Draft messages to fellow members of evidence synthesis (including HTA and guideline) communities (with forum@mcmaster.ca as the email address to which input should be sent)

1) Send in evidence sources and updated descriptions as the sources evolve so COVID-END can continue to update the guide to COVID-19 evidence sources

2) Review the terms of reference for each of the seven working groups (by clicking on the corresponding tabs on the COVID-END webpage), let us know if a senior leader from your organization is willing to devote time to work collaboratively to avoid duplication in and better coordinate activities in the domain covered by a working group, and keep abreast of new developments by checking back on the working group’s webpage

3) Review the description of one example of an evidence-service model that is scalable across countries (or states and provinces) and consider sending in a shareable description of other models

4) Follow @covid_e_n_d on Twitter to keep abreast of new developments in avoiding duplication and helping coordinate the explosion of evidence-synthesis activities related to COVID-19

Draft messages to well-positioned regional, national and sub-national organizations that are working in close partnership with key target audiences and already responding to their evidence needs

1) Start your response to any evidence request by reviewing the guide to COVID-19 evidence sources to determine whether you can use a robustly developed product that already exists (and focus on contextualizing it to your jurisdiction) or build on an existing product (e.g., by updating the search) or whether you need to fill a gap in what already exists

2) If you’re being asked to respond to evidence requests in a day or less, take a look at one example of an evidence-service model that you may want to adapt to your setting

Draft media release or newsletter blurb that can be adapted by other groups to highlight their own roles and anticipated contributions

COVID-19 Evidence Network to support Decision-making

To help health- and social-system leaders as they respond to unprecedented challenges related to the COVID-19 pandemic, the COVID-19 Evidence Network to support Decision-making (COVID-END) has come together rapidly in the past few weeks. COVID-END partners are drawn from diverse evidence-synthesis, technology assessment and guideline-development communities and have long track records of supporting decision-makers locally, nationally and internationally. Their activities span the full gamut of COVID-19 issues, including traditional infection prevention and control but also how to manage impacts on mental health and family violence, health- and social-care systems, education, employment, financial protection, food safety and security, government services, housing, public safety and justice, recreation and transportation. Their activities also span the full array of contexts where the COVID-19 pandemic is playing out, including low-, middle- and high-income countries.

COVID-END’s near-term priorities are to continuously maintain a guide to COVID-19 evidence sources, to help coordinate and avoid duplication in seven domains (such as digitizing key steps in evidence synthesis and guideline development), and to develop scalable models for supporting evidence-informed decision-making about COVID-19. [The secretariat for COVID-END is being jointly co-led by the McMaster Health Forum and its partners at The Ottawa Hospital and University of Ottawa. / The X working group is being co-chaired by person Y from partner organization Z.]

Insert quote from person Y from partner organization Z here

If every group plays to their comparative advantages and works together to support coordination and avoid duplication, we can make a big difference in minimizing the human suffering being caused by COVID-19.