1. INTRODUCTIONS

   a. Welcoming new working group members –
      i. Rajeev Aravindakshan, Pushpagiri Centre for Evidence Based Practice (PCEBP), India

2. FOLLOW-UP ON ACTION ITEMS

   a. Participants filled a few gaps in the organizations and/or contacts in the list updated at the Partners’ call on 14 May 2020 (see bolded additions/edits below)
      i. 3IE – contact: Birte Snilsveit
      ii. Agency for Healthcare Research and Quality (AHRQ) Evidence-based Practice Centers – contact: Stephanie Chang (or via Jerry Osheroff)
      iii. Africa Evidence Network, which includes groups like Africa Centre for Evidence, University of Johannesburg and the Centre for Rapid Evidence Synthesis, Makerere University – contact: Ruth Stewart, Africa Centre for Evidence
      iv. Campbell Collaboration – contact: Vivian Welch
      v. Campbell UK and Ireland – contact: Declan Devane
      vi. Centre for Learning and Evaluation Results – contact: Laurenz Langer
      vii. Cochrane Geographic Groups, including Cochrane US Network (4 EPCs are members) – contact: Sylvia de Haan
      viii. Collaboration for Environmental Evidence – contact: Ruth Stewart, Africa Centre for Evidence
      ix. European Network for Health Technology Assessment (EUnetHTA) – contact: Claudia Wild, Austrian HTA agency
      x. Evidence Aid – contact: Ben Heaven-Taylor
      xi. Evidence-Informed Policy Network (EVIPNet) – contacts: John Lavis and Ludovic Reveiz
      xii. Global Evidence Synthesis Initiative (GESI) – contacts: Tamara Loutfi and Elie Akl
      xiii. Guidelines International Network (GIN), including its regional sub-networks – contacts: Per-Olav Vandvik and Zachary Munn
      xiv. Health Information for All (HIFA) – contact: Sylvia de Haan (who is a member of the listserv)
      xv. Health Technology Assessment International (HTAi) – contact: Lucy Henry, HTAi
      xvi. International Network of Government Science Advisors – contact: Ruth Stewart or Laurenz Langer
      xvii. International Network of Health Technology Assessment Agencies – contact: TBD by INAHTA
      xviii. National Collaborating Centres (Canada) – contact: Maureen Dobbins
      xix. Red de Evaluación de Tecnologías en Salud de las Américas (RedETSA) – contact: Ludovic Reveiz
      xx. SPOR Support Units (Canada) – contact: Andrea Tricco
3. FRAMING AND FORMULATING MESSAGES

a. Participants reviewed the draft messages (see second document) and suggested the following considerations for the next draft
i. Why we are reaching out
   1. No additional considerations identified
ii. How COVID-END might be able to support your organization
   1. Concern about the amount of work that might be created by the point about ‘Connect with a community of practice’ (e.g., suggest that this be done through the listserv where many individuals may be able to respond to queries, not just COVID-END partners)
iii. Considerations in producing evidence syntheses and guidelines
   1. Consider adding a point under registration the planned date for completion as well as details about how to access when completed (both of which are supported by PROSPERO)
   2. Consider adding a point about rating the quality of reviews and guidelines (and the primary studies included in reviews)
   3. Consider adding a point about the importance of addressing decision-makers’ priorities and pointing people to established priority-setting processes (e.g., Africa Evidence Network, Cochrane)
   4. Consider adding a point about principles of open syntheses as well as other relevant sets of principles
      **ACTION:** Tamara Loutfi to re-share the ‘open synthesis’ document
iv. Possible additional section(s)
   1. Consider requesting their input about how to improve the website (e.g., additional tips and tools for those supporting decision-makers)
      **ACTION:** Laurenz and Maureen to consider the above points in revising the draft messages (and connect with the Synthesizing working group to ensure that the implications of their work for messaging have been considered)

b. Participants also noted additional considerations
i. We need to be sensitive that groups may have by now established processes that they are hesitant to adjust and that framing the messages will need to keep this in mind
ii. We need to be clear that the contacts are encouraged to adapt the wording so it is appropriate for their respective constituencies
iii. We need to make a decision about whether to use a listserv or MS Teams for broader communication with interested individuals
      **ACTION:** John to get additional details from Jeremy about the free listserv option available to individuals based in the UK
      **ACTION:** Sylvia to approach the HIFA listserv owner (Neil Pakenham-Walsh) to see whether they would be willing to open a ‘thread’ specific to the issues being addressed by COVID-END
ACTIONS: Laurenz and Maureen to consider the pros and cons of these two potential solutions (e.g., HIFA offers the advantage of an existing community, some of whom may be interested in joining the thread, as well as an existing moderator, however, the working group may want to play an active role in listserv moderation that may not be possible with this solution) and bring forward a recommendation to the next meeting.

4. ENGAGING WITH OTHER WORKING GROUPS

a. Working group agreed to try MS Teams as its communication vehicle and re-assess as needed

5. ANY OTHER BUSINESS

a. No other business