Editorial Integrity and Efficiency Project

Project plan
March 2021

Project Team: Karla Soares-Weiser, Rachel Marshall, Graham Smith, Toby Lasserson, Ruth Foxlee, Helen Wakeford, Maria Gerardi, Sylvia de Haan, Chris Champion and Katie Abbotts
What is the Editorial Integrity and Efficiency Project?

The Editorial Integrity and Efficiency Project is a pilot to investigate changing Cochrane's review production processes. It was approved by the Governing Board in March 2021. The project will:

- assess an independent editorial process using the Centralized Editorial Service for Cochrane;
- test the separation of responsibilities for developmental (authoring and author support) and editorial functions within Cochrane; and
- consult with individual Cochrane Review Groups (CRGs) on the future of producing reviews in Cochrane.

This project supports Goal 1 of Cochrane's strategy to “support the production of trusted and timely synthesized evidence addressing the most important questions for health decision making” by enhancing editorial independence and improving time to publication.

Why do we need to make changes?

There is much to celebrate about Cochrane's reputation and publication record; however, producing Cochrane reviews to a consistently high standard is challenging. CRGs have historically had dual roles – supporting authors and making editorial decisions – but this can make it difficult to guarantee editorial independence. Further, differences in how groups are funded, how they manage the dual roles, and how they prioritize their work can create inconsistencies in processes, and imbalances in output, quality and timeliness.

In order to address these challenges, we need to:

- build consistent and efficient processes, to keep producing high-quality reviews and ensure a good author experience;
- guarantee editorial independence and integrity in our processes, to retain our reputation as the gold-standard producer of evidence syntheses;
- support people working with and for Cochrane, removing conflicting responsibilities and making roles manageable;
- increase capacity to produce increasingly complex reviews and improve author support;
- maintain relevance by producing and publishing reviews quickly, without compromising on quality;
- work together to build an efficient, effective collaborative organization, which is sustainable.

Cochrane’s commitment to open access publishing is at the heart of its mission “to inform health decision making by producing trusted and timely synthesized evidence, making it accessible and advocating for its use”. The Governing Board has reiterated its commitment to open access publishing by 2025. To be ready for this change, Cochrane needs to address the challenges. The new editorial management system, Editorial Manager, will facilitate efficiencies and the integrity of the editorial process, and we aim to test whether the Centralized Editorial Service can further improve efficiency and integrity. The consultation with CRGs will also explore other ways we can support the transition to open access for all Cochrane reviews.
People: who will be involved in the project?

Project teams and working groups

The project will be managed by a project team, a working group, and an advisory board. These will act at various levels to provide oversight and guidance, or day-to-day running of the project.

Project Team

- Made up of members of the Central Executive Team
- Day-to-day project management and decision making

Working Group

- Made up of members of the Central Executive Team, representatives from Cochrane Review Groups, and other key stakeholders
- Represent the views of the Cochrane community
- Act as a point of contact for input and feedback from the community

Advisory Group

- Made up of members from the Governing Board, Editorial Board, Council, and the community
- Provide strategic support to the Project Team

Project Team

Sponsor: Karla Soares-Weiser (Editor in Chief)
Project Manager: Graham Smith (Project Manager)
Project Lead Workstream 1: Rachel Marshall (Editorial Lead, Editorial and Methods Department)
Project Lead Workstream 2: Ruth Foxlee (Senior Programme Manager, Editorial and Methods Department)

- Toby Lasserson (Deputy Editor in Chief, Editorial and Methods Department)
- Sylvia de Haan (Head of External Affairs & Geographic Groups' Support)
- Chris Champion (Head of People Services)
- Katie Abbotts (External Communications and Media Officer)
- Helen Wakeford (Centralized Editorial Service Lead)
- Maria Gerardi (Project Support Officer, Editorial and Methods Department)

Members of the Working and Advisory Groups will be formally invited to join the project in April 2021. As this project impacts so many Cochrane teams and workflows we aim to have a broad range of roles, responsibilities, and expertise represented within these groups. When we have confirmed who will join the groups, we will announce membership on the project webpage.
Which Cochrane Review Groups will take part in the project?

- The first six CRGs to join the pilot will be drawn from a pool of CRGs that have expressed an interest in participating. The names of these CRGs will be announced in April 2021.
- As other CRGs join the pilot their names will be announced on the project webpage.
- Up to 20 groups will take part in the pilot over the 18-month period.
- There will be a mix of CRGs from different Networks and geographic areas, and with different resources and outputs.
- To ensure that each CRG is fully supported, they will join the pilot in phases.
- All CRGs will use Editorial Manager.

How will the project work?

There will be two main parts of the project, which will run at the same time.

Workstream 1: scaling up the Centralized Editorial Service and piloting the independent editorial process

Workstream 2: consulting with the community

The Project Manager will work with the project leads from Workstreams 1 and 2 to ensure that all tasks are scoped and delivered in a timely fashion. The Project Team will work closely with the Project Manager to define which tasks and decisions need to be escalated to the Working or Advisory Groups as needed.

Workstream 1: Scaling up and piloting (March-July 2021)

Stage 1: Scaling up the Centralized Editorial Service (March to June 2021)

- The Centralized Editorial Service will manage high-priority and high-profile reviews, through a fast-track editorial process, based on the model used in Cochrane’s COVID-19 response. This model includes input from the Networks into the editorial process.
- Submissions could come either directly from authors (e.g. some of the COVID reviews, reviews funded by WHO, etc) or from CRGs wishing to fast-track their highest-priority reviews.
- The initial expansion of the Centralized Editorial Service will be staffed by redeployment from the Editorial and Methods Department.
- Recruitment of new Managing Editors and Editorial Assistants (on fixed-term contracts) will begin in Stage 1.
- The Project Team and Working Group will review the existing fast-track editorial process, and consider what refinements are needed for the pilot.

Stage 2: Piloting an independent editorial service (June 2021 -June 2022)

- Phased expansion of the Centralized Editorial Service will provide an independent editorial process to up to 20 CRGs.
- Continued recruitment of new Managing Editors and Editorial Assistants (on fixed-term contracts) to support the increased workload as the pilot progresses.
- The Project Team will regularly monitor and evaluate the pilot to:
• improve and refine editorial processes;
• decide whether to move to the next phase of the project.

**Phase A (June 2021-June 2022)**

- Six CRGs, will join the pilot in Phase A.
- These six groups expressed an interest in being involved in the pilot. The names of these groups will be shared with the community via the [project webpage](#) in April 2021.
- For all protocols, reviews and updates that have not reached the peer-review stage, the CRGs will work with authors to get reviews ready for peer review, and Centralized Editorial Service, with input from the Networks, will manage the editorial process from peer review to publication.
- For all protocols, reviews and updates that have already started peer review, CRGs will continue using their existing editorial processes.
- The Project Team and Working Group will test the pilot processes based on the experience of the first six CRGs and refine and adapt them as necessary.

**Phase B (September 2021-June 2022)**

- Four more CRGs will be invited to join the pilot in Phase B. The names of these groups will be shared with the community when their participation in the pilot has been confirmed.
- The Centralized Editorial Service will manage the editorial process for half these four groups’ protocols, reviews and updates that have not yet reached the peer-review stage, and the CRG will handle the other half.
- This will allow direct comparison of the Centralized Editorial Service’s versus CRGs’ processes.
- The Working Group will tweak processes in the pilot as required.

**Phase C (November 2021-June 2022)**

- This phase will allow testing of the editorial process on a larger scale.
- Up to 10 CRGs will be invited to join in Phase C. The names of these groups will be shared with the community when their participation in the pilot has been confirmed.
- Editorial processing for these groups will be the same as in Phase B.

**Workstream 2: Consultation (April 2021-November 2021)**

- Workstream 2 will run at the same time as Workstream 1.
- The Editor in Chief and Deputy Editor in Chief will meet each CRG to:
  - discuss how CRGs are currently managing the challenges of editorial integrity and efficiency;
  - explore any other ideas that CRGs may have in relation to improving editorial integrity and efficiency;
  - understand the concerns of the CRGs and their expectations of what a Centralized Editorial Service would provide;
  - hear ideas that can be used to scope out the resource and training needs;
  - hear CRG concerns about how open access arrangements could impact on them and their ideas about how to meet Cochrane’s open access publishing ambitions and obligations.
- Consultations will start with the CRGs who are entering the pilot first, but over the course of 2021 all CRGs will be invited to a consultation session.
• All CRG editorial staff will be invited to take part in the consultation.
• Feedback from the consultation will be used to adjust the pilot during the first quarter of 2022 or test new ideas identified by CRGs.
• The final pilot project report for the Governing Board will include feedback from the consultation.

Project workstreams plans by quarter (Q2 2021-Q2 2022)

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<tr>
<th>Timeline</th>
<th>Workstream 1</th>
<th>Workstream 2</th>
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<tr>
<td>Q2 2021</td>
<td>• Communication of plans</td>
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<td></td>
<td>• Scale up the Centralized Editorial Service for COVID-19 and other</td>
<td>• Consultation with CRGs starts</td>
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<td>high-priority and high-profile reviews</td>
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<td>Q3 2021</td>
<td>• Pilot independent editorial process with Centralized Editorial Service</td>
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<td>• First CRGs join pilot</td>
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<td>Q4 2021</td>
<td>• Next CRGs join pilot</td>
<td>• Consultation with CRGs completed</td>
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<td>Q1 2022</td>
<td>• Adjust pilot based on metrics and feedback</td>
<td>• Feedback from CRG consultations compiled</td>
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<td>Q2 2022</td>
<td>• Pilot completed</td>
<td>• Full report prepared</td>
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See Appendix 1 for a detailed project timeline.

Recruitment to the Centralized Editorial Service

• Recruitment of Managing Editors and Editorial Assistants to the Centralized Editorial Service will be staggered to match the phases of implementation.
• Information from phase A will be used to decide staffing requirements for phases B and C.
• There will be a mixture of secondments and external appointments.
• Advertising will be started early and promoted widely to ensure that Cochrane applicants are aware of this opportunity.
• Posts will offer flexible hours and locations.
• Applicants will be informed that longer-term contracts may be available at the end of the short-term contract, dependent on the outcome of the pilot.

Communications

The Project Team and Working Group plan regular internal and external communications throughout the project through:
• the [project webpage];
• updates at the monthly Editor in Chief webinars;
• the Editor in Chief’s fortnightly ‘Editorial update’ email to the Community (also posted on the Cochrane Community website, shared on CET and Community Slack, and incorporated into the monthly Community newsletter).

There will be a contact form on the webpage for questions from those involved or interested in the project.

Training

CRGs will be fully supported with:
• an introductory webinar;
• webinars, training and information throughout the project;
• resources to support participation in the pilot;
• training on Editorial Manager and Cochrane’s editorial policies for editors joining the Centralized Editorial Service;
• monitoring throughout the project to identify longer-term training needs.

How will the project be funded?

• The Governing Board approved the following funding for this project:
  o £200,000 drawn from the Strategic Investment Fund;
  o £200,000 reallocated from the 2021 budget following de-prioritization of other existing Editorial and Methods Department projects.
• In addition, the Editorial and Methods Department has reallocated staff to the project.
• During the pilot we will work to identify possible resources to support the long-term funding of an independent editorial process for Cochrane.
• CRGs will not need to provide any funding or personnel to take part in the pilot.

How will the project be monitored and evaluated?

• Every two months, the Working Group, CRGs and Networks involved, and the Centralized Editorial Service will:
  o review the progress of the project;
  o assess the efficiency of the processes and suggest adjustments if necessary;
  o review the metrics used for evaluation and monitoring.
• Origin Editorial will conduct a survey and teleconferences in the final stage of the project, consulting with the CRGs that took part in the pilot on their experiences.
• The Working Group will also review the metrics used towards the end of the project for the final evaluation.
• Editorial Manager will track and report on the metrics being considered in this project.
• The Editor in Chief will update the Governing Board on project progress as part of regular quarterly updates from the Editorial and Methods Department.

**Metrics for evaluating the project**

The Project Team and Working Group will define metrics and adjust them as the project goes on. Metrics are likely to include the following.

• Efficiency:
  o Number of protocols and reviews published
  o Number of priority protocols and reviews published
  o Time protocol/review in development process
  o Time protocol/review in editorial/production process

• Review quality:
  o Proportion of reviews submitted to the Centralized Editorial Service deemed ready for peer-review

• Adherence to Cochrane policy, including [Editors or editorial staff as authors](#) and [Peer review](#)

• Appropriate assignment of tasks and roles in Editorial Manager

• Satisfaction
  o Author satisfaction
  o Network Editor satisfaction
  o Cochrane Review Group member satisfaction
  o Cochrane Editorial Service member satisfaction