

COVID-END: Achievements, Priorities and Opportunities to Draw on this Work to Achieve Greater Value for Money When Commissioning or Funding COVID-19 Research

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HEALTH FORUM



Background

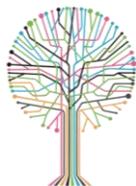
- COVID-END is a **time-limited network** that has come together in response to an ‘exogenous shock’ (COVID-19) to collaboratively advance the evidence (synthesis) ecosystem in a way that
 - Makes the most of an explosion of interest in and demand for evidence synthesis (in part by reducing the noise-to-signal ratio)
 - Makes the evidence (synthesis) ecosystem even more robust and resilient in future
 - Strengthens existing institutions and processes
- COVID-END’s work can also help to make the most of investments in primary research

Some of COVID-END's 45+ Partners

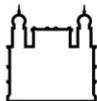
- Centre for Evidence Based Health Care



- Evidence
- Synthesis
- International



The Global Evidence Synthesis Initiative



Ministério da Saúde



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 **longer-term solutions** that can better support decision-makers

Achievements (<https://www.covid-end.org>)

- 1) Regularly updated **guide** to key COVID-19 evidences sources, which can be used to quickly review high-yield, high-quality sources of evidence to respond to decision-makers' urgent questions
- 2) Repository of **COVID-19 knowledge hubs**, which can be used to identify organizations that are already supporting decision-making with a specific topic or sectoral focus, with a specific type of resource (e.g., recommendations, evidence syntheses or data), and/or with a specific geographic or linguistic scope
- 3) **Taxonomy of decisions** where evidence will be needed, which spans public-health measures, clinical management of COVID-19 and pandemic-related health issues, health-system arrangements, and economic & social responses
- 4) Principles and resources to support **evidence packaging** for decision-makers
- 5) Description of an **evidence-support model** that can provide responses to decision-makers questions – both what's known and who's doing what – in timelines as short as three hours
- 6) **Tips and tools** for those supporting decision-makers
- 7) **Resources to support researchers** considering or conducting an evidence synthesis (with an interactive flow diagram)

Seven Working Groups Focused on Quick Wins and Processes for Longer-Term Solutions

- 1) Scoping where support and coordination is most needed and what principles should underpin such support and coordination
- 2) Engaging those already supporting decision-makers to work in more coordinated and efficient ways
- 3) Digitizing as many aspects of the work as possible to facilitate coordination and capture efficiencies
- 4) Synthesizing the evidence that already exists in ways that are more coordinated and efficient and that balance quality and timeliness
- 5) Recommending evidence-based approaches in ways that are more coordinated and efficient and that balance quality and timeliness
- 6) Packaging evidence and guidelines in ways that meet the needs of citizens, providers, policymakers and researchers in different contexts and languages
- 7) Sustaining the efforts that strengthen institutions and processes so that we are even better prepared for future challenges

Priorities: 1) COVID-END Community Listserv

- Reached out to 20+ networks to identify **individuals with the following attributes** to invite them to join the listserv (and community of practice)
 - Creating and/or using evidence syntheses, technology assessments, and/or guidelines as the focus of their support to decision-making about COVID-19
 - Engaging with decision-making about COVID-19 by citizens/service users, providers, and/or health- and social-system policymakers
 - Keen to learn from others about how to support decision-making about COVID-19 and willing to explore challenges and/or share experiences through online discussions
 - Share the values of the COVID-END partnership
- Created a preliminary list of **discussion topics and facilitators**
- Developed an approach to summarizing and sharing the **insights** from both organized topic discussions and ad hoc interactions
- [Join](#) the COVID-END Community listserv

Priorities: 2) Inventory (and Sharing)

- Inventory of 'best evidence syntheses' for all types of decisions being faced by those who are part of the COVID-19 pandemic response, which will save time and avoid duplication for those providing 'front-line' decision support in government (who can then focus on what the evidence means for their context)
 - Evidence syntheses harvested bi-weekly from sources in COVID-END guide
 - Filters applied for all parts of the COVID-END taxonomy of decisions (COVID-focused for all parts and often COVID-relevant too for health-system arrangements and economic & social responses)
 - 'Best evidence syntheses' rank-ordered within any given 'row' in taxonomy, based on
 - Date of search (e.g., 2020-07-01)
 - Quality (AMSTAR) rating (e.g., 8/11)
 - Evidence profile available (e.g., yes, with hyperlink)
 - Re-worded title with details to support relevance assessment (e.g., participants/exposure/outcomes)
 - Additional decision-relevant information profiled
 - Living evidence document (e.g., yes)
 - Type of synthesis (e.g., full review, rapid review, protocol)
 - Type of question (e.g., benefits & harms, costs, views and experiences, how & why it works)
- COVID-END's 'improve my RIS file service' will enable value-added data sharing across different group's workflows (e.g., Cochrane, Norwegian Institute of Public Health, UNCOVER)

Rough Example of What the Inventory Will Look Like (Hiding and Not Hiding Columns)

Broad and specific decisions	Criteria for 'best evidence synthesis'			Key details to support relevance assessment
	Date of last search	Quality (AMSTAR) rating	Evidence profile	Title
Infection prevention				
Personal protection				
Washing hands				

Broad and specific decisions	Criteria for 'best evidence synthesis'			Key details to support relevance assessment	Additional decision-relevant details			Citation
	Date of last search	Quality (AMSTAR) rating	Evidence profile	Title	Living evidence synthesis	Type of synthesis	Type of question	
Infection prevention								
Personal protection								
Washing hands								

Priorities: 3) Horizon Scanning

- Global horizon-scanning panel, comprised of diverse strategic and ‘out-of-the-box’ thinkers and doers, to proactively identify both **long-term and emergent issues** that need to be prioritized in efforts to synthesize the best available research evidence to support decision-making about COVID-19
 - Diverse in their coverage across the parts of the taxonomy and the four key target audiences (citizens, providers, policymakers and researchers)
 - Diversity in terms of WHO region and primary language
- Main focus is to identify priorities for **living reviews** on recurring priorities (and full or rapid reviews on one-off priorities) as we **transition from a sprint to a marathon**

Drawing on This Work When Commissioning or Funding Evidence Syntheses

- Point ‘new entrants’ to
 - **Resources to support researchers** (interactive flow diagram) to ensure they’re being as systematic and transparent as possible
 - E.g., register their protocol with PROPERO
 - E.g., work with established like Cochrane and Campbell
- Point everyone to
 - **Inventory of ‘best evidence syntheses’** to ensure they’re filling a gap
 - **Horizon-scanning reports** to ensure they’re addressing a need
 - Intermediary groups who can help with points on the next slide
- Be explicit about the rare instances when commissioning or funding replications of existing syntheses

Drawing on This Work When Commissioning or Funding Evidence-Contextualization Initiatives

- Point ‘new entrants’ to
 - **Tips and tools** for those supporting decision-makers
 - Principles and resources to support **evidence packaging** for decision-makers
- Point everyone to
 - Repository of **COVID-19 knowledge hubs** to ensure they’re filling a gap in topic or sectoral focus, type of resource (e.g., recommendations, evidence syntheses or data), and/or geographic or linguistic scope
 - **Guide** and soon the **inventory of ‘best evidence syntheses’** to ensure they’re supporting the use of best evidence
 - Description of an **evidence-support model** if they need to provide responses to decision-makers questions in timelines as short as three hours

Drawing on This Work When Commissioning or Funding Primary Research

- Point everyone to
 - **Inventory of 'best evidence syntheses'** to ensure they're filling a gap in the primary studies included in these syntheses (e.g., no or low-certainty evidence and no identified study protocols)
 - **Horizon-scanning reports** to ensure they're addressing a need
 - Other resources beyond COVID-END
 - COVID-19-COS for **core outcomes**

Keep Up To Date and/or Share Your Insights

- 1) Website – <https://www.covid-end.org>
- 2) Email – c/o covid-end@mcmaster.ca
- 3) Twitter – @covid_e_n_d
- 4) COVID-END Community listserv – <https://www.jiscmail.ac.uk/cgi-bin/webadmin?SUBED1=COVIDEND&A=1>