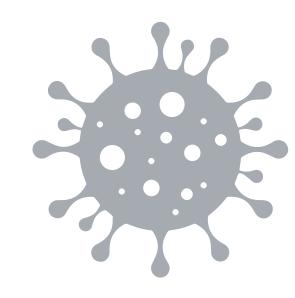
Impact Statement: Evidence in action

March 2020 – October 2022

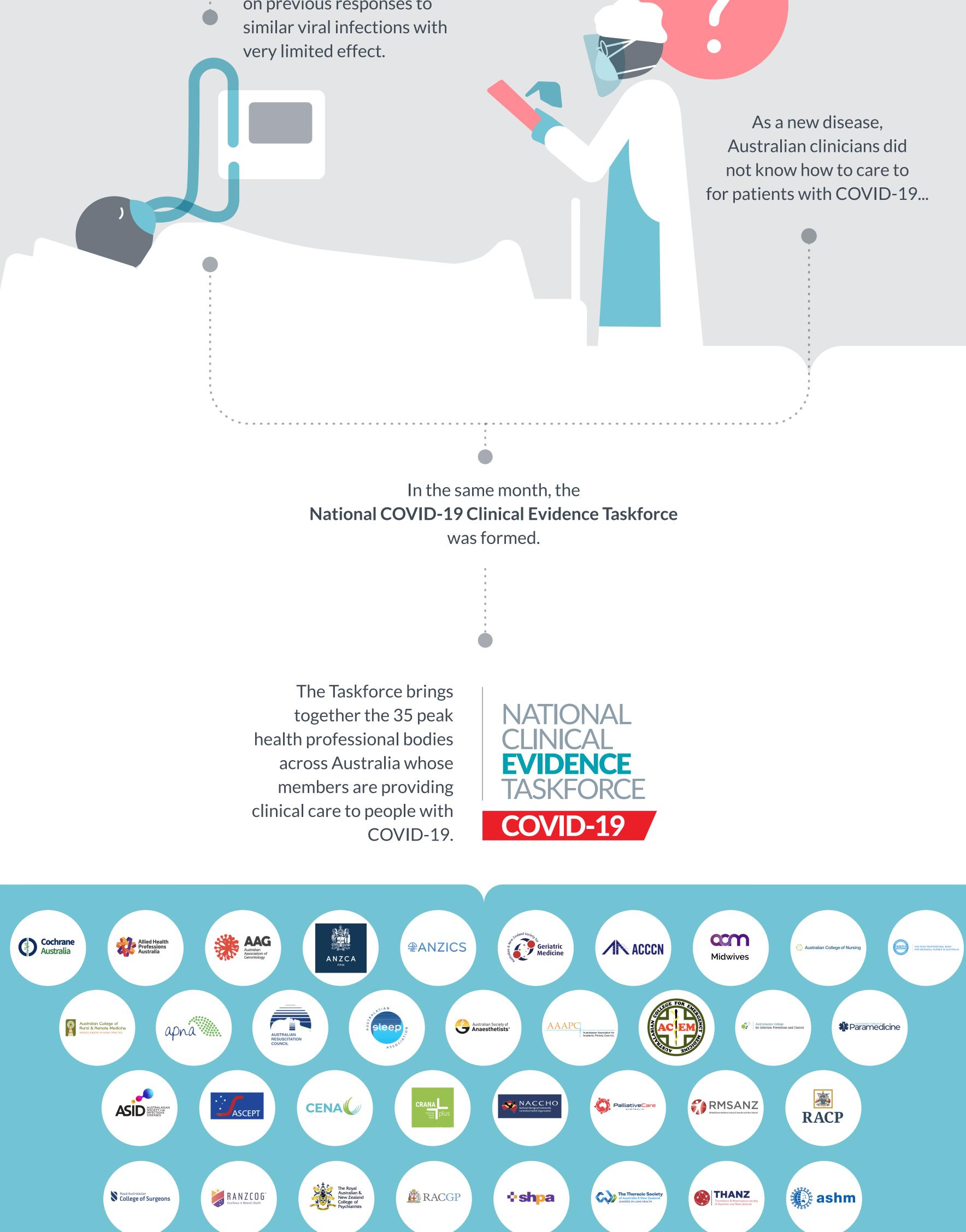


Across the world case numbers were rising, and there was widespread fear. In March 2020, WHO declared COVID-19 a global pandemic.

numbei meanwhile an overwhelming volume of information was emerging every day, and there was great uncertainty and concern. U S **T** Rapid MON 70K 700K 600K 60K XX 500K 50K **40K** 400K MODER ON 30K 300K World Health Organization **Global COVID-19** infections 20K 200K Of which less than 3% was credible evidence based research 100K **10K** Global **COVID-19** deaths April 2020 May 2020 January 2022 July 2020 March 2020 **July 2022** January 2021 June 2020 **July 2021**

March 2020

Treatment was largely based on previous responses to



The work of the Taskforce has been made possible by the unpaid contributions of 200+ clinicians, often at weekly panel meetings. We estimate that we've benefited from more than 27 000 hours of their time, on top of their clinical and academic workloads during a time of great need. Producing the guidelines simply would not have been possible without their immense depth and breadth of real-world clinical expertise and extraordinary generosity.



The Taskforce ensures every Australian clinician can access a single source of trustworthy advice about COVID-19 care.

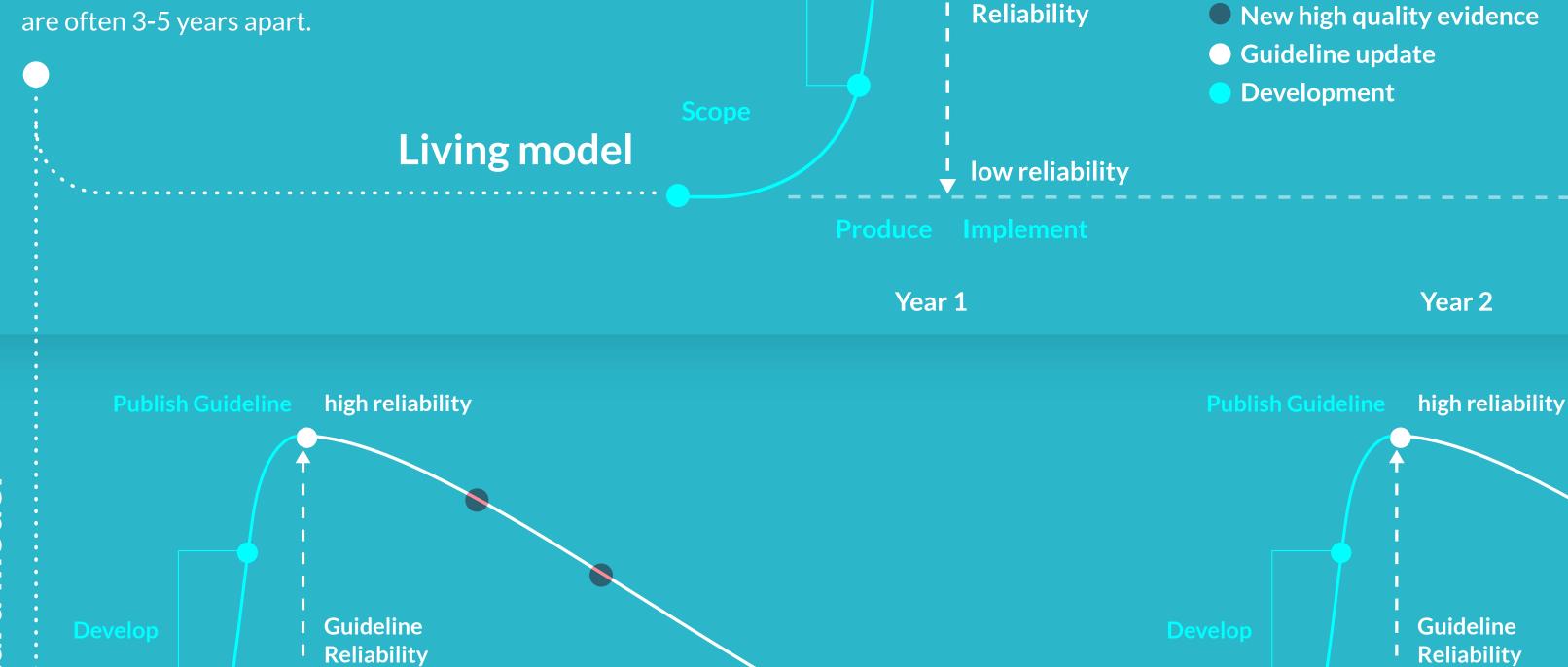


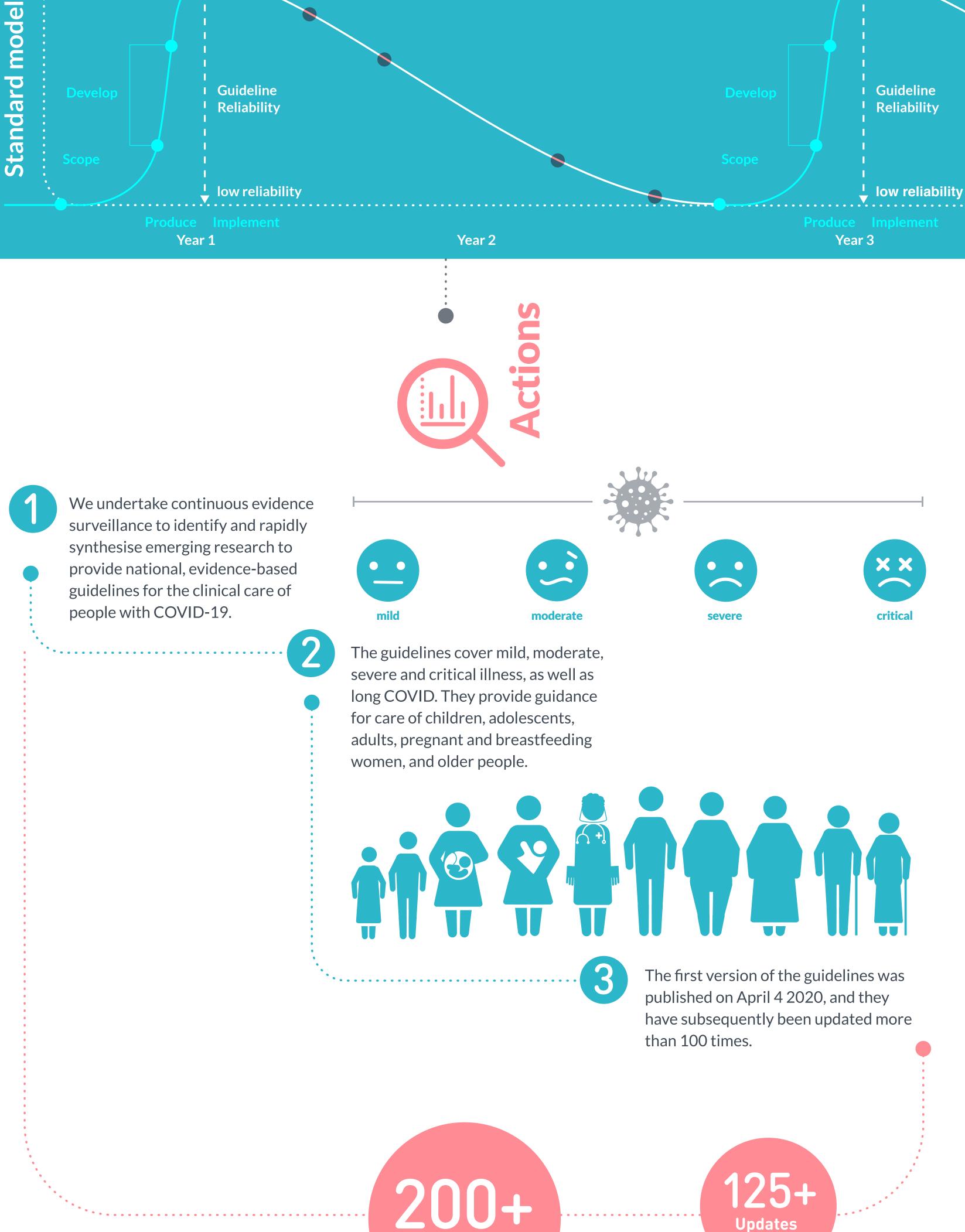
What is living evidence?

high reliability

Guideline

On average, it took less than 28 days from identification of a trial evaluating a new medication for us to appraise the quality of the study, incorporate it with other relevant research, achieve clinical consensus and endorsement from our 35 membership organisations; and publish a new or updated recommendation to guide practice. This is a huge reduction from standard guideline updates, which **Develop** are often 3-5 years apart.





The guidelines now include more than 200 recommendations covering the full spectrum of disease and care for people with COVID-19.

Recommendations

NATIONAL **CLINICAL** EVIDENCE TASKFORCE COVID-19



While it's very difficult to determine exactly how many lives have been saved, hospitalisations avoided, and health outcomes improved by the work of the Taskforce; there is no question that the Taskforce guidance has contributed to Australia having one of the very lowest case-fatality rates anywhere in the world.



Three Key Actions

Through varied evaluations by the Taskforce, including interviews and surveys of hundreds of participants we've established that the guidelines were very or extremely relevant, easy to use, trustworthy and valuable.

A SING PAGE WIEWS

Caring for people with COVID-19

Caring for people with COVID-19

Clinicians treating patients with COVID-19 are able to easily access reliable guidance, reducing stress for a healthcare staff in a very worrying time.

> A central source of guidance for states, territories and health services to adapt and develop local level guidance which was endorsed by all, removing duplication and confusion, and ensuring consistency in decision-making.

> > FLOWCHART USERS 145,000+

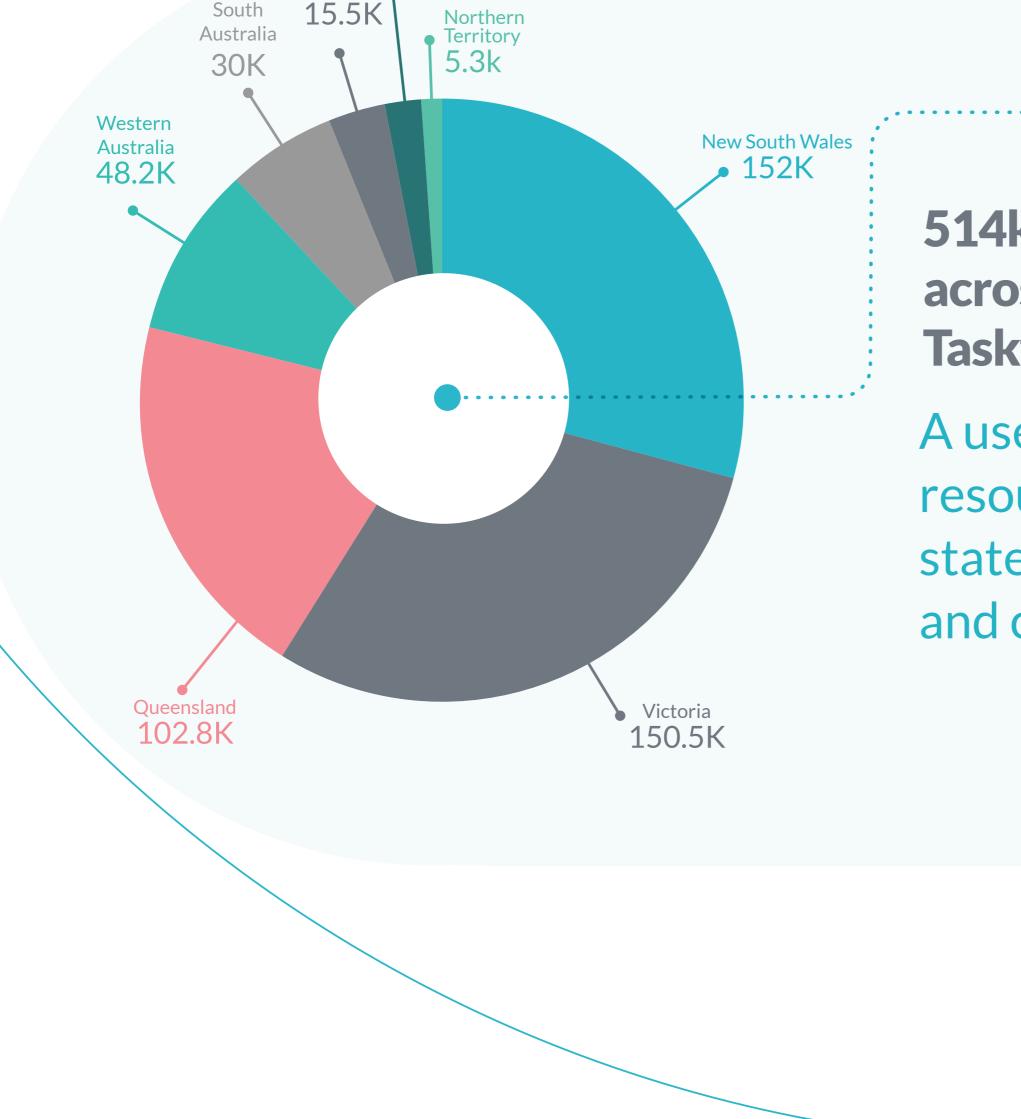
WEBSITE USERS SINCE LAUNCH 675,000+

ACROSS ALL DEVICES

200+ countries and territories

INTERNATIONAL SITE USERS SINCE LAUNCH 135,000+

DO YOU HAVE A CLINICAL QUESTION



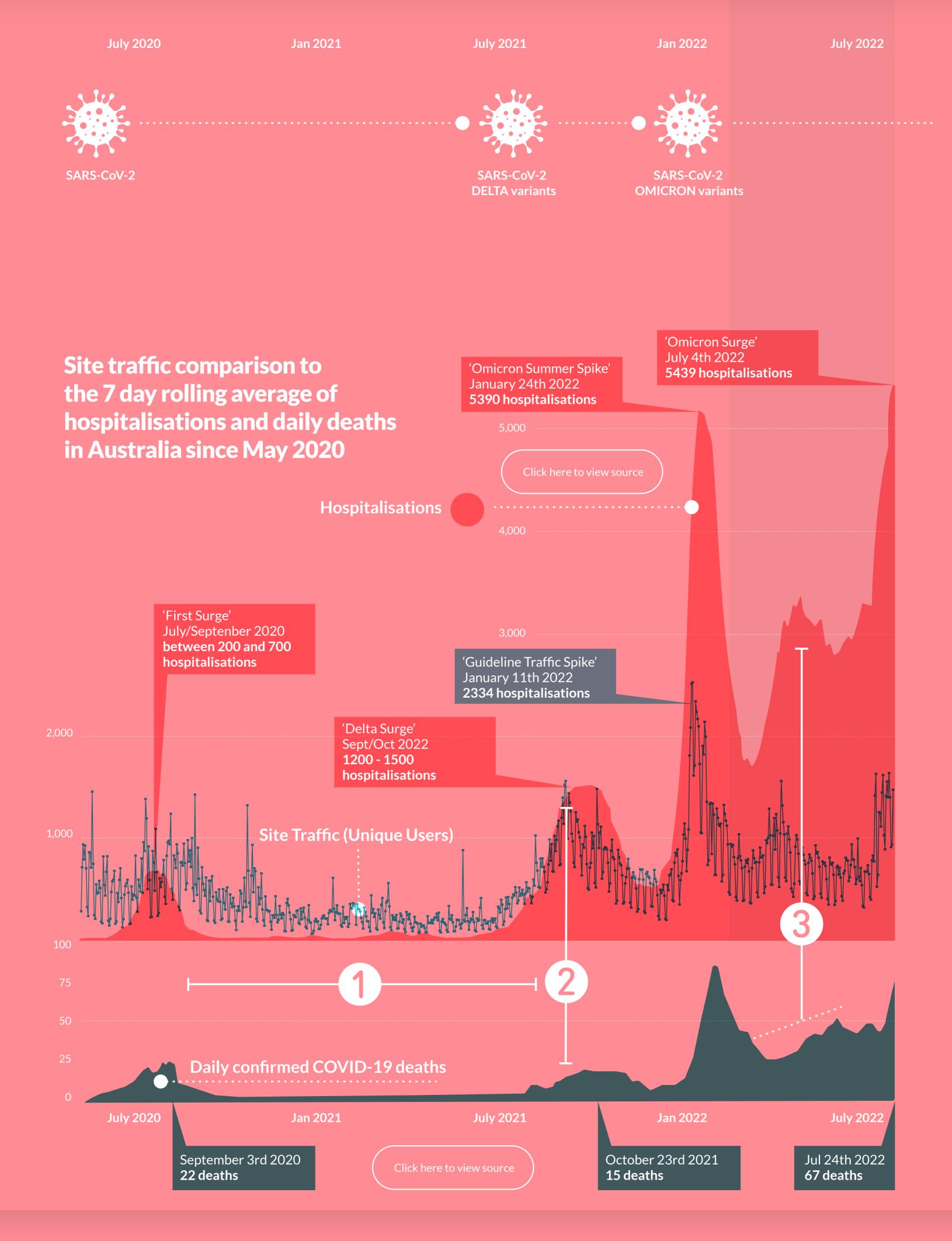
Tasmania 9.7K

ACT

South

514k unique users across Guideline and **Taskforce resources**

A useful and trusted resource for Federal and state health departments and clinical decision makers



Phase 1. **Providing clinical confidence:**

During a period of great uncertainty the Taskforce provided clear and united guidance for clinicians and policy makers preparing to face COVID, especially in Victoria.

The scientific rigour of the living evidence model together with the multidisciplinary approval of the 34 member organisations provided much comfort to clinicians caring for people with COVID-19.



Phase 2. Supporting a national response:

In 2021 as COVID case numbers surged in NSW and then again in Victoria, website usage began to demonstrate a national reliance on the Taskforce guidance.

The Taskforce website and guideline platform became the trusted source of evidence-based advice for clinicians across the country while the media increasingly turned to the Taskforce for comment on COVID-19 treatments.

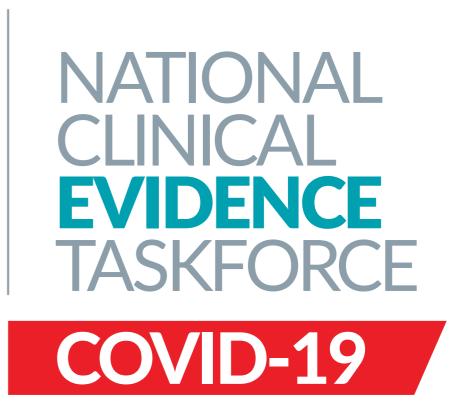
Phase 3. Negotiating the waves:

3

With the advent of Omicron and the subsequent January and July case spikes, the Taskforce once again demonstrated its usefulness with clinicians turning to the website and Taskforce resources for treatment guidance.

The Taskforce also negotiated new evidence for mild treatments and kept existing recommendations up-to-date with wave after wave of emerging variants and subvariants.

By showing that it is possible to produce and maintain reliable, evidence-based guidance that is kept continually up-to-date, even during a pandemic, the Taskforce has demonstrated the value and feasibility of a 'living' approach to guideline development – with substantial potential to improve the currency and quality of guidance for a broad range of clinical topics.



It was just fantastic to have someone distilling all the evidence that was coming in and writing some high-level national guidelines that we could use as our source of truth, because there was just so much disparate information.

Taskforce Impact Evaluation Survey - February 2022

[The guidelines] had a stabilizing influence because whenever we've had people worried about –"is this right thing to do," you can always point them to the guidelines and say, well this is evidence-based, wide consensus in the industry based on the best science and the best health advice we've got. So you can trust that this is the best we've got.

The impact is massive. I mean, state and local government, health authorities and hospital and health districts all across Australia are using the taskforce guidance to drive therapeutic guidance. So rather than setting their own, you know, because this is a fast-moving area, ... they're using the criteria that Taskforce developed. So they're absolutely being used, it's hugely influential.

Taskforce Impact Evaluation Survey - February 2022

Taskforce Impact Evaluation Survey - February 2022

Partners





AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE











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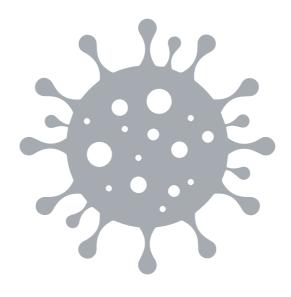
Walter Cottman Endowment Fund

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Impact Statement: *Evidence in action*

March 2020 – October 2022



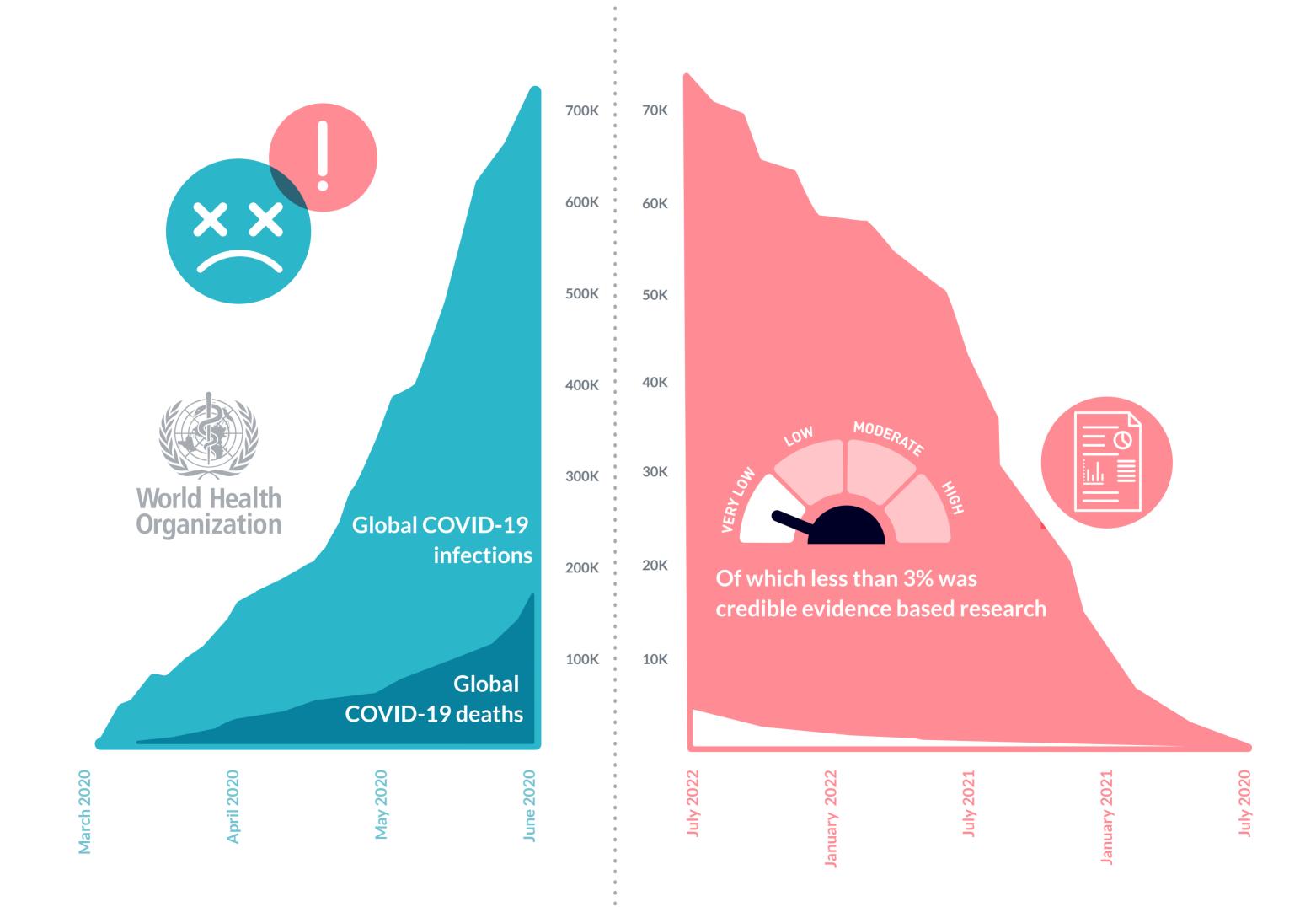
Across the world case numbers were rising, and there was widespread fear.

Rapid case number rise

In March 2020, WHO declared COVID-19 a global pandemic.

Mounta

meanwhile an overwhelming volume of information was emerging every day, and there was great uncertainty and concern.



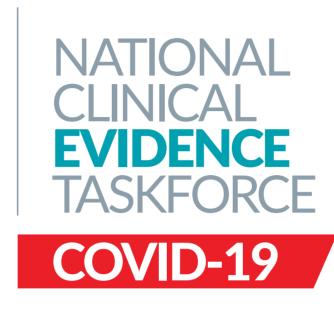
March 2020 Treatment was largely based on previous responses to similar viral infections with very limited effect. In the same month, the National COVID-19 Clinical Evidence Taskforce was formed.



As a new disease, Australian clinicians did not know how to care to for patients with COVID-19...



The Taskforce brings together the 35 peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19.





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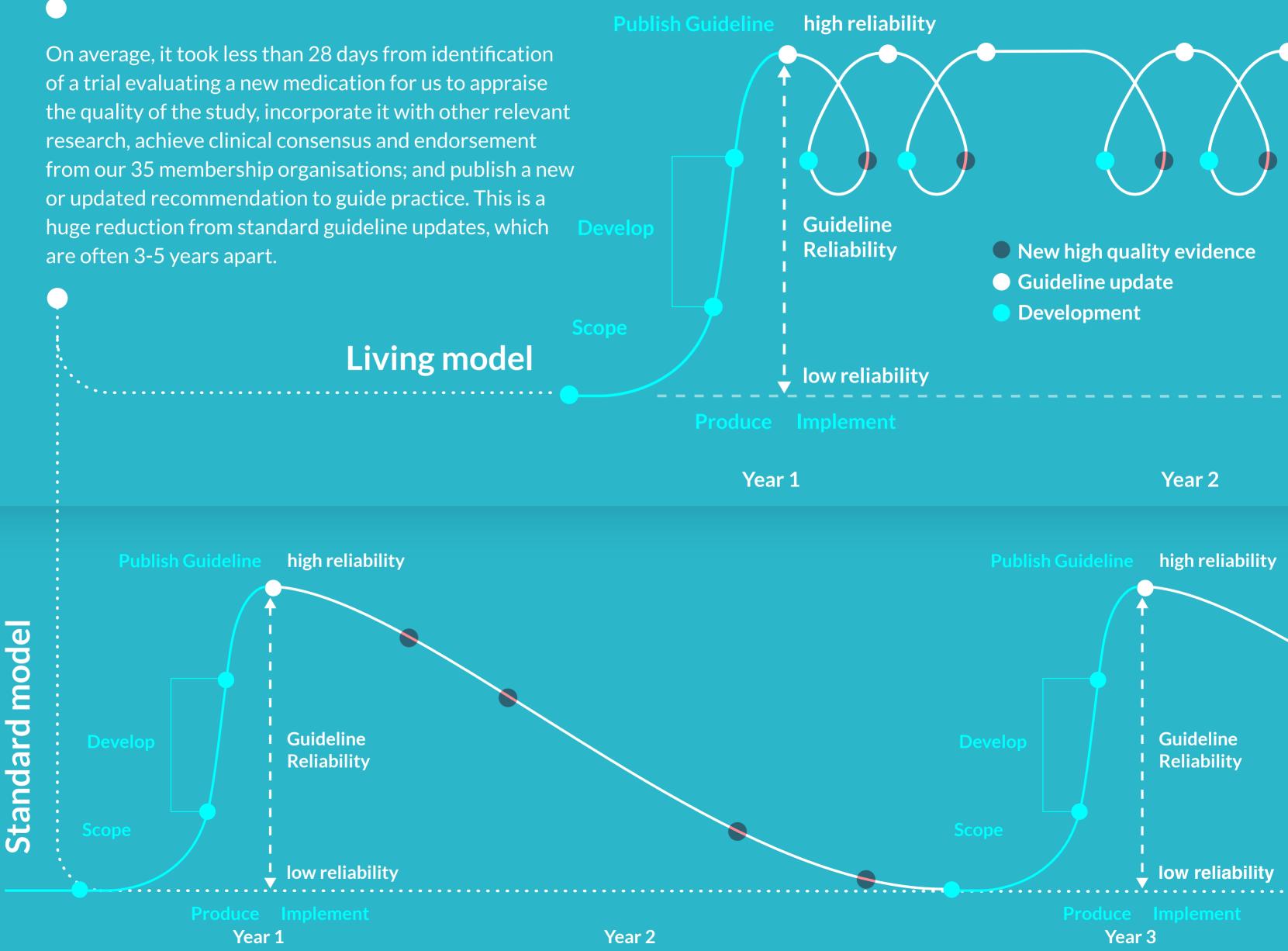
Key things to understand Sifting through this mountain of information we produce 'living' guidelines,

continually updated with new research to give reliable, up-to-date advice to clinicians providing frontline care in this unprecedented global health crisis.



Click here to view our Taskforce organisational flow and consensus process

What is living evidence?



1

We undertake continuous evidence surveillance to identify and rapidly synthesise emerging research to provide national, evidence-based guidelines for the clinical care of people with COVID-19.

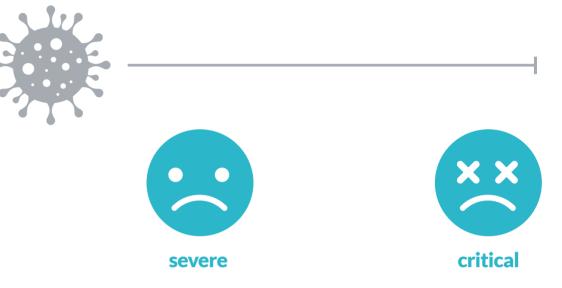
> The guidelines cover mild, moderate, severe and critical illness, as well as long COVID. They provide guidance for care of children, adolescents, adults, pregnant and breastfeeding women, and older people.

> > 20

moderate

3

mild



The first version of the guidelines was published on April 4 2020, and they have subsequently been updated more than 100 times.

200+ **Recommendations**

The guidelines now include more than 200 recommendations covering the full spectrum of disease and care for people with COVID-19.

mpac

While it's very difficult to determine exactly how many lives have been saved, hospitalisations avoided, and health outcomes improved by the work of the Taskforce; there is no question that the Taskforce guidance has contributed to Australia having one of the very lowest case-fatality rates anywhere in the world.







The Taskforce coordinated the voice of all peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19, through a 100% consensus model.

This meant all clinicians were getting the same information from their professional bodies, and that the guidelines were truly multidisciplinary.

WORLD



We collaborated with the Australian National **COVID-19 Clinical Evidence Taskforce during** development of the guideline, and acknowledge their contribution to identifying and reviewing the evidence for therapeutics.

Nationally consistent, evidence-based, continually up-to-date advice for clinicians in all settings is truly unprecedented.

Three Key Actions

Through varied evaluations by the Taskforce, including interviews and surveys of hundreds of participants we've established that the guidelines were very or extremely relevant, easy to use, trustworthy and valuable.

2

Clinicians treating patients with COVID-19 are able to easily access reliable guidance, reducing stress for a healthcare staff in a very worrying time.

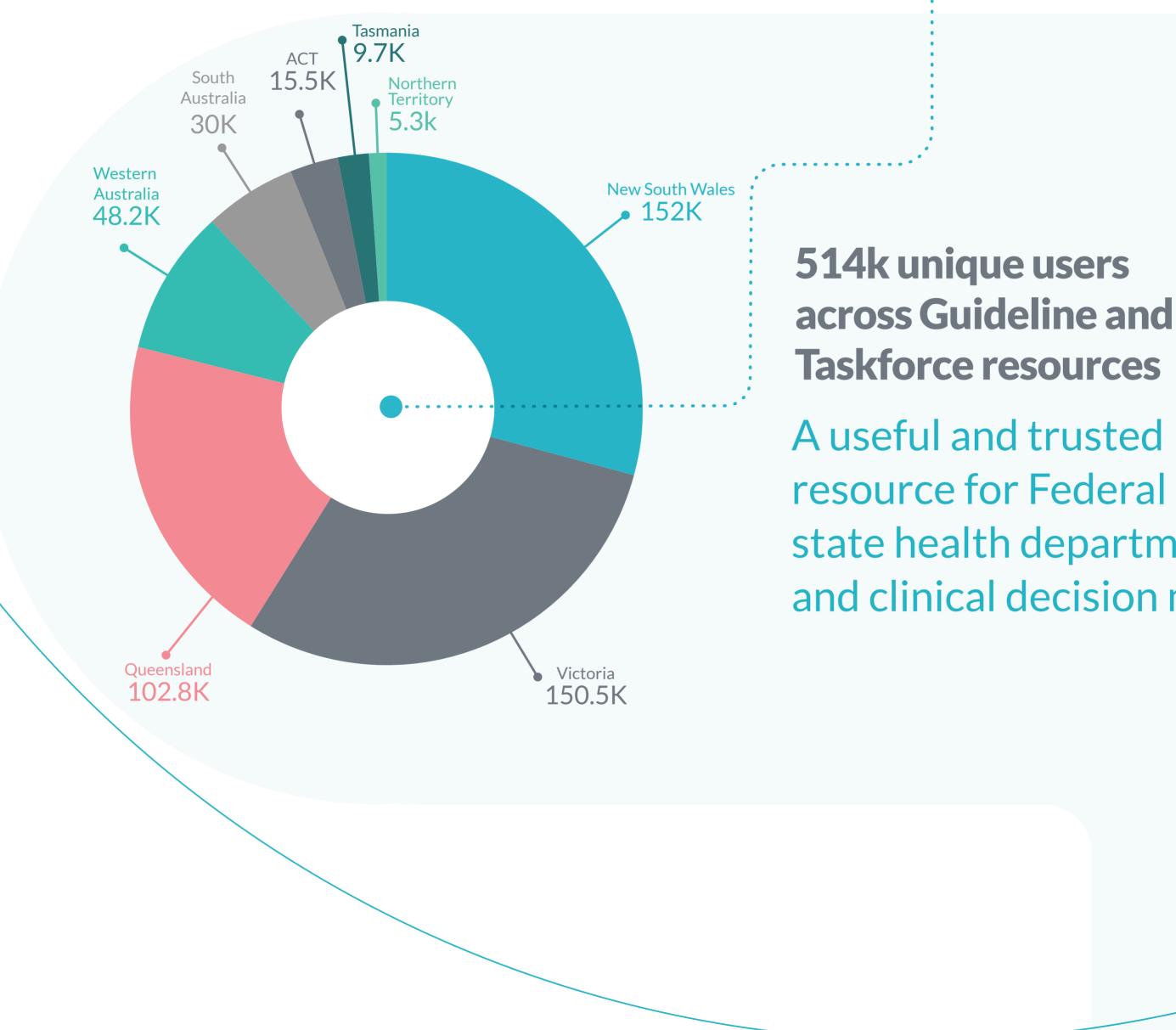
> A central source of guidance for states, territories and health services to adapt and develop local level guidance which was endorsed by all, removing duplication and confusion, and ensuring consistency in decision-making.

AGE VIEWS Caring for p COVID-19 **WEBSITE USERS** SINCE LAUNCH CLINICAL EVIDENCE TASKFORC **Caring for people with COVID-19** 675,000+ LIVING GUIDELINES **ACROSS ALL DEVICES**

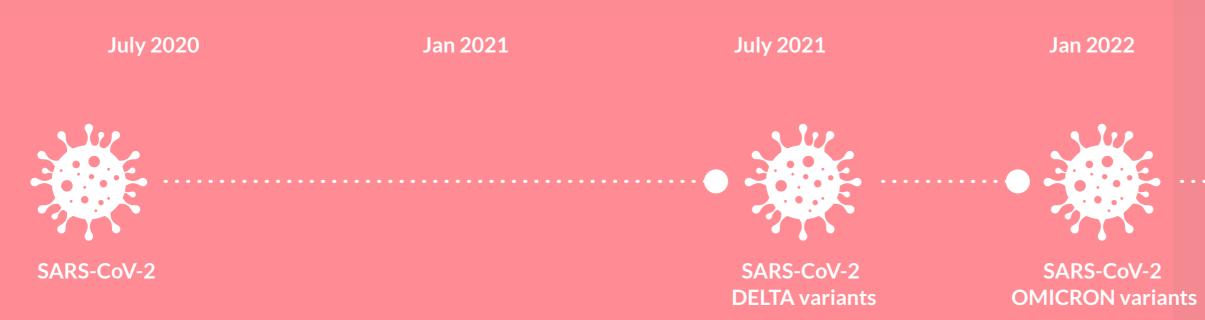
200+ countries and territories

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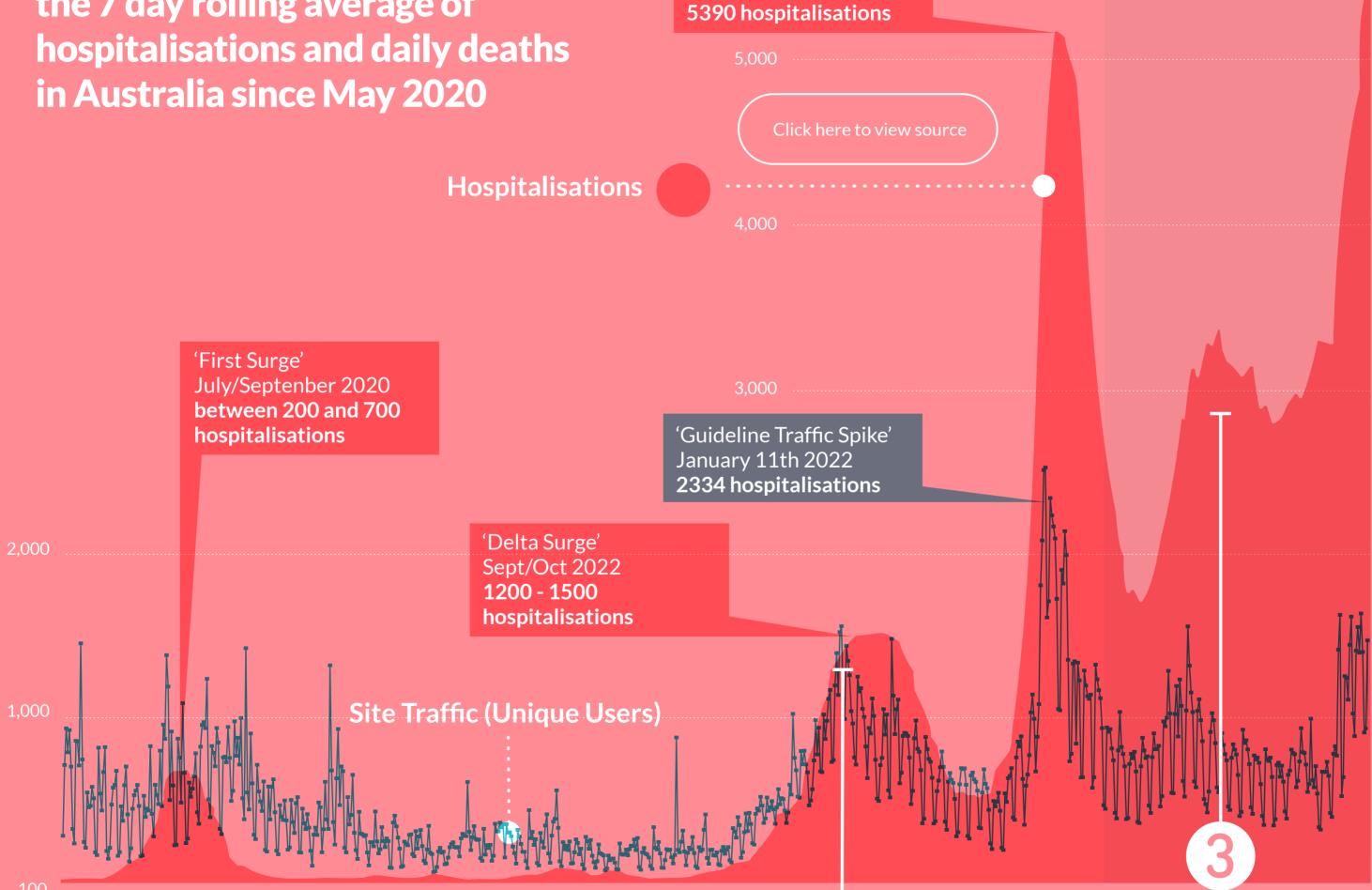


resource for Federal and state health departments and clinical decision makers



July 2022

Site traffic comparison to the 7 day rolling average of



'Omicron Summer Spike'

January 24th 2022

'Omicron Surge' July 4th 2022 5439 hospitalisations



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NATIONAL CLINICAL EVIDENCE TASKFORCE









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