COVID-END Inventory (& Sharing)

COVID-END Synthesizing Working Group, 8 July 2020

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Primary Use Case for Inventory (and Sharing)

- Inventory for ‘front-line’ decision-maker support (so ‘local’ groups can focus on evidence contextualization – what does it mean for our setting?)
  - Reviews harvested from sources in the COVID-END guide
  - Filters applied for all levels in the COVID-END taxonomy of decisions
  - ‘Best evidence’ rank-ordered within any given ‘row’ in the taxonomy
    - Living (or recent search)
    - Quality (using AMSTAR I)
    - Available evidence profile
  - Decision-relevant information profiled (above plus type of review, type of question and (later) countries where studies conducted)
- COVID-END’s ‘improve my RIS file service’ will enable value-added data sharing across different group’s workflows (e.g., Cochrane, NIPH)
Secondary Use Case for Inventory

- Horizon scanning to identify needed taxonomy adjustments and priorities for living reviews on recurring priorities (and full or rapid reviews on one-off priorities) where none currently exist
  - Summarizing key insights derived from horizon-scanning organizations and from a variety of other types of organizations (including international agencies, governments, NGOs, media, etc.) and from assessments of gaps in inventory (including PROSPERO)
  - Engaging a global horizon-scanning panel in ‘sense-making,’ with members selected to achieve
    - Coverage across 4 parts of the taxonomy and 4 key target audiences (citizens, providers, policymakers & researchers)
    - Diversity in terms of WHO region and primary language
## Rough Example of What It Will Look Like

<table>
<thead>
<tr>
<th>Taxonomy</th>
<th>Living evidence document</th>
<th>Date of last search [Search conducted in last month (green)]</th>
<th>Quality rating using AMSTAR I 1) 8-11 [green] 2) 4-7 [yellow] 3) 0-3</th>
<th>GRADE evidence profile available 1) Yes, with hyperlink [green] 2) No</th>
<th>Title [hyperlink to abstract +/- full text]</th>
<th>Citation</th>
<th>Type of review</th>
<th>Type of question</th>
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<tbody>
<tr>
<td>Public-health measures</td>
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<td>1) Effectiveness</td>
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<td>Infection prevention</td>
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<td>2) Costs</td>
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<td>Personal protection</td>
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<td>3) Protocol</td>
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<tr>
<td>Washing hands</td>
<td>Yes</td>
<td>2020-07-01</td>
<td>10/10</td>
<td>Yes</td>
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<td>1) Full review</td>
<td>4) Other</td>
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<td></td>
<td>No</td>
<td>2020-05-20</td>
<td>8/9</td>
<td>Yes</td>
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<td>Wearing personal protective equipment</td>
<td>Yes</td>
<td>2020-06-21</td>
<td>5/9</td>
<td>No</td>
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<td>Disinfecting surfaces and facilities</td>
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<td>Physical distancing</td>
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<td>Temporal distancing</td>
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<td>Public-focused behaviour-change support</td>
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<td>Health worker and essential worker-focused care</td>
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<td>Service Limitations</td>
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<td>Essential service designations</td>
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<td>Daycare, school, university and summer camps</td>
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<td>Recreational areas (e.g., parks) limitation</td>
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Questions

- Making available iterations of the inventory as it becomes filled out (all living reviews, then all living and full systematic reviews, etc.)
- Making trade-offs across the three criteria when ordering reviews (living/recency, quality and evidence profile)
- Setting up the data in ways that are usable by the ‘improve my RIS service’ (and drawing on insights from COKA & using JSON format)
- Establishing terms for reciprocity
  - Partner logo on COVID-END inventory webpage if used as a source
  - COVID-END logo on source page if used COVID-END data
- Transitioning from COVID-focused documents only to also including COVID-relevant documents (to fill gaps)