

## 1. e-COVID-19 LIVING MAP OF RECOMMENDATIONS

- Presentation by Holger Schünemann on living recommendations map, through collaboration between Holger's group @ McMaster and NIPH, and many international collaborators, covering recommendations in infection control to health systems
- Goal is to provide one-stop shop for trustworthy recommendations, both research and KT strategy; building on existing work on WHO TB recommendations map
- Includes recommendations, good practice treatments and tools and tips related to subject, with more information (critical appraisal, COIs,) available
- Working groups looking at information science, quality appraisal, equity, adoption, EML
- Daily extraction of recommendations from websites and publications, and screens professional societies and team meets weekly to review guidelines and recommendation, prioritization exercises to help identify strategic areas
- Currently translating priority guidelines in French and exploring translations to Spanish and German
- Adoption, adaption, contextualization is being automated in collaboration with NIPH and Epistemonikos to add locally-relevant information (and feed this back to e-COVID)
- Continue to develop partnerships, adoption and rapid updating
- Questions from group included:
  - Quality appraisal; very few guidelines met the expected quality cut off of 60%; currently includes all guidelines, but many guidelines in publications do not always have full information necessary for AGREE scores. Currently assessing three key AGREE domains and doing all six for priority guidelines, with aim to eventually have full assessments for all guidelines. Assessment not perfect, and includes guidelines that scores poorly but are transparent about scoping system
  - Approach to living guidelines: Australian and WHO living guidelines to be included shortly; system does daily screening of databases to identify guidelines and update as new guidelines are produced
  - Accessibility: currently very focused on health professionals versions, still need to do some translation for public and non-health professionals, starting with prioritized areas; may be opportunities to engage with others on call (e.g. ACTS, Academy Health)
  - Handling divergent guidelines: lays out differences between recommendations to allow users quick-view of where different and why
  - Contextualization: interested in opportunities to strengthen data available for contextualization process; provides original developer's rationale for recommendation so users can assess relevance of rationale against accessibility, equity, costs among others

- Opportunity for COVID-END to think through how we can amplify and support e-COVID where it complements COVID-END objectives
- Would be helpful to carry out independent assessment by sub-group of COVID-END
- Contextualization should point to multiple resources and frameworks so that users have a complete view of all available resources (e.g. contextualization prompts on public domain)
- Suggest considering vertical and horizontal integration of how recommendations are presented to line up all of recommendations that feed into clinical decisions. End-users often cannot check all of the guidelines relevant to their question; would be helpful to have grouping to navigate many different guidelines addressing similar questions

**ACTION: Working group members to send any additional comments to Ivan and David to continue discussion both within working group and at Secretariat**

**2. ANY OTHER BUSINESS**