Cochrane
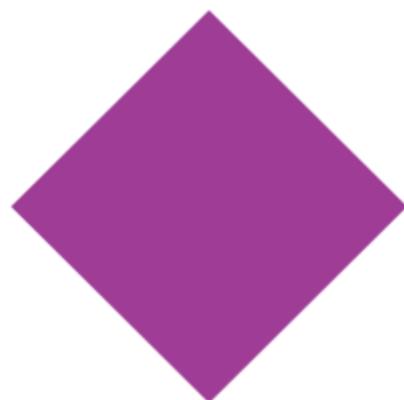
Strategy to 2020:
2020 Targets

For Governing Board approval

Trusted evidence.
Informed decisions.
Better health.

| 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 |

> *"Strategy to 2020* aims to put Cochrane evidence at the heart of health decision-making all over the world."

Introduction:

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People Involved in developing the paper:	Senior Management Team
Date:	Approved by the Governing Board at its 12th December 2019 teleconference
For your:	Decision
Access level:	Open access

This document presents the five organizational Targets for 2020 in a format consistent with the previous years of the *Strategy to 2020*. The Senior Management Team recognises the format and processes for development of strategic priorities from 2021, under a new strategic framework, will be different. These Targets represent the main organization-wide priorities in this transition year between strategic plans.

Structure of the *Strategy to 2020*:

There are various ways in which strategic plans can be structured; and planning structures and terminology are used differently by different organizations. **Cochrane's** *Strategy to 2020* has been developed with the following structure:

Vision > Mission > Goals > Objectives > Targets > Workplans:

- Vision: Outlines what the organisation wants the world in which it operates to be.

- Mission: Defines the fundamental purpose of the organisation, describing why it exists and what it does to achieve its vision.
- Goals: Establish the desired endpoints for achieving the mission.
- Objectives: Describe the ways in which goals will be operationalized and achieved.
- Targets: Represent the tangible stepping stones on the path towards the achievement of an objective. An objective may have one or many targets that must be fulfilled to achieve it.
- Workplans: Set out how the targets will be achieved.

Proposed organizational Targets for 2020:

GOAL 1: PRODUCING EVIDENCE
To produce high-quality, relevant, up-to-date systematic reviews and other synthesized research evidence to inform health decision-making.

TARGET 1: EDITORIAL AND PRODUCTION SYSTEMS PROGRAMME:
Provider selection, workflows and roles, and initial implementation phases

In 2020, three of the five planned projects in a new, large-scale 'Editorial and Production Systems Programme' will be undertaken:

Project 1 = Production system tender process (COMPLETED IN 2019)

Project 2 = Editorial & Management System (EMS) evaluation and tender process (COMPLETED IN 2019)

Project 3 = Provider selections for EMS and production systems

Project 4 = Full production workflow creation (EMS + Production + Delivery): defining roles, workflow work, content, translations and other elements

Project 5 = Implementation of new systems (for both production system and EMS, staggered as appropriate into 2021)

Contributes to *Strategy to 2020* Objective(s):	1.6. EFFICIENT PRODUCTION We will improve our technology and revise our processes to create more timely, consistent and efficient editorial and production systems.

Background:	Cochrane uses several editorial management systems and processes to manage its content. Archie, Cochrane's bespoke content and editorial management system (amongst other functions), has not kept pace with the requirements of the editorial user base and has also fallen behind technologically, raising concerns about maintainability, reliability and security. The production systems employed by the Library's publisher, Wiley, into which our content is fed have also fallen behind and are too complex. Improvements in this area are critical. As a result, tender processes have been run in 2019 for both a new Editorial Management System (EMS) and an improved production system. These have produced viable, affordable new options. In conjunction with these system changes, process and workflows will be reviewed and required changes made to more optimally support editorial and production workflows in Cochrane.
Rationale for the Target in 2020:	• Improved and aligned editorial and production systems are a critical dependency for most of our Goal 1 Objectives. • Cochrane's current systems are starting to become outdated. Origin, the consultant which undertook the EMS evaluation in 2019 (see above, Project 2), stated in their recommendations report for the EMS: *"The current variety of systems and technology impact the ability to measure performance at the macro level by denying a clear image of existing operations … Cochrane <u>must invest</u> in a new EMS solution in order to remain competitive and improve the stakeholder experience … A market-based system would reduce* **internal pressure for Cochrane by allowing it to focus on content rather than software design."**
Desired outcomes	• Implementation of a new Editorial Management sSstem closely aligned with a new production system to improves the efficiency, reliability, and sustainability of producing and publishing Cochrane content. • Editors, peer reviewers, and authors will get a more effective and coherent editorial process, while greater consistency will mean Cochrane is better able to measure the performance of all aspects of the editorial process.
Planned outputs by the end of 2020	Project 3: Providers for the production system and EMS are selected: • Proposed architecture is articulated • Implementation plan is prepared • Contracts with system vendors are signed Project 4: Workflow analysis and proposed changes: • A comprehensive workflow map is created • Roles and responsibilities for each system are defined • A list of 'testable unknowns' for piloting in implementation are identified

	Project 5: Staggered implementation of both systems across Cochrane begins (continuing into 2021).

TARGET 2: IMPLEMENTATION OF MORE RIGOROUS CONFLICT OF INTEREST POLICIES

In 2020, **new policies that strengthen Cochrane's approach to financial interests, and clarify our position regarding non**-financial interests, will be implemented.

Contributes to *Strategy to 2020* Objective(s):	1.1. HIGH-QUALITY We will continue to develop and implement comprehensive quality assurance mechanisms for editorial and methodological standards throughout our production and updating processes.
Background	In 2018, Cochrane initiated a revision of its Commercial Sponsorship policy for Cochrane Reviews. This work was led by a panel **of experts that included Cochrane's Conflict of Interest** (Funding) Arbiters, members of the Cochrane Governing and Editorial Boards, and other Cochrane members with expertise in conflict of interest. At the end of this process, the panel proposed **a series of recommendations to strengthen Cochrane's policy** regarding financial and non-financial conflicts of interest. The Governing Board approved these recommendations in October 2019, and work has begun to rewrite the current policy accordingly. The new policy will come into force early in 2020 and will apply to all newly registered Cochrane Reviews. Work now needs to be undertaken to revise and clarify the supporting policy for Cochrane Groups and members.
Rationale for the Target in 2020:	• **Cochrane's** reputation for independence, transparency and integrity in healthcare research is one of its most important features. World-leading conflict of interest policies are essential to maintaining this reputation. • The current policy for Cochrane Reviews lacks clarity in places and is difficult for Review Groups to implement and the Funding Arbiters to administer. • The policies for Cochrane Reviews and Cochrane Groups need to be aligned.
Desired outcomes	• Users of Cochrane Library content can see clearly where conflicts exist and can be confident that our policy mitigates the impacts of conflict of interests on Cochrane Reviews. • Everyone involved in producing Cochrane Reviews understands the new policy and can apply it as part of their regular editorial process. • All policies and processes for managing conflict of interests in Cochrane are consistent and aligned.

Planned outputs by the end of 2020	• New conflict of interest policies for Cochrane Reviews and Cochrane Groups are published. • New declaration of interest forms are developed and implemented. • **A conflict of interest 'portal'** is launched on the Cochrane websites. • Training materials and support are provided.

GOAL 2: MAKING OUR EVIDENCE ACCESSIBLE
To make Cochrane evidence accessible and useful to everybody, everywhere in the world.

TARGET 3: CONSULTATION ON OPEN ACCESS FOR COCHRANE REVIEWS

In 2020 there will be a consultation with external and internal stakeholders to achieve a common understanding of the challenges and opportunities for Cochrane in delivering universal, immediate Open Access to Cochrane Reviews whilst continuing to ensure organizational financial sustainability. The outputs of the consultation will directly inform any future revisions to existing policy.

Contributes to Strategy to 2020 Objective(s):	2.4. OPEN ACCESS: We will achieve universal open access to Cochrane Systematic Reviews immediately upon publication for both new and updated reviews and the archive of existing published reviews.
Background	Since February 2013 Cochrane has: • Provided free access to new and updated Cochrane Reviews for all readers worldwide 12 months after publication, under our 'green' Open Access scheme. Over 65% of all Cochrane Reviews are now available this way. • Deposited all Cochrane Reviews in PubMed Central for open access publication 12 months after publication (started September 2016). • Made all Cochrane Review protocols freely available on publication (since February 2016). • Provided Cochrane author teams with the option to pay an Article Publication Charge in order to make their new and updated reviews freely available worldwide on publication, and to take up other benefits of a Creative Commons licence, via a 'gold' Open Access option. • Provided free one-click access to all Cochrane Reviews for over 3.66 billion people living in Low- and Middle-Income Countries. In November 2018 the Governing Board decided to continue these policies under the post-2020 publishing arrangements, but to postpone implementation of the target set out in *Strategy to 2020* to make all Cochrane

	Reviews open access 'immediately upon publication'. The Board reiterated that this remains Cochrane's long-term ambition, but it will be implemented only when the Governing Board is confident that it will not undermine Cochrane's future sustainability and, therefore, its ability to meet other strategic goals.
Rationale for the Target in 2020:	• Cochrane needs to remain responsive to the wider scientific publishing environment and trends. • In 2020 Cochrane will announce new publishing arrangements for the Cochrane Library from 2021; and it is therefore the right time to evaluate our Open Access options. • Cochrane has multiple stakeholders interested in Open Access, including Group funders, review authors, and Library licence purchasers. The expectations and requirements of these stakeholders vary. Consulting with these groups, educating them on the context in which Cochrane operates, and using their expertise to explore possible options will be key to developing a sustainable Open Access position and funding model.
Desired outcomes	• An enhanced understanding by our stakeholders of the complexities and constraints of Open Access for Cochrane. • Stakeholder position statements can inform any changes to Cochrane's current Open Access policy and provide more clarity on the transition process from one model to the next. • Better transparency about the organization's costs and how funds are spent is achieved. • Improved relationships with funders and partners are achieved.
Planned outputs by the end of 2020	• A detailed stakeholder map and analysis is developed • An Open Access and Open Data discussion framework is developed • Cochrane's cost base is clarified and communicated better • A strategic session at the Governance Meetings in Manchester, April 20202, is held to consult with internal stakeholders • An 'Open Access summit' is held at the Toronto Colloquium to consult with external stakeholders • A consultation summary, with stakeholder position statements, is published

TARGET 4: IMPROVING QUALITY, CONSISTENCY AND TRANSLATABILITY OF COCHRANE'S PLAIN LANGUAGE SUMMARIES

Plain Language Summaries (PLSs) are a key dissemination product created and published for every Cochrane Review. Along with the Review Abstract, they are often: 1) the first - or only - contact potential health decision-makers will have with Cochrane as an organization; and 2) the main way health decision-makers will access and gain understanding of a Cochrane Review. They are also the one product that is most frequently translated into other

languages. This project aims to determine a new approach and format that simplifies and standardizes Cochrane's PLSs to improve the readability and understandability of Cochrane evidence.

Contributes to *Strategy to 2020* Objective(s):	2.5. ACCESSIBLE LANGUAGE We will make our reviews more accessible to decision-makers. We will simplify and standardize the language used across our content to improve readability and reduce ambiguity.
Background	The drive to improve the consistency and quality of Plain Language Summaries is not new. In 2016-17, Cochrane Norway ran a pilot project, which identified: • the strengths and weaknesses of different approaches to writing PLSs within Cochrane; • the need to provide a standardized language to all PLSs to assist the facilitation and uptake of language translation; and • the requirement for guidance in producing templates and subsequent training for writing PLSs.
Rationale for the Target in 2020:	• Accessible language is key to achieving the Goal 2 of making Cochrane evidence accessible and useful to everybody, everywhere in the world. • Content written in plain language is a key dependency for producing effective and usable Knowledge Translation products, including language translations.
Desired outcomes	• **Cochrane's four target Knowledge Translation audiences (consumers and the public, practitioners, policymakers, and researchers and funders) find the Plain Language Summaries produced from Cochrane Reviews to be more understandable and consistent, leading to an uptake in their use.** • Cochrane language translation teams find the Plain Language Summaries to be more consistent and therefore easier to translate into other languages. NOTE: This work will also be designed and implemented alongside a potential collaboration between the Central Executive Team and Cochrane Norway on an EU grant application with the aim of designing and user-testing a template for communicating evidence-based information about the effects of healthcare interventions to patients and the public. The success of this potential collaboration will likely impact on the final outcomes and timing of this project.
Planned outputs by the end of 2020	• A project to test a new format and template for producing and writing PLSs within the MOSS CRG Network supported by KT advisors, senior editorial teams will be undertaken, working from learning already gained from the previous Cochrane Norway PLS pilot scheme. • The new-style PLSs will be regularly evaluated and compared against a range of existing PLSs.

	• The project will develop a series of recommendations and guidance for future PLSs, including the feasibility of a single integrated PLS approach for Cochrane.

GOAL 3: ADVOCATING FOR EVIDENCE
To make Cochrane the 'home of evidence' to inform health decision-making, build greater recognition of our work, and become the leading advocate for evidence-informed health care.

There are no proposed organizational Targets under Goal 3 for 2020, although ongoing prioritized work that is now part of standard operations will be focused on the following Objectives:

3.2. THE 'HOME OF EVIDENCE'
We will make Cochrane the 'go-to' place for evidence to inform health decision-making by offering a range of evidence-informed products and resources.

There will be ongoing development and new feature development of the Cochrane Library, as detailed here: https://www.cochranelibrary.com/about/releases.

3.4. GLOBAL ADVOCATE
We will advocate for evidence-informed health care and the uptake of synthesized research evidence in health policymaking and services planning.

3.6. GLOBAL ADVOCATE
We will campaign for transparency and integrity in scientific conduct, including the registration and reporting of results from all clinical trials, to ensure that the totality of evidence is available to those conducting research or making health decisions.

Organizational advocacy priorities for 2020-2021 approved by the Governing Board in October 2019 will be developed and implemented around:

➢ Advocacy for the use of high-quality evidence synthesis in health decision making; and

➢ Advocacy for transparency and integrity in research.

3.7. GLOBAL PARTNER
We will build international and local partnerships and alliances with organizations that help us to reach people making decisions in health, particularly guidelines developers, policymakers, associations of healthcare practitioners and patient organizations.

Cochrane's work with external partners is guided by the Cochrane Partnership Policy, and the Guidance for Partnership Development. A dedicated space on the community website has been developed to keep the Cochrane community informed about the key external partnerships that Cochrane is engaged in. A full review of Cochrane's partnership work and its existing and potential future partners will be conducted in 2020.

3.8. GLOBAL IMPACT
We will demonstrate Cochrane's value and impact to funders, users and other beneficiaries of our work.

In 2020, as we end the current strategy and prepare for the next strategic plan, there will be a specific focus on evaluation of the many *Strategy to 2020* initiatives **undertaken over the past seven years, and their value and impact to Cochrane's internal and external stakeholders.** Our KT monitoring and evaluation work in 2020 will develop theories of change, evaluation plans and tools liaising with diverse stakeholders around the world that will support policy makers, practitioners, the public and researchers to use Cochrane evidence in policy and practice. Further, a monitoring and evaluation framework for **Cochrane's** next strategic plan will be established.

GOAL 4: BUILDING AN EFFECTIVE & SUSTAINABLE ORGANISATION
To be a diverse, inclusive and transparent international organisation that effectively harnesses the enthusiasm and skills of our contributors, is guided by our principles, governed accountably, managed efficiently and makes optimal use of its resources.

TARGET 5: DEVELOPMENT AND LAUNCH OF A NEW ORGANIZATIONAL STRATEGIC PLAN

In 2020, a new strategic framework and plan will be developed and launched, **setting out Cochrane's priorities and decision**-making framework from 2021 onwards.

Contributes to *Strategy to 2020* Objective(s):	This will be a new strategic framework and plan.
Background	Cochrane's *Strategy to 2020* was designed as a time-limited plan for organizational transformation. The next strategic plan will build on, prioritize and – where appropriate – amend the priorities of *Strategy to 2020*, preparing the organization to meet its mission from 2021 onwards.
Rationale for the Target in 2020:	A new strategic framework and plan beginning from January 2021 is critical for the organization.

Desired outcomes	• A new strategic framework and plan that build on the learning of *Strategy to 2020* and support the organization to meets its mission from 2021 onwards. • Improved strategic and operational planning, monitoring and evaluation processes.
Planned outputs by the end of 2020	• An internal and external evaluation of the *Strategy to 2020* • An internal stakeholder consultation at the Governance Meetings in Manchester, April 2020 • A new strategic framework, with a re-assessed vision and mission, decision-making framework, and prioritized objectives • Launch of a new strategic decision-making framework and plans at the Toronto Colloquium, October 2020 • New strategic and operational planning, monitoring and evaluation processes and resources