





Wales COVID-19 Evidence Centre Work Programme Updated September 2022

Purpose of this Document

This document presents the Wales COVID-19 Evidence Centre (WCEC) **work programme** for Autumn - Winter 2022.

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.

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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 60 **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 | Category 2 | Category 3 |
|---|--|--|
| Recommended onto work | Not currently recommended | Not recommended onto work |
| programme | onto work programme | programme |
| a) with no significant changesb) with revisionsc) 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

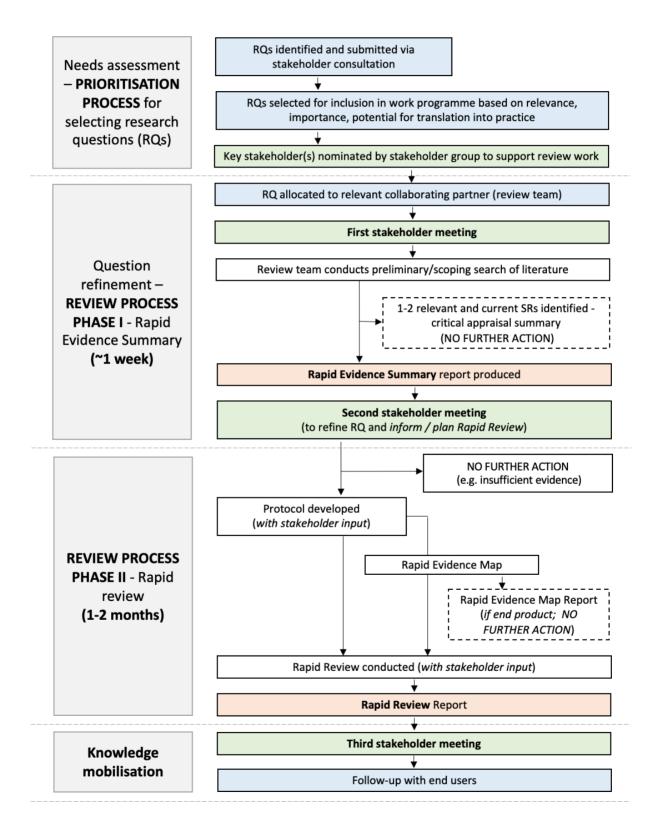
As we know, the impact of the pandemic on health and social care needs is continually changing. Questions that have been identified may become more or less important depending on the phase of the pandemic. Therefore, we frequently review our work programme to ensure that our priorities are up-to-date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



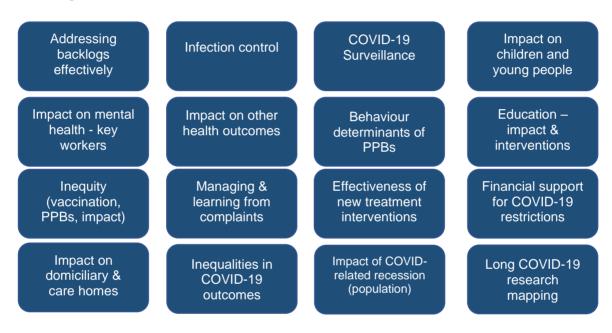
3. Our Work Programme

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 questions for inclusion in our Work Programme for winter/spring 2022 and progress to date is outlined in Table 2 (page 6).

Key priority themes

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



3.1 WCEC Work Programme (Updated September 2022)

In the Table below, we present the next stage of our work programme, 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). For full details of our completed reviews for 2021, please follow the link to our webpage below.

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

<u>https://healthandcareresearchwales.org/about-research-community/wales-covid-19-evidence-centre</u>. Where a question is not proceeding to the rapid review, the research evidence summary (RES) or rapid evidence map (REM) will be published.

Table 1. Updated WCEC work programme for Autumn – winter 2022

Progression key: Complete In progress Not yet started

Partner group: see Abbreviations Table in Appendix

| Document identifier & Status (R, A, G) | Question | Requestor | Partner conducting review | Published |
|---|--|--|------------------------------|-----------------------|
| 00020_RES | Financial Support for Self Isolation 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. | Socio Economic Harms TAG Subgroup HTW | HTW | August publication |

| | Disability inequalities | WG Equity Branch | | Yes |
|-----------|---|--|-------|-----|
| RR_00025 | To develop a clear understanding of the extent to which the inherent institutional and systemic inequalities, discrimination and barriers faced by disabled people living in Wales have exacerbated the impact of the COVID-19 pandemic on disabled people living in Wales. | | SURE | |
| RR_00036 | Non-Pharmaceutical Interventions | | | Yes |
| | Which papers/studies, that consider multiple NPIs and their impact on Rt, are of sufficient quality to be included in the NPI tool* to help determine the optimal selection of non- pharmaceutical interventions (NPI) to apply in a COVID-19 'urgent' situation (as described in the coronavirus control plan). | TAC | HTW | |
| | Recruitment and retention of NHS workers | | WCEBC | Yes |
| REM_00028 | The NHS workforce shortage is now so acute that the NHS is in danger of collapsing this winter. Given that overseas or training options take too long to be able to help in the immediate short term, how can the NHS get clinicians and other health professionals who have left the medical profession to return to plug gaps? | Royal College of Surgeons Edinburgh | | |
| | LGBTQ+ inequalities | | | Yes |
| REM_00029 | To develop a clear understanding of the impact of the COVID-19 pandemic and COVID-19 restrictions on LGBTQ+ communities in Wales, particularly LGBTQ+ children and young people. | WG Equity Branch | SURE | |
| | Long COVID | SUPER PPI group | | Yes |
| RES_00034 | What is the cost impact of demands due to Long Covid on NHS and social care services? | TAG modelling subgroup | BIHMR | |
| | | Social Care Wales | | |

| | | CYP TAG Subgroup | | |
|-----------|---|---|-------|-----|
| | Long COVID | SUPER PPI group | | Yes |
| RES_00038 | What is the cost impact of long covid on employment and caring responsibilities? | TAG modelling subgroup | BIHMR | |
| | | Social Care Wales | | |
| | | CYP TAG Subgroup | | |
| | Recruitment and retention of NHS workers | Royal College of | | Yes |
| REM_00028 | The NHS workforce shortage is now so acute that the NHS is in danger of collapsing this winter. Given that overseas or training options take too long to be able to help in the immediate short term, how can the NHS get clinicians and other health professionals who have left the medical profession to return to plug gaps? | Surgeons Edinburgh | WCEBC | |
| | Addressing demand for surgical backlog | | | Yes |
| RR_00030 | 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? | Cwm Taf | PHW | |
| | What difference can prehabilitation make to patients who are on long surgical waiting lists? | | | |
| | What strategies are in place to ensure the NHS in Wales can cope with Covid and the coming winter pressures without | All Wales Medical Directors | | |
| | having to pause elective care again? | Royal College of | | |
| | What is the impact on patients of longer waiting times for procedures that were paused during the peak of the pandemic? | Surgeons Edinburgh TAG modelling subgroup | | |

| | How can service configuration in Primary Care, for example, through the use of allied health professionals better support patients while they wait for procedures? | | | |
|----------|--|--------------------|------|---------------------------|
| RR_00031 | What impact have COVID-19 induced changes in working practice had on greenhouse gas emissions? | TAG-E | BC | Yes |
| | Cancer services | | | No |
| | 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? | Velindre NHS Trust | SURE | |
| RR 00035 | 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. | | | |
| KK_00035 | 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? | | | |
| | What impact did the COVID19 pandemic and changes in cancer diagnostic/screening services have on urgent cancer referrals for early diagnosis? | | | |
| | Telemedicine/remote consultations | All Wales Medical | | Due to be |
| RR_00032 | How many face-to-face consultations in vascular surgery can be safely moved to remote consultations (telemedicine) with minimal risk to patient? | Directors | | published in September |

| | What is the clinical effectiveness (quality of life, therapeutic relationship, physical activity, global ratings of change, cost effectiveness, and convenience) of telehealth / video consultations in Musculoskeletal podiatry across Wales? | Royal College of Podiatry | WCEBC | |
|-----------|--|------------------------------|-----------------|---|
| | What is the effectiveness, interaction and longitudinal care of patient engagement platforms in podiatry? What is the value of foot and ankle assessment using video assessment? | | | |
| RR_00054 | Living Review | | WCEC, UKHSA and | Publication |
| | The effect of vaccination on transmission of COVID-19: a rapid review | | HTW | expected in September with added peer- review publication |
| RR_00044 | Post-16 Education Report update | | WCEBC | No |
| | Challenging/risky behaviours amongst learners | | | No |
| RES_00037 | Has the extent of challenging/risky behaviour amongst learners changed during and since the pandemic began? | TAG CYP Subgroup | SURE | |
| | Long COVID | Department of Health | BIMHR | No |
| RR_00040 | Morbidity impact of COVID-19 on the Health Related Quality of Life of infected individuals | and Social Care | | |
| | Filtration systems in hospital settings | Cwm Taf Hospital | HTW | No |
| RR_00041 | What is the effectiveness of supplementary air cleaning devices in healthcare settings to reduce the transmission of SARS-CoV-2 or other airborne pathogens? | | | |
| | Discharge of older adults | Social Care Wales | SURE | Yes |
| RR_00039 | | | | |

| | What innovative workforce models have helped to rapidly grow capacity for community care to help older adults leave hospital? | | | |
|-----------|---|---|-------|----|
| RR_00043 | Diagnostic hubs What is the available evidence for the effectiveness of community diagnostic centres? | | PHW | No |
| RES_00042 | Support for People living with Long Covid What interventions or best practice could be used to support patients with Long Covid (or similar post viral conditions e.g. Chronic Fatigue Syndrome, ME) to return to their 'normal life' including back to the workforce, training or education? | | BIHMR | No |
| RES_00046 | IPAC measures for community staff What IPAC processes and PPE should be recommended for WAST staff? How much delay is put into the 'hands on' job cycle through the use of certain sorts of PPE and does the benefit (to staff) outweigh the risks (to staff and patients) What IPAC processes and PPE should be recommended for Primary care staff? | Welsh Ambulance Service NHS Trust Royal College of General Practitioners | HTW | No |
| RES_00047 | Innovation in social care services How well have different forms of innovation support worked in children's social care? | Social Care Wales | SURE | No |
| RES_00048 | Evidence for surgical hubs With surgical hubs being brought in by the Welsh government, what is the global best practice for how they operate, looking at healthcare systems such as Australia, NZ and the United States? | Royal College of Surgeons of Edinburgh | PHW | No |

| | Domestic violence | Ethnic Youth Support | BIHMR | No |
|-----------|---|----------------------------|-------|----|
| RES_00049 | What impact has the pandemic had on rates of domestic violence? | Team | | |
| | What impact has this had on younger children who are part of the home environment and what are their support needs? | | | |
| | Paramedic recruitment | Welsh Ambulance | WCEBC | No |
| RES_00050 | What innovations help recruit and retain paramedics for the WAST? | Service NHS Trust | | |
| RES_00051 | Mental health services | Ethnic Youth Support | SURE | No |
| | What has been the impact on access to mental health services and what needs to be done to address the back- log? | Team | | |
| | What interventions can be used to address the backlog in children and young people's mental health services and what support can we provide whilst they are waiting for referrals / on waiting lists? | Children & Young People | | |
| | What is the recovery plan for mental health services in Wales? How can we ensure that it caters for everyone who needs it, not the most desperate? | Taff Housing | | |
| | Vaccination | Royal College of | HTW | No |
| RES_00052 | How long to antibodies from vaccination last? Is an annual vaccination likely to be adequate? | General Practitioners | | |
| | Is it safe and effective to combine covid vaccination with influenza vaccination? | | | |
| | Surgery prehabilitation | Royal College of | PHW | No |
| RES_00053 | What prehabilitation interventions are most effective at improving A: the success of surgical and other treatments | Surgeons of Edinburgh | | |

| | and B: the quality of life of those on the waiting list C: the capacity and throughput of the health system? | | | |
|--------|---|---|--|----|
| | Primary research studies | work programme | | |
| PR_000 | Brain and Brainstem Bases of Long COVID | Researcher application | CVUHB / CUBRIC | No |
| PR_001 | Public Views During the Coronavirus Pandemic | Researcher application | Swansea University | No |
| PR_005 | Impact on Welsh Language Education | | | No |
| | What have been the experiences of learners and their families from homes where Welsh is not spoken during the COVID-19 pandemic? | WG Welsh Language Division | Part In House - WCEC team support development of protocol. | |
| | What support will there be for those in Welsh medium schools whose parents do not speak Welsh and could not support their home learning during lockdowns? | СҮР | Then commission external partner with Welsh Language skills to conduct work | |
| | Improving Vaccine uptake | | | No |
| PR_003 | What are the predictors of vaccine uptake (first and second dose)? | TAC | PHW & SAIL | |
| | What are the clinical characteristics, outcomes and health care utilisation patterns of vaccinated and unvaccinated patients admitted to critical care? | All Wales Medical Directors | | |
| PR_008 | Antivirals | TAC | SAIL | No |
| | What is the effectiveness of antivirals for clinically vulnerable patients? | Royal College of General Practitioners | | |
| | | | | |

| PR_007 | Long term conditions | Arising out of previous work | SAIL | No |
|--------|--|---|--------------------|----|
| | Based on previous work to evaluate the impact of COVID-19 on diagnosis of patients with long term conditions, using the condition specific cohorts created in Phase 1, in this phase we aim to investigate the impact on health services. | | | |
| | What impact has the pandemic had on healthcare services for people with chronic conditions? What support do these individuals need in light of this impact? | | | |
| PR_006 | Nosocomial infections | Delivery Unit/ PRIME Centre Wales Patient | Cardiff University | No |
| | Refinement and cognitive testing of a patient safety tool to explore patient and public safety concerns in Wales, including nosocomial infections (health and social care). Will be used as part of WG commissioned nosocomial infection work being conducted by Delivery Unit. NHS Wales. | Safety Group | | |
| PR_009 | Virus transmission in Education Settings Following the distribution of carbon dioxide monitors to | WG Education Directorate | In house – WCEC | No |
| | delivery partners (education) - how have they have been accepted, used and perform in the working environment? | (Sustainable Communities for Learning Team) | | |
| PR_010 | CARI-Cymru COVID-19 and common respiratory tract infection-related health behaviours: Development of community-based approaches to reducing the burden of RTIs in Wales | Researcher application | Swansea University | No |
| | Long term impact on mental health of health and social care staff The impact on mental wellbeing of people; long term deterioration of mental health | Wales COVIS-19 Evidence Centre Symposium | In house - WCEC | No |

| and wellbeing, especially front-line workers (health and social care, teachers, school | Royal College of Surgeons Edinburgh | | |
|---|--|-----------------|--|
| staff). How do we measure how they are feeling? A lot of distress and staff leaving now. How do we support the staff who stay? | Ethnic Youth Support Team | | |
| What interventions for staff mental health and wellbeing support have been put in place by Health Boards during the pandemic, how successful have they been, and which ones should be made permanent features of NHS Wales to support staff retention and workforce resilience going forward? | | | |
| Impact on young patients What are the experiences and needs of children who transitioned from paediatric to adult healthcare during the pandemic, and what interventions can we put in place to better support them? | Children and Young People | In house - WCEC | |
| Impact of the pandemic on domiciliary care packages How many domiciliary care packages were reduced following measures introduced under Schedule 12 of the Coronavirus Act 2020, which allowed local authorities to reduce the level of care provided to levels below that of their assessed need? How many cut packages have not returned to their pre- COVID-19 levels? | | In House - WCEC | |
| How do the different local authorities calculate domiciliary care charges? | | | |
| How do local authorities calculate the poverty status of disabled people? When making this calculation, do they all take into account the extra costs of being disabled, their | | | |

| utility costs, and the effects of inflation in regard to benefits/salaries not keeping pace? | | | |
|---|------------------------------|--------------------|--|
| How many people who receive domiciliary care who are living in poverty, or on the edge of poverty, pay for all or part of the charges? And what definition of poverty was used to calculate this figure? | | | |
| Impact on new refugees arriving during pandemic What has been the impact of COVID-19 on refugees arriving in Wales during the pandemic period? What are their outstanding needs? What 'catch-up' services / interventions are needed to support them? | Ethnic Youth Support Team | Swansea University | |

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 | нтw | Technical Advisory Cell | TAC |
| Human papilloma virus | HPV | Technical Advisory Group | TAG |
| Personal Protective Behaviours | РРВ | University Health Board | UHB |
| Public Health Wales | РНЖ | 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 WCEC integrates with worldwide efforts to synthesise and mobilise knowledge from research.

We operate with a core team as part of <u>Health and Care Research Wales</u>, are hosted in the <u>Wales Centre for Primary and Emergency Care Research (PRIME)</u>, and are led by <u>Professor</u> <u>Adrian Edwards of Cardiff University</u>.

The core team of the centre works closely with collaborating partners in <u>Health Technology</u> <u>Wales</u>, <u>Wales Centre for Evidence-Based Care</u>, <u>Specialist Unit for Review Evidence centre</u>, <u>SAIL</u> <u>Databank</u>, <u>Bangor Institute for Health & Medical Research/ Health and Care Economics Cymru</u>, and the <u>Public Health Wales Observatory</u>.

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.

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https://healthandcareresearchwales.org/about-research-community/wales-COVID-19-evidencecentre