



## Governing Board Elected Member Candidate Statement

The Candidate Statement, your photograph and names of your nominators will be published on the Cochrane Community website during the elections process, and the Candidate Statement and photograph will remain on the website against the names of new members for the duration of their terms on the Board. For this reason, this Candidate Statement document template must be used; and full addresses, email addresses and/or unencrypted e-signatures excluded.

Please submit this Elected Member Candidate Statement in Word format by the stated deadline. It should be shared beforehand with your two nominators.

Family name (surname):	<b>Bonfill</b>
First name(s):	<b>Xavier</b>
Today's date:	<b>November 10, 2018</b>

### 1. How and when did you first become involved in Cochrane and what has been your subsequent contribution to Cochrane's work (maximum 200 words)?

In 1994 I attended my first Colloquium in Hamilton (Canada) and began promoting the Cochrane Collaboration in Spain. In 1997 the Spanish Cochrane Centre was registered and I became its director. In 2000 the centre was registered as Iberoamerican Cochrane Centre (IbCC) because we assumed the responsibility of promoting and coordinating the Cochrane activities in the Latin American Spanish-speaking countries besides Spain and Portugal. I have been the director of the IbCC since then. We have established there a large network of associate and affiliate centres based in health care centres, research institutes, universities and government bodies.

I have co-authored 30 Cochrane reviews and 4 protocols published in the Cochrane Library. I was the coordinating editor of the Lung Cancer Group between 1998 and 2003.

We started translating the Cochrane reviews into Spanish in 2000 and publishing them in the Biblioteca Cochrane Plus (BCP). Beginning in 2003 until now the Spanish Ministry of Health has maintained a national subscription to the BCP, similarly to what has happened in other Iberoamerican countries in different periods. The usage of the BCP has been always very high (in millions). It was integrated into the enhanced Cochrane Library in past July.

### 2. What experience do you have serving as a member of a governing board, board of directors or similar? This might be within a non-for-profit or charitable organization, or a hospital or University. Please include the name(s) of the organization(s), the roles you played and other relevant

### information (maximum 200 words).

In Cochrane I have been a member of the Board of Directors since its inception and I was co-chair of the Centre Directors between 2008 and 2010. Since 1995 I have been the president of the Asociación Cochrane Iberoamericana (ACCIB) and since 2014 the president of the Institute for Clinical and Health Care Excellence (INPECS), which are non-profit entities created for managing the resources obtained and needed to support the Cochrane activities in our referent area as well as research projects.

Since 2009 I have been trustee of the Board of the Institute of Biomedical Research Sant Pau, linked to my hospital in Barcelona. Since 2007 I am also a member of the Executive Committee of the Department of Pediatrics, Obstetrics and Gynaecology, and Preventive Medicine and Public Health at the Universitat Autònoma de Barcelona.

### 3. Acting as a Board member requires a collaborative approach to decision-making, setting aside personal opinions and group affiliations and acting in the best interests of the charity. Please describe how you would fulfil this obligation, using examples from previous committee or other work (maximum 200 words).

A Cochrane Board member must always keep in mind which the principles of this organisation are, particularly collaboration that names it and expresses its main essence. I and surely most of Cochrane members have joined this organisation also because of its democratic and participative nature and therefore we must protect and develop these values. We must also accept that we are a very diverse organisation that aims to give global responses to the challenges posed worldwide but that they should get adapted to a great variety of local circumstances and characteristics.

The Board must find a good balance between debate and action, between participation and decisions. The Board members cannot be isolated from the rest of the organisation during its mandate but they have to be sensible to the opinions, criticisms and proposals coming from the different groups and entities, and particularly, from the Council. If the decision-making process would be based only or too much on the opinions of the people who eventually are Board members, the stability of the organisation could be too vulnerable and variable, or alternatively, be too dependent on the executive people.

We have developed the Iberoamerican Network trying to honour these principles and criteria.

### 4. What do you think would make you an effective member of the Board (maximum 200 words)?

I think my potential contributions to the Cochrane Board will be effective if I succeed in respecting the principles and values that I feel necessary for such endeavour: thorough analysis of the issues under discussion, with consultation to the pertinent people whenever necessary; search of the greater consensus among Board members before making a decision, looking always with flexibility for those agreements that can integrate the existing sensitivities; strategic vision to understand the needs of the organisation and capacity to overcome the potential challenges; personal commitment to look after the members of the organisation and making it really participative and inclusive, because without that Cochrane would be unable to achieve its goals; capacity to explore and reform the legal framework in order to adapt it to the goals and policies established by the whole organisation.

## 5. What do you believe are the most important strategic challenges for Cochrane in 2019 (maximum 200 words)?

In my opinion Cochrane is currently at a very important crossroad to face its future, with several major challenges: 1. reaffirming and further developing the foundational principles of the Collaboration so that there are no doubts neither internally nor externally about them or their interpretation. This would provide greater cohesion among members and overcome the existing confusion, frustration and division; 2. reviewing the internal mechanisms of organisation, participation, resolution of potential conflicts and differences, as well as clarifying the degree of the necessary autonomy of territorial entities and individuals. All these mechanisms should prevail over —although making them compatible with—the constraints from the legal structure of the organisation; 3. continuing the efforts to become an organisation really global, participative, multilingual, and inclusive; 4. developing a sustainable and ambitious economic model that combines institutional agreements, progressive open access policies and more support to Cochrane entities worldwide.

## Questions 6-12: Specific Skills

To function optimally the Governing Board requires a range of experiences, knowledge and expertise amongst its membership. We cannot expect any single Governing Board member to have all the necessary skills and experience. We are looking for diversity.

**We do not expect you to answer “yes” to more than one or two of these questions.**

If you do answer “yes”, please provide at least one example which best demonstrates your experience or expertise. You may wish to include:

- A description of the situation and the context
- What you did
- What skills and knowledge you deployed
- The outcome and your personal contribution

## 6. Do you have experience of Charity Governance (in any charitable organization around the world)?

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Yes. As said in question # 2, I have been the president of the some non-profit entities registered in Spain that were created for managing the resources obtained and needed to support the Cochrane activities in our referent area as well as independent research projects. We have provided a large variety of services, such as training courses, elaboration of clinical guidelines, translation or supporting research activities.

Since 2009 I have been trustee of the Board of the Institute of Biomedical Research Sant Pau, linked to my hospital in Barcelona, which includes 8 public and non-profit private institutions.

**7. Do you have experience of Organizational Finance and Resource Management?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Yes. All the activities done during the almost last 25 years in order to promote Cochrane activities in Iberoamerica have been developed thanks to the capacity that we have had to raise and spend the resources needed, because we have not received enough core funding for sustaining our activities.

It is also remarkable that we have been able to maintain the translation activities to publish the Biblioteca Cochrane for almost 20 years, dealing with complex agreements between some Iberoamerican governments or institutions, Update Software, Wiley and Cochrane Central. We have organised two Colloquia (Barcelona 2003 and Madrid 2011), with good capacity of organisation and resource management.

**8. Do you have experience of People Management (often called ‘Human Resources’ in English) and Organizational Development?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Yes. As director of the Service of Clinical Epidemiology and Public Health in my hospital, director of our research group, and president of our non-profit organisations I have had the responsibility of managing the involved human resources.

**9. Do you have experience of Consumer and Patient involvement in Evidence Production and Health Policy?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Not very much. We have been translating the diverse Cochrane materials addressed to consumers into Spanish and have a formal agreement with the Organización de Consumidores y Usuarios (OCU), the Spanish national organisation of consumers, in order to periodically publish some outreach materials in their magazine. But we have not succeeded in involving patients in evidence production.

**10. Do you have experience of Advocating for Evidence?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Yes. As director of the Iberoamerican Centre and Network, for many years I have had the responsibility of maintaining many contacts with diverse people representing governments, universities, research groups, charities, patients associations, or drug companies, among others.

**11. Do you have experience of Widening Access, Participation, Reach and Impact of Research?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Partially. We have developed an initiative in Spain called MAPAC, which stands for ‘Improving the clinical and health care appropriateness’, which now has a multicentre approach. Related to this, we created the portal [www.dianahealth.com](http://www.dianahealth.com) which provides in English and Spanish access to the existing worldwide recommendations for reducing low value health care interventions.

**12. Do you have experience of Fundraising & Development?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

Please, see my response to question # 7.

**13. Is there anything else you would like to say in support of your nomination (maximum 200 words)?**

I feel that Cochrane, to which so many people we have devoted so much time along our life, now really needs the generosity and capacity from all of us. We are a unique organisation worldwide whose contributions and importance go far beyond our products. Our existence and background demonstrates that the principles on which we have built our project are enough solid and necessary to be preserved and enlarged in order to improve the health of people and also the health of the world. The original spirit of the Cochrane Collaboration must be adapted to the new times and challenges but without losing its nature. We must learn constructively from the recent problems in order to better combine legality and participation, democracy and inclusiveness.

**Declarations:**

To be eligible to stand for election, candidates must confirm the following by putting a ‘tick’ (✓) or their initials in the boxes below:

**I hereby confirm that I:**

1. Have accepted the <a href="#">Terms and Conditions of Cochrane Membership</a> and have been a Cochrane Member for at least 30 days prior to the close of voting in this election	✓
2. Have read the following guidance produced by the <a href="#">National Council for Voluntary Organisations</a> in the UK: <ul style="list-style-type: none"><li>• What is a charity</li><li>• What is a charity trustee</li></ul>	✓

<ul style="list-style-type: none"> <li>• What trustees must do</li> <li>• How trustees look after the charity</li> </ul>	
3. Accept the <a href="#">Governing Board Charter</a>	√
4. Accept and will adhere to the <a href="#">Code of Conduct for Trustees</a>	√
5. Have completed the Cochrane 'Declaration of Interest' Statement (Annex 1 of this document)	√
6. Have completed the 'Trustee Eligibility Declaration' required by the <a href="#">UK Charity Commission for all Trustees</a> (Annex 2 of this document)	√
<b>NAME:</b> Xavier Bonfill	
<b>DATE:</b> November 10, 2018	

## Annex 1: Cochrane Declaration of Interest Statement

Candidates must make a declaration of conflict of interest, including financial or non-financial relationships with other organizations, professional relationships to other members of the Board, and other Boards she/he may sit on. In writing this statement, candidates should refer to Cochrane's [conflict of interest policy](#) and the [declarations of existing members of the Board](#).

Please answer the following questions:

<b>1. Financial interests</b>	<b>Yes/No (If yes, please provide details)</b>
<b>In the last three years, have you:</b>	
a) Received research funding: any grant, contract or gift, commissioned research, or fellowship from Cochrane or a related organization (i.e. any organization related to health care or medical research) to conduct research?	No
b) Had paid consultancies: any paid work, consulting fees (in cash or kind) from a related organization?	No
c) Received honoraria: one-time payments (in cash or kind) from a related organization?	No

d) Served as a director, officer, partner, trustee, employee or held a position of management with a related organization?	No
e) Possessed share-holdings, stock, stock options, equity with a related organization (excludes mutual funds or similar arrangements where the individual has no control over the selection of the shares)?	No
f) Received personal gifts from a related organization?	No
g) Had an outstanding loan with a related organization?	No
h) Received royalty payments from a related organization?	No
<b>2. Do you have any other competing interests that could pose a conflict of interest that would reasonably appear to be related to the primary interest?</b>	No

## Annex 2: Trustee Eligibility Declaration

As required by the [UK Charity Commission](#)

Please tick or initial in the boxes below to confirm the following:

### I declare that I:

Am willing to act as a trustee of The Cochrane Collaboration	√
Understand Cochrane's purposes (objects) and rules set out in its <a href="#">Articles of Association</a>	√
Am not prevented from acting as a trustee because I: <ul style="list-style-type: none"> <li>• Have an unspent conviction for one or more of the offences <a href="#">listed here</a></li> <li>• Have an Individual Voluntary Arrangement, debt relief order and/or a bankruptcy order</li> <li>• Have been removed as a trustee in England, Scotland or Wales (by the Charity Commission or Office of the Scottish Charity Regulator)</li> <li>• Have been removed from being in the management or control of any organization in Scotland (under relevant legislation)</li> <li>• Have been disqualified by the Charity Commission</li> </ul>	√

<ul style="list-style-type: none"> <li>• Am a disqualified company director</li> <li>• Am a designated person for the purposes of anti-terrorism legislation</li> <li>• Am on the sex offenders register or equivalent in any country</li> <li>• Have been found in contempt of court for making (or causing to be made) a false statement</li> <li>• Have been found guilty of disobedience to an order or direction of the Charity Commission</li> </ul>	
<p>Will provide true, complete and correct information to the Charity Commission if elected as a Board member</p>	√
<p>Understand that it's an offence under section 60(1)(b) of the Charities Act 2011 to knowingly or recklessly provide false or misleading information</p>	√
<p>Comply with my responsibilities as a trustee that are set out in the <a href="#">Charity Commission guidance 'The essential trustee (CC3)'</a></p>	√