 2015.

Finally, I have no conflicts of interest to declare, other than being a strong advocate of evidencebased medicine and the development and use of high-quality systematic reviews to facilitate evidence-based decision making and improve patient health outcomes.

In closing, I believe my more than 20 years' experience as a leader in developing evidence-based policy within a large health care delivery system, ability to provide governance and direction for a multi-country professional network, collaborative approach to decision making and relationship building among people and organizations, knowledge of the landscape and potential approaches to address the evidence needs of guideline developers and policy makers, and long-time dedication to Cochrane's efforts, could make a valuable contribution to Cochrane and the successful implementation of the *Strategy to 2020*.

Thank you for this opportunity, and I look forward to being considered for an External Board Member position.

Sincerely, Marguerite

Marguerite A. Koster, MA, MFT

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Senior Manager, Evidence-Based Medicine Services Kaiser Permanente Southern California

Immediate Past Chair Guidelines International Network/North America