Dear Colleagues,

The latest issue for the Reviews and Methods Digest is published below. As ever we welcome feedback, and also submitted content that you would like us to include.

Thanks to Karla Soares Weiser for pulling the Digest together.

Welcome message

The period leading up to the mid year meetings is always a time of high activity and sometimes stress: papers to write and refine, preparations to make, and so on. It is not an exaggeration to say that the mid year meetings in Geneva in April will be highly influential in terms of determining future directions.

One of the key developments is the Sustainability Review of CRGs. This will reach an important milestone, with the first report from the project team, which includes three Co-ordinating Editors - Jonathan Craig, Martin Burton and Nicky Cullum - to the Governing Board. Work has focussed on assessment of nine CRGs initially, on the basis of quantitative and qualitative data collected by the CEU team. These data include measures of productivity, quality, time to publication, prioritisation, and impact. In addition, we have reviewed each Group’s interactions with the CEU team, the extent of support provided, and subsequent progress, in order to assess the overall level of commitment to quality improvement. The project team will present early recommendations to the Governing Board relating to the individual CRGs, and also in relation to the Transformation Programme highlighted in the previous Structure and Function paper presented in Seoul in October 2016. These changes will be discussed at the mid year business meeting of the Co-ordinating Editors Board.

Topics in this Digest:
1) Identifying and avoiding common errors in Cochrane Reviews: training resources now available

A training resource is now available to help identify and avoid common errors in Cochrane Reviews.

**Common Errors** is a suite of five learning modules for Cochrane Editors to enhance their editorial skills. The modules are designed to help Editors learn to recognize and address common errors and good practice, using examples that the Cochrane Editorial Unit has identified through its ongoing review screening programme.

The five modules are:
1. Inconsistency and inaccuracy
2. GRADE and interpretation of findings
3. Interpretation of statistical results
4. Summary versions of a review
5. Check your knowledge (an exercise module)

You can read more about the training resource [here](#), and take the training modules [here](#).

*Please contact the learning team at training@cochrane.org with any questions.*

2) Call for submissions: Fast-Track Service

We have launched an official call for submissions to the Cochrane Fast-Track Service. Please circulate the link to the call widely: [http://community.cochrane.org/news/call-submissions-fast-track-service](http://community.cochrane.org/news/call-submissions-fast-track-service)

**Call for submissions**

Cochrane is pleased to announce that we are piloting a Fast-Track Service. This is a ‘journal-like’ process whereby high-quality, MECIR-compliant reviews that require no major revision, can be
submitted directly into an accelerated editorial process. We aim for a turnaround of three months from submission to publication.

**Eligibility requirements**
This call is open to experienced Cochrane authors who wish to submit a Cochrane Review in 2017. The threshold for acceptance will be high, and we expect submitted manuscripts to be of publishable standard and to meet the specified criteria, found in the [Information for Authors](#) and [Fast-Track Service webpage](#). Consequently, authors can expect a higher rejection rate than with the non-Fast-Track submission process. For more information about the threshold for rejection please see Appendix 3 of the [proposal](#).

Submitted reviews should be accompanied by a research protocol, which may be - but does not need to be - a published Cochrane protocol. The protocol must be pre-registered in PROSPERO as a minimum requirement.

**Applications**
Author teams who wish to apply for the Fast-Track service can submit a short expression of interest using this [online form](#). We will respond within 14 days. Agreement from the relevant review group will be sought before a review can enter the pilot.

**Timeline**
The pilot is open and will be accepting applications until the end of December 2017.

For more information about eligibility onto the scheme and details regarding the editorial process, please see the [Fast-Track Service webpage](#). For any other enquiries, please contact Karla Soares-Weiser ([ksoares-weiser@cochrane.org](mailto:ksoares-weiser@cochrane.org)) or Helen Wakeford ([hwakeford@cochrane.org](mailto:hwakeford@cochrane.org)).

### 3) Results and conclusions of the CEU’s Plain Language Summary pilot project

The [final report](#) presenting results and conclusions from the CEU’s Plain Language Summary pilot project is now available.

Over the past six months, seven Cochrane Review Groups (CRGs) have been piloting the use of a [Plain Language Summary (PLS) template and checklist](#) developed by Cochrane Norway. CRG editorial staff have sent the template to their review authors, used the template to write PLSs themselves, and/or used the checklist on PLSs written by review authors.

CRG editorial staff involved in the pilot found the template to be useful and feasible to implement. While they had several suggestions about how we could improve the template, they all plan to use it after the pilot period has ended.

We still lack data about the experiences of review authors who have used the template. However, based on the positive feedback that the template received from editorial staff, the report suggests that the PLS template is made an official Cochrane resource. The report also suggests several issues that should or could be addressed, either before or after official approval.

Current versions of the template and checklist that were used in the pilot are available on [Cochrane Norway’s website](#).
If you have any comments or questions on the report’s recommendations or suggested next steps, please see here or get in touch with Julie Wood (jwood@cochrane.org).

4) Revised Conflict of Interest Policy for Peer Reviewers

There has been a small change to the conflict of interest (COI) policy. The change concerns the COI for peer reviewers (peer referees), which is section 4 of the COI policy in the Editorial and Publishing Policy Resource (http://community.cochrane.org/editorial-and-publishing-policy-resource/ethical-considerations/conflicts-interest-and-cochrane-reviews).

Peer reviewers are no longer required to complete the full author COI form, but are instead required to complete the updated peer reviewer COI statement in the peer reviewer forms and checklists.

Cochrane Review Groups that prefer to use the full author COI form for peer reviewers can continue to do so.

The following texts have been updated:
1. Section 4 of the COI policy (http://community.cochrane.org/editorial-and-publishing-policy-resource/ethical-considerations/conflicts-interest-and-cochrane-reviews)
2. The COI statement in all of the peer reviewer forms and checklists (http://community.cochrane.org/editorial-and-publishing-policy-resource/cochrane-review-management/peer-review).

If you use the standard Cochrane peer reviewer forms and checklists, please download the updated versions.

If your CRG does not use the standard Cochrane peer reviewer forms and checklists, please ensure that the following statement is completed by all peer reviewers (including consumer peer reviewers):

Potential conflicts of interest: peer reviewer statement
Do you have any potential conflict of interest? Yes (add details below)  No
You should declare and describe any present or past affiliations or other involvement in any organisation or entity with an interest in the outcome of the review that might lead to a real or perceived conflict of interest. You should report relationships that were present during the past 36 months, including, but not restricted to, financial remuneration for lectures, consultancy, travel, and whether you are an author of, or contributor to, a study that might be included in this review. You should declare potential conflicts even if you are confident that your judgement is not influenced.

Conflict of interest statement:

If you have any questions, please don’t hesitate to contact Bryony Urquhart (burquhart@cochrane.org)
5) **Cochrane Governing Board announces change in membership**

The Cochrane Governing Board has announced the following:

*We regret to advise the Cochrane community that Michael Makanga has announced his resignation from the Cochrane Governing Board, due to changing demands in his primary role as Executive Director of the European & Developing Countries Clinical Trials Partnership (EDCTP). Michael’s resignation takes effect from 1st March. Although his time on the Governing Board was brief we would like to thank him for his service and his contributions to its work during a period of significant transition.*

*We will fill Michael’s now-open position on the Board later in the year as part of the planned process to recruit additional external representatives.*

Lisa Bero and Cindy Farquhar  
Co-Chairs, Cochrane Steering Group

Please see [this link](#) on the Cochrane Community website.

6) **Announcing Cochrane’s Chief Information Officer**

David Tovey and Chris Mavergames announce the following regarding Cochrane’s Chief Information Officer:

*Dear colleagues*

*There is a close collaborative working relationship between Cochrane’s Information Specialists (CISs) and the Central Executive’s Informatics & Knowledge Management Department (IKMD) in relation to our Linked Data work - specifically, annotation of Cochrane Reviews and Studies. We expect the work on annotation and metadata management to expand and become even more important in the coming years, and therefore we are formalizing this closer collaboration by introducing a ‘dotted line’ support and advisory relationship between CISs and Chris Mavergames, Head of Informatics and Knowledge Management.*

*All existing formal lines of accountability remain in place and are unaffected by this change. CISs continue to report to the Coordinating Editor (Co-Ed) of their Review Group and then to David Tovey as Editor in Chief. This new ‘dotted line’ advisory relationship does not change that all workload management and day-to-day operational management of the Information Specialists’ work remains with their respective Co-Eds.*

*As part of our recognition of the future importance to Cochrane of data structures, metadata standards, and other data-level aspects of our technology and knowledge management infrastructure, Chris will be taking on the title of Chief Information Officer (CIO) as well as Head of IKMD. The CIS Executive will continue to have an advisory role to him on relevant issues.*

*If you have any questions or concerns about this development, please don’t hesitate to contact us.*

**Best regards**

*David Tovey, Editor in Chief/Deputy CEO*
Chris Mavergames, Head of Informatics and Knowledge Management/CIO

You can find this announcement on the Cochrane Community website [here](#).

### 7) GESI Network: Call for expressions of interest - Deadline 15 April 2017

Join an international network of Evidence Synthesis Centres in low- and middle-income countries (LMICs):

The GESI Secretariat aims to build a network of Evidence Synthesis Centres in LMICs to build partnerships and collaborations and strengthen capacity in multidisciplinary evidence synthesis production and use in LMICs.

The call for submission of Expressions of Interest to help build a network of evidence synthesis centres in LMICs is now open. The GESI Secretariat invites all centres that are based in LMICs and that are or have been involved in evidence synthesis to complete an [EOI form](#).

All Expressions of Interest must be submitted in English by 15 April 2017.

Please click [here](#) for more information.

### 8) How are funders working to minimize waste in research? Report in The Lancet from a team of Cochrane colleagues and researchers

Following the publication of The Lancet’s 2014 series on ‘Research: increasing value, reducing waste’, a team of researchers undertook a project evaluating processes that research funders use to provide transparency and reduce waste in making funding decisions. They have presented the results of their research in a letter to The Lancet, published 9 March 2017. Plymouth University is [featuring the research project](#) on their website, including a video interview with lead author Mona Nasser, a longtime Cochrane contributor and Governing Board member.

Please click [here](#) for more information.