COVID-END Update

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Background

- COVID-END is a time-limited network that aims to promote co-operation and collaboration, and avoid duplication of effort of the evidence synthesis community’s response to COVID-19.
- With its partners, it is creating resources and tools to support:
  - Decision makers seeking and using evidence
  - Intermediary organisations supporting decision makers to use evidence
  - Evidence synthesis organisations acting in a more co-ordinated and efficient manner to improve the quality and timeliness of outputs
Background

- During the first 8 weeks of COVID-END remarkable progress has been made on addressing early wins that had the potential to immediately help the global community.
- COVID-END resources eg the inventory of trustworthy evidence resources are used as first stop by WHO and other agencies around the world.
- WHO has asked Cochrane and COVID-END to collaborate to support greater coordination in the evidence synthesis response to COVID-19.
COVID-END – the next phase

- We need to identify substantive projects that could be conducted over 4-6 months to further support decision makers and the evidence synthesis community globally.

- We propose the following principles to guide activities:
  - COVID-END projects should focus on niche areas where its convening function and reach allow it to address issues that individual partners cannot.
  - Partners will contribute (within their available resources and interests) to and benefit from projects.
  - Resulting tools and resources are shared products of the secretariat and contributing partners and can be shared through partners’ channels (websites etc) using co-branding.
COVID-END – the next phase

- Substantive projects should facilitate co-operation, collaboration and/or reduce inappropriate duplication of effort.

- Project ideas are welcomed from the secretariat, partners and working groups.

- During the initial phase of COVID-END, we focused on early wins that could be achieved without additional funding; for the next phase of COVID-END, we should be prepared to seek funding for projects if needed.
Trustworthy evidence resources inventory linked to decision-based taxonomy (1)

Background

- COVID-END has produced an inventory of trustworthy evidence resources. However this requires groups to go to each evidence source to find reviews relevant to their question (and assess the quality and up-to-datedness of resources). Whilst facilitating identification of and access to trustworthy evidence sources, it still requires considerable effort by the end user (decision-maker or evidence intermediary).

- COVID-END has also produced a taxonomy of decisions faced by decision makers addressing four domains (public health measures, clinical management, health-system arrangements, economic and social responses).
Proposal

- Our proposal is to create an inventory of appraised, date stamped trustworthy evidence resources addressing specific questions structured according to the decision taxonomy that would allow:
  - Decision makers and evidence intermediaries to more efficiently identify high-quality, up-to-date evidence resources;
  - Evidence synthesis groups to rapidly identify whether existing high-quality, up-to-date evidence resources are available prior to embarking on new review activities.

- The Secretariat and three working groups (Digitizing, Synthesizing and Recommending) will create an inventory that puts of all of the decision-relevant evidence (quality appraised and time-stamped) in one place.
Building the COVID-END Community (1)

Background
COVID-END has brought together nearly 50 of the major evidence synthesis groups from across the globe. However, there is significant demand to join the partnership and an unmet need for a complementary and broader approach to community engagement. The Engaging working group has invited groups supporting decision-making about COVID-19 to participate in a virtual community.
Building the COVID-END Community (2)

Proposal
The secretariat and Engaging Group establish and actively grow the COVID-END community. Specifically to create a listserv will allow COVID-END to communicate broadly across groups, engage them in discussion focused on bi-weekly topics, support their sharing of experiences and lessons learned, and enable the establishment of special interest groups covering specific topics (e.g., rehabilitation) or regions (e.g., sub-Saharan Africa).
Background
COVID-END partners have appropriately focused their initial response to COVID on the immediate (often public health and clinical management) evidence needs of decision makers. However, as the pandemic and pandemic response unfold, evidence needs will evolve (for example, with greater emphasis on mitigating the impact of the pandemic on non-COVID healthcare provision and on moderating the economic and social responses). It is essential that the evidence synthesis community identifies future evidence needs and begins to conduct relevant evidence synthesis activities.
Horizon scanning (2)

Proposal
The Secretariat and the Engaging working group will administer a horizon-scanning function involving a panel of key decision makers from across sectors globally who will inform extensions of and prioritization within the COVID-END taxonomy of decisions where evidence syntheses will be needed.
DEVELOPING A CORE SET OF LIVING SYSTEMATIC REVIEWS

Background
The initial phase of the evidence synthesis response to COVID was somewhat chaotic with lots of inappropriate duplication of effort focusing on producing rapid evidence syntheses of variable quality and utility. However, the relevant evidence base continues to evolve rapidly and so there is an urgent need to develop high-quality living systematic reviews. COVID-END has identified an urgent need to begin transition from having many groups undertake rapid reviews on the same topics and with variable quality to a set of high-quality living systematic reviews on perennial issues.
PROPOSAL

- The Secretariat with partners plans to work with key decision-makers to identify what living reviews are most needed and to encourage evidence synthesis groups to take on responsibility for undertaking and maintaining these reviews resulting in a global body of high-quality living systematic reviews.