Cochrane Rehabilitation
Who we are, how we work, and how you can contribute - The Networking Strategy

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ESPRM Secretary General

@CarlotteK
@CochraneRehab
@ESPRM_
Nothing to disclose
Cochrane vision

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.
What does Cochrane do?

Cochrane gathers and summarizes the best evidence from research producing **systematic reviews and meta-analysis** including only Randomized Controlled Trials (RCTs).

Cochrane does not accept commercial or conflicted funding.
Cochrane Organization

**Review Groups**: systematic reviews (56)

**Methods Groups**: development of methods for reviews (17)

**Centres**: local knowledge translation
- >52 countries & regions

**Fields**: knowledge translation for a specific health community other than a condition (11)
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<thead>
<tr>
<th>Number</th>
<th>Group Name</th>
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<td>1</td>
<td>Acute Respiratory Infections Group</td>
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<td>Pregnancy and Childbirth Group</td>
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<td>Work Group</td>
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<td>56</td>
<td>Wounds Group</td>
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4 with >20 reviews of PRM interest

1. Back and Neck
2. Bone, Joint and Muscle Trauma
3. Musculoskeletal
4. Stroke

| 1. | Acute Respiratory Infections       | 15. | Incontinence                  |
| 2. | Airways                          | 16. | Injuries                     |
| 4. | Bone, Joint and Muscle Trauma    | 18. | Lung Cancer                  |
| 5. | Breast Cancer                    | 19. | Movement Disorders           |
| 6. | Cystic Fibrosis and Genetic Disorders | 20. | Multiple Sclerosis and Rare Diseases of the CNS |
| 9. | Ear Nose and Throat disorders    | 23. | Neuromuscular                |
| 10. | Eyes and Vision                  | 24. | Pain, Palliative and Supportive Care |
| 13. | Heart                            | 27. | Vascular                     |

Cochrane Fields

Focus on dimensions of health care other than a condition or topic

• the setting of care (primary care)
• the type of consumer (children, older people)
• or the type of provider (nursing).

Cochrane Rehabilitation focuses on a specific health strategy.
Stucki G, Bickenbach J.

Functioning: the third health indicator in the health system and the key indicator for rehabilitation.

Role of Cochrane Fields: a bridge

- facilitate work of Cochrane Review Groups
- ensure that Cochrane reviews are both relevant and accessible to their fellow specialists and consumers

Rehabilitation stakeholders side

Cochrane Groups side
Vision of Cochrane Rehabilitation

All rehabilitation professionals can apply Evidence Based Clinical Practice

Decision makers will be able to take decisions according to the best and most appropriate evidence
Goals

1. To connect stakeholders and individuals involved in production, dissemination, and implementation of evidence based clinical practice in rehabilitation, creating a global network

2. To undertake knowledge translation for Cochrane on reviews relevant to rehabilitation, with dissemination to stakeholders, in line with Cochrane’s knowledge translation strategy

3. To develop a register of Cochrane and non-Cochrane systematic reviews relevant to rehabilitation
Goals

4. To promote Evidence Based Clinical Practice and provide education and training on it and on systematic review methods to stakeholders

5. To review and strengthen methodology relevant to Evidence Based Clinical Practice to inform both rehabilitation and other Cochrane work related to rehabilitation and stimulating methodological developments in other Cochrane groups

6. To promote and advocate for Evidence Based Clinical Practice in rehabilitation to other Cochrane groups and wider rehabilitation stakeholders
Organization

Executive Committee
- Reviews Committee: Chair: W. Levack (NZL), Co-chair: F. Rathore (PAK)
- Methodology Committee: Chair: A. Malmivaara (FIN), Co-chair: T. Meyer (DEU)
- Education Committee: Chair: J. Patrick Engkasan (MYS), Co-Chair: E. Ilieva (BGR)
- Communication Committee: Chair: F. Gimigliano (ITA), Co-Chair: C. Kiekens (BEL)
- Publication Committee: Chair: A. Oral (Tur), Co-Chair: F. Grubisic (HRV)
- Representatives: LMIC: W. Levack (NZL)

Contributors
- 254 contributors from 54 countries of all continents

Partners
- To start in 2018

Advisory Board
- 5 World and 4 Regional Scientific Societies
- 12 Journals, 4 Experts
- 4 Representatives
- 3 Cochrane Groups

Directors
- Director: S. Negroni (ITA)
- Coordinator: C. Kiekens (BEL)

Offices
- Headquarters: IRCCS Don Gnocchi & University of Brescia
- Treasurer: R. Frischknecht (CHE)
- Fundraiser: A. Haig (USA)
Director

Define Knowledge Translation (KT) strategy
Set and maintain direction, scope and organization
Promote the aims and work of Cochrane within the Field’s area of care
Take responsibility for representing the Field at an international level
Link with groups in- and outside Cochrane
Allocate Field’s resources
  - Funds 2017-2019 for Headquarters secured

One of the 12 members of the KT Advisory Board of Cochrane
Field Coordinator

Define the **Networking strategy**

Coordinate and supervise work of committees, representatives, units/partners and individual members/contributors

Liaise with Managing Editors to ensure that Field is represented in appropriate CRGs
Headquarters team

Rovato Headquarter (Italy)
- Stefano Negrini, MD – Field Director
- Chiara Arienti, Mot Sci, DO – PhD Student
- Joel Pollet, PT – Researcher
- Sylvia Bergamini, PT - Researcher
- Roberta Bettinsoli, M Lang – Secretary

Leuven (Belgium)
- Carlotte Kiekens, MD – Field Coordinator
Advisory Board

Critically review the progress and achievements of CR based on its goals
Suggest new directions to advance CR, based on expressed needs from stakeholders, Cochrane or CR
Provide ad hoc advice on request
Support the dissemination strategy of CR
Establish important contacts
Maintain strict liaison with all Stakeholders
Advisory Board

3 Cochrane Groups
   1 Centre: Cochrane Italia
   2 Cochrane Review Groups: Musculoskeletal, Stroke

5 World Scientific Societies
   ISPO
   ISPRM
   WCPT
   WFNR
   WFOT
Advisory Board

4 Regional Scientific PRM Societies
AMLAR
AOSPRM
ESPRM
UEMS-PRM Section

4 Experts
Jianan Li, Luz Helena Lugo, Gerold Stucki, Sam Wu

4 Representatives
consumers (2), LMIC (2), WHO
Advisory Board
12 Journals

American Journal PMR
Archives PMR
Australian Occup Ther J
Clinical Rehabilitation
Developmental Neurorehabil
European J PRM

J Orth Sports Physical Therapy
J Rehabilitation Medicine
Manual Therapy
Neurorehab neural repair
Physical Therapy
Prosthetics Orthothotics Int
Advisory Board

First meeting in Buenos Aires during ISPRM 2017

Second meeting in Paris during ISPRM 2018
Administrative functions

- Treasurer
  - Rolf Frischknecht (CH)

- Fundraiser
  - Andy Haig (US)

Invited members of the EC
Executive Committee

To advise and assist the Field Director on managerial issues

Is composed by

• chairs of the Committees
• representative of Rehabilitation Professionals
• representative of LMICs
Organigram
Goal 3. To develop a register of Cochrane and non-Cochrane systematic reviews relevant to rehabilitation

“Tag” rehabilitation reviews within (and out of) the Cochrane database

The reviews are initially being tagged in three categories
• professional group
• health condition
• intervention type

At a later date, outcome categorised on the basis of ICF
List of Cochrane reviews of rehabilitation interest.

By subtopic:

- Health Conditions (284)
  - Cardiac (8)
  - Gynaecology or Urology (10)
  - Mental Health (7)
  - Neurological (65)
  - Older Adults (>65 years) (31)
  - Oncology (13)
- Orthopaedic or musculoskeletal (incl. pain conditions) (79)
  - Calcium and vitamin D for increasing bone mineral density in premenopausal women (protocol stage)
  - Acupuncture and related interventions for symptoms of chronic kidney disease
  - Acupuncture for neuropathic pain in adults
  - Anti-sclerostin antibodies for the treatment of osteoporosis (protocol stage)
  - Antidepressants for chronic non-cancer pain in children and adolescents
  - Antidepressants for osteoarthritis (protocol stage)
  - Antipsychotics for fibromyalgia in adults
  - Aquatic exercises for the treatment of lower and hip osteoarthritis
  - Back schools for acute and subacute non-specific low-back pain
Goal 2. To undertake **knowledge translation** for Cochrane on reviews relevant to rehabilitation, with dissemination to stakeholders, in line with Cochrane’s knowledge translation strategy.

Disseminate the available Cochrane evidence within the PRM community, other relevant health professionals, consumers and the public.

Website, Newsletter, Twitter, Facebook, YouTube channel, Blogshots.

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**Comunication Committee**

Chair: Francesca Gimigliano
Co-chair: Carlotte Kiekens
Publication Committee

Goal 2. To undertake knowledge translation for Cochrane on reviews relevant to rehabilitation, with dissemination to stakeholders, in line with Cochrane’s knowledge translation strategy.

Cochrane Corners in scientific journals
Cochrane Rehabilitation E-book

Chair: Aydan Oral
Co-Chair: Frane Grubisic
Education Committee

Goal 3. To promote Evidence Based Clinical Practice and provide education and training on it and on systematic review methods to stakeholders

Workshops and Courses on EBM and Cochrane

- ESPRM2018 Vilnius
- ISPRM2018 Paris

Chair: Julia Patrick Engkasan

Co-Chair: Elena Ileva
Methodology Committee

Goal 4. To review and strengthen methodology relevant to Evidence Based Clinical Practice to inform both rehabilitation and other Cochrane work related to rehabilitation and stimulating methodological developments in other Cochrane groups.

Focus on Methodological problems in PRM

- RCTs are difficult to conduct
- Complex interventions
- Behavioural components of interventions
- Measurement systems
- Use of the ICF framework in research

Chair: Antti Malmivaara
Co-Chair: Thorsten Meyer
Representatives

Low Middle Income Countries (LMIC)

• Ensuring that all the work of Cochrane Rehabilitation will reflect the different perspectives of the Low and Middle Income Countries.

Review selection process in Pakistan

LMIC
Farooq Rathore
Representatives

Rehabilitation Professionals

• Ensuring that all the work of Cochrane Rehabilitation reflect the different perspectives of the various people involved in the rehabilitation team, including professionals, consumers and care-givers.

Professional Societies and Journals in the Advisory Board

Rehabilitation professionals
Tracey Howe
Individual members/Contributors

Members of Cochrane Rehabilitation are recruited according to a top-down approach through specific calls following the tasks gradually produced by the committees.

All members providing support are credited in the website.

Currently 304 people from > 50 countries are members

Twitter: 932 Facebook: 1592 Newsletter: 426
Calls

We are now looking for:

- Translators
- Persons interested in Review Tagging Activities
- Bloggers
Units/Partners

Fulfil all the needs of a larger specific task of Cochrane PRM proposed by the committees

Ongoing discussion with Cochrane central

Units are recruited according to a bottom-up approach to produce big tasks under the guidance of one or more Committees

Contacts with eleven groups to launch the first Units in 2018
Cochrane Rehabilitation

Partners—work in progress

1. University of Antioquia (Colombia)
2. University of Warwick (England)
3. HochSchole Furtwangen (Germany)
4. World Federation of Neuro-Rehabilitation (Germany)
5. Bharath University (India)
6. Uniwersytetu Medycznego w Łodzi (Poland)
7. Nursing Midwifery and Allied Health Professions (Scotland)
8. Hospital Universitari Vall d'Hebron Barcelona (Spain)
9. Turkish Society of Physical Medicine and Rehabilitation (Turkey)
10. Faculty of Medicine, University of Banja Luka (Bosnia)
Partners
Memorandum of understanding

- International organisation
- ISPRM
- ESPRM
- ....
Partners

Memorandum of understanding

- National PRM Societies
- Croatia April 2018
- Belgium December 2018
- Italy September 2018
- …
Thank you 😊
Join us, follow us!

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http://rehabilitation.cochrane.org
cochrane.rehabilitation@gmail.com
@CochraneRehab

Trusted evidence.
Informed decisions.
Better health.