1. INTRODUCTIONS

   a. Laurenz notes that our one new member was unable to introduce herself during the last call but we will give her this opportunity the next time she joins a call
      i. Sunu Alice Cherian, Pushpagiri Centre for Evidence Based Practice (PCEBP), India

2. STANDING LIST OF ORGANISATIONS FOR OUTREACH

   a. Laurenz provided a ‘last call’ for input to the list of ‘networks’ and the names of key primary contacts of each organization (see attachment 3) and working group members had no additional input
      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 (or via Nikita Burke)
       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. Cochrane Ireland – contact: Nikita Burke
         ix. Collaboration for Environmental Evidence – contact: Ruth Stewart, Africa Centre for Evidence
         x. European Network for Health Technology Assessment (EUnetHTA) – contact: Claudia Wild, Austrian HTA agency
         xi. Evidence Aid – contact: Ben Heaven-Taylor
         xii. Evidence-Informed Policy Network (EVIPNet) – contacts: John Lavis and Ludovic Reveiz
         xiii. Global Evidence Synthesis Initiative (GESI) – contacts: Tamara Loutfi and Elie Akl
         xiv. Guidelines International Network (GIN), including its regional sub-networks – contacts: Per-Olav Vandvik and Zachary Munn
         xv. Health Information for All (HIFA) – contacts: Sylvia de Haan (who is a member of the listserv)
         xvi. Health Technology Assessment International (HTAi) – contact: Lucy Henry, HTAi
         xvii. International Network of Government Science Advisors – contact: Ruth Stewart or Laurenz Langer
3. OUTREACH

a. Finalize the communication vehicle for the group
   i. Update on call with HIFA that Laurenz and Sylvia attended
      1. More complicated than hoped
      2. Four ways to work with and through HIFA, but all of them introduce the complications of not being able to ‘bound’ the list and having members of the ‘COVID-END community’ receiving many HIFA messages that are not COVID-19 relevant
         a. Contribute to the general discussion forum
         b. Join the existing evidence-informed policy and practice project
         c. Create a new COVID-END project
         d. Create a sub-community
   3. Working group members described their experiences and one suggested that working group members could join the HIFA list for a week to gain experience
      ii. Principal alternative communication vehicle under consideration is JISC
   iii. ACTION: Laurenz and Maureen to solicit feedback from working group members (with a note and the accompanying pros and cons tables) and decide on Friday whether they feel they have enough input to make a decision about which platform to use and what would be the key considerations in implementing it
b. Sign-off the messages for Working Group’s first communication with organizations (which can be adapted by the contact people)
   i. Working group approved the minor tweaks to the document that was circulated in advance (attachment 3)
   ii. ACTION: Laurenz and Maureen to proceed with the communication to identified contacts (with the modification that listserv details will be shared at a later date)

4. WORKING GROUP ACTIVITIES

a. Review description of working group achievements (originally shared at partners meeting on May 28th)
   Initial description:
      i. Engaging those already supporting decision-makers to work in more coordinated and efficient ways: 20+ networks, key messages (e.g., assess quality of and use, adapt or
contextualize what’s already there), discussion topics for the ‘COVID-END community’ listserv, and possibly a pilot expansion of PROSPERO to include COVID-19 review protocols with non-health outcomes (and engage non-H people)

**Suggested changes (in italics):**

i. Engaging those already supporting decision-makers to work in more coordinated and efficient ways: 20+ networks, key messages (e.g., adapt or contextualize what’s already there, open-access principles and priority setting, assess quality of and use), discussion topics for the ‘COVID-END community’ listserv, and possibly a pilot expansion of PROSPERO to include COVID-19 review protocols with non-health outcomes (and engage non-H people)

**ACTION:** Laurenz to post this item for discussion on MS Teams to be finalized by Friday. John to update the COVID-END slides to capture the change.

**b. Review of Goal statement for Engaging Workgroup**

i. See discussion on Microsoft Teams

**c. Feedback from the working group on COVID-END website (tips and tools page)**

i. To discuss online or at the next meeting

**d. Review priority setting resources (see attachment 4)**

i. To discuss online or at the next meeting

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**5. HORIZON SCANNING**

a. Heather introduced a potential approach to horizon scanning and posted the following questions for discussion

i. Do you agree that this is a helpful priority project for this working group?

ii. Do you have suggestions for project steering committee members?

iii. Do you have any ideas about sources of good horizon-scanning material?

**ACTION:** Heather to post the questions in MS Teams, working group to continue discussion online, and co-chairs to bring the item back for decision at the next meeting

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**6. ANY OTHER BUSINESS**

a. Working group agreed to the proposed schedule change in the working group meeting time (to 7am EDT)

b. **ACTION:** Safa to adjust the calendar invitations once the shift is confirmed by the Secretariat