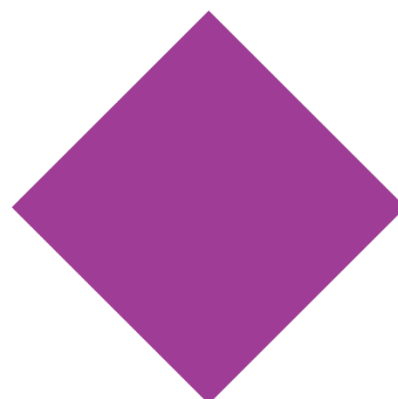# Strategy to 2020:
2019 Targets

Approved by the
Governing Board in
January 2019

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.

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.

The Objectives have been developed as overarching aims to 2020. SMART (Specific, Measurable, Attainable, Relevant & Time-Bound) Targets and accompanying Workplans are developed and reviewed on an annual basis to achieve these Objectives. Some of the Targets are annual, some will be for a two-year period and a few may be for longer. All Targets are approved by the Governing Board and establish the priority tasks the organisation is setting itself for a given period. Progress against the Targets and the wider Objectives and Goals are reported on regularly by the Senior Management Team (SMT).

Targets for 2019:

Nine priority Targets have been approved by the Governing Board for 2019. Together, Cochrane Groups and the Central Executive Team will:

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

1. CONTENT STRATEGY IMPLEMENTATION
Achieve the annual objectives and targets of Cochrane's Content Strategy, including:

- o Implementing the Risk of Bias 2 tool (ROB2);
- o Scaling up Cochrane's 'Living Systematic Reviews';
- o Developing standards and scaling up our Network Meta-analysis (NMA);
- o Deciding whether to progress work on developing Rapid Reviews
- o Exploring the use of Clinical Study Reports as source data for drug intervention reviews.

> **Why are we doing this?**
>
> - It is vital for Cochrane's sustainability that we develop and implement strategies aimed at providing reviews that address decision makers' needs more effectively: focusing on high priority and increasingly complex questions, the use of new methods, new review types and expanding data sources.

2. IMPROVED EDITORIAL PROCESS
Assure the quality and consistency of Cochrane's editorial process, by:

- o Developing an editorial charter that describes agreed expectations across Review Group Networks and Review Groups to assure the equity and consistently high quality of editorial processes; and
- o Developing and implementing an agreed quality assurance process for high-profile reviews.

> **Why are we doing this?**
>
> - Cochrane needs to attract high quality researchers from across the world to contribute to its reviews. The marketplace for such reviews is highly competitive, with many high impact journals now wishing to publish systematic reviews. Therefore, the editorial process needs to be consistently supportive (within agreed limits), efficient and rigorous. There is ample evidence that the process is currently inconsistent and sometimes unacceptable. Addressing these is therefore a key priority.

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

3. COCHRANE REVIEW STRUCTURE AND FORMAT CHANGES
Make Cochrane Reviews more accessible to decision makers, by:

- o Developing a prioritised and costed list of potential changes to the structure and format of Cochrane Reviews with a proposed development and implementation plan to be undertaken over the course of three years.

Why are we doing this?

- The structure of reporting and publishing Cochrane Reviews remain unchanged since Cochrane's inception.
- In response to methodological advances, new features have been added to Cochrane Reviews over the years (e.g., Summary of Findings Table), and this probably contributed to reviews becoming longer and more complex (less accessible).
- Review production (write, editorial process, and copy-editing) is more time-consuming and quality assurance is a challenge.
- This proposal aims to support improvements in the quality, understandability, and usefulness of Cochrane Reviews, which in turn might allow for tailored derivative products that build on and go beyond what Cochrane Reviews can offer.
- User testing of Cochrane Reviews have found that they are difficult for decision-makers to understand and use; e.g., they are long, there are frequently large numbers of comparisons and outcomes, there is frequently missing information about outcomes, particularly adverse effects.

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4. UPDATED OPEN ACCESS AND OPEN DATA POLICIES
Review our policies on Open Access to Cochrane Reviews and datasets

> **Why are we doing this?**
>
> - Cochrane already has progressive [Open Access options](#) for Cochrane Reviews and always respects the mandates of funders of Cochrane Reviews. It also has a long-term ambition to move to full and immediate Open Access for Cochrane Reviews once a reliably sustainable funding model for its activities is established.
>
>   In 2018 a group of national research funding organisations, with the support of the European Commission and the European Research Council (ERC), announced the launch of 'cOAlition S', an initiative that aims to accelerate the transition to full and immediate Open Access for research publications. The Coalition has produced 'Plan S', which may have important implications for the funding of Cochrane Reviews – and Cochrane Groups - and it is therefore appropriate to re-assess our current policies and funding model in light of this.
>
> - 'Open data' is the manifestation of the principle that clinical trials should be freely available to everyone to use and republish as they wish, without restrictions from copyright, patents or other mechanisms of control[1]. Cochrane has many types of data that are useful to share, and it [already makes the statistical datasets from Cochrane Reviews](#) available for non-commercial use. As we are reviewing our Open Access policies, it also makes sense to review our policies to data access: what data, to whom, and for what purposes should we share our data in support of our mission to improve health decision-making?

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.

5. NEW COCHRANE LIBRARY FEATURES
Continue to deliver more features and enhancements in the Cochrane Library, with a focus on continuing to improve the discoverability, accessibility, usability and impact of our content.

   o Projects to be delivered in 2019 include PICO based search, RoB2, Living Systematic Reviews and the integration of Health Systems Evidence.

> **Why are we doing this?**
>
> - Following delivery of an enhanced Cochrane Library in 2018, work will continue to deliver features and enhancements on an ongoing basis, as planned, to maintain its relevance and usability.

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[1] https://en.wikipedia.org/wiki/Open_data

6. SUPPORTING POLICY-MAKERS
Support health policy makers to use Cochrane evidence and new advocacy initiatives, by:

- o Strengthening Cochrane's capacity to support policy-makers and health policy managers in their uptake and use of Cochrane evidence applicable to their language and context;
- o Advocating for evidence-informed health care and the uptake of synthesized research evidence in health policy making and service planning.

Why are we doing this?

- This Target directly addresses the challenge set by Goal 3 of Cochrane's *Strategy to 2020* 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'.
- It does this by expanding Cochrane's capacity to engage more effectively with one of the most important target users of our evidence: health policy makers. This focus will increase the take up and impact of Cochrane evidence with these users; and give valuable lessons on how we embed effective Knowledge Translation approaches and tools across Cochrane to reach other target audiences better in future.
- The continuing implementation of the Knowledge Translation Strategy will complement Cochrane's Editorial Content Strategy and advocacy messages to ensure the widest possible access to and use of our evidence, in multiple languages and across geographic contexts.
- Cochrane has not yet developed an organizational Advocacy Strategy that will guide its work in this important area. The Target supports the development of new advocacy initiatives, expanded partnerships and wide internal and external consultations that will help Cochrane develop an Advocacy Strategy ready for implementation in January 2020.

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.

7. SUPPORTING AND TRAINING OUR CONTRIBUTORS
Build capacity in the Cochrane community to produce more complex reviews and undertake knowledge translation activities.

Why are we doing this?

- This Target is addressing Review Group concerns about:
    - o the level of author training being too basic;
    - o mass training exercises (encouraging Centres to work on training users in this context instead).

- It is also addressing issues around quality of training (training trainers to be better trainers and providing improved materials).
- It is making the most of Cochrane Interactive Learning and embedding that as our new standard author training with face-to-face opportunities seen as advancing that rather than replicating that basic training.
- It is supporting the quality improvement agenda by establishing more support and learning for editorial staff.
- It's is addressing some of the skills gap in the organization around Knowledge Translation.
- It is addressing issues around generational change and supporting younger members of the community to find their place and opportunities.

8. IMPROVED EDITORIAL MANAGEMENT SYSTEM
Evaluate, plan and begin implementation of an improved Editorial Management System for Cochrane Review production.

Why are we doing this?
- Cochrane's editorial management systems are 15 years old, and whilst they were fit for purpose when created they have not kept up with external competition over the last 15 years due to lack of investment and other priorities.

9. INCREASED ORGANIZATIONAL DIVERSITY
Strengthen Cochrane as a global organization, through a series of initiatives including:

- o Establishing new Cochrane Networks in the US and China to extend Cochrane's global reach and facilitate the accessibility, use and uptake of Cochrane evidence in practice;
- o Promoting diverse participation within our organization;
- o Expanding equity in the content and accessibility of our work;
- o Supporting the next generation of Cochrane Contributors.

Why are we doing this?
- This Target is a direct response to the objective to strengthen Cochrane as a global and diverse organization by establishing a Cochrane organisational presence in all regions, building capacity in low- and middle-income countries; promoting gender, linguistic and geographic diversity; and enabling generational change.
- As stressed in the 2019 Colloquium theme, we aspire to embrace diversity in Cochrane and we need to support this actively.
- The development of a Content Strategy highlighted importance of equity in our work.
- We need a new generation of people coming through to lead Cochrane –we need to celebrate and support them.

In addition to these Cochrane organizational Targets, the Central Executive Team will:

Run an open, competitive tender process for Cochrane's future publishing arrangements from January 2021.

1. CONTENT STRATEGY IMPLEMENTATION

Achieve the annual objectives and targets of Cochrane's Content Strategy

Target Outcomes	We will achieve the key objectives and targets relating to the Content Strategy, as approved by the Governing Board in April 2018. These will address the following: • Implementation of Risk of Bias 2 tool (ROB2) • Scaling up of Living Systematic Reviews • Standards developed and scaling up of Network Meta-analysis (NMA) • A Decision on whether to progress work on developing Rapid Reviews • Further exploration of the use of Clinical Study Reports as source data for drug intervention reviews
Why are we doing this?	It is vital for Cochrane's sustainability that we develop and implement strategies aimed at providing reviews that address decision makers' needs more effectively: focusing on high priority and increasingly complex questions, the use of new methods, new review types and expanding data sources.
Indicators of Success	• Successful introduction of Content Strategy Implementation plan. • Implementation plans for: ROB 2 tool, Network Meta-Analysis, Using Clinical Study Reports as the source of data for drug intervention reviews, Living Evidence, Rapid Reviews and Reviews of Prognosis Studies • Successful implementation of ROB2 for all new reviews and updates initiated after the end of 2019 • Development of 'MECIR' standards for NMA • Decision on whether to proceed Rapid Reviews in Cochrane • Meetings to explore feasibility and exemplar reviews based on Clinical Study Reports and organizing broad access to CSRs • Progress in identifying and commencing work on exemplar reviews based on Living Systematic Reviews identified and initiated by at least five Networks

Deliverables		
	1) Content Strategy Implementation plan agreed and signed off	1) March 2019
	2) Development of online learning modules in Network Meta-analysis	2) December 2019
	3) Meetings organized to further explore use of Clinical Study Reports	3) May 2019
	4) Tech development to support ROB2 in RevMan Web and Cochrane Library	4) December 2019
	5) Rapid Review Methods Group to complete first part of project leading to a go/no go decision	5) April 2019
	6) NMA quality standards and proposed implementation plan agreed and delivered	6) June 2019
	7) ROB2 become the default form of risk of bias assessment for new reviews	7) December 2019
	8) Identification of initiation of work for LSR's across at least five Networks	8) April 2019
	9) Meeting to plan Clinical Study Report exemplars and access to CSR's. Clinical Study Report exemplars identified, and work initiated for at least three reviews	9) June 2019
Estimated start date	January 2019	

2. IMPROVED EDITORIAL PROCESS

Assure the quality and consistency of Cochrane's editorial process

Target Outcomes	• We will develop an editorial charter that describes agreed expectations across networks and Review Groups to assure the equity and consistent high quality of editorial processes • Development and implementation of an agreed quality assurance process for high-profile reviews
Why are we doing this?	Cochrane needs to attract high quality researchers from across the world to contribute to its reviews. The marketplace for such reviews is highly competitive, with many high impact journals now wishing to publish systematic reviews. Therefore, the editorial process needs to be consistently supportive (within agreed limits), efficient and rigorous. There is ample evidence that the process is currently inconsistent and sometimes unacceptable. Addressing these is therefore a key priority.
Indicators of Success	• Approval process and implementation plans for Editorial Charter completed • Implementation of agreed Editorial Charter • Implementation of clear quality assurance process for high-profile reviews
Deliverables	1) Development of an Editorial Charter to be agreed across Cochrane Groups addressing: fidelity and equity of title registration, timeliness of response, high quality communication, transparency of decision making, implementation of due process, separation of editor and author functions. 1) April 2019 2) Consultation, amendment and implementation of Editorial Charter with support from Review Groups Network Senior and Associate Editors 2) July 2019 3) Development and implementation of quality assurance process for high-profile reviews 3) April 2019 4) Central Methods Support Unit to provide hands-on support to Groups 4) June 2019 5) Agreed performance parameters and monitoring process for Networks. 5) June 2019 6) Review Groups and Network priorities communicated 6) July 2019 7) Adherence to Editorial Charter and process for high profile reviews 7) December 2019
Estimated start date	January 2019

3. REVIEW STRUCTURE AND FORMAT CHANGES

Make Cochrane Reviews more accessible to decision makers

Target Outcomes	We will develop a prioritised and costed list of the proposed prospective changes to the structure and format of Cochrane Reviews with a proposed development and implementation plan.
	• This will follow a full evaluation and options appraisal of the ongoing prototype being developed by Cochrane Norway which will be presented to the Governing Board in April 2019.
	• The implementation plan will include:
	    o An advisory Board with representatives from the community and central team;
	    o Description of technology challenges for both review production (RevMan etc) and publication (Cochrane Library roadmap);
	    o Guidance, support and learning needs of the Cochrane community in delivering the changes consistently and with high quality;
	    o CET responsibilities and accountabilities across different departments;
	    o Consultation plan and engagement with the Cochrane community.

Why are we doing this?	• The structure of reporting and publishing Cochrane Reviews remain unchanged since Cochrane's inception. • In response to methodological advances, new features have been added to Cochrane Reviews over the years (e.g., Summary of Findings Table), and this probably contributed to reviews becoming longer and more complex (less accessible). • Review production (write, editorial process, and copy-editing) is more time-consuming and quality assurance is a challenge. • This proposal aims to support improvements in the quality, understandability, and usefulness of Cochrane Reviews, which in turn might allow for tailored derivative products that build on and go beyond what Cochrane Reviews can offer. • User testing of Cochrane Reviews have found that they are difficult for decision-makers to understand and use; e.g. they are long, there are frequently large numbers of comparisons and outcomes, there is frequently missing information about outcomes, particularly adverse effects.
Indicators of Success	• A strategic plan for the proposed changes in the structure and format of Cochrane Reviews. • A clear and comprehensive implementation plan detailing the proposed changes in the structure and format of Cochrane Reviews according to a prioritization process and with plans for regular deliverables (using an agile strategy).
Deliverables	1) A full evaluation and options appraisal of the ongoing prototype 1) March 2019 2) Development and implementation plan established, including: 2) September 2019 a) Advisory board 3) September 2019

	b) Governance and accountability c) Consultation plan with community and external stakeholders d) Guidance, support and learning needs of the Cochrane community e) Resource requirements: human and financial f) Description of technology challenges for review production and publication 3) Full options paper with resource requirements paper to Governing Board 4) Active involvement in consultation process from Review Groups Networks: feedback and support	4) September 2019
Estimated start date	January 2019	

4. UPDATED OPEN ACCESS AND OPEN DATA POLICIES
Review our policies on Open Access to Cochrane Reviews and datasets

Target Outcomes	In 2019, we plan to review our policies on open access to Cochrane Reviews and datasets, with the aim of ensuring these policies are up-to-date, continue to support our organizational mission to improve health decision-making, and secure core and Group funding, and the long-term sustainability of the organization.
Why are we doing this?	Cochrane already has progressive Open Access options for Cochrane Reviews and always respects the mandates of funders of Cochrane Reviews. It also has a long-term ambition to move to full and immediate Open Access for Cochrane Reviews once a reliably sustainable funding model for its activities is established. In 2018 a group of national research funding organisations, with the support of the European Commission and the European Research Council (ERC), announced the launch of 'cOAlition S', an initiative that aims to accelerate the transition to full and immediate Open Access for research publications. The Coalition has produced 'Plan S', which may have important implications for the funding of Cochrane Reviews – and Cochrane Groups - and it is therefore appropriate to re-assess our current policies and funding model in light of this. 'Open data' is the manifestation of the principle that clinical trial should be freely available to everyone to use and republish as they wish, without restrictions from copyright, patents or other mechanisms of control[2]. Cochrane has many types of data that are useful to share, and it already makes the statistical datasets from Cochrane Reviews available for non-commercial use. As we are reviewing our Open Access policies, it also makes sense to review our policies to data access: what data, to whom, and for what purposes should we share our data in support of our mission to improve health decision-making?
Indicators of Success	• Cochrane Governing Board, Cochrane Group, public and funder support for our Open Access and Open Data policies • Continued compliance with funder mandates for Cochrane Reviews

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[2] **https://en.wikipedia.org/wiki/Open_data**

Deliverables	1. Formation of a project team. Scoping and preparatory work undertaken by the team. 2. Formation of a Consultation Group composed of people internal and external to Cochrane with expertise in Open Access, Open Data, and research funding; and representing key stakeholder groups such as Cochrane Groups, Review funders, and Library customers. 3. Consultative meetings at the Chile with the Cochrane community on Open Access and Open Data approaches. 4. Meeting of the Consultation Group and other stakeholders to discuss Cochrane Open Access and Open Data policies and approaches. 5. Submission of any revised policy(ies) to the Governing Board for approval.	1) April 2019 2) August 2019 3) October 2019 4) Q4 20119 / Q1 2020 5) April 2020 (Governance meetings)
Estimated start date	March 2019	

5. NEW COCHRANE LIBRARY FEATURES
Continue to deliver more features and enhancements in the Cochrane Library

Target Outcomes	We will deliver new features and enhancements of the Cochrane Library on a regular basis, with a focus on continuing to improve the discoverability, accessibility, usability and impact of our content. Projects to be delivered in 2019 include: • PICO based search • Risk of Bias 2 (ROB2) • Living Systematic Reviews; and • The integration of Health Systems Evidence.
Why are we doing this?	Following delivery on an enhanced Cochrane Library in 2018, work will continue to deliver features and enhancements on an ongoing basis, as planned, to maintain its relevance and usability.
Indicators of Success	• Release of features and enhancements aligned to strategic priorities and delivering against the following product themes - discoverable, accessible, credible, actionable, sustainable. • PICO based search, RoB2, Living Systematic reviews and Health Systems Evidence are delivered on the Cochrane Library by the end of 2019.

Deliverables	1) Regular release of new features and enhancements, including public release notes. 2) Quarterly roadmap report confirming our now, next, and future development plans. 3) PICO search beta available on the Cochrane Library 4) Features required to support the publication and use of Living Systematic reviews available on CDSR 5) Health Systems Research searchable from the Cochrane Library 6) Publish RoB2 7) Ideas and suggestions for new functionality/features to support Cochrane's aims and vision to input into the roadmap from Cochrane Groups. 8) Support for understanding the requirements and applications of the stated priority features for 2019 and future features from Cochrane Groups.	1) At lease quarterly from January 2019 2) Quarterly from March 2019 3) Quarter 3 2019 4) Quarter 3 2019 5) Quarter 3 2019 6) Quarter 4 2019 7) Ongoing 8) Ongoing
Estimated start date	January 2019	

6. SUPPORTING POLICY-MAKERS
Support health policy makers to use Cochrane evidence and new advocacy initiatives

Target Outcomes	Health policy makers are a key user group for Cochrane evidence, and a principal target of Cochrane's advocacy messaging. In 2019, as part of the implementation of Cochrane's Knowledge Translation (Knowledge Translation) Strategy, we will: • Strengthen Cochrane's capacity to support policy-makers and health policy managers in their uptake and use of Cochrane evidence applicable to their language and context; • Advocate for evidence-informed health care and the uptake of synthesized research evidence in health policy-making and service planning. This includes a specific aim of making Cochrane leaders more effective advocates for evidence-informed healthcare.
Why are we doing this?	• This Target directly addresses the challenge set by Goal 3 of Cochrane's *Strategy to 2020* 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'. • It does this by expanding Cochrane's capacity to engage more effectively with one of the most important target users of our evidence: health policy-makers. This focus will increase the take up and impact of Cochrane evidence with these users; and give valuable lessons on how we embed effective Knowledge Translation (Knowledge Translation) approaches and tools across Cochrane to reach other target audiences better in future. • The continuing implementation of the Knowledge Translation (Knowledge Translation) Strategy will complement Cochrane's Editorial Content Strategy and advocacy messages to ensure the widest possible access to and use of our evidence, in multiple languages and across geographic contexts.

	• Cochrane has not yet developed an organizational Advocacy Strategy that will guide its work in this important area. The Target supports the development of new advocacy initiatives, expanded partnerships and wide internal and external consultations that will help Cochrane develop an Advocacy Strategy ready for implementation in January 2020.

Indicators of Success	• Indicators of success for strengthening Cochrane's capacity:
	
	   o The community of Cochrane collaborators working with policy-makers is expanding. This community helps identify training needs and tools (such as evidence briefs, support summaries and other Knowledge Translation dissemination products as part of a Knowledge Translation 'tool-kit') to facilitate interaction with policy-makers.
	   o Training and guidance provided to specific Cochrane Groups who are, or who will imminently be, actively engaged in working with policy-makers and request additional support.
	   o Tools and Knowledge Translation products developed are prioritized for translation into non-English languages fit for multiple dissemination platforms.
	   o An improved understanding of policy-making environments with strengthened systems, processes and evaluation frameworks that support Cochrane's engagement with policy-makers.
	   o Health Systems Evidence – a database to support the use of health evidence in policy making – is integrated within the Cochrane Library's search function.
	   o Best of practice experiences gained from working with policy-makers will be shared across Cochrane's community Groups.
	
	• Indicators of success to advocate for evidence-informed health care and the uptake of synthesized research evidence in health policy making and service planning:
	
	   o Documented stories of systematic review use in selected countries. What is/was needed to ensure use in-country (advocacy and campaigning work for the use of evidence; relationship building and use; dissemination and translation work). The stories will help device strategies for facilitating campaigns and advocacy work around future reviews with the potential to change health policy and practice (illustrated by stories of success).
	   o Documented stories of strengthening the capacity of policy makers in understanding and interpreting evidence synthesis and its use in policy and practice. Specific activities include: training of policy makers; deliberative dialogues; expanding our work with the WHO Evidence-Informed Policy Network (EVIPNet).
	   o New connections built with WHO departments, leading to continued and increased use of Cochrane Reviews in WHO normative guidance;
	   o New partnerships and priorities for co-production developed that have resulted in joint advocacy statements and work.

Deliverables	1) The successful preparation and holding of a session on: "*Supporting the use of evidence in policy-making*" at Cochrane's Governance meetings in Krakow. Cochrane's Knowledge Translation Advisory Group, Editorial Board and Review Groups Networks and geographic Centres to approve the session's aims and expected outcomes. 2) The delivery of an ongoing programme of 'train the trainer' activities; exemplar projects; and the production of a Cochrane community tool-kit consisting of 'evidence briefs' and practical tools to improve the quality of Cochrane's Knowledge Translation dissemination products aimed at policymakers. 3) A Cochrane Advocacy strategy is developed and approved for implementation in 2020 and beyond.	1) April 2019 2) April - October 2019 (delivered by Chile Colloquium) 3) December 2019
Estimated start date	January 2019	

7. SUPPORTING AND TRAINING OUR CONTRIBUTORS
Build capacity in the Cochrane community to produce more complex reviews and undertake knowledge translation activities

Target Outcomes	During 2019 and 2020 we will be developing tools, materials, guidance and learning for the whole Cochrane Community to build the skills required to respond to our Editorial Content and Knowledge Translation strategies. Both are critical for the organisation to continue to produce relevant evidence that is used in decision-making, so it is vital that the right support and training are in place to enable our contributors to do their Cochrane work.
Why are we doing this?	• This is addressing Review Groups concerns about the level of author training being too basic • This is addressing the concerns of Review Groups about mass training exercises (pushing those Centres to work on training users in this context instead) • This is addressing issues around quality of training (training trainers to be better trainers and providing improved materials) • This is making the most of Cochrane Interactive Learning and embedding that as our new standard author training with face-to-face opportunities seen as advancing that rather than replicating that basic training. • This is supporting the quality improvement agenda by establishing more support and learning for editorial staff • This is addressing some of the skills gap in the organization around Knowledge Translation • This is addressing issues around generational change and supporting younger members of the community to find their place and opportunities.

Indicators of Success	• For improvements in author training, success will be Cochrane Review Groups experiencing improved submissions and greater levels of author skills • For Knowledge Translation training development, success will be a greater number of training sessions being delivered that focus on use of Cochrane evidence • For equipping the next generation of Cochrane collaborators and leaders, success will be an increase in the number of young researchers publishing with Cochrane and taking positions of responsibility within the organization	
Deliverables	**Content Strategy and quality improvement** 1) Develop a new author training curriculum that blends online learning with face-to-face learning, with an emphasis on more advanced and in-depth learning face-to-face, so that our author teams have the skills needed to produce high quality reviews and adopt more complex methods as required. 2) Provide Cochrane Trainers with pedagogical training, linked to a defined curriculum, to support high quality teaching delivery and delivery of new types of learning. Face to face training to be delivering at the 2019 Colloquium with online follow up training to continue the learning. 3) Develop communities of practice amongst Cochrane Editors to share learning and develop skills, based on a problem-based learning approach using real case studies. 4) Support the community of Managing Editors (ME) to establish minimum competencies for the ME role, and develop training opportunities to support these competencies **Knowledge Translation** 5) Develop an online learning experience for Cochrane contributors to learn about knowledge translation in Cochrane 6) Develop materials for Cochrane Groups to provide more training on the use of Cochrane evidence in practice for policy makers, practitioners and patients. 7) Develop a suite of online learning for patients to understand evidence and the role of systematic reviews in health decision-making.	1) Estimated Quarter 2 2020 2) First milestone Quarter 3 2019 3) Quarter 1 2019 4) Quarter 4 2019 5) Completion by Quarter 3 2019 6) Completion by Quarter 4 2019 7) Completion by Quarter 2 2019
Estimated start date	January 2019	

8. IMPROVED EDITORIAL MANAGEMENT SYSTEM

Evaluate, plan and begin implementation of an improved Editorial Management System for Cochrane Review production

Target Outcomes	In 2019, we plan to evaluate our editorial management system to understand the needs of the system users and to compare these needs with the products available on the market. We will then decide either to purchase a new Editorial Management System or, if no external system is suitable, we will make e significant investment in Archie to make it fit for purpose. As this is a tool used every day by the community, it will be critical that this work is carried out in close collaboration with system users such as Managing Editors and other key stakeholders.
Why are we doing this?	Cochrane's Editorial Management Systems are 15 years old, and whilst they were fit for purpose when created they have not kept up with external competition over this period due to lack of investment and other priorities.
Indicators of Success	• A decision is taken on what our future system for editorial manage should be, and all major stakeholder groups agree with the selection. • Key stakeholders, such as Group staff, are engaged with the evaluation and support whichever option is chosen. • Implementation is underway before the end of 2019.
Deliverables	1) Commissioning with external consultants an evaluation of Cochrane's editorial management requirements and then involving all relevant stakeholder groups leading to an update paper for the Board and the community, including any known resource implications. 2) Implementation plan for new system, developed in collaboration with the community, with clear timelines and budget (if new system). 3) Development plan for Archie is developed, in collaboration with the community, with clear timelines and budget (if continuing with Archie). 4) A plan of Archie's other functionality is developed for whichever option is pursued. 5) Implementation started on the agreed solution. 6) Provide expert stakeholder input to the evaluation process. 7) Assist in the implementation planning of the agreed solution. 1) Krakow - April 2019 2) July 2019 3) July 2019 4) September 2019 5) November 2019 6) February 2019 7) November 2019
Estimated start date	January 2019

9. INCREASED ORGANIZATIONAL DIVERSITY
Strengthen Cochrane as a global organization

Target Outcomes	Cochrane is a global organization that welcomes participation from a diverse range of contributors. We aspire to have a global impact through our work. *Strategy 2020* sets an objective to: *strengthen Cochrane as a global and diverse organization by establishing a Cochrane organisational presence in all regions, building capacity in low- and middle-income countries; promoting gender, linguistic and geographic diversity; and enabling generational change*. In 2019 we have a range of related initiatives that collectively address this objective, both in our organization and in the work we produce.
Why are we doing this?	• This is a direct response to the objective to strengthen Cochrane as a global and diverse organization by establishing a Cochrane organisational presence in all regions, building capacity in low- and middle-income countries; promoting gender, linguistic and geographic diversity; and enabling generational change. • As stressed in the 2019 Santiago Colloquium theme, we aspire to embrace diversity in Cochrane and we need to support this actively. • The development of the Editorial Content Strategy highlighted the importance of equity in our work. • We need a new generation of people coming through into leadership positions in Cochrane –we need to celebrate and support them.
Indicators of Success	• Cochrane is communicating clearly about diversity with transparent metrics and targets for development • Meaningful recommendations on diversity are developed from the 2019 Colloquium • Young authors have mechanisms to put themselves forward to join author teams under defined terms of involvement
Deliverables	**Developing our global organization** 1. Establish networks in the US and China to extend Cochrane's global reach and facilitate the accessibility, use and uptake of Cochrane evidence in practice. **Embracing diverse participation within our organization** 2. Using the 2019 Santiago Colloquium as a platform, discuss, debate and identify ideas for embracing diversity in a way that leads to meaningful recommendations that can be put into action. 3. Perform a pilot study to assess improved approaches to supporting authors in Spanish speaking countries to understand how we might improve non-English author support internationally. 4. Collectively assess the Cochrane title proposal process and identify opportunities for improvements to support diversity in our author base. 5. Establish new metrics for the organization to report meaningfully on diversity within the organization **Equity in the content and accessibility of our work** 6. Develop training to support authors to address equity considerations in reviews including a learning module and guidance documentation, all supported by the Equity Methods Group	1. Quarter 2 2019 2. Quarter 4 2019 3. Quarter 3 2019 4. Quarter 3 2019 5. Quarter 22019 6. Quarter 3 2019 7. To be confirmed 8. To be confirmed 9. Quarter 4 2019 10. Quarter 1 2019 11. Quarter 4 2019

| | 7. Provide the right infrastructure to support efficient language translation processes including the integration of high performing machine translation (MT) engines into workflows for selected Cochrane languages.
8. Strengthen Cochrane's language translation community by providing a suite of online training and learning modules for volunteer translators, to improve the quality of our multi-lingual content and reducing workloads for Cochrane geographic groups/editors/managers.

Supporting the next generation of Cochrane Contributors
9. Define clear roles for early career researchers, including clear guidance for how to involve someone in their first review as an author and their first review as a lead author and creating other opportunities in the organization to support their development, e.g. Junior Editor roles.
10. Facilitate a community of practice amongst early career researchers to learn from each other's experiences of working within Cochrane, building on the *Cochrane 30 under 30* initiative.
11. Propose KPIs that Cochrane Groups can adopt to increase the number of young people progressing in their Cochrane career. | |
| **Estimated start date** | January 2019 | |