

<p>1. INTRODUCTIONS</p> <p><i>a. David Gough, EPPI-Centre, UK</i></p>	<p>5 min</p>
<p>2. COVID-END LOGIC MODEL</p> <p><i>a. Logic model presentation (see attachment 2)</i></p> <ul style="list-style-type: none"> <li>• <i>David Gough walked through the various components of the logic model</i></li> </ul> <p><i>b. Discuss the following:</i></p> <p><i>i. Does the logic model make sense from the working group's perspective?</i></p> <ul style="list-style-type: none"> <li>• <i>The most valuable strengths of COVID-END is the multisectoral approach (public health, clinical management, health system arrangements and economic and social response), and that's within the long-term influences, but it should be distributed within the rest of the logic model</i></li> <li>• <i>Where do primary trials fit into the logic models, and how do we engage that in the logic model?</i></li> </ul> <p><i>ii. Does the logic model adequately represent the tasks and terms of reference of the working group?</i></p> <p><i>iii. Are there any missing elements; work that your working group is doing that cannot easily be located within the model?</i></p> <ul style="list-style-type: none"> <li>• <i>Target group will need policy makers and health care providers. Decision makers is a broad category and will need to be broken down further (to perhaps policy makers and health care providers)</i></li> <li>• <i>Intersectionality to be included in the principles of diversity, inclusiveness and equity</i></li> <li>• <i>Links to impacts, are there key definitions that fit into each of the impacts and what is meant by those terms that can be added or referenced in a separate slide or documentation?</i></li> <li>• <i>The grey boxes at the top could capture the background or work that is already being conducted prior to COVID-19 and COVID-END that we are currently building on</i></li> <li>• <i>There needs to be more connection between the different sectors coming together within the target groups component too</i></li> </ul>	<p>30 min</p>

<p><i>iv. Are there any early indications or examples for the short-term outcomes and long-term influences? If so, can these be packaged as ‘success stories’, which will help COVID-END’s business case and liaising with funders</i></p> <ul style="list-style-type: none"> <li>• <i>Success stories include:</i> <ul style="list-style-type: none"> <li>○ <i>Resources and guidance for researchers and knowledge producers that is on the COVID-END website along with diagram and schematic</i></li> <li>○ <i>Conversations around equity which led to the formation of an equity subgroup that will draw on and work on all of the working groups</i></li> <li>○ <i>Addressing the issue of quality of rapid reviews</i></li> </ul> </li> <li>• <i>The diversity of experiences and the amount of data that exists in which global partnership allows partners to be exposed to other disciplines and the other syntheses and work</i></li> </ul> <p><i>v. Are there any emergent systems and methods within existing institutions and processes that can be reflected in the model?</i></p> <p><i>vi. Eventually we would like working groups to think beyond COVID. Thinking about the logical model can be a way to start this conversation about any tasks/roles/projects that could continue past COVID-END. This conversation could be about individual groups and also about how they all function together (in the logic model) to enable the use of evidence (in evidence ecosystem)</i></p> <ul style="list-style-type: none"> <li>• <i>Further work on the duplication of efforts and of synthesis/rapid review</i></li> <li>• <i>Through core funding, COVID-END can be sustained and it would be provide a useful platform for all evidence synthesis groups and may strengthen links with primary trial groups as next steps</i></li> <li>• <i>The diversity of experiences and the amount of data that exists in which global partnership allows partners to be exposed to other disciplines and the other syntheses and work</i></li> </ul>	
<p><b>3. FOLLOW-UP ON ACTION ITEMS</b></p> <p><i>a. Review notes and action items from last meeting (see attachment 3) Safa to prompt members of the Doctor Evidence again and if they have any revisions for the resources page</i></p> <ul style="list-style-type: none"> <li>• <b>ACTION:</b> All members to review DoctorEvidence’s COVID resources and share any comments with Safa who will compile comments, considering the resources already in the guide</li> </ul> <p><i>b. Review notes and action items from joint meeting (see attachment 4)</i></p>	15 min
<p><b>4. WORKING GROUP MEETING DATE AND TIME</b></p>	5 min

<p><i>a. Re-scheduling the Synthesizing WG meeting times: 9am EST?</i></p> <ul style="list-style-type: none"> <li>• <i>Need to decide as a group whether our next meeting is Synthesizing or joint meeting</i></li> <li>• <i>Group agreed to have a monthly joint working group meeting</i></li> <li>• <b>ACTION:</b> Safa to circulate an email to the whole group indicating that the next meeting will be on the week of October 19</li> <li>• <b>ACTION:</b> David and Safa to decide on meeting times based on the Doodle poll circulated</li> </ul>	
<p><b>5. ANY OTHER BUSINESS</b></p> <p><i>a. Weeks with no COVID-END scheduled meetings:</i></p> <ul style="list-style-type: none"> <li><i>i. Week of October 12</i></li> <li><i>ii. Week of November 16</i></li> </ul>	<p>5 min</p>