## **Assessing the reporting** quality of published qualitative evidence syntheses in the **Cochrane Library**

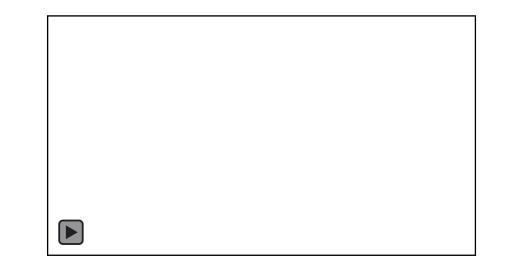
Presented at: Reporting a Cochrane Qualitative Evidence Synthesis – how to avoid common reporting issues.

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Presenting on behalf of: Dr. Martina Giltenane Dr. Aoife O'Mahony Dr. May Silveira Bianchim Professor Jane Noyes and QIMG Convenors

## **Declaration of interests**

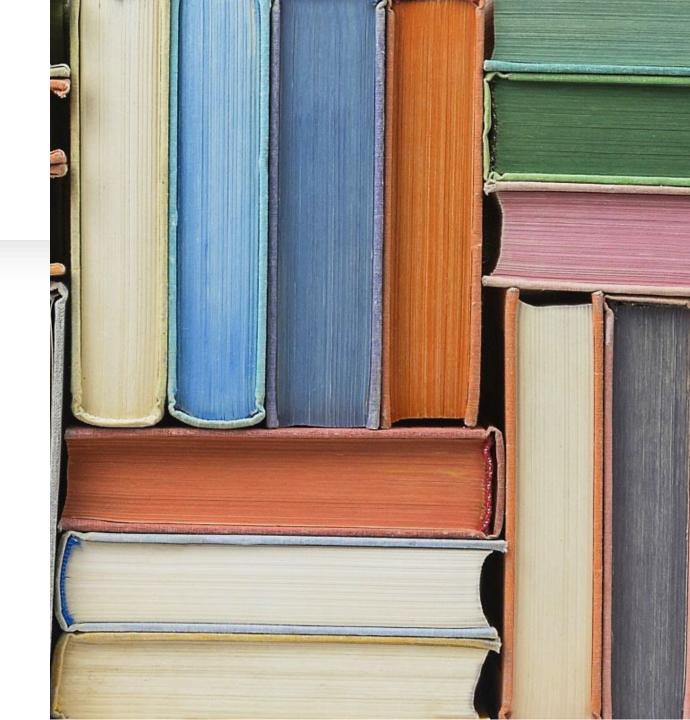
- This work and presentation was created in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.
- All authors are members of the Cochrane Qualitative and Implementation Methods Group.
- Noyes is a member of the Cochrane Methods Exec and Editorial Board and an originator of the eMERGe reporting tool for meta-ethnography
- Noyes is Editor of the Cochrane-Campbell Handbook for QES





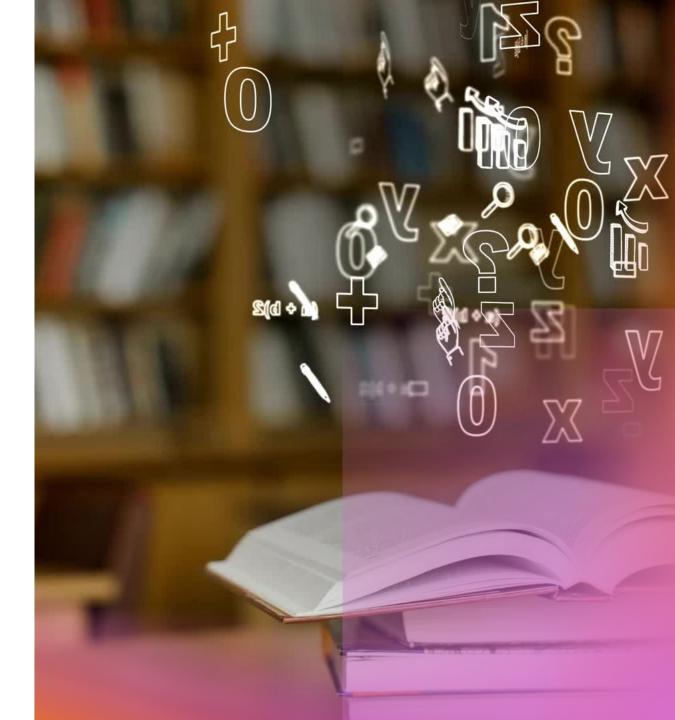
## Background

- Over ten years since the first qualitative evidence synthesis (QES) was published in the Cochrane Library, QES and mixedmethods reviews have become increasingly common and influential in healthcare research and policy development.
- The quality of such reviews and the clarity with which they are reported is therefore of paramount importance.



## Aim

- This review aimed to assess the reporting quality of published QES in the Cochrane Library.
- Of note reporting quality is not the same as methodological quality and there are different tools for reporting and assessing methodological limitations
- If a review is well reported it is much easier to subsequently assess methodological quality



## Methods

- All published QES and mixed-methods reviews were identified from the Cochrane Library.
- A bespoke framework developed by key international experts was used to code the quality of reporting of QES and mixedmethods reviews.
- Framework domains were based on the following guidelines:
  - Former Effective Practice and Organisation of Care (EPOC) Template
  - Meta-ethnography Reporting Guidance (eMERGe)
  - Enhancing Transparency in Reporting the Synthesis of Qualitative Research (ENTREQ)



#### Search String

Qualitative OR "mixed method" OR metasynthesis OR "qualitative evidence synthesis" OR "framework synthesis" OR meta-ethnography OR "thematic synthesis" OR realist OR "qualitative comparative analysis"

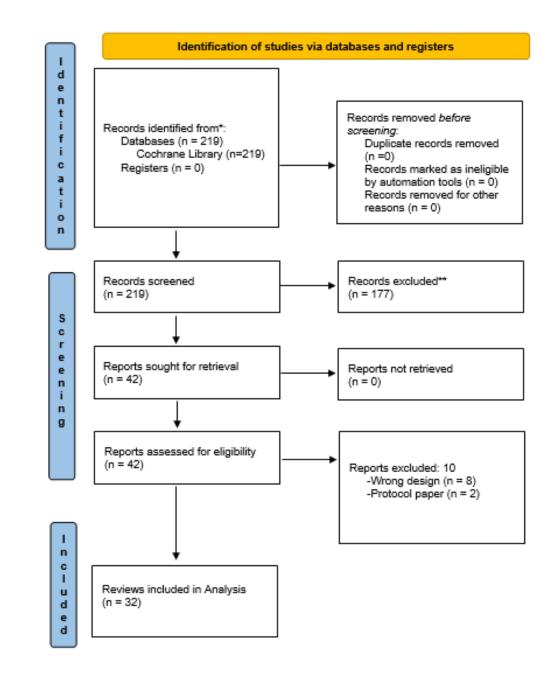
#### **Inclusion Criteria**

We included any qualitative evidence synthesis or mixed-methods reviews included in the Cochrane Library from 2013 to 2023.



## PRISMA flowchart

• Thirty-two reviews were identified, including 11 mixed-methods syntheses



Domain	Indicator	
Title	<ul> <li>Title included qualitative evidence synthesis</li> <li>Title reflected the main objective</li> </ul>	
Context	<ul> <li>Sufficient context was provided? (Topic area / Health condition / Population / Setting / Type of intervention)</li> <li>A rationale was provided for undertaking the review</li> <li>A theoretical framework was cited</li> <li>An equity perspective was taken</li> <li>The QES was linked with a corresponding intervention effect review</li> </ul>	
Question/Objectives	<ul> <li>Clear objectives were identified</li> <li>A specific question/s was stated for the review</li> <li>Clear evidence of the use of a question formulation framework was identified (e.g. PICO if mixed methods, SPICE, SPIDER, etc.)</li> </ul>	

	Rating
3	Good
2	Could be clearer or more detailed
1	Poor quality description
0	Not Addressed

Domain	Indicator
Type of QES and included studies	<ul> <li>For mixed method reviews, the methods for both the QES and intervention effectiveness components were described.</li> <li>QES method was specified (meta-ethnography, framework synthesis, thematic synthesis, etc.)</li> <li>Type of studies included were specified [MSB1] (e.g. pure qualitative data collection and analysis, mixed method with qualitative component, open ended survey responses, Trial sibling studies only, or trial sibling and non-trial sibling studies included or non-trial sibling studies only)</li> <li>Review included non-English language studies (or does not have non-English studies as an exclusion criterion)</li> <li>Where non-English language studies were included the review identified how translation was carried out</li> <li>Review included studies from LMIC and HIC income countries</li> </ul>

	Rating
3	Good
2	Could be clearer or more detailed
1	Poor quality description
0	Not Addressed

Domain	Indicators	
Screening	<ul> <li>Inclusion criteria were specified and were adhered to</li> <li>Search string/terms were identified</li> <li>The names and number of databases searched were identified</li> <li>Screening process was explained (If sampling was used, the proceed explained)</li> <li>Screening Process was appropriate (eg double screening independence of how disagreements were resolved) (If sampling was used appropriate)</li> <li>PRISMA flow diagram (or equivalent) showed evidence of the searched</li> </ul>	dently and sed it was
Synthesis	<ul> <li>Characteristics of included studies were specified</li> <li>Type of qualitative data extracted was specified (i.e. participant quotations only, author interpretations, both, etc.)</li> <li>Analysis process was explained</li> <li>Quotations from original studies were used to support findings</li> </ul>	
Findings	<ul><li>Findings appropriately reported</li><li>Theory development evident</li></ul>	Rating
		3 Good

Poor quality description Not Addressed

1

Domain	Indicators	
For QESs that are integrated with an intervention effect review	The method used was appropriately applied? (Mention method used in comment section)	
Quality Appraisal	An appropriate quality appraisal framework was applied An appropriate quality appraisal framework was reported appropriately	
Confidence in Review Findings	Confidence in the review findings were reported appropriately (i.e. GRADE CERQual)	
Reflexivity	A specific reflexivity statement was evident including conflicts of interest	
Limitations	Limitations of the review were reported (i.e., acknowledging including only English language studies in the inclusion criteria, etc.)	
Overall quality	Rate the overall quality of the QES	
Review funding	Funding was reported (if applicable) (Specify by whom it was funded in the comment section)	
Patient and	Review involved PPIs and stakeholders (Specify how they were involved in the	
public/stakeholder involvement	comment section).          3       Good         2       Could be clearer or         1       Poor quality description	

e detailed

Not Addressed

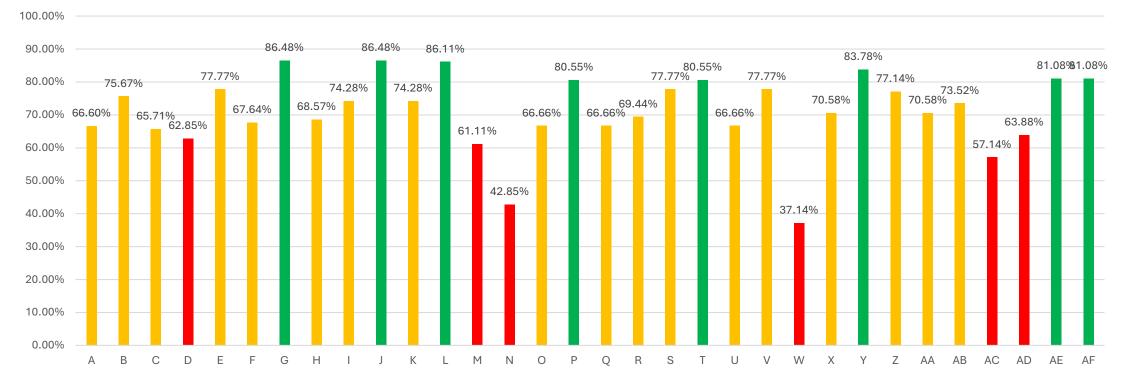
### **DRAFT Results**

- Thirty-two reviews were identified, including 11 mixed-methods syntheses.
- The quality of the QES and mixed method reviews published by Cochrane varied considerably.
- Based on the criteria within our framework, a quarter (8, 25%) of the reviews were rated as good quality achieving at least 80% compliance with our framework,
- 18 (56.25%) needed clarity or detail in their reporting (65%-79% compliance)
- six (18.75%) were rated as being less than 65% compliant with our framework.



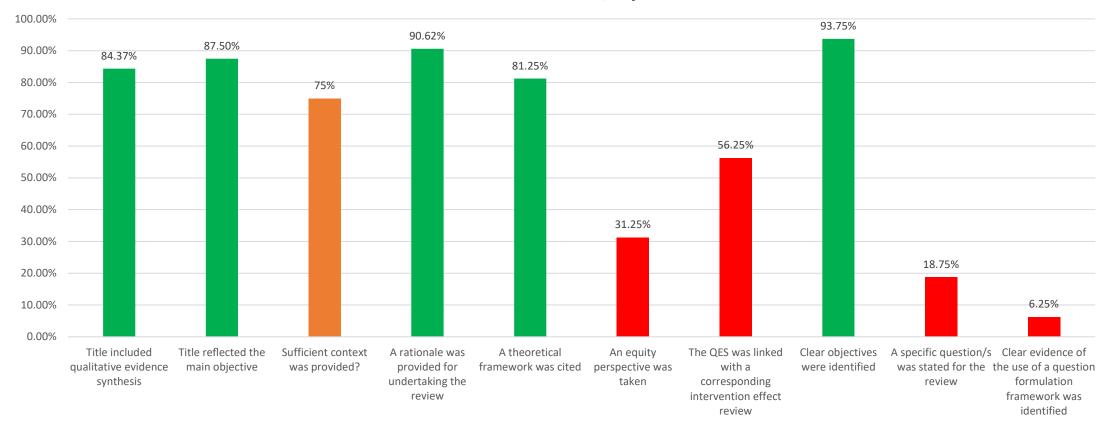
### Individual Reviews % Compliance with Framework

Individual Reviews % Compliance with Framework





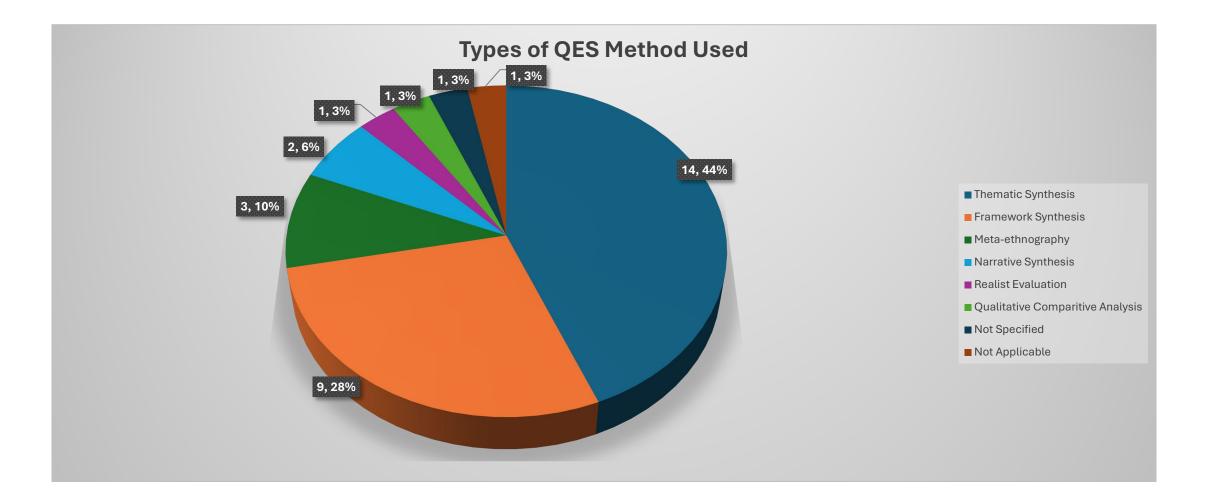
#### Percentage of Reviews Compliance with Indicators relating to Title, Context, Questions/Objectives



#### Title Context Questions/Objectives

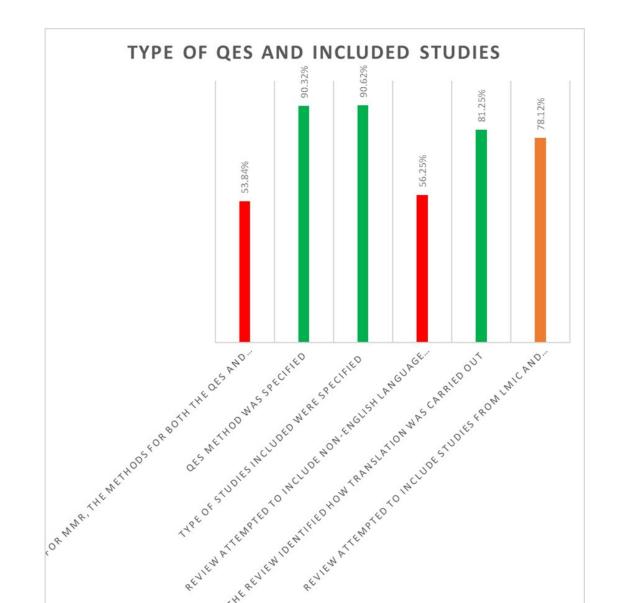
Key 80-100% 65-79% <65%

#### **Types of QES Method Used**



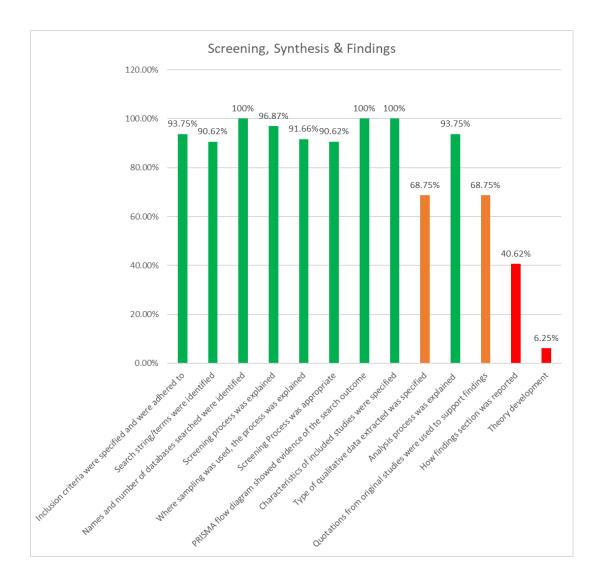
### Percentage of Review Compliance with Indicators relating to the Type of QES and

### **Included Studies**



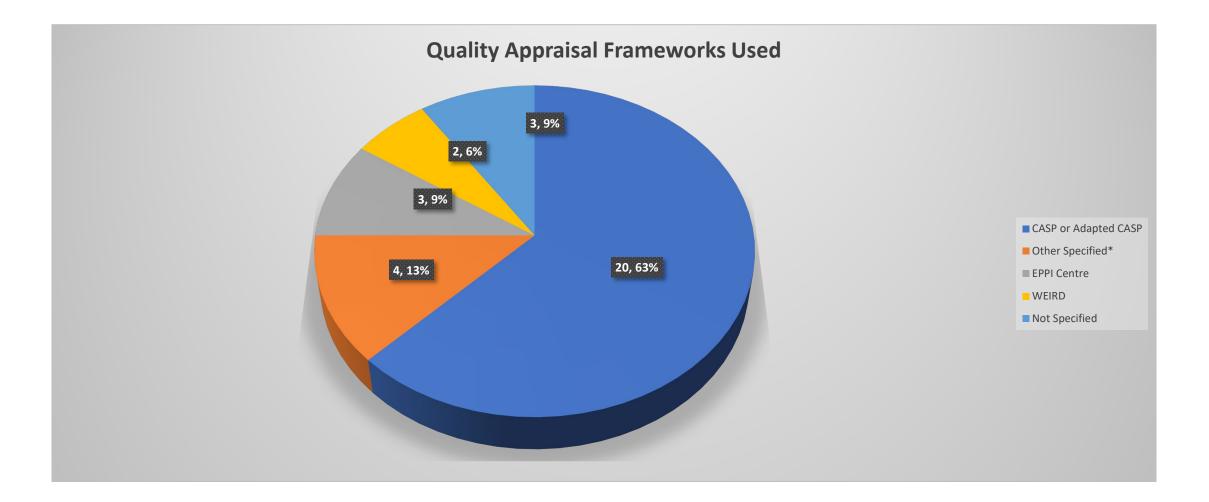


## Percentage of Review Compliance with Individual Indicators relating to Screening, Synthesis and Findings

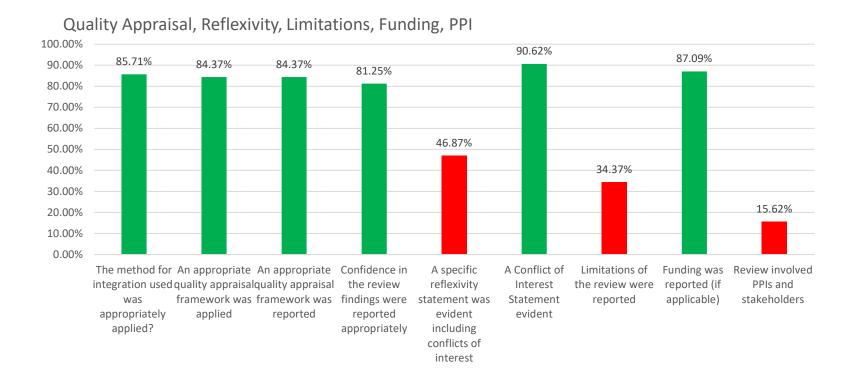




## **Quality Appraisal Frameworks Used**



### Percentage of Review Compliance with Individual Indicators relating to Quality Appraisal, Reflexivity, Limitations, Funding and PPI



Key 80-100% 65-79% <65%



## Summary of Findings

- Good QES reporting guidance and practice has evolved over the last 10 years and findings need to take this into account.
- Our findings highlight gaps in the quality of Cochrane QES reporting
- The need for further reporting guidance tailored for these types of reviews is required.
- Only a quarter of 32 included Cochrane reviews demonstrated good reporting quality.
- Most of the remainder required more detail or clarity, particularly regarding reporting of:
  - equity perspective,
  - question formulation,
  - reflexivity statements,
  - funding,
  - stakeholder involvement.

## **Summary of Findings**

- Very few of the reviews reported specific research questions and few showed clear evidence of using a question formulation framework .
- Many of the reviews would have benefitted from more complete reporting of findings of the full synthesis, particularly the inclusion of interpretation and of verbatim text extracts to support the themes identified.
- Reporting of summarised GRADE-CERQual findings have often in recent times been given greater prominence than reporting the findings from the full synthesis using a specific synthesis method.
- The variability in reporting quality serves as a compelling reminder of the imperative to develop PRISMA-associated reporting guidance specifically designed for QES.



New tools and resources to further strengthen QES and mixed-methods review conduct and reporting





### New Cochrane RevMan template and guidance for reporting for QES due Autumn 2024 PRISMA QES in development



RMW Knowledge Base / Practice and training

#### Cochrane review template

Review template

- How to use the template
- Prototype review

References

#### Practice and training

Create a practice review

Cochrane review template

Cochrane Trainers

> Plan: define analyses and risk of bias

Prepare: extract study data

Populate: import and organize data

Publish

> Start here

> Work smarter

Text editing

Tables and figures

Review dashboard

Versions of reviews

Diagnostic test accuracy reviews

Organization management

Review management

> People management

#### Focused review format

From 3 June 2024, all protocols, reviews and updates in RevMan have the focused review format enabled by default. This applies to all review types. No data or text is lost in RevMan when the focused review format is enabled.

If your protocol, review or update was submitted for editorial assessment before 3 June 2024, or is being supported by the Methods Support Unit, it will not switch to the focused review format at this stage. Your submission will remain in the current format through to publication. For these exceptions, the focused review format will be enabled after either publication or a reject decision.

#### Review template

NEW! We have a recommended template for intervention reviews in the focused review format.

Create your personal copy of the template as a practice review in RevMan. (Hold down Ctrl + click the button below to open the practice review in a new tab.)

#### Create my copy of the review template

Click on the title to open the template in RevMan.

Your copy of the template will be available for 30 days. Come back here at any time to recreate a copy!

The template will be continuously updated to reflect best practice. Always open the template as a practice review in RevMan to ensure you are always viewing the latest version.

#### How to use the template

Cochrane's intervention review template contains essential guidance on conducting your review and reporting your findings. This guidance is relevant to all authors of protocols, reviews and updates using the focused review format. Open the template in RevMan alongside your own protocol, review or update. See Split the screen. Check that each section of your work follows the template.

Practice reviews
[Study-centric] Intervention Review template
Expires: September 17, 2023

#### Q

# New Cochrane-Campbell Handbook for QES due early 2025



### Cochrane-Campbell Handbook for Qualitative Evidence Synthesis

Edited by Jane Noyes • Angela Harden Associale Editors Heather Ames, Andrew Booth, Kate Flemming, Emma France, Puth Garside, Cather the Houghton, Tomas Pantoja, Katy Sutcifife, and James Thomas.

WILEY Blackwel

#### Part 1: Core methods

- 1. Starting a qualitative evidence synthesis
- 2. Defining the review scope and formulating review questions
- 3. Selecting and using theory
- 4. Developing and using logic models
- 5. Searching for and identifying studies
- 6. Selecting studies and sampling
- 7. Assessing study methodological strengths and limitations
- 8. Selecting a method of synthesis and data extraction
- 9. Conducting a framework synthesis
- 10. Conducting a thematic synthesis
- 11. Conducting a meta-ethnography
- 12. Using visual methods to support synthesis
- 13. Assessing confidence in the evidence using the GRADE-CERQual approach
- 14. Integrating qualitative and quantitative evidence
- 15. Conducting time-sensitive reviews

#### Part 2: Other relevant methods

16. Conducting a realist synthesis

- 17. Reviewing diverse types of implementation evidence
- 18. Conducting a qualitative comparative analysis
- 19. Introducing meta-narrative reviews, critical interpretive synthesis, narrative syn

#### Part 3: Reporting and peer review

20. Reporting a protocol and a review

21. Peer reviewing a protocol or a review

https://training.cochrane.org/cochrane-campbell-handbook-qualitative-evidencesynthesis



Integrating qualitative evidence syntheses with intervention effect findings [May 2022] \*QES webinar series\* Angela Harden, Professor of Health Sciences, City, University of London. James Thomas, Professor of Social Research & Policy, UCL Social Research Institute, UCL Institute of Education, London. [click here for recording & accompanying materials]

**GRADE CERQual** [April 2022] \*QES webinar series\* Megan Wainwright, consultant in qualitative research, Portugal & member of the GRADE-CERQual coordinating team. [click here for recording & accompanying materials]

Meta-ethnography [March 2022] \*QES webinar series\* Kate Flemming, Professor of Hospice Practice and Evidence Synthesis, University of York, UK [click here for recording & accompanying materials]

Thematic Synthesis [February 2022] \*QES webinar series\* Angela Harden, Professor of Health Sciences, City, University of London. James Thomas, Professor of Social Research & Policy, UCL Social Research Institute, UCL Institute of Education, London. [click here for recording & accompanying materials]

#### Making Sense of Framework and Best Fit Framework Synthesis [January 2022] \*QES webinar series\*

Professor Andrew Booth, Professor in Evidence Synthesis, School of Health and Related Research (ScHARR), University of Sheffield, UK. [click here for recording & accompanying materials]

#### Selecting studies and assessing methodological limitations [December 2021] \*QES webinar series\*

Jane Noyes, Professor in Health and Social Services Research and Child Health, Bangor University, UK Dr Andrew Booth, Reader in Evidence Based Information Practice & Director of Information, University of Sheffield, UK. [click here for recording & accompanying materials]

#### Question formulation and searching for qualitative evidence [November 2021] \*QES webinar series\*

Dr Andrew Booth, Reader in Evidence Based Information Practice & Director of Information, University of Sheffield, UK

## https://training.cochrane.org/interactivelearning



### Module 12: Introduction to qualitative evidence synthesis

#### 🖲 90-120 min

Getting started with qualitative evidence synthesis, taking stock of evidence, synthesising and developing findings and writing up a report. Read more

#### Restricted

Log in to access



#### **Cochrane Interactive Learning**





Read reviews





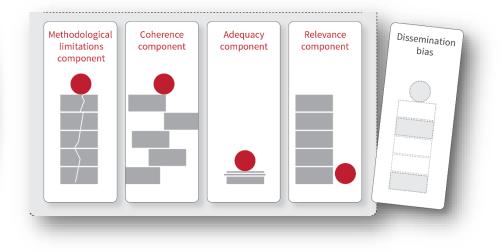


ethods Professor Jane Noyes & Professor Andrew Booth

https://training.cochrane.org/resource/applying-andreporting-grade-cerqual-how-to-avoid-common-mistakes

### Applying and reporting GRADE CERQual

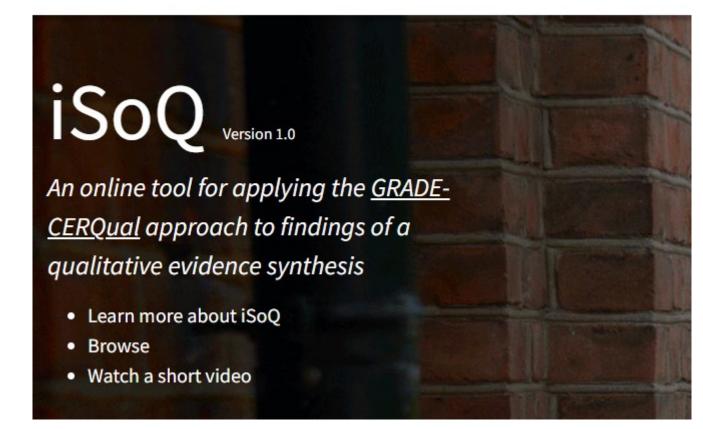
### How to avoid common mistakes





# New innovations to support review authors

**GRADE CERQual** interactive Summary of Qualitative Findings

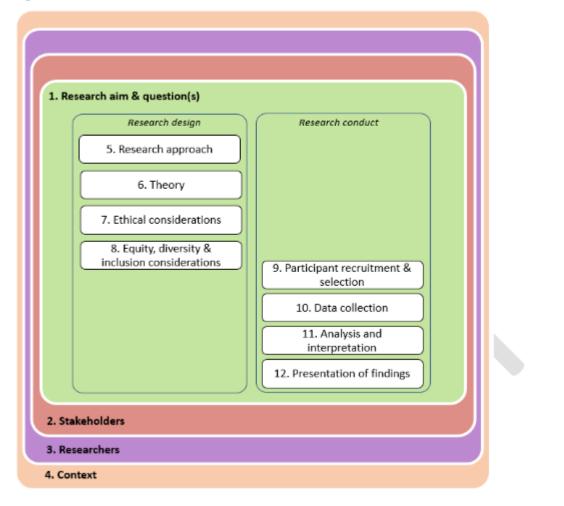


Interactive Summary of Qualitative Findings (epistemonikos.org)

#### New CAMELOT tool for assessing methodological limitations

#### CochrAne qualitative Methodological Limitations Tool. (CAMELOT)

#### Figure 7.1 Overview of CAMELOT

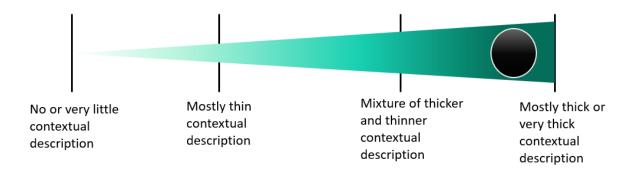


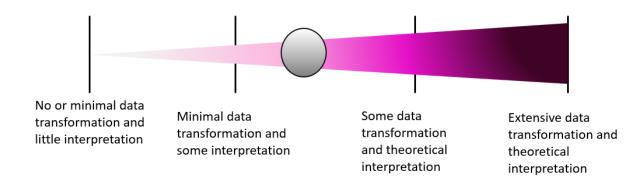
See Munther-Kaas et al Cochrane Evidence Synthesis and Methods journal – in press and chapter 7 Cochrane-Campbell Handbook for QES

## New Qualitative Data thickness/richness assessment tool \*

See Ames et al Cochrane Evidence Synthesis and Methods journal – in press and chapter 6 Cochrane-Campbell Handbook for QES

Figure 4: The sliding data (A) thickness assessment tool and (B) richness assessment tool





\*CERQual group would like to undertake more work on use of this tool



We are here to help!