COVID-END's Past Achievements and Current Priorities

Evidence Synthesis Network, 8 September 2020

John N. Lavis, MD PhD, Co-Lead, COVID-END;
Director, McMaster Health Forum; and Professor, McMaster University

Jeremy Grimshaw, MBChB PhD, Co-Lead, COVID-END;
Senior Scientist, OHRI; and Professor, University Of Ottawa

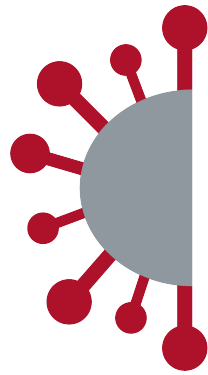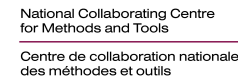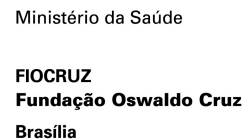David Tovey, MBChB FRCGP, Senior Advisor, COVID-END

Background – COVID-END's Focus

- 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 as well as in methodological research and infrastructure

Seven 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) Living hub 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 [**searchable version coming soon**]

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

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

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 3-4 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)

Priorities: 1) Inventory

- 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 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 / intervention / phenomenon, and outcomes)

Priorities: 1) Inventory (and Sharing)

- Inventory (continued)
  - 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)

Priorities: 1) Inventory [Under Construction]

Broad and specific decisions		Criteria for 'best evidence synthesis'			Details to support relevance assessment
		Date of last search	Quality (AMSTAR) rating	Evidence profile	Key findings
	Wearing masks	2020-06-02	7/10	No	Limited evidence from observational studies shows that face mask use may be effective at reducing respiratory virus infections, with stronger evidence from healthcare settings compared to community settings (Last update 13 Aug 2020)
		2020-05-03	9/11	Yes	Large reductions in risk of viral infections may be possible with the use of masks, with N95 or similar respirators more likely to lead to greater reductions compared to disposable surgical masks or other reusable masks (Last update 13 Aug 2020)

Broad and specific decisions	Criteria for 'best evidence synthesis'			Details to support relevance assessment	Additional decision-relevant details			Citation
	Date of last search	Quality (AMSTAR) rating	Evidence profile	Key findings	Living evidence synthesis	Type of synthesis	Type of question	

Priorities: 2) 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)

  - Diverse 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

Priorities: 3) Living Systematic Reviews

- In the short-term

  - Create a list of priority topics where living systematic reviews are needed (based upon our inventory and horizon-scanning activities)

- In the medium-term

  - Cajole, encourage and nudge groups to collectively take responsibility for a full set of living reviews addressing all priority issues related to the pandemic and pandemic response

Priorities: 4) COVID-END Community Listserv

- **Targets** individuals with the following attributes
  - 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
- **250+ members** from around the globe, and counting
- Vibrant list discussion topics and facilitators
- Complemented by a soon-to-launch webinar series
- Plan to summarize and share the insights from both organized topic discussions and ad hoc interactions

Keep Up To Date and/or Share Your Insights

- Website – https://www.covid-end.org
  - ❑ Resources to support researchers
  - ❑ Guide → Inventory [under construction]
  - ❑ Horizon-scanning panel's monthly briefing notes and panels summaries → List of gaps in living systematic reviews
  - ❑ COVID-END Community listserv – https://www.jiscmail.ac.uk/cgi-bin/webadmin?SUBED1=COVIDEND&A=1
- Email – c/o covid-end@mcmaster.ca
- Twitter – @covid_e_n_d