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Cochrane Methods Adverse Effects	• Development of a new online training platform, under the Cochrane Learning Live Program, to help reviewers tackle specific challenges in extracting data on adverse effects.
	  ○ Adverse effects 1: How to overcome the challenge of reviewing adverse effects. [Yoon Loke - April 2017]
	  ○ Adverse effects 2: Searching for adverse effects. [Su Golder - May 2017]
	• Collaboration with Tom Jefferson and colleagues on 'Interim guidance on the inclusion of clinical study reports and other regulatory documents in Cochrane Reviews: progress report', which has important implications for reviews on adverse effects.
	• The group held a successful two-day meeting in September 2016 entitled '*Development of guidance for the identification and quality assessment of adverse effects in systematic reviews'*. This meeting was supported by a number of external experts.

Cochrane Methods Priority Setting	• Involvement with the REPRISE Project (Reporting Principles for Research Priority Setting with Stakeholders). This collaboration will continue and build upon the preliminary work done by the Group for reporting guidelines for priority setting exercises.* • Relaunch of the Plain Language Summary Project. • Evaluating the work of funding agencies (REWARD Alliance). Good practices on priority setting between funding agencies have been identified, and work with these agencies is underway to identify how best to communicate their roles with the Cochrane community. Specifically the Group is working to increase opportunities for methodological research grants for which the group can apply.* • The Global Health Trials Methodological Research Agenda (a priority setting exercise to help low- and middle-income countries to identify key methodological research priorities.
Cochrane Methods Bias	• Participated in developing a tool for assessing the severity of conflicts of interest in medical research (the TACIT project). This work will continue throughout 2017. • Led work on developing a tool for assessing risk of bias due to missing results. This work will continue throughout 2017.
Cochrane Methods Comparing Multiple Interventions	• CINeMA (Confidence In Network Meta-Analysis) is an online implementation of the Group's system for assessing certainty in evidence from network meta-analysis.* It will provide an interactive environment for supporting judgements about rating down evidence in a GRADE-type approach. The initial work on the system was supported by a grant from the Methods Infrastructure Fund. The development of CINeMa has been supported by a grant from the Campbell Collaboration.
Cochrane Methods Equity	• In development: reporting guideline for equity-informing RCTs (CONSORT-Equity) • The Sex/Gender Methods Subgroup was awarded a planning grant to develop a larger grant to assess sex/gender-based analysis in cardiovascular trials. • Awarded funding from the Canadian Institutes of Health Research (CIHR) to develop guidance for review authors and editors about how and when to replicate systematic reviews.

* Items also reported in Key Achievements

	• International collaboration on multiple projects related to multi-stakeholder engagement; including defining "meaningful engagement", identifying barriers and facilitators to stakeholder engagement in systematic reviews and guideline development, and developing a framework to evaluate stakeholder engagement. • Migrant Health subgroup is leading a series of guidelines on screening and management of infectious diseases in migrants (protocol in press with BMJ Open) – no further information available at this point • Development of a GRADE FACE survey to assess the feasibility, acceptability, cost and equity of emerging guidelines. This work has substantial international involvement with many European colleagues. We anticipate that the guidance statements and the suite of systematic reviews will be published in late 2017. The GRADE FACE survey has been used in four clinical guidelines from the Canadian Task Force on Preventive Health Care, most recently for the guideline on Screening for Hepatitis C. Funding is being sought to integrate this tool into the GRADEPro software. • Two highly relevant equity projects have started recently: evaluation of whether the use of home-based records improves care in antenatal, postnatal, new-born, child and adolescent health and; development of guidelines appropriate for care of individuals in vulnerable housing.
Cochrane Methods GRADEing	• Work continues on a Methods Innovation Fund (MIF) Project that focuses on integrating non-randomized studies in Summary of Findings (SoF) tables and collaborating on developing SoF tables for network meta-analysis, and values and preference studies. • Completed MIF research project: evaluated the degree of acceptable flexibility beyond standard presentation of SoF tables. The second aim of the project was to provide guidance on the standardization of comments and footnotes for SoF tables, with a focus on the explanations for downgrading and upgrading the quality of a body of evidence. The third aim of the project was to develop guidance on the information to include in SoF tables in diagnostic test accuracy reviews.* • Ongoing MIF research project: **'**Summary of findings' (SoF) tables in diagnostic test accuracy reviews'**.** • Guidance for rigorous assessment of risk of bias associated with missing participant outcome data in systematic reviews: work was based on a systematic survey of published methodological research, iterative discussions with experts, testing in previously published and ongoing systematic reviews, and feedback from the GRADE Working Group. • Development of standardized reporting and wording of results and interpretation**:** to improve standardized wording to present results and conclusions in the sections of Cochrane Reviews. A draft list of statements has been developed and various groups are using them. The next step will be to survey authors, researchers and readers about the acceptability of the statements. • Assessing the quality of evidence using GRADE and presenting results from non-randomized studies in Cochrane systematic reviews**:** to provide assistance for Cochrane authors on how and when to include, assess, and present evidence obtained from NRS in a systematic review, and to facilitate the GRADE assessment in the SoF tables on a body of evidence from RS and NRS. • Network meta-analysis of intervention and 'Summary of findings' (SoF) tables**:** to develop, through user testing, an NMA-SoF table that displays NMA results for each outcome. Fifteen user interviews have been conducted so far, improving the format and presentation of the NMA SoF table. It expects that health professionals who want to summarize the main findings from NMAs in a condensed form will use the NMA-SoF tables.

* Items also reported in Key Achievements

	• Network meta-analysis interpretation based on components**:** to provide GRADE guidance for the interpretation of the results of NMAs based on two components: firstly, the ranking probabilities of interventions and/or surface under the cumulative ranking curve (SUCRA) and secondly, the certainty of the evidence for evidence synthesisers and decision makers. • Collaborating with Cochrane Complementary Medicine Field to write summaries of Cochrane systematic reviews in complementary and alternative medicine for publication in the European Journal of Integrative Medicine.
Cochrane Methods IPD Meta-analysis	• Following the plenary at the 2016 Cochrane Colloquium on "*Data transparency through an IPD meta-analysis lens*" a follow-on paper on data sharing from the perspective of an IPD systematic reviewer is in development. • Contributed to the European Clinical Research Infrastructure Network (ECRIN) consensus document for a common framework to provide access to IPD from clinical trials. Plan to publish an editorial alongside this consensus document to highlight remaining issues. • High level participation in discussions with the MRCT Centre and the Wellcome Trust aimed at spearheading a major initiative related to sharing of clinical trials data. • Attended the University College London and YODA Project joint meeting on facilitating data access to non-industry funded research. • Development of a series of articles on different types of IPD systematic reviews of e.g. efficacy, prognosis and diagnosis. • Editing a book on Evidence Synthesis using IPD (Wiley), which aims to be a highly practical guide to the concepts and methods, and will therefore draw on authors from across the group and the wider community of experts on IPD meta-analysis. • Input provided to the NextGen discussions of an 'IPD demonstrator'. This is envisaged as an interoperable system to integrate outputs from IPD meta-analysis with at least one source of external data (e.g. the electronic medical record), to "personalise" presentations of synthesised evidence for intervention effects to reflect known characteristics of individual patients. • One of the convenors has been invited to set up and a chair a group exploring IPD issues for Cochrane under the NextGen project. • IPD perspective will be covered in a major update of the *Handbook*
Cochrane Methods Information Retrieval	• Development of a filter, on behalf of the Cochrane Centralised search service (CSS), to identify controlled trials in CINAHL.* • Interim guidance on the inclusion of clinical study reports and other regulatory documents in Cochrane Reviews (led by Tom Jefferson, Acute Respiratory Infections Group, with input from the IRMG and a number of other Methods Groups): to develop guidance on how to decide whether to incorporate clinical study reports and other regulatory documents into Cochrane Reviews. • Collaborative research in to the best resources to search for economic evaluations following the closure of NHS Economic Evaluation Database and Health Economic Evaluation Database.

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Cochrane Methods NRS for Interventions	• Development of AMSTAR2- A redesign of the original AMSTAR tool to include the assessment of systematic reviews that include non-randomized interventions as well as randomized controlled trials.
	  ○ Piloting and reliability testing of AMSTAR 2 completed.
	  ○ Conducted a Nominal Group Process for AMSTAR2. Systematic review round table at the Ottawa Hospital Research Institute (OHRI).
	  ○ Publication submitted to BMJ and is awaiting peer review.
	• Development of The Risk Of Bias In Non-randomized Studies – of Interventions (ROBINS-I) assessment tool for different NRSI design (e.g. case-control, interrupted time series, controlled before-and-after studies, regression discontinuity and instrumental variable analyses).
	• Development of ROBIS: A new tool to assess risk of bias in systematic reviews

Cochrane Methods Patient Reported Outcomes	• Developed methods for analysing continuous data obtained from Patient Reported Outcome Measures (PROMs), and provided recommendations for use in 'Summary of findings' tables. • Engaged in identifying the Minimally Important Differences (MIDs) published on all Patient Reported Outcomes (PROs) in the literature, and is analysing the methods used to obtain these estimates. • Analysis of the methods used to identify and obtain the estimates of the Minimally Important Differences (MIDs) published on all patient reported outcomes. • Development of MetaPROM, a statistical tool, which performs fixed-effect and random-effects meta-analysis for continuous PROM data, and is particularly useful when the included trials report results using different PROMs. MetaPROM facilitates the use of a series of common and emerging statistical presentation formats including standardized mean difference (SMD), mean different (MD) in natural units of the most familiar instrument, MD in minimally important difference (MID) units, ratio of means, relative risk, odds ratio, risk difference and the number needed to treat for an additional beneficial outcome or an additional harmful outcome. • Development of a core credibility instrument of MID estimation that includes the following items: an anchor that represents a patient rating and is interpretable to the patient and clinician; the precision around the estimate; and the correlation between the anchor and PROM. An extension includes the following items: an author-selected threshold on the anchor that reflects a small but important difference; an optimal time period between baseline and follow-up measurement for MID estimation; and correlation of the transition rating with the pre, post, and change scores in the PROM. Our new instrument will allow users to determine the extent to which the design and conduct of studies measuring MIDs is likely to have protected against misleading estimates.
Cochrane Methods Prognosis	• Awarded 200K EURO grant from the Cochrane Strategic Methods Fund to develop approaches and teaching materials to enhance Systematic Reviews of prognosis studies in Cochrane. This work will engage both the group membership and developing Editorial Board. • Methods for systematic review and meta-analysis of prognostic factors and prediction modelling studies**:** funded by the Methods Innovation Fund this research is scheduled for completion in 2019. A number of papers on methods about how to perform systematic reviews (SRs) and meta-analyses (MAs) of prognostic studies have been published.
Cochrane Methods Prospective Meta-analysis	• Will expand its remit to incorporate prospective trial registration.

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	• The group's work is referenced in a report by the Council of International Organisations of Medical Sciences Working Group X – meta-analysis entitled 'Considerations for applying good meta-analysis practices to clinical safety data within the biopharmaceutical regulatory process'.
Cochrane Methods Qualitative and Implementation	• Contributed to development of the eMERGE: Meta-ethnography Reporting Guidelines Project (funded by National Institute for Health Research, UK). • Contributed to the ongoing development of the GRADE CERQual Approach for assessing the confidence of evidence from reviews of qualitative research. • Contributed to the development of forthcoming World Health Organization (WHO) methodological guidance for complex interventions. • Two Convenors are members of the project funded by the Cochrane Methods Innovation Fund for Quality Assessment of Qualitative Research (CAMELOT). • Contributed to the GRADE CERQual Subgroup on Dissemination Bias in Qualitative Evidence. • Represented on the "Overview of Good Practices for Synthesizing and Using Evidence in Health Care Decision Making: an International Society for Pharmacoeconomics and Outcome Research HTA Council Working Group", which is working on the role of qualitative evidence in HTA. • Contribution to Cochrane *Handbook* Chapter on Overviews of Reviews • Supervision of a doctoral project on the role of context in systematic reviews on early child development.
Cochrane Methods Rapid Reviews	**Completed** • Trading certainty for speed - how much uncertainty are decision makers and guideline developers willing to accept when using rapid review? An international survey. **In progress** • Assessing the validity of an ultra-rapid review strategy: four case studies from oncology and public health – a study protocol. • What is the relation of completeness of reporting of rapid reviews to publication status? A comparative, cross-sectional methodological study. • A cross-sectional, comparative methodological study of formatting characteristics of published and unpublished rapid review reports. • Evaluation of conduct characteristics of rapid reviews. • Developing an extension to PRISMA for rapid reviews. • Assessing rapid reviews as an information product per the BRIDGE criteria: an evaluation pilot study. • Rapid reviews 2.0 – a second look at the OHRI approach to conducting rapid evidence summaries. Revisions and updates to our methodology. • Systematic Prospective Assessment of Rapid Knowledge Synthesis SPARKS. • Contribution to the working group established to develop a global relay model for emerging and remerging infectious diseases. This is co-ordinated by the Epidemic Diseases Research Group Oxford (ERGO) on behalf of the UK Public Health Rapid Support Team. The launch of this pilot project is anticipated for July 2017. **Seeking funding** • Evaluating perspectives establishing guidance on the appropriateness of conducting rapid reviews.

* Items also reported in Key Achievements

	• Efforts to develop a Cochrane *Handbook* chapter on Rapid Reviews.
Cochrane Methods Screening and Diagnostic Tests	• Developing plain language summaries for DTA reviews: funded by the Methods Innovation Fund this research has recently been completed. The first draft of the template and guidance were launched during an oral presentation and a workshop at the 2016 Cochrane Colloquium. The guidance is currently being piloted in a small number of reviews and producing additional example PLSs. The guidance will be incorporated into a chapter of the Cochrane DTA *Handbook*. • Group members are involved in the development of a PRISMA extension (PRISMA-DTA) for reporting systematic reviews and meta-analyses of diagnostic accuracy studies. The PRISMA-DTA Group met in Amsterdam in May 2017 to finalise the PRISMA-DTA checklist.

* Items also reported in Key Achievements