

Top Ten Insights Into How COVID-END Can Help You Support Decision-making

Webinar, 20 May 2020

John N. Lavis, MD PhD, Co-Lead, COVID-END; Director, McMaster Health Forum; and Professor, McMaster University

Jeremy Grimshaw, MBChB PhD, Co-Lead, COVID-END; Senior Scientist, OHRI; and Professor, University Of Ottawa







Background

- COVID-END is a time-limited network that has come together in response to an 'exogenous shock' (COVID-19) to collaboratively advance the evidence ecosystem in a way that
 - Makes the most of an explosion of interest in and demand for evidence synthesis (in part by reducing the noise-to-signal ratio)
 - Makes the evidence ecosystem even more robust and resilient in future
 - Strengthens existing institutions and processes





























































National Collaborating Centre for Methods and Tools

Centre de collaboration nationale des méthodes et outils

















Background (2)

- Three of the seven principles that underpin COVID-END's work
 - Supporting (not competing with or replacing) well-positioned organizations that are working in close partnership with key target audiences and already responding to their evidence needs
 - Supporting with a common brand/identity, small agile secretariat, and simple working group structure – a distributed network of organizations and individuals to play to their comparative advantages and leverage one another's work
 - Seeking out quick wins for those supporting decision-makers and among those involved in preparing evidence syntheses, technology assessments and guidelines, and taking measured steps to longerterm solutions that can better support decision-makers







Overview of How COVID-END Can Help

- 1) Website
- 2) Guide(s)
- 3) Tips and tools
- 4) Taxonomy
- 5) Innovative model 1: Rapid evidence profile
- 6) Innovative model 2: Evidence contextualization service
- 7) Working groups
- 8) Working group achievements coming online
- 9) Listserv
- 10) Insert your idea here







1. Website

- We've structured our website (https://www.covid-end.org) to meet the needs of two target audiences
 - Those supporting decision-makers (e.g., evidence shop at WHO, ministry staff, groups like RISE and EVIPNet)
 - Researchers (e.g., the many groups doing duplicative daily searches, the many groups doing duplicative rapid reviews, etc.)







2. Guide(s)

- We created two versions of the guide to COVID-19 evidence sources
 - One for those supporting decision-makers (who just need pointing to the high-quality, high-yield links), which we've called the <u>guide</u> to <u>key COVID-19 evidences sources</u>
 - Another one for researchers (who can help with avoiding duplication and enhancing coordination), which we've called the <u>guide to all COVID-19 evidences sources</u>







3. Tips and Tools

- We've drafted and continue to revise two versions of tips and tools
 - □ Tips and tools for those supporting decision-makers
 - Two of the tips are about making sure you have the right team and relationships in place (on demand and supply sides)
 - Six of the tips focus on creating the **right processes** to respond to requests from decision-makers (start with the guide, look for quality-rated products, document the recency of the search)
 - Two of the tips relate to the right balance between being reactive and proactive
 - □ <u>Tips and tools for researchers</u> who are involved or who want to become involved in such work







4. Taxonomy

- We've created a four-part taxonomy of decisions related to COVID-19
 - <u>Public-health measures</u> (infection prevention and control as well as broader measures)
 - <u>Clinical management</u> of COVID-19 and related health issues (e.g., unmanaged chronic conditions, mental health issues, family violence)
 - Health-system arrangements (e.g., how to re-start ambulatory clinics, cancer treatments, and elective procedures, how to maintain and build on the gains achieved with virtual care)
 - <u>Economic and social responses</u> (e.g., education, financial protection, food safety & security, housing, recreation, transportation)







4. Taxonomy (2)

- The taxonomy is a work in progress that can help to:
 - Curate existing evidence syntheses, technology assessments, and guidelines (we are exploring the possibility of creating a single searchable portal using the taxonomy as filters)
 - Inform the prioritization of the questions that need to be answered as issues emerge
 - Inform the prioritization of evidence syntheses, technology assessments and guidelines that should be kept up to date for the foreseeable future
 - Inform the prioritization of evidence syntheses, technology assessments and guidelines that are likely to be needed at some point in **future phases** of the pandemic and pandemic response







5. Innovative Model 1: Rapid Evidence Profiles

- We've piloted a rapid-evidence model that can be used or adapted in any jurisdiction to describe – in a three-hour turn-around time – both evidence and innovations to inform a particular decision
 - Three of ten examples (with the full list <u>here</u>)
 - What screening approaches can be used in non-healthcare settings (e.g., universities, stores and office settings) to identify people who may have COVID-19 and need to take appropriate action?
 - What are the international lessons learned from re-opening non-COVID-19 activities in hospitals?
 - What is known about strategies for supporting the use of masks under shortage conditions to prevent COVID-19?







6. Innovative Model 2: Contextualization Service

- We'll soon be piloting an evidence-contextualization model that can be used or adapted in any jurisdiction to engage local experts in interpreting what the research evidence means for your context
 - Rather than rely on them as a substitute for finding and using the best available research evidence







7. Working Groups

- We've convened working groups to achieve and document quick wins and establish processes to achieve and document longer-term wins
 - Scoping where support and coordination is most needed and what principles should underpin such support and coordination
 - <u>Engaging</u> those already supporting decision-makers to work in more coordinated and efficient ways
 - <u>Digitizing</u> as many aspects of the work as possible to facilitate coordination and capture efficiencies
 - Synthesizing the evidence that already exists in ways that are more coordinated and efficient and that balance quality and timeliness
 - Recommending evidence-based approaches in ways that are more coordinated and efficient and that balance quality and timeliness
 - Packaging evidence and guidelines in ways that meet the needs of citizens, providers, policymakers and researchers in different contexts and languages
 - Sustaining the efforts that strengthen institutions and processes so that we are even better prepared for future challenges







8. Working Group Achievements Coming Online

- Engaging
 - Identified 20+ networks globally that we'll be regularly engaging
- Digitizing
 - Soliciting input on greatest barriers (where digitization may help)
- Synthesizing
 - Revising and adding to the tips and tools for researchers
- Recommending
 - Moving towards a global guidance repository (w/ quality ratings)
- Packaging
 - Drafted **principles** and **resource list** to support evidence packaging







9. Listserv

We'll soon by launching a listserv for a community of practice among those who are supporting decision-making about COVID-19







10. Insert Your Idea Here

■ We're open to additional **suggestions** about what else we can do







Overview of How COVID-END Can Help

- 1) Website
- 2) Guide(s)
- 3) Tips and tools
- 4) Taxonomy
- 5) Innovative model 1: Rapid evidence profile
- 6) Innovative model 2: Evidence contextualization service
- 7) Working groups
- 8) Working group achievements coming online
- 9) Listserv
- 10) Insert your idea here







Keep Up To Date and/or Share Your Insights

- 1) Website https://www.covid-end.org
- Twitter @covid_e_n_d
- 3) Email c/o forum@mcmaster.ca



