

pain, relapses and provide an alternative to surgery, the current standard of care.

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## VP163 Patient Involvement In The Development Of Multi-Criteria Decision Tool

### AUTHORS:

Marie-Pierre Gagnon  
([Marie-Pierre.Gagnon@fsi.ulaval.ca](mailto:Marie-Pierre.Gagnon@fsi.ulaval.ca)), Sylvain L'Espérance, Carmen Lindsay, Marc Rhainds, Martin Coulombe, François Rousseau

### INTRODUCTION:

Healthcare organizations should assess the relevance of both existing and new practices. Involving patients in decisions regarding which health technologies and interventions should be prioritized could favor a better fit between strategic choices and patients needs.

### METHODS:

Following a systematic review of existing multi-criteria decision support tools and a consultation with hospital clinicians and managers, a set of potentially relevant criteria was identified. A three-round modified Delphi study was then conducted among four groups (hospital managers, heads of department, clinicians, and patient representatives) in order to reach consensus on criteria that should be considered in the tool.

### RESULTS:

In total, seventy-four participants completed the third round of the Delphi study. Consensus was obtained on twelve criteria. There were some significant differences between groups in priority scores given to criteria. Patient representatives differed significantly from other groups on two criteria. Their ranking of the accessibility criteria was higher, and their ranking of the organizational aspect criteria was lower than for the other groups.

### CONCLUSIONS:

Patient representatives can be involved in the development of a multi-criteria decision support tool to identify, evaluate and prioritize high value-added health technologies and interventions in order to enhancing clinical appropriateness. The fact that accessibility aspects were more important for patient representatives calls for specific attention to these criteria when prioritizing health technologies or interventions. Furthermore, we need to ensure that the decisions made regarding the relevance of these technologies and interventions also reflect patients' preferences.

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## VP164 Applying Health Technology Assessment To Pharmacy: The Italian-Medicine-Use-Review-Health Technology Assessment

### AUTHORS:

Michela Tinelli ([m.tinelli@lse.ac.uk](mailto:m.tinelli@lse.ac.uk)), Andrea Manfrin, Martin Knapp, Americo Cicchetti, Andrea Mandelli

### INTRODUCTION:

There is a lack of Health-Technology-Assessment (HTA) tools in pharmacy practice and the collection of real-world-evidence (RWE) in community pharmacy to populate longer-term-disease-progression-modelling (1). This project is looking at the development and application of a novel Patient-Reported-Outcome-Measure (PROM) in community pharmacy that can enable: the evaluation of the quality of care delivered from the patient perspective in terms of economic impact, patient health outcomes and 'utilities'; the collection of RWE and evaluate long-term effect of care; to provide different stakeholders with unique evidence-based information that help formulate health policies in community pharmacy that are safe, effective, patient-focused and cost-effective, balancing access to innovation and cost containment.

## METHODS:

Evidence from the Italian-Medicine-Use-Review (I-MUR) trial (2) showed that the I-MUR intervention provided by community pharmacists to asthma patients is effective, cost-saving and cost-effective (3). The trial allowed to model a framework (I-MUR-HTA) that would enable to routinely deliver the intervention, but also collect and analyse PROM data on its clinical-effectiveness, quality-of-life and cost-effectiveness. I-MUR-HTA was discussed within three expert-panel discussions including policy-makers, commissioners, academics, healthcare-professionals and patient-representatives in Italy, United Kingdom and Europe. Current plan include testing the use of the tool in the real world environment.

## RESULTS:

Evidence collected from the panel discussions confirmed that I-MUR-HTA evidence-based information is relevant to meet current National-Health-Care-System plans and this is what is needed to support the evaluation of innovative effective and cost-effective health policies and promote their implementation across nations. Current Italian law on pharmacy services provides the appropriate institutional framework to regulate the introduction of I-MUR-HTA across the territory. Its implementation is underway and a real-world pilot is planned to take place in Italy.

## CONCLUSIONS:

I-MUR-HTA appears to be an innovative tool to promote active patient involvement into policy-decision-making and pharmacy-service.

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## VP165 Landscape Assessment: Patient Engagement In Health Technology Assessment

### AUTHORS:

Elisabeth Oehrlein ([eoehrlein@umaryland.edu](mailto:eoehrlein@umaryland.edu)), Jason Harris, Nicole Labkoff, Eleanor Perfetto, Manal Ziadeh, Sarah El-Gendi, Bahareh Ghorashi, Marc Boutin

### INTRODUCTION:

Understanding the current landscape of patient engagement across value decision-making bodies internationally is a critical first step toward improving the patient centricity of Health Technology Assessment (HTA). This study assessed: (i) Terms and definitions used; (ii) Patient engagement opportunities; (iii) Evidence of patient engagement.

### METHODS:

A sample of country-specific HTA's (HTA; n = 6), professional organizations (PO; n = 4), and collaborations/independent organizations (CO; n = 3) was selected for representativeness. Information was gathered through: (i) targeted web search and (ii) emailing organizations directly. Definitions, HTA methods documents, and the three most recent evaluations were identified, abstracted, and compared. Data were collected between September-October 2016.