

## Governing Board Internal Candidate Statement

Please note that both this Internal Candidate Statement and the Letters of Support you provide **will be published on the Cochrane Community website** during the elections process, and the Internal Candidate Statement will remain on the website against the names of the new members for the duration of their terms on the Board. For this reason, this document template must be used for candidate statements; and full addresses, email addresses and/or unencrypted e-signatures excluded from Letters of Support. Photographs (including personal headshots) must not be included.

Please submit this Internal Candidate Statement in Word format by the stated deadline. It should be shared beforehand with the two nominators writing your Letters of Support.

Family name (surname):	<b>Howe</b>
First name(s):	<b>Tracey</b>
Today's date:	<b>20<sup>th</sup> June 2017</b>

You may expand the boxes in providing your answers to the questions below:

### 1. Do you have experience or expertise in one or more of the published list of essential areas of expertise for members of the Governing Board?

- Evidence-informed health care or policy: I work with the WHO on its Global Action Plan for Ageing and Health. I have previously been involved on various committees of NICE (England) and SIGN (Scotland).
- Consumer engagement: I have worked extensively with the Cochrane Consumer Network since 2003.
- Systematic review conduct and methodology: I am an author, editor and former co-ordinating editor within Cochrane.
- Knowledge translation and communication: I have experience in Public engagement and knowledge exchange – championing the consumer voice in health care, disseminating research into practice and initiating, driving and delivering large-scale science communication to the public including the achievement of a Guinness World Record involving over 5,500 children, 60 primary schools and 160 student nurses in Glasgow. Local Principal Investigator for £3M citizen science project OPenAirLaboratories – OPAL exploring nature.
- Financial management in the not-for-profit sector: Board membership (see later)
- Organizational governance: I have developed, managed and monitored strategic plans, operational objectives and risk. Ensured compliance with legislation and good practice models in both public and third sector organisations

### 2. How have you contributed to Cochrane's work during your time as a member?

In developing this statement I ran a personal report on myself in Archie and was surprised to find that I have been involved with Cochrane activities since 2003, how time flies when you are having fun! Here is my Cochrane story.

I was recruited in 2003, probably like many other people, by other Cochranites who just ooze enthusiasm for making a difference by creating trusted evidence to inform decisions for better health. Initially my involvement was as a co-author of a Cochrane review. I now have reviews registered and have worked with a diverse range of review groups including; Bone, Joint and Muscle Trauma, Eyes and Vision, Drugs and Alcohol, Vascular, Pain Palliative and Supportive Care, Musculoskeletal, and Movement Disorders Groups.

Like many others I then progressed to serving as an editor, in my case the Musculoskeletal Injuries Group and Musculoskeletal Group and was subsequently invited to be Joint Coordinating Editor, with Bill Gillespie of the Bone, Joint and Muscle Trauma Review Group. In this role I gained hands on experience managing a review group including, review production, review management, capability and capacity development and income generation. It was during this time that my interest in priority setting developed and I joined the Priority Setting Methods Group. Since then I have represented Cochrane on the steering groups of four James Lind Alliance Priority Setting Partnerships: Early osteoarthritis of the hip and knee, Surgery for osteoarthritis of the hip and knee, Shoulder surgery and currently Ageing and Multi-morbidity

It is my personal belief that all health and social care and services, including prevention, should be person centered and thus have always been an active participant, contributor and strong supporter of the Cochrane Consumer Network. I recognize the valuable contribution consumers can, and do, make within Cochrane as an organization, its products and in promoting its activities.

I have found the Cochrane ‘family’ not only passionate about the cause but also very supportive and keen to involve others. I have attended, and presented at, numerous Cochrane courses, events and Colloquia. These are all great ways to meet others, keep up to date with the latest developments, face some new challenges, contribute, receive constructive feedback and typically at the end of action packed programme, an opportunity to really let your hair down and have some fun.

### 3. What experience do you have in leadership and/or governance roles within Cochrane and in other relevant contexts? Can you provide examples of successful leadership?

More recently I turned my interest to knowledge translation and was appointed as Joint Director, with David Stott and Peter Langhorne, of the Cochrane Healthcare of Older People’s Field. This gave me the opportunity to contribute to the organization at a more strategic level as an active member of the Fields Executive.

Knowledge translation and communication is critical and I have contributed in a number of ways including as the Chief Elf of the ‘National Elf Service’s Musculoskeletal Elf’ [www.themusculoskeletalelf.net](http://www.themusculoskeletalelf.net) where I promote Cochrane evidence in ways more accessible to frontline healthcare professionals and the public. I also have a regular feature ‘Tracey’s Cochrane Corner’ in Innov-age Magazine <http://www.edwardhealthcare.org/research/innov-age-magazine/> . I was awarded a Winston Churchill Fellowship 2016 to explore large-scale health communication projects in New York City and used this opportunity to also spread the Cochrane message.

I am currently involved in the Cochrane Wikipedia Project [https://en.wikipedia.org/wiki/Wikipedia:Cochrane/Global\\_Ageing](https://en.wikipedia.org/wiki/Wikipedia:Cochrane/Global_Ageing) that has opened up new opportunities for knowledge translation to diverse world wide audiences. Social media is a great way to connect with people and I have met, and am now working and conversing with some great people through this medium. You can see me on Twitter @ProfTraceyHowe @MSK\_Elf and @CochraneAgeing and on Facebook and LinkedIn.

In 2016 I had the honour of representing Cochrane on the WHO consultation process for the Global strategy and action plan for ageing and health. This contributed to the establishment of Cochrane Global Ageing [www.globalageing.cochrane.org](http://www.globalageing.cochrane.org) (born on 31st October 2016) where I serve as a Founding Director, with Sue Marcus and Vivian Welch. We are now working closely with WHO on the implementation of the global action plan towards a decade of Healthy Ageing commencing 2020.

Cochrane Global Ageing has emerged at a pivotal point in Cochrane's development during the structure and function review. As Directors we have taken great care to engage with the Cochrane Executive Team and other executive groups and wider membership in the development of our Knowledge Translation initiative. Our focus is Cochrane's vision of a world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence.

My other experience outwith Cochrane includes:

- Partnership working - Former Deputy Chair of Glasgow City of Science, with Sir Kenneth Calman as Chair of a pioneering partnership of over 90 organisations. The purpose was to promote awareness of the roles of STEAMMS - Science, Technology, Art and design, Engineering, Maths, Medicine and Social sciences - in improving people's lives and thereby their communities. With the aim of working smarter together to leverage the region's scientific potential as a major driver of sustainable economic development [www.glasgowcityofscience.com](http://www.glasgowcityofscience.com). Realized collaborative advantage through identification, shaping, steering, formalising through MOUs and driving strategic partner engagement strategies and activities with start-ups, SMEs, public sector (FE, HE, NHS and local authorities) and third sector organisations through to globally significant brand-led businesses such as Morgan Stanley.
- Engagement in significant international collaborative partnerships e.g. EU FP7 Open PLACES Cities of Scientific Culture - 200+ European Cities - Glasgow was identified as exemplar in the final report. Host of a workshop 'Cities as Living Labs: Engaging Citizens and Policy Makers in Inclusive, Inspiring and Responsible Science and Innovation' at the European Science Open Forum 2016 the largest multidisciplinary science meeting in Europe.
- Leading and managing - held multiple inaugural directorships with responsibility for strategic leadership in managing, influencing and enhancing productivity of staff and integrating and aligning strategies and plans with corporate objectives. Developed and embedded policy and practice, and promoted excellence and high standards of achievement.
- Active leadership roles as ambassador - effective and persuasive advocate of organisations at senior levels (CEOs, Vice Chancellors, elected members and officials of local and national government) at local, national and international events with media and wider stakeholder audiences.
- Strategic planning and transformational leadership - developing, supporting and driving high performance cross-institutional multi-professional research teams and environments leading to recognised international profiles, funding portfolio enhancement and diversification (business growth) demonstrated by results in UK Research Assessment Exercise (RAE) 2001, RAE2008 and Research Excellence Framework (REF) 2014.

#### 4. What do you think would make you an effective member of the Board?

I have experience of Board membership at all levels from local community initiatives through to European based charities. I have knowledge and understanding of governance including ensuring that the 'charity' is carrying out the purposes for which it is set up, compliance with UK law, making balanced informed decisions and acting with care for both long and short term and an understanding of accountability.

##### Current

- Member of the Board of Management City of Glasgow College (Scottish Government Ministerial Appointment), Scotland's Super College (Further Education) with 40,000+ students from 130 countries (from August 2016 - ).

##### Previous

- Non Executive Director - Picker Institute Europe (Registered No. 1081688) - international standard of facilitators of quality of care worldwide (from December 2014 – Feb 2017).
- Board Member for local award winning Social Enterprise 'Gorbals Recycles' (resigned December 2015)
- Board Member for local award winning Community Interest Company 'MsMissMrs' (resigned September 2016)
- Deputy Chair Glasgow City of Science (June 2013 - resigned Sept 2016)

#### 5. How do you see Cochrane developing or changing in the future (i.e., what is your 'vision' for Cochrane), and why?

Cochrane is justifiably proud that it has been the driving force for a number of significant changes in healthcare and the "go to" place for high quality evidence for over 20 years. For many years we have had a monopoly in the evidence synthesis market. However, several similar organisations have now been established and the danger is that they could 'take over' some activities that Cochrane considers its core business. Our market share may decline or even disappear entirely. What can we do about this? Cochrane needs to change to adapt to this new landscape and this has been the focus of the structure and function review. But change how? Our vision is of a world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence. How can we best achieve this in the current and future environments?

Cochrane reviews involve complex processes of people working together in a coordinated way over time. Feedback from our stakeholders and end users tells us that to be of most use to them our reviews need to address their priority issues. Messages should be accessible globally in terms of plain language, understanding in context and easy to access and share. Production time needs to be dramatically shortened, but quality must be maintained - right message, right place, right time. If we don't address these concerns then for whom are we producing these reviews?

#### 6. What do you see as the most important issues to be addressed by the Board during your term of office?

Sustainability of Cochrane with financial security, brand visibility and brand value is the most important issue facing us. Cochrane has grown into a highly complex organisation and operates in multiple social, cultural, and economic environments. We need to get the most out of our capital with careful use of all our resources to maximize performance and create long-term stakeholder, user and

employee value and loyalty. This is something that we must do together through the collective wisdom of the Cochrane family.

Change is inevitable; the key is to prepare for change by being proactive rather than reactive, and to always remember to expect the unexpected. I would like to join the Board and commit my experience and energy into helping us achieve our ambitions.

### 7. For individuals seeking re-election, how have you contributed to the Board during your previous term of office?

### 8. Is there anything else you would like to say in support of your nomination?

If elected as a member of the Cochrane Board I am able to contribute over 30 years experience in:

- **Research and analytical skills** – internationally recognised Professor of Rehabilitation Sciences and Chartered Physiotherapist. Served on numerous International and UK research commissioning, policy and governance panels. Personal research has won numerous awards for their important contribution to priority areas of health policy (IMPACT).
- **Policy and operational issues facing Higher and Further Education** - experienced panel member assessing the quality of research at UK Universities serving on RAE2008 and REF2014, tasked with deciding on the allocation of many millions of pounds of research funding to Higher Education Institutions. REF consultant to a number of UK HEIs and International advisor Romanian RAE. Previously Glasgow Chapter lead for ScienceGrrl UK promoting women in science and science policy and a member of the steering group of Glasgow's Science Technology Engineering & Maths (STEM) Hub.
- **Organisational development and capacity building** – up-skilling workforce through innovative combinations of training, mentoring and support with an emphasis on early career staff, healthcare professionals, academics, administrators and science communicators. Conceived, developed and delivered a multi-institutional inter-disciplinary graduate school recognised by a UK award for 'Innovation in recruitment and career development'.
- **Innovation and creative thinking** – developed and implemented new methods of skills development and applied research leading to a range of innovative impactful and successful educational and research demonstrator projects and innovation projects with SMEs.
- **Promoting innovation** – initiated and led the steering group developing an application for Glasgow to become European Innovation Capital 2016, EU Horizon2020 competition. Glasgow was a finalist City. Based with Glasgow Chamber of Commerce on fostering innovation through actions at city level, to build up an innovation ecosystem and ideas to further expand and scale up these initiatives.
- **Teaching and learning** - extensive knowledge of effective curriculum design, delivery, assessment and quality assurance at undergraduate and postgraduate levels and researcher development programmes.
- **Personal development** – actively participated in intensive personal development e.g. Top Manager Programme and Athena Programme for Executive Women, both the King's Fund, London, and PRINCE2 practitioner programme

## Declaration of Interest statement:

Candidates must make a declaration of conflict of interest, including financial or nonfinancial relationships with other organizations, professional relationships to other members of the Board, and other Boards she/he may sit on. In writing this statement, candidates should refer to Cochrane's [conflict of interest policy](#) and the [declarations of existing members of the Board](#).

Please answer the following questions:

1. Financial interests In the last three years, have you:	Yes/No (If yes, please provide details)
a) Received research funding: any grant, contract or gift, commissioned research, or fellowship from Cochrane or a related organization (i.e. any organization related to health care or medical research) to conduct research?	No
b) Had paid consultancies: any paid work, consulting fees (in cash or kind) from a related organization?	No
c) Received honoraria: one-time payments (in cash or kind) from a related organization?	No
d) Served as a director, officer, partner, trustee, employee or held a position of management with a related organization?	<p>Current</p> <ul style="list-style-type: none"> <li>Member of the Board of Management <a href="#">City of Glasgow College</a> (Scottish Government Ministerial Appointment), Scotland's Super College (Further Education) with 40,000+ students from 130 countries (from August 2016 - ).</li> </ul> <p>Previous</p> <ul style="list-style-type: none"> <li>Non Executive Director - <a href="#">Picker Institute Europe</a> (Registered No. 1081688) - international standard of facilitators of quality of care worldwide (from December 2014 – Feb 2017).</li> <li>Board Member for local award winning Social Enterprise 'Gorbals Recycles' (resigned December 2015)</li> </ul> <p>Board Member for local award winning Community Interest Company 'MsMissMrs' (resigned September 2016)</p>

e) Possessed share-holdings, stock, stock options, equity with a related organization (excludes mutual funds or similar arrangements where the individual has no control over the selection of the shares)?	No
f) Received personal gifts from a related organization?	No
g) Had an outstanding loan with a related organization?	No
h) Received royalty payments from a related organization?	No
<b>2. Do you have any other competing interests that could pose a conflict of interest that would reasonably appear to be related to the primary interest?</b>	No

From  
Anne Lyddiatt  
18/12/2016

To: Cochrane Board

Subject: Nomination of candidate for member of the Cochrane Board

I hereby nominate **Tracey Howe** as a candidate for election to the Cochrane Board.

I have known and worked with Tracey as a colleague in Cochrane for over 10 years. I confirm that she is an active member of the Cochrane community and that she has the following experience and skills;

- Evidence-informed health care and policy
- Editorial policy and publishing
- Consumer engagement
- Systematic review conduct
- Systematic review methodology
- Knowledge translation and communication
- Financial management in the not-for-profit sector
- Organizational governance

While Tracey's many accomplishments attest to her having the above experience and skills she also has exceptional organizational skills and an innate ability to interact and work equally with health professionals, business, educational and government staff and representatives as well as consumers/citizens. She is not only a well qualified candidate for the Board but is also very well liked and respected both within Cochrane and by other groups/organizations. I feel we are very fortunate to have someone of her caliber willing to serve on the Board. I have just finished a term on the Steering Group and feel I can say without hesitation that Tracey has the qualities, enthusiasm and commitment we need on the Board as Cochrane moves to 2020 and beyond.

Yours sincerely

Anne Lyddiatt

Nominee: Tracey E Howe



From  
Sue Marcus  
Managing Editor Cochrane Dementia and Cognitive Improvement Group

To: Cochrane Board

Subject: Nomination of candidate for member of the Cochrane Board

I hereby nominate **Tracey Howe** as a candidate for election to the Cochrane Board.

I have known and worked with Tracey as a colleague in Cochrane for 5 years. I confirm that she is an active member of the Cochrane community and that she has the following experience and skills;

- Evidence-informed health care and policy
- Editorial policy and publishing
- Consumer engagement
- Systematic review conduct
- Systematic review methodology
- Knowledge translation and communication
- Financial management in the not-for-profit sector
- Organizational governance

I have no doubt she will make a great contribution to the Board.

Yours sincerely

Sue Marcus

Nominee: Tracey E Howe