

Summary Notes
CENTRAL/CCTR Advisory Group (CCAG) Meeting
1999 Cochrane Colloquium
Rome, Italy
6 October 1999, 7:30 am

Present: Mike Clarke (MC), Kay Dickersin (KD), Jeannette Downing-Park (JDP), Cindy Farquhar (CF), Diane Haughton (DH), Monica Kundun (MK), Carol Lefebvre (CL), Mark Lodge (ML), Eric Manheimer (EM), Indy Rutks (IR), Mark Starr (MS), Joanne Telenta (JT)

1. Outstanding issues from previous CCAG teleconference

The action items from the minutes of the CCAG April teleconference were reviewed.
The following action items were noted as having been completed:

- EM updated the footer dates of the April teleconference minutes and distributed the final minutes to the CCAG list.
- The new members of the CCAG were informed that they represent a constituency and should thus seek feedback prior to meetings so they can accurately represent the views of their constituents.

2. Agenda for CCAG meetings at the 1999 Rome Colloquium

- The CCAG plans to cover the agenda (see attached document named *CCAG Rome Agenda 10-99.wpd*) in three meetings: October 6, 7:30 am, October 7, 7:30 am, and October 8, 5 pm.
- KD announced that the Cochrane Collaboration Steering Group (CCSG) expects a CCAG recommendation regarding the management of CENTRAL/CCTR for the CCSG meeting October 6, 10:45 am. The CCAG members agreed that the remainder of the October 6 CCAG meeting would be dedicated to the discussion and drafting of a CCAG recommendation for CCSG. A summary of the issues discussed and a copy of the final recommendation to CCSG are below.

3. CENTRAL Publishing

- MS stated that there is currently no contract in place for the development of CENTRAL/CCTR, and an official contract would need to be drafted and signed by Update Software and a Steering Group representative in order for Update to continue to develop CENTRAL/CCTR. MS stated that such contract would be exclusive and would include a stipulation that Update would negotiate with publishers of

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MEDLINE, EMBASE and other database producers for permission to include records in CENTRAL. MS noted that the group publishing CENTRAL will need to pay 30,000 British pounds to Elsevier to publish EMBASE records in CENTRAL. CF asked if the Steering Group would provide funding to support publishing these records; ML and MC replied that Steering Group funds were not available for this purpose.

- KD remarked that another start-up group with whom she has been in contact had also expressed an interest in publishing CENTRAL. Members discussed the advantages of involving a publishing group other than Update Software, specifically the additional marketing exposure which could be gained by working with more than one publisher. KD projected that the start-up group with whom she had been in contact would need six months before committing to a decision to publish CENTRAL.
- Members agreed that there should be a vote taken later in the meeting (see below) on whether Update Software or another group should, in the future, publish CENTRAL.

4. The roles of Update Software and the NECC@P in CENTRAL Management

- It was agreed that a contract would need to be drafted to explicitly state the specific roles of both NECC@P and Update Software (assuming Update continues to publish CENTRAL) in the future management of CENTRAL.
- Group members discussed the roles to be played by NECC@P staff and Update Software staff in the processing of the following components of CENTRAL: specialized registers, handsearch results, MEDLINE records, and EMBASE records. For specialized registers and handsearch results, members discussed whether the Cochrane Groups should send files directly to Update, or rather, to NECC@P, who would standardize the records, combine submissions, and then send the files to Update. For the MEDLINE and EMBASE records, members discussed whether Update Software should download the records directly or whether NECC@P should download the records and forward them to Update.
- It was agreed that if Update Software continued to work with NECC@P staff in the management and development of CENTRAL, an Update staffer would be designated to provide feedback to NECC@P staff on any problems with specialized register and handsearch submissions, and answer questions posed by NECC@P staff.

5. CENTRAL Publishing and Management: CCAG Recommendation to CCSG

It was decided that CCAG members would vote on whether Update Software would continue to publish CENTRAL and then, if necessary, draft a proposal summarizing Update's role and the NECC@P's role in the future management of CENTRAL. In order to prevent a potential conflict of interest, staff members of the NECC@P and Update Software left the room so as not to be involved in the voting and ensuing drafting of the proposal. Mike Clarke also was not involved as he left the meeting at 10 am to attend another meeting. The remaining CCAG members (CF, CL, ML, IR, JT) unanimously voted that Update Software should continue to publish CENTRAL. The following proposal was drafted, agreed to and signed by voting members, and presented at the CCSG meeting, October 6, 10:45 am by CF:

- *Update Software will process individualized, specialized registers from the CRGs and Fields and a single file of hand search results, both submitted from NECC@P in mutually agreed tagged text format.*
- *Update Software will negotiate with database producers for rights to process and include records for inclusion on CENTRAL/CCTR, eg. EMBASE and MEDLINE.*
- *Update Software will set up a timely feedback system with New England Cochrane Center, Providence Office to improve the quality of the CENTRAL/CCTR.*
- *Update Software will designate a named individual to communicate with NECC@P and that the level of communication will be acceptable to both sides.*
- *In exchange for performing the above tasks, Update Software will require exclusive rights to the electronic form of CENTRAL/CCTR for a period of 3 years.*
- *This statement was discussed, a vote was taken, which was unanimous and the group specifically wanted to recognize the effort that NECC@P have put into negotiations with other publishers in respect of CENTRAL/CCTR. CCAG were concerned about time issues involved in any such project and consequently favors the Update Software proposal. CCAG recognizes that it will be necessary for Update Software and NECC@P to work closely together to ensure the proposal works effectively for all concerned.*

The CCAG's proposal was accepted by the CCSG, and has been added as a second annex to the Cochrane Collaboration's Special Agreement with Update Software.
