

ED. Collaboration in the early stages of technology development is fundamental to improving the appropriateness of data produced for future HTAs. This will facilitate quality decision-making on the incorporation of procedures into the National Health Service.

PD224 Evaluating Participant Satisfaction In Health Technology Assessment Reports: A Survey Study In Catalonia, Spain

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Introduction: Developing a health technology assessment (HTA) report requires the involvement of relevant stakeholders, specifically healthcare professionals, patients, and industry representatives. Evaluating the satisfaction of participants in HTA reports is crucial to improving internal procedures and increasing the participation of stakeholders, who play a crucial role in adding knowledge and experience to the reports.

Methods: We developed a nine-question survey to assess the satisfaction of healthcare professionals and patients involved in HTA reports. The questions evaluated global satisfaction with participating in the HTA report (scored 0 to 10), as well as with the information received to develop tasks within the report and the time given to perform them. Healthcare professionals (n=86), patients (n=3), and contributors to outcome prioritization (n=4) involved in 12 HTA reports developed in Catalonia, Spain were invited to participate.

Results: Thirty-two contributors (34.4%) responded. Twenty-nine were healthcare professionals (33.7% response rate) and three were patients (100% response rate); 59.4 percent of respondents had only participated in one HTA report. Contributors rated their participation with 8.53 points, with external reviewers and patients being the most satisfied collaborators (9.33 and 9.00 points, respectively). Twenty-eight participants (87.5%) felt they had received enough information to develop their tasks in the report, while the other four (12.5%) would have preferred more specific information about the aims of the evaluation. All but one contributor was satisfied with the amount of time given to perform the required tasks.

Conclusions: Collaborators in HTA reports were satisfied with their participation. Both the information provided about the tasks and the time provided to perform them were adequate. Nevertheless, the assessment team must always ensure that the aims of the evaluation are clear to everyone. We plan to evaluate the satisfaction of industry collaborators in the near future.

PD225 Implementation Of Hospital-Based Health Technology Assessment For Innovative And Expensive Medical Devices In A French Teaching Hospital

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Introduction: Teaching hospitals are the first users of innovative, and often costly, technologies. In our institution, innovative medical devices are in demand in the early stage of market diffusion, but there is little data available to help decision-makers. Although decision criteria were identified, structured and contextualized work could help the process through formalized hospital-based health technology assessment (HB-HTA).

Methods: A specialist team was set up to develop an HB-HTA process dedicated to innovative and expensive devices. The process is multidisciplinary and comprises methodologists, health economists, and pharmacists. The template developed by the Adopting Hospital Based Health Technology Assessment project was used to draft the report and to identify relevant elements adapted to the local context. Literature reviews were conducted. A list of contributors was drawn up, including the medical team and the various directors involved in generating decision support information (in particular, strategic and organizational impacts). Finally, workshops were held with patient representatives.

Results: Three applications have been processed, enabling the HB-HTA procedure to be improved. Coordination of the work by a dedicated independent team made it possible to establish the transparency and robustness required for an HTA process. The main difficulties were related to the multi-contributor aspect, which affected the timeline to produce the reports, introduced heterogeneity within the different items, and created some redundancy that had to be sorted out. Uncertainties were highlighted in relation to data on clinical benefits in our patient population and assumptions about activity and budget impact. The use of real-world studies to address these issues has been proposed.

Conclusions: The decision-maker appreciated being able to make decisions based on a single document resulting from multidisciplinary work. The experiences were positive and have led to the creation of an HB-HTA unit. Future reports should consider the weaknesses identified, and methodological developments are underway to improve the process.