

## A framework for effective collaboration between specialist and broad-spectrum groups for delivering priority Cochrane reviews

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### Abstract

**Objectives:** We aimed to develop and pilot a process for joint working between Cochrane Review Groups (specialist-area groups responsible for producing Cochrane reviews) and Cochrane Fields (broad-spectrum interest groups), for identifying high priority review topics and enhancing quality and dissemination of priority reviews.

**Study Design and Setting:** We developed and piloted a framework for collaboration between a Cochrane Review Group (specializing in musculoskeletal injuries) and a Cochrane Field (focusing on health care of older people) for identifying, delivering, and disseminating priority Cochrane intervention reviews using hip fracture rehabilitation as an exemplar. The processes adopted included consultation of members of both the entities, mapping of trials from the Review Group's Specialized Register, jointly establishing criteria for topic prioritization, identification of researchers, and facilitating provision of expert peer review from the field.

**Results:** A framework for effective collaboration between a Cochrane Review Group and Cochrane Field for identifying and delivering priority Cochrane Reviews was devised and piloted. Additionally, two new Cochrane reviews, preceded by protocols, were published.

**Conclusion:** The project demonstrated the feasibility and potential benefits of a structured collaboration between a Cochrane Review Group and a Cochrane Field for the identification and production of Cochrane reviews on priority topics. © 2013 Elsevier Inc. All rights reserved.

**Keywords:** Health priorities; Hip fractures; Rehabilitation; Systematic reviews; Older people; Collaboration

### 1. Introduction

Two key types of entities in the Cochrane Collaboration are Cochrane Review Groups (Review Groups) and Cochrane Fields (Fields). The main work in preparing and maintaining Cochrane Reviews is done by members of 52 Review Groups, most of which focus on a specific health care area. That of the Bone, Joint, and Muscle Trauma Group is musculoskeletal injuries, of which osteoporotic fractures in older people form a major category. Fields have a more general role, including ensuring that priorities and perspectives within their domain are reflected in the work of Review Groups. Subject areas of Fields include types of interventions, such as complementary medicines,

and types of consumers, such as children and older people. One of the main aims of the Cochrane Healthcare of Older People Field is to support Cochrane Review Groups in conducting high-quality relevant reviews for frail or dependent older adults.

Fracture of the proximal femur (henceforth referred to as hip fracture) is a major injury in terms of incidence and increasing societal burden [1]. Most people with hip fracture are old (mean age typically around 80 years in industrialized societies), female, and frail. Between 12% and 37% die within the first year [2] and most survivors fail to regain their former levels of mobility and activity and become more dependent [3]. For some, their dread of moving into a nursing home becomes a reality [4]. The topic of rehabilitation after hip fracture falls unambiguously within the scope of the Health Care of Older People Field. Both Cochrane entities recognized that there were important gaps in coverage by Cochrane Reviews on this topic. Additionally, there was recognition that there were unresolved

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**What is new?**

- Effective collaboration between specialist (Cochrane Review Groups) and broad-spectrum (Cochrane Fields) groups in identifying and delivering Cochrane reviews on priority health care topics is feasible and productive.
- A piloted framework for guiding this process is now available.
- Cochrane Review Groups and Cochrane Fields should consider increased engagement in areas of mutual interest.
- Funding to both entities to support this activity is required.

difficulties in question formulation for this topic, especially in terms of the complexity of rehabilitation interventions and the particular patient group.

Before the establishment of the project, the Field had had no engagement with the Bone, Joint, and Muscle Trauma Group. Members of both entities concluded that the project presented not only an opportunity to remedy this but also to explore ways of optimizing working together.

## 2. Objectives

We aimed to pilot processes toward harnessing the potential for Fields to inform the work of Review Groups, with the objective of identifying high-priority subjects for review and enhancing quality and improving dissemination of priority Cochrane Reviews. Commensurate with this is the importance to Fields of engaging with Review Groups on projects of mutual concern. Our specific objectives were to present a piloted framework for effective collaboration between a Review Group and a Field for identifying and delivering on priority topics; and in the process, to produce two Cochrane reviews on key topics relating to hip fracture rehabilitation.

## 3. Study design

Consensus development of joint working practices by an expert group comprising editorial staff of a Cochrane Review Group and convenors of a Cochrane Field.

## 4. Methods

A generic framework for collaboration was developed and piloted in the context of the identification, delivery, and dissemination of two priority topics in hip fracture

rehabilitation. After an initial “scene setting” teleconference of the project group in preparation for a formal face-to-face project meeting, subsequent meetings of the project group were based on need, availability, and opportunity (e.g., the Cochrane Colloquium held in Freiburg, Germany, October 2008). In the following, people’s contributions are identified only where specific expertise or role was required.

### 4.1. Identification of priority topic

There were three initial activities toward the formulation of a “list of priorities or gaps.” First, as one way of obtaining an independent and informed perspective, an expert (both a practicing clinician and guideline developer) in the subject area was identified and approached for their “list of priorities or gaps” within hip fracture rehabilitation. Second, two Review Group members of the project group developed a “conceptual framework” (formed round key treatment decisions along the patient pathway) for hip fracture management, including rehabilitation, based on Scottish Intercollegiate Guidelines Network recommendations [5]. The framework incorporated titles of current relevant Cochrane reviews and helped to identify gaps. Last, information and insights were incorporated from the general scoping exercise for the Field that identified and categorized Cochrane reviews focused on health care issues for older people (separate project) [6].

The subsequent multistep process for topic identification began with a consultation of Review Group and Field members ( $n = 103$ ) identified via the Review Group or Field with a special interest in the area of hip fracture rehabilitation and/or care and welfare of older people. An e-mail letter was circulated from the Field asking for “your thoughts and comments regarding priority areas in hip fracture rehabilitation, and where you would like to see a Cochrane systematic review performed.” The letter included a preliminary list of areas, not already covered in Cochrane reviews, which had been suggested as priorities and listed a couple of related issues (multicomponent interventions and timing of rehabilitation) that they “may like to consider and also comment on.” The responses were collated and tabulated by the participating Field convenor (D.J.S.) and circulated to the project group for their input. The Bone, Joint, and Muscle Trauma Group’s Trial Search Coordinator, an information specialist (J.C.E.), searched the Group’s Specialized Register for trials related to hip fracture rehabilitation, and after consultation with H.H.H. (an established reviewer in this area), mapped these to the feedback table. The project group decided on the following criteria for topic prioritization:

- no current Cochrane review on this topic,
- must fall under the Review Group’s scope,
- at least two fully published trials, and
- the topic must have been identified by the feedback.

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