Strategic Plan Template for Cochrane Affiliates

This document is applicable to Affiliates only.

This Strategic Plan template is divided into six sections:

1. The local environment in which the Affiliate operates
2. Current Funder priorities/requirements
3. How your Affiliate will deliver its Cochrane functions
4. Specialisms of the Affiliate
5. Challenges and Risks
6. Development Plan

Appendix – Overview of functions and tiers – for information

# The local environment in which the Affiliate operates

1. The use of evidence in your country or region

Please describe in brief (approximately 250 words) the state of the use of evidence in decision-making in your country and highlight where work needs to be done to improve the use of evidence or other gaps in the evidence system that you think the Cochrane Affiliate needs to fill.

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| Thanks to Cochrane, free access to full texts of Cochrane Systemic Reviews in the Cochrane Library exists for people in Bosnia and Herzegovina (B&H).  However, the awareness of this opportunity is rather low (only one third of the physician population). So is the use of Cochrane evidence, with one tenth of surveyed physicians reading summaries of systematic reviews in the Cochrane Library (Mahmic-Kaknjo, CMJ 2015).  During the last decade, there have been continuous individual efforts by health care professionals in different health care institutions in B&H to implement evidence based medicine in therapeutic guidelines and protocols, necessary for everyday general medicine and clinical practice. Now, we would like to combine our individual strengths and ambitions and create a unified Cochrane presence in B&H.  Fortunately, Cochrane Croatia with its promotional activities, such as their annual symposia and translation of Cochrane Plain Language Summaries (PLS), has had a great impact on increasing not only awareness of Cochrane and EBM but also providing the motivation for introducing and spreading similar activities in B&H.  Another area where work needs to be done is the media. The majority of media outlets in B&H use unreliable sources of information on topics that involve health care and prevention, resulting in misinformation and poor quality reporting. Education in EBM of the media, health care professionals and the whole community could help change such reporting and improve the overall health of the population. |

1. Priorities

What do you see as the highest priorities for Cochrane in your country, and which functional areas are the most important to your Affiliate?

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| Our highest priorities are to:   * become an affiliate * educate health professionals about the importance of EBM and Cochrane * teach medical and allied health students about the importance of EBM and Cochrane * educate health decision makers * educate media on Cochrane and its products * continue to participate in Cochrane Croatia’s translation activities and start our own   Functional areas that are most important to our Group are: to establish a formal Cochrane presence in our country; to promote Cochrane and its work; to support and develop the multicultural community of Cochrane members in B&H; to disseminate Cochrane Reviews locally based on multicultural stakeholder networks, the media and other communications channels. |

# Current Funder priorities / requirements

Many funders add additional requirements above those stipulated by Cochrane. Please list below what additional work you need to do to fulfil the requirements of your funding above and beyond the requirements Cochrane sets.

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| Not applicable |

# How your Affiliate will deliver its Cochrane functions

The newly-established functions for Cochrane Affiliates are outlined in the below table. Full details of the functions are available in [*Implementing Strategy to 2020: Cochrane Centres, Branches & Networks Structure & Function Review*](http://community.cochrane.org/sites/default/files/uploads/inline-files/centres___branches_structure___function_review_-_final_-_june_2016.pdf); and will be incorporated into the *Organisational Policy Manual*.

Affiliates are expected to respond to these functions in a way that is meaningful in their local context. This template, therefore does not list specific activities, but contains a column requesting details on how the Affiliate intends to fulfil the function. Affiliates should complete this column with a detailed explanation of activities to be undertaken.

The functions in this form are organised around Cochrane’s four strategic goals:

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

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

***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.*

***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.*

The final column asks for targets against which the Affiliate can be measured. You are invited to give short and long term targets for each functional area. Please ensure these targets are “**SMART**” (**S**pecific, **M**easurable, **A**chievable, **R**elevant and **T**ime bound). We advise short term targets to be for one year and long term targets to be for three years.

Under each Goal there is also a row for “Additional work the Affiliate carries out under Goal X”. This is because the new structure and function review allows all Cochrane Groups much greater freedom to perform other functions outside those required of their Group type. Affiliates therefore have the opportunity to specify other activities that they do which are worthy of note and should be tracked as part of their performance.

The functional areas in purple are the items in the additional ‘Tier 4’ functions which are not mandatory for Affiliates.

If you wish to see some examples of activities that might be under taken for each function please see [*Implementing Strategy to 2020: Cochrane Centres, Branches & Networks Structure & Function Review*](http://community.cochrane.org/sites/default/files/uploads/inline-files/centres___branches_structure___function_review_-_final_-_june_2016.pdf), pages 16 – 21.

Tier 1: Core Functions of Affiliates

These are the three core functional areas of Affiliates. All Affiliates must complete these functions.

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| Functional Area | How this function will be delivered | Short and long term “SMART” targets. |
| Goal Two: Making our Evidence Accessible | | |
| To **disseminate Cochrane Reviews** locally based on stakeholder networks, the media and other communications channels. | 1. In order to be able to disseminate Cochrane Reviews to interested parties in BH, we must first translate them, so we will continue to participate in Cochrane Croatia’s translation activities as well as start translating Cochrane evidence into the remaining languages spoken in B&H: Bosnian and Serbian. 2. Establish stakeholder networks 3. Disseminate translated Cochrane podcasts | Short term:   * Create a mailing list of potential partners: media, patients, healthcare organizations, politicians, healthcare institutions, etc. * Translate at least 50 Cochrane PLSs into languages of the people of B&H (Bosnian, Croatian and Serbian) annually * Set up a Cochrane presence on the web page of the School of Medicine, University of Mostar for disseminating Cochrane evidence * Disseminate Cochrane evidence through Facebook, university journals, professional publications, and ministry websites (state, federal, cantonal level) that will provide support as partners.   Long term:   * Disseminate key Cochrane Reviews to relevant stakeholders * Establish cooperation with the Agency for Quality and Accreditation in Health Care in the Federation of B&H (AKAZ) and Agency for certification, accreditation and health care improvement in the Republica of Srpska (ASKVA) * Disseminate Cochrane evidence among healthcare professionals, policy makers, the general public, journalists and the media * Dissemination through, social media, blogs, blog shots, podcasts. |
| Goal Three: Advocating for Evidence | | |
| To **promote Cochrane** and its work in their country. | 1) We will build awareness of Cochrane by working with key stakeholders such as professional bodies and attending relevant national conferences.  2) We are going to develop partnerships in all parts of the country in all areas, such as schools, hospitals, students, media, patient associations.  3) We are going to organize university workshops, we will encourage students to become involved and increase awareness of the great potential and quality of Cochrane reviews. | Short term:   * We are going to attend two national conferences annually – to promote Cochrane * We plane to include students, professors and all members of Cochrane team in writing articles for regional magazines, make promotional flyers, set up Cochrane corners at all faculties at the University of Mostar. * We are also going to make a Facebook page that is going to be active and available daily to all followers for any information. * We are going to include students and other stakeholders in work such as translation of Cochrane evidence. Students are going to be involved in translation of Cochrane evidence through various seminar workshops, courses – elective courses.   Long term:   * We will establish formal partnerships for collaboration with schools and provide education to students via webinars and workshops. * We will establish formal partnerships for collaboration with hospitals and provide education to health professionals via newsletters. * We will establish formal partnerships for collaboration with the media and patient associations and provide education to them about Cochrane and EBM via a webinar. * We are going to provide education to hospitals and their employees, members of the Chamber of Physicians and Medical Biochemists at their meetings. * We are going to invite lecturers from other countries who will introduce students of graduate and postgraduate courses to Cochrane and EBM. |
| Goal Four: Building an Effective and Sustainable Organisation | | |
| To support and **develop the community of Cochrane members** in their country. | 1. We will build formal and informal partnerships with key stakeholders 2. We will encourage involvement in CSR production 3. We will use crowd sourcing to include the general public in Cochrane activities | Short term:   * We will provide newsletters and other communications locally (with support of Cochrane provided tools). * We will support the Cochrane membership scheme by creating a sense of community locally and actively inviting people to join.   Long term:   * We will help to maintain an active list of members/contributors in the Cochrane membership database * We will support members in their engagement with Cochrane (e.g. help them reach appropriate contacts in Cochrane, or find appropriate tasks they can engage with). * We will provide opportunities for members in the area to take on leadership roles to ensure appropriate generational change. * We will support CRGs or other Groups in resolving disputes relating to authors in the country. |

Tier 4: Additional Functions

There is no expectation that Affiliates will take on additional functions, in fact we expect most will not do so. However, where local funding or other factors support take on more than the core functions of Affiliates then they can add them in this section so that this additional contribution to Cochrane is captured.

The additional functions available to all Centres, Associate Centres and Affiliates are listed here along with a more generic section referred to as “Additional Work”. By Additional work we mean any other activities you undertake as a Cochrane Group that you would like to record as part of your contribution to Cochrane.

| Functional Area | Tier | How this function will be delivered | Short and long term “SMART” targets. |
| --- | --- | --- | --- |
| Goal One: Producing Evidence | | | |
| To undertake searching of local sources, especially non-English sources to contribute to the development of CENTRAL, Cochrane’s register of controlled trials. (Optional) | Four |  |  |
| Goal Two: Making our Evidence Accessible | | | |
| To support the work of Cochrane’s consumer network by hosting/supporting a ‘consumer champion’. (Optional) | Four |  |  |
| To undertake Knowledge Translation (KT) work or work with other Groups in Cochrane to implement KT initiatives locally. (Optional) | Four |  |  |
| To support or lead translation initiatives to increase the accessibility of Cochrane Evidence in their native language. (Optional) | Four | 1. We will support the translation of Cochrane Evidence by increasing the accessibility of Cochrane Evidence in our three native languages (Bosnian, Croatian, and Serbian). | Short term:   * Translation of at least 50 Cochrane PLSs in the next year into all three languages.   Long term:   * We plan to translate 150 Cochrane PLSs into all three languages in the next three year period. |
| Additional work | | | |
| Additional work the Affiliate carries out under Goal One. |  |  |  |
| Additional work the Affiliate carries out under Goal Two. |  |  |  |
| Additional work the Affiliate carries out under Goal Three. |  |  |  |
| Additional work the Affiliatecarries out under Goal Four. |  |  |  |

# Specialisms

Most Affiliates specialise in a certain function or area of work to some degree. Please give details of any particular specialisms of your Affiliate, and where you feel that work in your specialist area means you are delivering less in other functional areas please explain this.

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| We will specialize in providing training to volunteers for the translation of Cochrane PLSs into the three official languages of Bosnia and Herzegovina (Bosnian, Croatian and Serbian). Also, we will specialize in assisting healthcare professionals in the whole of Bosnia and Herzegovina with finding reliable evidence for clinical questions. Over time, we will probably develop other specialisms. |

# Challenges and Risks

Please provide details of any challenges or risks that might affect your Affiliate’s ability to complete its work over the next three years.

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| Lack of funding and experience can be a great risk that might affect our ability to fulfil our goals. B&H is still a deeply politically divided country, which will present an obstacle in getting adequate support, including financial, for establishment of an activity at the level of the whole country. There are only two Ministries operating for the whole country, but we are sure that establishing a Cochrane Affiliate will help in overcoming these barriers among the peoples of B&H and support cooperation and science in the whole region, as well as act as a valuable instrument of peace and reconciliation. We also expect that Cochrane Croatia's experience and support will be of great help to us. |

# Development plan

Please provide details of any plans you may have to grow your Affiliate’s activities; or develop into becoming an Associate Centre. Please note, it is not a requirement that Affiliates develop into Associate Centres.

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| We want to establish a formal Cochrane presence in our country. |

Version control

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| Document created: | 9 September 2016 |
| Document last updated: | 30 September 2016 |
| Document version: | 0.2 |
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Index of documentation relating to Geographic Groups

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# Appendix 1: Functionsof Centres

Thefunctions of Centres and other geographically-oriented Cochrane structures are all directly built on *Strategy to 2020* objectives. The functions are in a tiered hierarchy. Tier One functions must be performed by any Cochrane Group, however big or small. Tier Two functions must be performed by Associate Centres (formerly Branches) and Centres. Tier Three are functions that Centres must perform as well as those in Tiers One and Two. Tier Four are additional functions that any Cochrane Group would be encouraged to consider, however, Centres must perform at least one Tier Four function. These functions are written as: “It is a core function of Cochrane Centres [to…]”

* 1. The functions at a glance

How the tiers map to Groups