provides a transparent method for assessing the confidence of evidence from reviews of qualitative research. This presentation aims at giving examples of applying CERQual, presenting and discussing its strengths and limitations.

METHODS:

This presentation draws on practical experiences with the conduction of three qualitative systematic reviews using the CERQual approach. The reviews differ in aim and field of research.

RESULTS:

The three CERQual reviews to be discussed in this presentation are: (i) Emergency departments and mental health patients - Purpose: Uncovering knowledge in a project on merging emergency departments to include both somatic and psychiatric patients. (ii) Parental responses to severe or lethal prenatal diagnosis – Purpose: Providing physicians with knowledge on a patient group from their daily clinical practice. (iii) Patients' experiences with home mechanical ventilation – Purpose: Disseminating important knowledge from a national project to an international audience.

CERQual strengths:

- Presents complex and large amount of knowledge in a clear way
- Pools knowledge from different studies into common outcome measures across studies
- Presents an assessment of the quality and strength of outcome measures
- The clear presentation makes it useful in decision making.

CERQual weaknesses:

- · Time consuming to conduct the reviews
- Simplification of qualitative research, missing out on context and nuances.

CONCLUSIONS:

CERQual represents a useful tool to facilitate the use of qualitative evidence in clinical and political decision making. CERQual is time-consuming to learn, but a useful tool to apply when learned. CERQual may encourage more uniform reporting of qualitative research, including assessment of confidence in findings. This may increase the impact of systematic reviews of qualitative studies.

OP122 Applications For Research Funding: How Many Peer Reviewers Do We Need?

AUTHORS:

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INTRODUCTION:

The National Institute for Health Research (NIHR) is a major funder of health research in the United Kingdom. Selecting the most promising studies to fund is crucial, and external expert peer review is used to inform the funding boards. Our aim was to evaluate the influence of different kinds and numbers of peer review and reviewer scores on Board funding decisions, and how we might modify the process to reduce the workload for stakeholders.

METHODS:

Our mixed method study included i) retrospective cross sectional analysis of funding board and external reviewer scores for second stage applications for research funding, using Receiver Operator Characteristic (ROC) curves to quantify the influence of reviewer scores on funding decisions and ii) qualitative interviews with thirty stakeholders (funding board members, applicants, external peer reviewers and NIHR staff).

RESULTS:

Analysis of ROC area for reviewers indicated that areas changed very little with increasing numbers of reviewers from four to seven or more. External reviewers with clinical, methodological or patient expertise all appeared to influence Board funding decisions to a similar extent. The stakeholders interviewed valued peer review but felt it was important to develop a more proportionate process, to better balance its benefit with the workload of obtaining, preparing, reading and responding to reviews. Reviews are of most value when they fill gaps in expertise on the Board. Less than four reviews was felt to be insufficient but more than six, excessive. Workload could be reduced by making reviews more focused on the strengths and weaknesses of applications and identifying flaws which are potentially "fixable".

CONCLUSIONS:

Stakeholders supported the need for peer review in evaluating funding applications. Our results suggest that four to six peer reviews per application is optimum, depending on the expertise needed to complement that of advisory boards.

OP123 Translating Evidence To Action – The Role Of Health Research Funders

AUTHORS:

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INTRODUCTION:

National health research funders are accountable to the public with regard to the societal impact of the research, including health technology assessment (HTA), that they fund. Failing to do so can not only negatively affect public trust in the allocation of resources to funding agencies, but can also lead to public mistrust in science.

METHODS:

We present the results of reducing research waste to ensure societal responsible research, both at an international and national level. In the Netherlands, the National Organization for Health Research and Development (ZonMw) developed an analytical framework to assess its research programs, including the national HTA program.

RESULTS:

An evaluation of 12 national funding agencies in Australia, Europe and North America demonstrated that certain processes (e.g. how research questions are prioritized or decided) are not transparent. At the international level, health funders believe that they have a joint responsibility not just to seek to advance knowledge, but also to advance the practices of healthrelated research and research funding. In the Netherlands, ZonMw (HTA) research programs perform well regarding addressing societal relevance (e.g. stakeholder participation) and reasonably well on scientific quality (e.g. international cooperation and knowledge sharing). Efficiency (e.g. encouraging use of existing data and systematic reviews) appears to be less well developed, while integrity (e.g. preventing publication bias) is underexposed.

CONCLUSIONS:

Although ZonMw is doing reasonably well in terms of reducing research waste, it was concluded that more focus on societal impact assessment is needed. To do so funding agencies need to collaborate with all relevant stakeholders. This is especially relevant in the field of HTA where the ambition is to move from evidence to impact.

OP124 Research Gaps In Health Technology Assessment In Brazil

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INTRODUCTION:

In 2017 the Brazilian Ministry of Health (BMH), through the Department of Science and Technology (DECIT) and in partnership with the Hospital Alemão Oswaldo Cruz (HAOC), financially supported research activities focused on health technology assessment (HTA) on topics deemed important by the BMH. The aim was to help resolve the priority health problems of the Brazilian population and to strengthen the management of the Unified Health System, within the scope of HTA.

METHODS:

A survey of HTA research needs was carried out in all BMH sectors through internal meetings conducted by representatives from each of the sectors. The problems and needs were then discussed, prioritized, and transformed into research lines in a workshop sponsored jointly by DECIT and the HAOC. Following this, a specific public call was made to the HTA community to comment on the prioritized research lines. The submitted research projects were then judged and selected by a committee of experts in the field. The approved projects were contracted, and when the projects were completed the results were presented and discussed by the researchers in a final seminar for representatives of the BMH technical areas.

RESULTS:

A total of 135 research gaps were identified, of which forty-two lines of research were included in the research