

# Steering Group Bulletin

June 2008

No. 6

## Introduction from the Co-Chairs

*Lorne Becker and Adrian Grant*

Welcome to this, the sixth issue of the Cochrane Collaboration Steering Group Bulletin. The Steering Group was delighted to travel to India (see 'Thanks to the South Asian Cochrane Network', below) for what turned out to be a particularly rewarding, challenging, important and exhausting meeting. Your Steering Group representatives have to make difficult decisions on your behalf, and this meeting turned out to be potentially one of the most influential of the last few years. In particular, the Steering Group agreed to appoint an Editor-in-Chief for *The Cochrane Library*, and, working with Centre Directors and the Co-ordinating Editors, discussed the concept of expanding the Collaboration's outputs, developing particularly into the areas of closer to point-of care applications, and continuing medical education. As ever, your feedback on the Steering Group's deliberations, and on this Bulletin, is very welcome.

## WHERE WE ARE IN THE ELECTION PROCESS

*Claire Allen*

The following people are due to stand down from the Steering Group this year (see election process at [www.cochrane.org/ccsg.htm](http://www.cochrane.org/ccsg.htm)):

Jon Deeks (representing Methods Groups)  
Donna Gillies (representing Authors)  
Sally Green (representing Centres)  
Peter Tugwell (representing Co-ordinating Editors)  
Narelle Willis (representing Review Group Co-ordinators)  
Hans van der Wouden (representing Cochrane Review Groups 'at large')

Jon, Sally and Peter have served two terms on the Steering Group so cannot be re-elected. Voting instructions will soon be circulated to the people who are eligible to vote. More information about the election process can be found at <http://www.cochrane.org/ccsg/ccsgselectionsmain.htm>.

## STEERING GROUP MEETINGS

The Steering Group meets face-to-face twice a year, once during the annual Colloquium, for one and a half days, and a second time for three days, about six months later. The Steering Group's Publishing Policy and Executive Groups meet monthly by teleconference. The face-to-face meetings are intensive and require considerable preparation by participants. Forthcoming dates are as follows:

**2008 Colloquium:** Freiburg, Germany, 2 + 6 October 2008

**2009 mid-year:** Copenhagen, Denmark, 24–26 April 2009

**2009 Colloquium:** Singapore, 11–14 October 2009

**2010 Colloquium:** Colorado, USA, 18-22 October 2010

## Thanks to the South Asian Cochrane Network

The Steering Group expressed its sincere appreciation to Prathap Tharyan, Convenor of the South Asian Cochrane Network (SACN), and his team from the Vellore network site, for their hard work in hosting them in India. Alongside the Steering Group meeting itself, there were also meetings of the Centre and Branch Directors and of the Co-ordinating Editors' executive, as well as a one-day symposium run by the SACN for health professionals from the region. Attended by over 450 people, this latter event was a huge success, and those attending the Cochrane meetings were particularly pleased to be able to contribute to it.

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## Cochrane communication channels

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## The Cochrane Collaboration to appoint an Editor-in-Chief

In a far-reaching decision, the Steering Group approved a proposal to establish the office of Editor-in-Chief for *The Cochrane Library*. This is the most significant development of the Collaboration's editorial processes since its founding, and has the potential to revolutionise the way that we deal with key issues in systematic review production, including quality improvement and management, prioritisation of review topics, and moving towards positioning *The Cochrane Library* as a true life sciences journal, rather than a collection of databases. The Editor-in-Chief won't be able to work in isolation, and it was also agreed to establish an appropriately staffed office of the Editor-in-Chief, and to ensure good governance arrangements.

Reflecting on this major change, Adrian Grant reflected that "this is the biggest thing that has happened in the Collaboration in my time; it's a huge step forward, and I don't think that things will ever be the same again".

The driving force behind the initiative, which had the unanimous support of the Steering Group members, has been the Co-ordinating Editors' executive, led by Peter Tugwell and Jonathan Craig. Said Peter, "the Co-ordinating Editors recognised a couple of years ago that we needed to co-ordinate our activities and processes better, particularly regarding quality issues; we see this as a key piece of the jigsaw to ensure that Cochrane systematic reviews remain the prime source of high quality information on the effectiveness of healthcare interventions." A Co-ordinating Editors' Board has now been formed, which will work closely with others – such as Methods Group members – to ensure that the primary aim of maintaining and improving quality within and across Cochrane reviews is achieved.

Leading the development project to work towards the proposal was Sophie Hill, Co-ordinating Editor of the Consumers and Communication Review Group. Sadly, Sophie was injured in a traffic accident earlier this year and was unable to travel to Vellore to present the proposal – Andy Oxman and Paul Garner did this in her place – but the Steering Group expressed its appreciation of the work that Sophie had done, and was pleased to hear that she is recovering well.

Taking this initiative forward, a search and selection committee has been formed under Adrian Grant's chairmanship. Potential candidates wanting a confidential discussion about the post should contact him for further information.

## Our published product – where do we go from here?

Scientifically rigorous, the best available source of the effects of healthcare treatments, a searchable database bringing a massive amount of information and data together in one place. All these points about Cochrane Systematic Reviews and *The Cochrane Library* are true. And yet. Are we giving our audience everything that they need? Could we do more to inform our readers? Are there things that we could be doing with our products and services to position ourselves better as providers of healthcare information?

These and related issues were considered in Vellore by a joint session of Steering Group members, Co-ordinating Editors, and Centre and Branch Directors. In what proved to be an enjoyable and thought-provoking session, and one that arrived at a considerable degree of consensus, the principles of developing and considering ideas for new products were explored.

After Lorne Becker had introduced the session, Deborah Pentesco-Gilbert, Publisher for *The Cochrane Library* at Wiley-Blackwell, gave an overview of the healthcare information market, of our potential competitors, and Wiley-Blackwell's view of where the market was going in the next few years, and how we might choose to position ourselves as healthcare information providers. Key areas to consider were systems that brought us nearer to the point of care (POC), the physician-patient interface, and products in the Continuing Professional Development (CPD) and Continuing Medical Education (CME) sectors. Lorenzo Moja of the Italian Cochrane Centre then gave a thought-provoking but amusing and engaging presentation on the journey he had gone through in developing the concept of a CME product for the Italian healthcare system, based on Cochrane reviews.

Breaking into small groups, delegates then considered what principles the Collaboration should apply in considering developments such as POC and CME products, based on or derived from Cochrane reviews. Key to these were the following:

- New products should be aligned with current Collaboration principles;
- Work on new products should not distract effort or resources from our key mission of producing Cochrane reviews;
- New products should at least be cost-neutral to the Collaboration, and preferably revenue generating;
- Editorial control should rest within the product team, with proper governance arrangements between that and the Collaboration.

A small team has been established to take this initiative forward.

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## Financial management

Funding the new Editor-in-Chief post and Office won't be cheap. At the same time, there are other important demands on core funds. The level of proposals exceeds the resources available to the Collaboration in the next few years. This is perfectly normal in any organisation, and careful management will be needed to prioritise and balance the many demands on the Collaboration's core funds.

At the Vellore meeting, Lorne presented a four-year cash flow forecast, based on the Collaboration's standard five-year cash flow forecast. This showed that, with the unexpectedly large request for additional funding for the IMS system, plus a number of unplanned for and unexpected other funding requests, there were insufficient resources to fund all of the things being asked for at the present time, at the requested levels. The Steering Group agreed that current levels of expenditure across a number of core projects should be appraised to ensure that the Collaboration was getting value for money from its resources, and that options and plans should be brought forward to address any inconsistencies.

Details of financial decisions made at the Steering Group meeting are in the published minutes, but in brief these include:

- Increasing the funding to the Information Management System (IMS) team at the Nordic Cochrane Centre in Copenhagen, rising from a planned £112,585 to £176,019 for the financial year 2009-10.
- Increased funding to the IMS Support Team, with an increase of 0.4 full time equivalent post to total annual funding of £65,000.
- Additional one-off budget of £50,000 to the Collaboration Review, to allow engagement of external consultants in the review process.
- Allocation of £16,500 to support a meeting to develop the Collaboration's training strategy.
- Extending the funding for the register of Diagnostic Test Accuracy (DTA) studies, based with the Renal Group in Sydney, for a further three years, total £114,000.
- Extending the funding made available to the Continental European Support Unit for DTA reviews at the Dutch Cochrane Centre for one additional year, total £39,250.
- Establishing the post and related office of Editor-in-Chief, expected to cost in the region of £360,000 per annum, rising to £400,000 within a few years.

## Impact factor due in June 2008

The great day is almost upon us. After years of effort to get Cochrane Reviews listed in the ISI system, and three years of waiting for the impact factor calculation process to grind its gears extremely finely, in June of this year we will receive our first impact factor.

Our impact factor isn't about being in a competition with other journals, but about ensuring that our authors and others receive the recognition they deserve, from their colleagues, institutions, ministries and funders, for the fantastic work that they do. And despite views that impact factors are a cheapened currency, they matter.

Having said that, we have not been assiduous to date in doing the simple things that we could do to ensure that our reviews get the level of recognition that they deserve. For a number of reasons our impact factor is likely to be considerably lower than it would be if we were just another medical journal. Reasons for this include the following:

- We don't cherry-pick the most exciting, newsworthy scientific papers. Instead, we take the view that anyone who takes the time and effort to produce a high-quality paper based on our methods deserves publication, no matter what they found, even if they found no studies to include at all – the 'empty review' syndrome.

- As we publish everything, this means that, compared to traditional journals, our denominator is very large. (The impact factor for 2008 is calculated as the number of citations made in the year 2007 to include papers published in the years 2005 and 2006.) So, to get the same impact factor as a traditional journal, we would have to have perhaps three times the number of citations.

We are not very good at appropriate cross-referencing between reviews, which must be infuriating for our readers. Many Cochrane reviews contain not a single citation to another Cochrane review, even where there are related reviews available that might help to inform the reader.

It will be a key task of the incoming Editor-in-Chief to ensure that we maintain high quality standards in our reviews, including appropriate cross-referencing. This can only be helpful if we wish to see our impact factor improve.

In the meantime, we should allow ourselves a small moment of satisfaction, before we put our shoulders to the wheel once more. It's a fantastic achievement, and with comparatively little effort we can do so much better.

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## RevMan 5 now a reality

The much heralded and anticipated new version of the Collaboration's Review Manager software – RevMan 5 – has now been launched. Early reports are that authors and others are appreciating the new look, feel and functionality, and finding it relatively straightforward and intuitive to use. The Steering Group congratulates the IMS team on their work, and asked Monica Kjeldstrøm to convey their appreciation to her team in Copenhagen.

## Proposals to be sought to redevelop CENTRAL

Since the change in arrangements for managing our core trials register – CENTRAL – we have been looking at how we can improve trial registration processes, and what our trials register should look like, for the future. It has been agreed previously that we need a hybrid, web-based register, accessible to and used by all relevant entities, and capable of handling records of studies and their related trials, and also individual trials. Much useful work has gone into establishing an interim process whilst we consider the future, and all of the data gathered through this, the CENTRAL Vision Group, and other means, has now led to the development of a user requirement for the future Cochrane Register of Studies. A working group of Trials Search Co-ordinators (TSCs) has been instrumental in this work, and the experience they have gained through closer co-operation has now led to the formation of a TSCs' executive – a move much welcomed by the Steering Group.

Following discussion at the Vellore meeting, the user requirement for the new register was approved, and it was agreed that an open tender process would be conducted to seek a provider.

## Cochrane as a WHO Collaborating Centre?

A proposal was put forward by Davina Ghersi, Co-ordinating Editor of the Cochrane Breast Cancer Group and now running the WHO clinical trials registration unit in Geneva, Switzerland. Building on preparatory work undertaken in the last couple of years, Davina offered to organise a small project group to examine the issues and take this proposal forward.

## Capacity building and skills training: ensuring a strategic approach

We are in a period of considerable change. RevMan 5, Summary of Findings and Risk of Bias Tables, a new version of the Authors' Handbook just released - the list is long. We need to ensure that our contributors are prepared and supported in their roles.

Skills training and capacity building are core functions of our Centres and Branches. We need to ensure that we use our resources wisely, living up to our principle of reducing duplication. It was therefore agreed that there should be a meeting of training representatives from all Centres and Branches, plus other key people such as members of the IMS Support Team, with the aim of developing a co-ordinated training strategy for the Collaboration.

The meeting will be held in Cambridge, UK, from 28 to 30 July 2008, organised by Julian Higgins and Sally Green, co-editors of the Handbook for Systematic Reviews of Interventions.

The impact on environmental sustainability was noted, of running geographically-based training, where delegates and trainers have to be brought together physically. The Steering Group agreed to continue to develop web-based e-learning resources that would be independent of time and location.

## Jeremy Grimshaw's Collaboration-wide review begins

This Bulletin has reported earlier that Jeremy Grimshaw (Co-ordinating Editor of the Effective Practice and Organisation of Care Group) would be conducting a Collaboration-wide strategic review of the Collaboration's purposes, structures and governance arrangements, to ensure that we enter our next fifteen years in good shape to continue the achievements of our first fifteen years.

The review has now started, with interviews and meetings having taken place in Australia, Canada, Italy and the UK. A formal announcement will be made shortly with the launch of the review website on which colleagues will be able to find the latest information on what Jeremy is up to, see the discussion materials he is preparing, make comments, and contribute to virtual conversations as we all develop our ideas and concepts.

Everyone is encouraged to participate in the review – the Collaboration belongs to everyone, and through the power of the network we can continue to do great things.

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### Keystone 2010 – decision ratified

At its meeting in São Paulo in October 2007, the Steering Group approved the recommendation of the Colloquium Policy Advisory Group to accept the proposal of Bob Dellavalle, an Editor with the Cochrane Skin Group, and his team from the VA Medical Center in Denver, Colorado, USA, to hold the 2010 Cochrane Colloquium at the Keystone mountain resort. This decision was taken in full knowledge of the inherent risks of altitude sickness, which were felt to be more than balanced out by the many advantages of the venue.

Subsequent to the São Paulo meeting, some colleagues appropriately put forward opposing views that the potential risks of mountain sickness did outweigh the advantages of the venue, and provided additional information on what these risks might be.

The Steering Group agreed to re-visit its earlier decision, and was also further informed by an evidence review conducted by the Australasian Cochrane Centre, and the opinions of colleagues who had attended events at Keystone, or who had personal experience of high altitudes.

After considerable discussion and considering all the information available to them, the Steering Group decided to ratify the decision to go to Keystone. It was particularly swayed by the argument that, although altitude sickness can be unpleasant for those who are affected, the effects are not usually life-threatening, are relatively simple to treat, and that there are effective, safe and easily available prophylactic medicines and strategies that can eliminate the risk almost entirely. The Colloquium organisers will work with the venue managers and the Collaboration to ensure that the relevant information on risk reduction and preventative strategies is available to delegates well in advance of the event, and will include appropriate information about prevention and the availability of onsite health care facilities.

Taking on the organisation of a Cochrane Colloquium is a mammoth task, and has been likened to organising three normal scientific conferences at the same time and in the same venue. The Steering Group is immensely grateful to all those who take on this role. If you would like more information on what it entails, or are thinking of bidding to hold a future Colloquium (2011 is the next slot available!), get in touch with Jini Hetherington at the Cochrane Collaboration Secretariat ([jhetherington@cochrane.org](mailto:jhetherington@cochrane.org)).

### Should we have discipline- or profession-based fields or networks?

After lengthy discussion of this issue in Vellore, the Steering Group voted to approve the principle of registration of discipline-based or profession-based Fields.

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