

Wales COVID-19 Evidence Centre Work Programme September 2021

Purpose of this Document

This document presents the Wales COVID-19 Evidence Centre (WCEC) **work programme** to 10 September 2021.

We also present a summary of the process to date (from March 2021), including:

1. Our process for **consulting key stakeholders** in health and care to identify the most important COVID-related evidence needs and priorities in Wales – the Stakeholder Research Question Prioritisation Exercise (ScOPE).
2. An outline of our Rapid Evidence Review process.
3. The research questions adopted onto the WCEC work programme including the stage of progress.
4. A timeline for the reviews.

It is important to note that the WCEC work programme is **iterative**, and the research question prioritisation process is ongoing. We will continue to assess and incorporate research needs and priorities as they are submitted by stakeholder groups. The work programme will also be informed by ‘**horizon scanning**’ procedures, so that it is reactive to emerging and changing priorities.

Table of Contents

1.	<i>Our Research Question Prioritisation Process</i>	2
2.	<i>Our Rapid Evidence Review Process</i>	4
3.	<i>Our Work Programme</i>	5
	Table 2: WCEC Work Programme (10.09.21)	6
	Table 3: Questions on our work programme not yet started (10.09.21)	9
4.	<i>Next Steps</i>	11
5.	<i>Appendix</i>	11
6.	<i>About the Wales COVID-19 Evidence Centre</i>	12

1. Our Research Question Prioritisation Process

Who have we consulted so far?

To identify the most important current and emerging COVID-19 health and care priorities across Wales, we have reached out to a total of **39 individual stakeholder groups** involved in health and social care across Wales, within the following broad groups:

-
- Welsh Government / Policy Groups
 - Social Care
 - Academy of Medical Royal Colleges (Wales)
 - Public and Patient Involvement Organisations
 - Health and Care Research Wales Research Infrastructures
 - NHS Wales Service Delivery Groups
 - NHS Wales University Health Boards / Trusts
 - Third Sector Support Wales
-

What does this involve?

Questions are identified through i) identification of existing priorities, ii) stakeholder consultation and iii) horizon scanning:

i) Identifying existing priorities for early evidence reviews

Significant evidence-based groundwork has already been undertaken in Wales to identify and explore evidence priorities. We aimed to build upon and complement the priority setting and evidence review work that had already been conducted by Welsh Government's Technical Advisory Cell / Group, and other key groups.

Through discussion with the Welsh Government's Technical Advisory Cell / Group, we identified existing priorities and asked them to agree which of these remain the highest priority, to form the initial WCEC work programme.

Evidence reviews conducted as part of this early pilot work programme provided rapid answers to some of the most important ongoing priorities, and also allowed us to test, refine and improve our processes ahead of the results of the stakeholder research question prioritisation consultation exercise outlined below.

ii) Stakeholder consultation

Since March 2021, we have identified and invited stakeholders to complete the Stakeholder Research Question Prioritisation Exercise (ScoPE). Stakeholders were invited to provide **up to ten ranked 'top research questions'**, describing the following:

- a) Relevance to the current or future COVID-19 context in Wales

- b) Importance of the evidence gap (scale, costs, consequence)
- c) Potential benefits
- d) Potential for translation into practice
- e) Need for timely information

Completed ScoPEs are assessed by the WCEC Core Team against the criteria above and categorised as follows:

Category 1 <i>Recommended onto work programme</i>	Category 2 <i>Not currently recommended onto work programme</i>	Category 3 <i>Not recommended onto work programme</i>
a) with no significant changes b) with revisions c) as part of another question	Current relevance / importance / applicability limited - monitored during horizon scanning / review processes & considered against changing needs / emerging evidence	Issues with relevance, importance, benefits, translation, remit; Already addressed by ongoing / existing WCEC review OR external study / review; suitable for primary research

iii) **Horizon scanning**

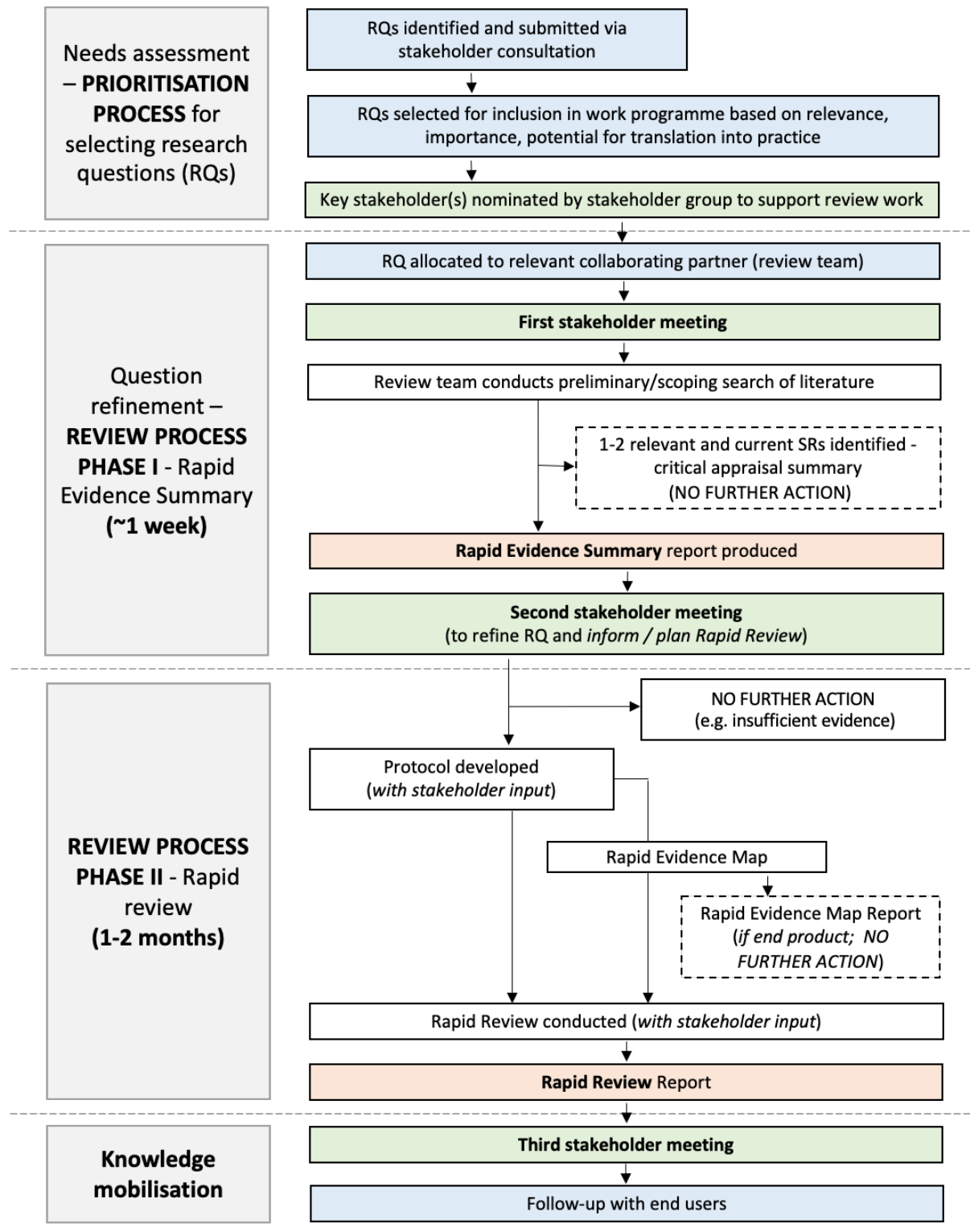
As we know, the impact of the pandemic on health and social care needs is continually changing. Questions that have been identified may become more or less important depending on the phase of the pandemic. Therefore, we frequently review our work programme to ensure that our priorities are up-to-date and continue to reflect the greatest need and greatest potential for impact.

In addition, new issues will emerge and become more prominent. Therefore, in addition to reviewing our work programme, we conduct ‘horizon scans’ in order to proactively identify long-term, recurring and emergent issues that need to be prioritised. Scans of the horizon provide a view of what might be important in future, and it will help us to gain lead time to proactively develop responses.

A number of well-established horizon scanning procedures have been identified (e.g. COVID-END), and we will consult these updates to identify emerging priorities. We will also continue to work closely with the Technical Advisory Cell / Group, who will have a clear understanding to the current COVID-19 context within Wales (e.g. numbers infected, transmission rates etc) and will be able to advise us on emerging issues that might significantly influence current policy, service delivery and practice. Further, we anticipate that new and unanswered issues will arise from the evidence syntheses conducted as part of our work programme, and we will integrate the capture of this information into report templates. Finally, we will re-consult with the key stakeholders (Table 1) at six monthly periods, asking them focus on future rather than immediate needs.

2. Our Rapid Evidence Review Process

The following figure represents our rapid evidence review process including stakeholder consultation.



3. Our Work Programme

Priority Research Questions identified via existing priorities, ScoPE and horizon scanning

Through consultation with stakeholders, we have identified **a number of high priority question topics for inclusion** in the current WCEC Work Programme. The full list of initial questions for inclusion in our Work Programme and progress to date is outlined in Table 2 (page 5).

Key priority themes

The question topics proposed for inclusion in the initial work programme cover the following broad themes.

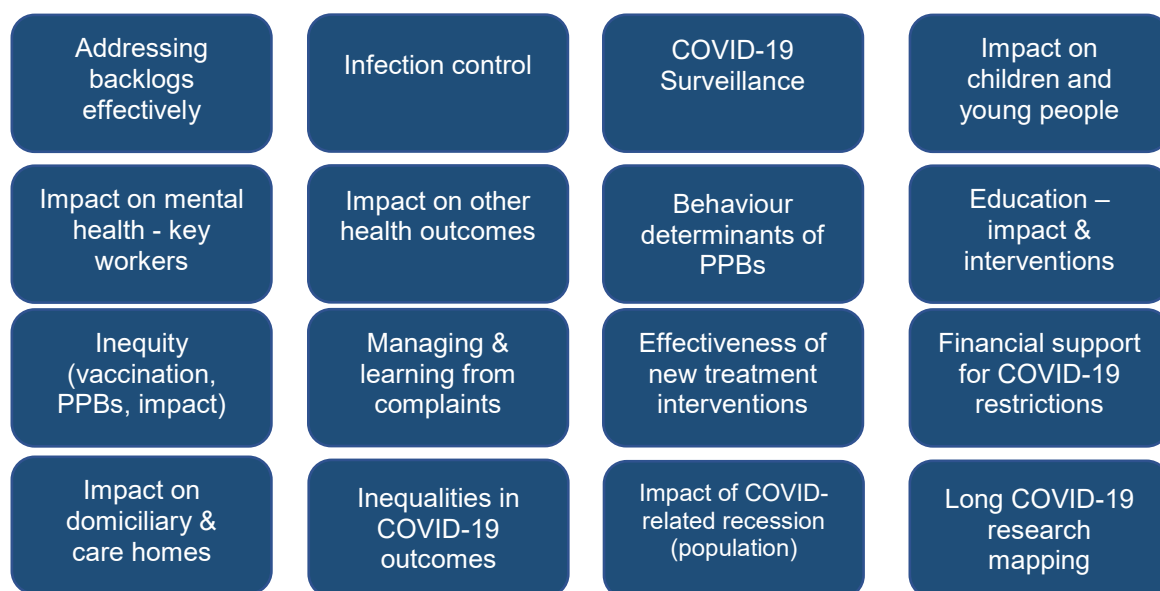


Table 2: WCEC Work Programme (10.09.21)

In the Table, we present an update of our work to date, indicating ongoing and completed review work at this time. (Note: Our work programme may be subject to change following discussion with Collaborating Partners and stakeholders, and if new high priority areas arise).

We currently produce three types of reports: a ‘Rapid Evidence Summary’ (**RES**), which is produced within one week; a ‘Rapid Review’ (**RR**), which is typically conducted within 1-2 months; and a Rapid Evidence Map (**REM**), which can be developed as an interim stage prior to the RR in order to identify a focused review question. The aim of the RES is to provide some early information to the stakeholders and inform the next stage of our work. Where there is insufficient research information available for conducting a RR, the RES represents the final product.

Our completed rapid review (RR) reports will be made available for download on our website <https://healthandcareresearchwales.org/about-research-community/wales-covid-19-evidence-centre>. Where a question is not proceeding to the rapid review, the research evidence summary (RES) or rapid evidence map (REM) will be published.

Code: **Green** – completed, **Amber** – in progress, **Red** – not yet started (but accepted onto the Work Programme)
(Abbreviations used are in the Appendix).

DOCUMENT IDENTIFIER	PRIORITY QUESTION TOPICS PROPOSED DURING SCOPE CONSULTATION (including sub-questions)	PROPOSER(S)	PARTNER CONDUCTING REVIEW	STATUS
00001_RES	Can we better quantify the relative risk of COVID-19 transmission in enclosed, semi-enclosed and outdoor environments?	TAG: Environmental Science Subgroup	WCEC Core team and HTW	Complete. Not proceeding to RR due to limited evidence
00002_RR	Impact of the COVID-19 pandemic on the mental health of health and social care workers within the UK	TAG: Policy Modelling Subgroup	SURE	Complete

<p>00003_RES 00003_RR</p>	<p>Cancer screening and investigation</p> <p>1. Can innovations address the screening backlog and be accelerated e.g., HPV self-sampling, risk stratification? (Includes diagnostic pathways)</p> <p>4. What examples of best practice are there for effective and efficient use of cancer investigations (e.g., imaging, endoscopy) maintained during the pandemic that can be learned from?</p> <p>The RR focus is on the endoscopy pathway for the diagnosis of gastrointestinal cancers</p>	<p>Shared by the National Cancer Research Institute</p>	<p>BIHMR / HCEC</p>	<p>RR due for completion and publication in September</p>
<p>00004_RES 00004_RR</p>	<p>Effectiveness and experiences of alternative education delivery strategies for healthcare students during the COVID-19 pandemic</p> <p>Including medicine, nursing, dentistry, and pharmacy</p>	<p>Prof. Steve Riley, Dean of Medical Education & Head of SOM, CU</p>	<p>WCEBC</p>	<p>RR completed. Publication due in September</p>
<p>00005_RES</p>	<p>The effectiveness of home monitoring using pulse oximetry in people with COVID-19 symptoms to guide future management</p>	<p>TAC via HTW</p>	<p>HTW</p>	<p>Completed. Not moving to RR due to Insufficient evidence.</p>
<p>00006_RES</p>	<p>Vaccination Uptake (barriers/facilitators and interventions) in adults from underserved or hard-to-reach communities</p>	<p>Vaccine Equity Group and PHW Vaccine Preventable Disease programme</p>	<p>PHW</p>	<p>RES completed. Not moving to RR.</p>
<p>00007_RES 00007_RR</p>	<p>Face coverings to reduce transmission of SARS-CoV-2</p> <p>What is the effectiveness of face coverings in reducing COVID-19 transmission, and in what settings are they most likely to provide benefit?</p> <p>What is the effectiveness of different types of face coverings (e.g. cloth coverings, medical-grade masks) in reducing COVID-19 transmission?</p>	<p>TAC via HTW</p>	<p>HTW</p>	<p>Completed</p>

00011_RES 00011_RR	<p>Infection prevention in schools / education settings</p> <p>How effective are the infection prevention and control measures (e.g. face coverings, social distancing, self-isolation, bubbles) being applied in education and childcare settings for children? (Age 0-18 yrs; to include virus transmission outcomes and mental health, wellbeing, and pre-school child development).</p> <p>The RR focused on reviewing 2 reports.</p>	TAG: Children & Education Subgroup	PHW	Completed. Publication due in September.
00016_RES 00016-RR	<p>Children and young people education</p> <p>What is the evidence of the effectiveness of strategies that seek to reduce inequalities in learning and attainment gaps for disadvantaged children and young people?</p> <p>RR focussing on the same question but for 16–18-year-olds.</p>	TAG: Children & Education Subgroup	WCEBC	RR due in September
00013_RES 00013_RR	<p>Impact on children and young people, and interventions to support / mitigate</p> <p>During the Covid-19 pandemic, what are the facilitators and barriers that have contributed to physical, mental, social and/or educational harms in children aged 3-13 years, to exacerbate existing or introduce new inequalities into our society?"</p>	TAG: Children & Education Subgroup. TAG: Socio Economic Harms Subgroup	SURE	RR due in September
00012_RES 00012_RR	<p>What is the SARS Cov-2 virus transmission rate in vaccinated populations?</p>	PHW	HTW	RR due in October
00010_RES	<p>Impact on chronic disease services and outcomes, and innovations to address</p> <p>How do we address the impact on patients with chronic disease, and any impact on secondary care? (Deteriorating chronic disease as patient not coming forward during COVID-19 time periods, or late presentations).</p>	Cwm Taf UHB	SAIL	Impact analysis in progress. Due early 2022.
00008_RES	<p>Innovations to address the backlog in elective services - surgical operations</p> <p>What has been the impact on elective services and outcomes for patients?</p>	Cwm Taf UHB	PHW	RES due in September

	How do we address the backlog of elective care cases and restart services? How do we prioritise cases and are all cases now relevant in new climate?			
00018_RES 00018_RR	What is the effectiveness of infection control measures in care homes and for domiciliary care residents?	WCEC - Identified evidence gap	BIHMR / HCEC	RR due in October
00023_RES	Review of ozone disinfection machines for schools: efficacy, effectiveness in real life settings and safety	TAG	HTW	RES due in September
00017_REM	Long COVID - research evidence mapping (REM) Existing long covid research – What research studies exist and how can patients get involved? How much are patients in Wales currently reflected/involved with existing studies?	Long COVID Task Force (WG)	WCEC Core Team	Ongoing
00014_RES	Health inequalities in COVID-19 outcomes What are the mediating factors for health inequalities in COVID outcomes such as hospital and deaths – e.g. Is it housing density, overcrowded housing, occupation, long term conditions, smoking, obesity, etc? Which of these factors accounts for health inequalities in covid being greater than for other diseases?	TAG: Policy Modelling Subgroup	WCEC Core Team supervised student projects	Ongoing

Table 3. Questions on our work programme not yet started (10.09.21)

DOCUMENT IDENTIFIER	PRIORITY QUESTION TOPICS PROPOSED DURING SCOPE CONSULTATION (including sub-questions)	PROPOSER(S)	PARTNER CONDUCTING REVIEW
00009_RES	Impact on cancer services and outcomes, and innovations to address these What impact did changes in cancer diagnostic/screening services during the pandemic have on a participant's diagnosis, stage of cancer, burden of disease and overall survival? What has been the impact of reduced cancer treatment services on the development of metastatic disease in all cancer disease sites, especially the burden of disease, recurrence, and overall survival	Velindre NHS Trust	To be allocated. (See also 0003_RR in Table 2)

	<p>What is the impact of (among COVID-19 infected cancer patients) of the COVID19 pandemic on cancer outcomes/toxicity in relation to decisions relating to radiotherapy, surgical, systemic anti-cancer treatment (SACT), immunotherapy and proton beam therapy treatments in all cancer disease sites, particularly thoracic and upper gastro-intestinal disease?</p> <p>What impact did the COVID19 pandemic and changes in cancer diagnostic/screening services have on urgent cancer referrals for early diagnosis?</p>		
00015_RES	<p>What are the barriers and facilitators to facilitate uptake of personal protective behaviours including asymptomatic regular testing (lateral flow tests), self-isolation and social distancing?</p>	TAG: Risk Communication & Behavioural Insights Subgroup	PHW
00019_RES	<p>Impact on COVID-19-related recession – general population</p> <p>What can we expect in terms of future health issues related to a COVID-19-related recession – e.g. in terms of deaths of despair? How do we mitigate these risks?</p> <p>What can we expect in terms of risky behaviours e.g. drug, alcohol, sexual health, in terms of coming through a pandemic? There is a large cohort of young people who may be more likely to be unemployed because of the pandemic or pick up certain behaviours like excess alcohol, drug use, gambling, unhealthy diet, lack of physical activity.</p>	TAG: Policy Modelling Subgroup	SAIL
00020_RES	<p>Financial support for quarantine</p> <p>A summary of research examining the financial and non-financial supports provided in developed economies to individuals who have been requested or required to quarantine as a consequence of travel from or to Covid-19 affected countries and regions and whether these have been sufficient to mitigate the overall long-term damage.</p>	TAG: Socio Economic Harms Subgroup	HTW
00021_RES	<p>Complaints and improvement</p> <p>How can we best handle and manage complaints and litigation within the COVID-19 climate to maximise improvement?</p>	Cwm Taf UHB	WCEBC

4. Next Steps

The WCEC work programme is iterative, and the research question prioritisation process is ongoing. We will continue to assess and incorporate research needs and priorities as they are submitted by stakeholder groups and **we encourage all stakeholders to continue to submit their completed ScoPE proformas, and potential new stakeholders to contact us.**

Please note, timeframes and question prioritisation may change if new high priority areas arise via ScoPE returns, horizon scanning, or ongoing reviews (e.g. pertinent questions in advance of new waves). There is flexibility in the work programme for urgent questions to be prioritised, and for other topics to be deferred until a later date.

5. Appendix

Abbreviations used

Bangor Institute for Health & Medical Research / Health and Care Economics Cymru	BIHMR/HCEC	Specialist Unit for Review Evidence	SURE
CU	Cardiff University	School of Medicine	SOM
Health Technology Wales	HTW	Technical Advisory Cell	TAC
Human papilloma virus	HPV	Technical Advisory Group	TAG
Personal Protective Behaviours	PPB	University Health Board	UHB
Public Health Wales	PHW	Wales Centre for Evidence Based Care	WCEBC
Secure Anonymised Information Linkage	SAIL Databank	Wales COVID-19 Evidence Centre	WCEC

6. About the Wales COVID-19 Evidence Centre

The Centre integrates with worldwide efforts to synthesise and mobilise knowledge from research. We operate as part of [Health and Care Research Wales](#) with a core team, hosted in the Wales Centre for Primary and Emergency (including Unscheduled) Care Research (PRIME).

The Centre core team of the centre works closely with collaborating partners in [Health Technology Wales](#), [Wales Centre for Evidence-Based Care](#), [Specialist Unit for Review Evidence Centre](#), [SAIL Databank](#), [Public Health Wales](#), [Bangor Institute for Health & Medical Research](#) in conjunction with [Health and Care Economics Cymru](#), and the [Public Health Wales Observatory](#).

Together we aim to provide around 50 reviews per year, answering the priority questions for policy and practice in Wales as we meet the demands of the pandemic and its impacts.

Director: Professor Adrian Edwards

Email: WC19EC@cardiff.ac.uk

Website: <https://healthandcareresearchwales.org/about-research-community/wales-covid-19-evidence-centre>