

1. FOLLOW-UP ON ACTION ITEMS

- a. *Review previous meeting notes from July 31 (see attachment 2)*
- b. *Finding a new time for meetings:*
Doodle poll <https://doodle.com/poll/8um8kwexgcn4tv7t>

- **ACTION:** Working Group members to fill out the Doodle poll to find a new time, hopefully projected to change for the week of September 7th

2. PRESENTATION AT FUTURE PARTNERS MEETING

- a. *Tentative date: August 27?*
 - *Recommending WG presentation at partners call to be moved to September 10th*

3. REGISTRIES OF GUIDELINES IN DEVELOPMENT

- a. *Discussion about registries [Zac and Sara] (see attachment 3)*
 - *Sara shared a short paper summarizing registries of guidelines in development*
 - *Clinical guidelines.gov form Australia (specific to Australia but high quality)*
 - *guidelineregistry.org (led by Yaolon Chen-, used extensively by medical association of china; 2 guidelines are COVID-specific)*
 - *Registry based in Germany, highest quality registry, collects information from 150+ guidelines; 14 are COVID-specific and 36 COVID-relevant*
 - *Registry led by Ukrainian MOH, some in English though mostly in Ukrainian; no COVID entries*
 - *Existing GIN library has 271 guidelines in development registered; no COVID specific guidelines. Sara's summary document also describes GIN's plans for guideline registration, including inviting COVID-specific and COVID-relevant guidelines. Will be open access and include contact information and deadline for contacting.*
 - *COVID-END's role should be to point to and complement GIN's resources*
 - *Registries of guidelines may be helpful for those that are starting new guidelines, but if a guideline developer realized that there is a guideline produced by an organization, then it would be helpful for those developers to contact guideline groups to avoid duplication of efforts*
 - *Currently no registry for HTA reports, though there is interest in EU*
 - *Planned and ongoing project (POP) reports within EUnetHTA, working to incorporate this into INAHTA database; likely the best tool and will evolve to be even more useful.*

- *Sandra suggested bringing Rebecca Morgan and the guideline working group into the conversation*
- *How can we increase collaboration around the world and to bring people to these specific GIN databases to avoid duplication? Potentially reach out to smaller groups (e.g. bridging across medical professional associations and societies internationally) and have a marketing piece about collaboration and present the challenges, insights and lessons learned, organize/host virtual conversations*
- *Critical to support collaboration is to make an agreed commitment a priori to a threshold of evidence (e.g. if evidence is too heterogeneous to combine, then can move to consensus-based, evidence-informed process)*
- *Guideline developing groups also need tools and resources (particularly around quantitative analysis) and collaboration is an avenue to bring in resources to support them*
- *Given the extent to which efforts to encourage collaboration have been challenged in the past, may be strategic to work with organizations producing high quality guidelines; context of collaboration is different in COVID (in living NMA, living reviews)*
- *Role for COVID-END in pointing to most trustworthy guidelines (through the inventory)*
- **ACTION:** *Ivan to connect with Rebecca Morgan, lead of the GIN Collaboration working group, to join the Recommending working group*

4. RESOURCES AND TOOLS FOR GUIDELINES AND HTA

a. Brief summary of discussion with the COMET initiative [Ivan]

- *Ivan, Nichole and David met with the COMET initiative. Emphasized need for outcome definitions for clinical practice guideline development and importance of network of clinicians, researchers, etc. who are using and creating those outcomes for various decisions*
- *Once the outcomes are completed (includes outcome set, definitions and how to measure), projected for the end of September, COVID-END can work encourage researchers and clinicians to use these outcomes for trials, systematic reviews and guideline development*
- *Potential for a partnership between COVID-END and COMET (to be discussed further with John and Jeremy)*
- *Paula Williamson has indicated that she can present at a partners meeting towards the end of September*
- *COMET is currently working on creating a 2-domain outcome set for intensive care treatment. Their work in Australia is to be published soon*

- *The COMET steering group newest focus in on prevention and once approved, they will launch an online Delphi process (projected to be completed by September) and are keen for COVID-END partners to sign up*

b. Final comments to 'Resources and tools for guideline developers and decision makers interested in rapid guidance and HTA-IF'

See Google document

<https://docs.google.com/document/d/16YKVksKbVbIeP4QfPHgIQbijobJm-IFQW9s6gGPJkzo/edit?usp=sharing>

5. ANY OTHER BUSINESS

No other business was raised