NIHR Cochrane Review Group Infrastructure Award

Annual Report for 2013

Reporting period for activity and outputs: 1 Jan 2013 to 31 Dec 2013.¹

Report submission date: by 1 May 2014 (latest).

Please use this form only for your NIHR Infrastructure Award annual report and return it by email attachment as a Word document using the filename format: [abbreviated name of your Cochrane Review Group] Annual Report 2013.

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<thead>
<tr>
<th>Name of Cochrane Review Group:</th>
<th>Pain, Palliative and Supportive Care</th>
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<tr>
<td>Name of host institution:</td>
<td>The Churchill Hospital, Oxford</td>
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<tbody>
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2a. What formal training in the conduct of systematic reviews has been provided by staff at the editorial base?

PaPaS CRG members provided the following training in 2013:

Author, Sheena Derry:
- Delivered training for review authors on developing a protocol at the UK Cochrane Centre, on: April 10th and 11th, October 15th and 16th, and December 11th and 12th 2013.

Editor, Professor Phil Wiffen:
- Delivered training for review authors: two four day courses in Shanghai July 2013, two one day courses Bath University in 2013.

PaPaS Co-ordinating Editor, Professor Chris Eccleston: no formal training. Mentorship, consultation, and advice on a range of titles and to novice authors. Multiple presentations at scientific meetings on PaPaS, Cochrane, and Evidence Based Medicine.

PaPaS editor, Professor Andrew Moore:
- No specific training other than some training for various medical specialities in Cancun (mainly S and C America).

2b. What Cochrane-related training have staff of the editorial base received, and how has it been provided?

The Co-ordinating Editor, Managing Editor, one Assistant ME and the TSC attended the UK and Ireland 21st Anniversary Symposium, Oxford, UK [April 2013].
The Co-Ed, ME and one AME attended The Cochrane Collaboration 21st Colloquium, Quebec, Canada [Sept 2013]: training, workshops and plenaries were provided on MECIR standards, Archie/RevMan and Cochrane tech, and other recent developments within the Collaboration.
The ME and one AME attended the UK Cochrane Centre Social Media training in June 2013.
The TSC has attended training sessions about the Cochrane Register of Studies (CRS) and the Cochrane Register of Studies Online (CRSO).

3. What outputs have been accomplished during the reporting period?

[Please complete the tables A – G provided in the appendix. If your CRG is associated with a NIHR Cochrane Programme Grant, you must list separately those reviews and review updates undertaken as part of that programme.]

Please state your 2012 impact factor (as provided by Wiley) here: 5.558

4. What progress has been made against each objective in your business plan?

[Please provide a short statement under each objective, identifying success against each objective as set out in your Business Plan. Suggested maximum of half an A4 page for each objective]

PaPaS Business plan, 2010-2015

1. Establishing and maintaining the efficient administration of the CRG’s editorial base, including attracting new and maintaining existing funding.

a) Secure a further DH grant to help further support review development.
NIHR Infrastructure funding awarded for 2015-2020: Band 3 £156,236 annually from April 2015.
NIHR Programme Grant awarded from 01 June 2014 for 36 months. Funding from International Headache Society for Assistant Managing Editor (4 hours per week, 0.1 FTE) secured from 1st January 2013 for three years.
b) Increase our presence at relevant Pain and Palliative Care meetings worldwide to increase the variety and number of contributors.

In 2013, PaPaS editorial staff attended the following meetings:
- The Cochrane Collaboration Mid-Year Meeting, and UK and Ireland 21st Anniversary Symposium, Oxford, UK
- The British Pain Society 2013 Annual Scientific Meeting, Bournemouth, UK
- The Cochrane Collaboration 21st Colloquium, Quebec

PaPaS Co-ordinating Editor, Professor Chris Eccleston:
- IVth international symposium on children and pain (May 2013: Tarragona, Spain)
- 1st invited international speaker at the Society of Pediatric Psychology Annual Conference (SPPAC) (March 2014: Philadelphia, USA)

PaPaS senior editor, Professor Andrew Moore:
- National Acute Pain Symposium (23rd Year) (Chester)
- British Pain Society 2013 (Bournemouth)
- Pharmacy meeting (Birmingham)
- Dentist meeting (Birmingham)
- Various group meetings in Far East (Singapore, Taiwan, Hong Kong)
- Swedish Anaesthetic meeting (Gothenburg)
- Asian and Oceanic Society of Regional Anaesthesia and Pain Medicine (Kuching, Sarawak)
- German Pain Soc (Hamburg)
- Tutzing pain meeting (Munich)

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- Swedish Anaesthetic meeting (Gothenburg)
- Asian and Oceanic Society of Regional Anaesthesia and Pain Medicine (Kuching, Sarawak)
- German Pain Soc (Hamburg)
- Tutzing pain meeting (Munich)

C) Support the Headache Assistant ME post for at least two days a month to produce Headache reviews, and seek alternative funding when necessary.

Funding from International Headache Society for Assistant Managing Editor (4 hours per week, 0.1 FTE) secured from 1st January 2013 for three years.

d) Establish an audit system and monitor the timeliness of review production.

The ME has developed a 'Dashboard of Critical Features' report which is circulated regularly with core editorial staff: the report includes total publications per month, time scales for sections of the editorial process, and screening report results. The ME is in discussion with other MEs and the Cochrane Information and Knowledge Management (IKMD) team with regards to implementing a 'one-click' report from the database, Archie, which could provide this information automatically.

We hold regular team meetings with core staff to discuss the editorial process. The ME circulates workflow reports for editorial staff on a weekly basis. The editorial team is working to agreed internal targets for timeliness, and we are developing methods to monitor adherence to these timelines (as mentioned above). The website has been updated to inform authors of the Collaboration’s and PaPaS’s expectations. An Updates Manager has been appointed to prioritise out of date titles, i.e. older than 2 years.

e) Annual appraisals to discuss past and future work and to set individual objectives.

Annual appraisals are held for payroll staff (ME, AME), and ‘catch up’ discussions held on regular basis between ME and AME/TSC by email and phone/Skype, and face to face when feasible.

f) Investigate potential sources of funds above those already explored to further support the work of the group.

We sought additional funding as follows:
- Marie Curie: the PaPaS Co-ordinating Editor is planning to meet with the Chief Executive to discuss funding opportunities and possible programme grant activity in January 2014.
- NIHR Incentive grants awarded for 2 reviews: Topical lidocaine for neuropathic pain and fibromyalgia; Psychological therapies for the management of chronic pain (internet delivered) in adults [published February 2014].
- Cochrane Collaboration Discretionary Fund: proposal title ‘Improving the Quality of Systematic Review Production’ to develop a process management tool for tracking review production, and how to monitor efficiency. Bid unsuccessful.
- The Clulow Award, British Pain Society: Bid unsuccessful.
- Initial discussions with other Cochrane review groups (namely Musculoskeletal and Neuromuscular Diseases) are on-going for an application to the Cochrane Collaboration’s Methods Innovation Fund, on behalf of the Methods Application and Review Standards Advisory Committee (MARS).

\[g\] Prepare Business plan for Department of Health (DH) on an annual basis.
On-going.

2. Selecting and prioritising systematic review topics and titles.

a) Ensure the scope matches current requirements for clinicians in practice and work on seeking priority topic titles that can provide answers for healthcare providers worldwide.

PaPaS editor Andrew Moore developed a form to invite suggestions for new review titles: this was initially circulated with clinicians at the National Acute Pain Symposium (23rd Year) (Chester). We are planning to develop a ‘vacant priority titles’ page on our website in 2014/15 to invite authors to bid for priority titles in all topic areas within our scope that need a new author team.

We held a priority-setting meeting in 2013 with Oxford-based pain relief nurses and clinicians: as a result of this meeting, we collated list of priority topics for potential reviews. These are being assessed and considered for inclusion on the upcoming ‘vacant priority titles’ page.

The PaPaS ME is a member of the Data Assessment Group for The Palliative and end of life care Priority Setting Partnership (PeolcPSP), established by James Lind Alliance and Marie Curie.

PaPaS editors had a joint meeting with the International Association for the Study of Pain (IASP) Special Interest Group(SIG) on Neuropathic pain, and established a priority list of topics for evidence review.

PaPaS editors contributed to the development of a new reporting guideline for social and psychological interventions with the Consolidated Standards for Reporting Trials [CONSORT] Group to develop CONSORT-SPI: an official Extension for Social and Psychological Interventions.

The PaPaS ME attended the launch event of the Oxford Headache Centre in Oxford; we circulated the title suggestion form amongst the delegates, and added it to our website; we extended an invitation to Director to visit PaPaS.

PaPaS is a registered stakeholder with NHS England for the following new guidelines and quality standards:
- Neuropathic pain - pharmacological management: guideline consultation
- Clinical Reference Group; The Specialised Commissioning Team at NHS England- D08. Specialised Pain
- Osteoarthritis
- Older people with long-term conditions
- Potential future public health quality standard topics
- Proposed static list
- Care of the dying adult
- Children and young people with cancer (quality standard)
Policy makers/ guidelines developers: please see Section 9 for additional details of our engagement with NICE and SIGN in 2013.

We are planning a meeting in 2014 between PaPaS and the Cochrane Neuromuscular Diseases Group to discuss collaboration with NICE and NeupSIG. The aim will be to identify ways to encourage these two entities to use our evidence and reference our reviews, eg in neuropathic pain.

Potential contributors can complete the Cochrane Collaboration’s approved ‘Contact Information Form’ or submit a Review Proposal Form for assessment; both forms are available to download from our website. We aim to match the level of expertise and the skills of potential authors to the complexity and relevance of the reviews for which we require additional authors.

We have appointed a new Updates Manager to assess our out-of-date reviews. Responsibilities include: determining the priority for updating (i.e. new evidence un/available), contacting the original author teams, and assessing titles for suitability for withdrawing and starting with a new protocol. We aim to regularly assess all titles that are older than 2 years (i.e. since publication of the protocol/review, or title registration) for relevance and adherence to current standards.

b) Arrange regular meetings for the Editors as of 2010 onwards to further support the work of the Editorial base and to advise on direction.

The most recent meeting for PaPaS editors was held February 2013. New term for editors begins April 2014, after which a date for the next meeting will be confirmed. These meetings provide the opportunity to discuss the current status of the review group, and emerging issues within our scope.

c) Improve the expertise of review team authors submitting titles to ensure increased quality of reviews published by the PaPaS review group.

We expect at least one author experienced in Cochrane reviews, and at least one author whose first language is English: these expectations are clearly stated on our website and on the Review Proposal Form.

We use a bespoke RevMan template that lists all relevant mandatory MECIR standards in the appropriate section, and make these pdf documents available to all authors. We use template emails and standard guidance documents that are sent to all authors at protocol, review and update stages. We routinely share the PaPaS author and referee guide (AUREF) with all authors and contributors.

We use the Cochrane Editorial Resource Committee (ERC) approved template documents as the basis for our standard documentation. We have developed a draft review proposal form for overviews and a peer referee checklist for overviews, which are currently being trialled.

We have incorporated the list of ‘common errors’ identified by the CEU’s screening project into the early editorial process for all new reviews.

We are implementing the use of ‘iThenticate: Cross Check’ for editorial staff to check all reviews for plagiarism, and the PaPaS ME was involved in the development of the Collaboration’s new plagiarism policy (for publication 2014).

We circulate two newsletters every year to inform authors of latest developments within the Collaboration, to inform them of the new screening process, MECIR standards, Archie ‘tickets’, and more. There is an open invite to new authors, and authors at update stage, to visit Oxford for supervision and advice.

The PaPaS website was updated in 2013 to include the latest information, links and documentation relevant to our contributors. Please see the new ‘Resource Hub’ for specific guidance documents and links for authors: http://papas.cochrane.org/resource-hub

The ME and AME are planning to set up regular editorial meetings with other Cochrane Review Groups based in the local area, to start in 2014. This will provide the opportunity to share experiences and expertise with other CRG staff, with the aim of improving our editorial process and introducing efficiencies where possible.
The TSC develops search strategies for all draft protocols, reviews and review updates and checks the search sections when the authors submit their first drafts. The TSC also offers services as required to develop search strategies on behalf of the authors. The TSC submits all eligible references from Included Studies for publication on CENTRAL, and adds references from Included Studies to the group’s Trials Register.

d) Co-ordinating Editor to reserve the right to withdraw a title at the draft protocol stage if the author appears not to be writing to the expected standards.

An Updates Manager is in post, whose role it is to assess and prioritise out of date titles. A PaPaS Updates Policy for managing scenarios (e.g. authors unavailable, starting with a new team or a new protocol) is in development. We are watching with interest the Cochrane Collaboration’s on-going discussion on how to manage out of date reviews, which is expected to involve an expanded classification system within the database, Archie.

e) Review and refine the scope of our review group with particular regard to a better definition of Supportive Care and Palliative Care.


5a. How has your CRG established plans to ensure priority topics in your topic area are covered and are up to date?

[Please provide a description of the approaches taken to prioritisation of topics and reviews by your group, and identify whether the approach is a) Analytical e.g. looking at trials registers; b) Internal CRG consultation e.g. editorial base/small group analysis of out of date reviews; or c) External CRG consultation e.g. patient organisations/policy makers/clinical experts]

We identify priorities through internal and external consultation, and a combination of peer group presentations and reviews at national and international congresses. We regularly make use of the IASP NeuPSIG (The International Association for the Study of Pain Special Interest Group on Neuropathic Pain) and our Contact Editors for registering and developing systematic reviews. We engage with patient forum panels of key constituents, for example professional groups, patients, etc. We also hold discussions with guidelines developers.

We have a PaPaS protocol for assessing reviews for updating based on a hierarchy of decisions, namely the relevance of the question, availability of the author team, any new evidence, and whether the conclusions are likely to change.

We continually assess our resources against the availability and capability of the author team. Our external stakeholders include the following:
The Special Interest Group on Neuropathic Pain (NeuPSIG), of the International Association for the Study of Pain (IASP).
Dr Gavin Stewart, of the Statistical Methods Group.
WHO: World Health Organisation’s essential medicines list
IMMPACT (Initiative on Methods, Measurement, and Pain Assessment in Clinical Trials)
OMERACT (Outcome Measures in Rheumatology): an independent initiative of international health professionals interested in outcome measures in rheumatology.

5b. How does your CRG ensure that priority setting plans remain up to date?

[Please provide a description of the approaches taken to ensure that priorities are reviewed and kept up to date.]

This is an on-going assessment and forms part of our frequent team meetings as a standing item, and we are in regular discussions with stakeholders and collaborators to monitor our progress. We intend to hold another priority-setting meeting with the Oxford-based pain clinicians in 2014.

We have significantly increased our Social Media presence via Twitter (@CochranePaPaS), from approx. 300 Followers in June 2013 to more than 800 by December. Our Followers include pain clinicians, palliative care clinicians, policy makers, nurses, carers, students, and Cochrane authors, so we are visible and available to discuss relevant priorities and topics. We regularly
Tweet our new reviews, links to the Cochrane Library, any relevant news items, and other information that may be useful to our stakeholders. We encourage and actively participate in conversations and Tweetchats on Twitter. Discussions are on-going with regards a Wikipedia project with the Cochrane Editorial Unit. In 2014 we are planning to increase our focus on palliative care, which will involve engagement with clinicians and consumers in the palliative care community. In advance of the implementation of these plans, in 2013 we have made initial enquiries with UK clinicians and other leading professionals regarding their potential involvement and contribution. We plan to hold an initial strategy meeting in Winter 2014.

6. What arrangements have been in place over the past year for development and appraisal of editorial base staff employed using NIHR funding?

Salaried CRG staff (on Oxford University Hospital NHS Trust (OUH) payroll): Managing Editor (ME) and Assistant Managing Editor (AME).
The ME reports to the Co-ordinating Editor, and the AME reports to ME. Annual appraisals are held for the ME and AME, and agreed documentation is signed and kept on file. Appraisal forms are based upon the templates from Oxford University and OUH NHS Trust policy.
Any training opportunities identified are discussed and approved by Line Managers as appropriate. OUH Trust provides online Statutory and Mandatory training, to be completed annually/every three years as appropriate.

7a. Have there been any important changes to your staff, location or scope over the last year?
No significant changes.

7b. Do you anticipate any important changes to your staff, location or scope over the next year that you would like to bring to our attention?
- NIHR Programme Grant, start date 01 June 2014, will fund: a new part time Assistant Managing Editor, based in Oxford office, at 0.6 FTE; two senior editors at 0.2 FTE; dedicated systematic reviewers, one 0.5 and one 0.6 FTE; and a TSC funded for 0.2 FTE.
- Change/increase in editorial base, e.g. paediatric editor, new palliative care editor, from April 2014.
- Plans for prioritisation within topic area of palliative care/frailty/dementia. In 2014/15, we will be seeking support for a programme of work in palliative and supportive care, in particular for end of life care.

8. Does your Cochrane Review Group have a satellite or multiple satellites?
[If yes please provide brief details of this satellite and its location.]
No satellites.

9. Please provide any further information you wish to give that is not covered elsewhere in the report
Evidence of our impact on health guidelines and the wider community are listed below.

1. Citations of PaPaS reviews, or reviews by PaPaS editors, in SIGN Management of chronic pain guideline and BMJ editorial, collated December 2013:

Drugs for neuropathic pain, Eija Kalso, D J Aldington, R A Moore BMJ 2013;347:f7339
doi: 10.1136/bmj.f7339 (Published 19 December 2013)
Total PaPaS/editor references: 14

**PaPaS Guidance Document (1)**
Cochrane Pain, Palliative and Supportive Care Group Author and Referee Guide

**PaPaS reviews (7)**


Non-PaPaS reviews: authors RA Moore, S Derry, C Eccleston, and/or P Wiffen (6)


**SIGN Management of chronic pain: A national clinical guideline December 2013**
Scottish Intercollegiate Guidelines Network (SIGN).
(SIGN publication no. 136). [December 2013]. Available from URL: http://www.sign.ac.uk
SIGN is grateful to the following people who have contributed to the development of the guideline.
Professor Andrew Moore Deputy Editor, Cochrane Pain, Palliative and Supportive Care Group, Oxford.

PaPaS reviews (19)


Non-PaPaS reviews: authors RA Moore, S Derry, C Eccleston, and/or P Wiffen (6)


Managing chronic pain: a clinical challenge: new SIGN guidelines provide a practical evidence-based approach and identify research gaps

L. A. Colvin, A. Stein and B. H. Smith on behalf of the SIGN Chronic Pain guideline development group

Total PaPaS/editor references: 4

PaPaS reviews (0)

Non-PaPaS reviews: authors RA Moore, S Derry, C Eccleston, and/or P Wiffen (4)


3 - Three requests from Cochrane Nursing Care Field (CNCF). The CNCF has established a program whereby ‘Cochrane Corner’ columns (summaries of recent nursing-care-relevant Cochrane Reviews) are regularly published in collaborating nursing-care-related journals:
- Topical capsicain (low concentration) for chronic neuropathic pain in adults.
- Effectiveness and cost-effectiveness of home palliative care services for adults with advanced illness and their caregivers
- Nutritional screening for improving professional practice for patient outcomes in hospital and primary care settings

4 - Four Evidently Cochrane blogs featuring PaPaS reviews:
- Migraine, art and medicine: inc. 6 reviews http://evidentlycochrane.wordpress.com/2013/11/06/migraine-art-and-medicine/

5 – Two requests for podcasts:
- Pharmacotherapy for the prevention of chronic pain after surgery in adults
- Interventions for the symptoms and signs resulting from jellyfish stings

6 - Five PaPaS reviews featured on MDLinx [www.MDLinx.com] ’an award-winning, practical medical information tool that busy physicians and healthcare professionals use to stay current with the latest clinical research and healthcare news in the field of medicine’: 
- Aspirin with or without an antiemetic for acute migraine headaches in adults
- Paracetamol (acetaminophen) with or without an antiemetic for acute migraine headaches in adults
- Ibuprofen with or without an antiemetic for acute migraine headaches in adults
- Topiramate for neuropathic pain and fibromyalgia in adults
- Oral morphine for cancer pain

7 - The PaPaS ME contacted the Oxford Research Staff Society (OxRSS) and forwarded a PaPaS information leaflet for distribution amongst its members, in order to determine networking/research opportunities.

8 – Senior editor Andrew Moore was asked to provide a commentary on the following article:

9 - PaPaS author Chris Derry gave a talk to the Clinical Pharmacology Colloquium (British Pharmacological Society) entitled “Faster, higher, stronger. Formulation and efficacy of ibuprofen in acute pain”, which used data from Cochrane reviews and other work within Pain Research.

10 - In June 2013, PaPaS began using Twitter as a tool to support the dissemination of evidence. We more than tripled our number of Followers in 2013, to 800+ by December. Our 2014 communication strategy is available in the 5 year Business Plan report.

11 – Further details of our engagement with NICE and SIGN in 2013 are listed below.

June 2013: PaPaS meeting with Ms Sally Bailey, Senior Programme Manager, and Dr Tom Kenny, Director of External Relations, at National Institute for Health Research. As a result, PaPaS received their spreadsheet of the draft NICE 5-year work plan, encouraging us to be ‘proactive and responsive’ to current and upcoming priority topics.

June to July 2013: Extensive correspondence via email and telephone with Dr Phil Alderson, Associate Director, Centre for Clinical Practice, National Institute for Health and Care Excellence

October 2013: NICE Evidence Summaries on Unlicensed and Off-label medicines – request for expert comments sent to Professor Christopher Eccleston, who responded on 18 October.

General: We subscribe to NICE monthly newsletter (from enewsletter@website.nice.org.uk) and @Cochrane PaPaS follows @NICEcomms on Twitter.

Professor Andrew Moore, additional relevant publications:
- Expect analgesic failure, pursue analgesic success. BMJ 2013;346:f2690 doi: 10.1136/bmj.f2690 (Published 3 May 2013)

7 Please include any significant training (e.g. workshops, courses etc.) provided to those contributing to Cochrane reviews and other systematic reviews, but exclude occasional 1:1 support of authors of your reviews.
Certified as correct by:

Coordinating Editor: Professor Christopher Eccleston

Date: 01 May 2014

Address: Director, Centre for Pain Research
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Email: c.eccleston@bath.ac.uk

Telephone number: 01225 386439

Institution’s Finance Officer: Paul Betts
Signature: [Signature]
Date: 16/04/2014

Please return the completed form by email attachment to Ria Osborne at NETSCC (SRPinfo@southampton.ac.uk), by 1 May 2014 at the latest. Due to the deadline for preparing a management report for the Systematic Reviews Programme Advisory Group, extensions to this deadline cannot be granted.

NB: “wet-ink” signatures and subsequent paper copies of this report form are not required. Electronic or scanned signatures are sufficient for submission.