Introduction. Evaluating the impact of health technology assessment (HTA) is vital to measure its contribution to health and social care decision-making and improving citizen outcomes. Health Technology Wales (HTW) is a HTA body committed to evaluating the impact of our work. Here we present HTW's impact evaluation approach with a case study for autologous hematopoietic stem cell transplantation (AHSCT) for highly active relapsing remitting multiple sclerosis (RRMS).
Methods. Using an outcomes-focused approach based on contribution analysis, HTW has worked with an external evaluation organization to develop a framework to measure the impact of our work. Data on impact was collected from both qualitative and quantitative sources, including social media metrics, surveys, and informal feedback from stakeholders. We engaged with various stakeholders, including clinicians, academics, patient organizations and other HTA bodies.
Results. The technology appraisal and guidance were published in July 2020, recommending AHSCT for routine adoption to treat highly active RRMS. Patient groups welcomed the appraisal findings as an important step forward in recognising the needs of people with RRMS and felt that "people living with MS were listened to throughout the process". Following publication online, the guidance has had approximately 500 views, and featured on the MS Trust website and in several news articles. The Welsh Health Specialist Services Committee, a commissioning body in Wales, recommended AHSCT for RRMS as a 'high priority' for funding in the WHSSC Integrated Commissioning Plan 2021-22.
Conclusions. Since its publication, we have been able to prospectively capture the impact of this guidance through various stakeholders groups and sources. Overall, responses have been positive and the guidance has supported decision makers in Wales. Ongoing evidence capture, including through HTW's adoption audit processes, will add further understanding to the potential impact of our work.

PP149 A Multidimensional And Multistakeholder Approach: Assessing Ethical, Legal, Organizational, Social or Patient-centered (ELSI+) for Telemedicine In Neurological Diseases

Ana Toledo-Chávarri (anatoledochavarri@sescs.es), Alezandra Torres Castaño, Janet Delgado Rodríguez, Analía Abt Sacks and Pedro Serrano-Aguilar

Introduction. Telemedicine strategies have been broadly introducing in health services during the COVID-19 pandemic, including in care of neurological diseases.
Methods. A rapid realist review was conducted using EUnetHTAs Core Model 3.0 and GRADE evidence to decision frameworks were used as frameworks to describe the ethical, legal, organizational, social and patient aspects (ELSI+) related to the use of teleneurology (TN) A scoping multistakeholder meeting helped defined the scope and research questions of the assessment. Patient representatives, clinicians, scientific society representatives with relevant experience in TN were invited and participated. Industry representatives were also present. Systematic searches for ethical, legal, organizational, social and patients related aspects were conducted. Additional manual searches contributed to contextualize these dimensions in the Spanish context. A narrative synthesis was undertaken.
Results. Main results of the assessment of the ELSI+ aspects of TN were described. TN applications are diverse depending on the condition, objective of care and technology used. The implementation of TN lacks specific legal frameworks which implies legal uncertainty. TN may increase geographical accessibility to neurological care in remote areas and by reducing difficult commuting to specialized care centers. Nevertheless, accessibility is challenged by reduced access to technology, the digital divide, lack of health literacy or technologies not adapted to functional diversity. Therefore, equity is not guaranteed if it is offered as a non-voluntary basis or with no support. TN tends to be accepted by patients and carers if it has enough quality, saves travelling time and costs and does not dehumanize care as it is perceived as more flexible and convenient. Quality of TN needs an interdisciplinary team with skills to coordinate organizational aspects of the implementation which include among others, the planification of the support to patients and carers before, during and after the consultation. Health professionals may also need to learn adapted communicational and technological skills.
Conclusions. The implementation of TN poses many ethical, legal, organizational, social or patient-centered challenges.

PP150 The Role Of Expert Consensus In UK Guidance: Patient Selection For Hydrogel Spacer Use During Prostate Cancer Radiotherapy

Rhodri Saunders, Heather Ann Payne, Suneil Jain, Clive Peedell, Albert Edwards, Andrew Thomas, Prantik Das, Amanda Hansson Hedblom (amanda@coreva-scientific.com), Emily Woodward and Amit Bahl

Introduction. In UK males, prostate cancer is the most common cancer, with over 47,500 diagnosed annually. Radiotherapy is a highly effective curative treatment but can be limited by dose to surrounding normal-tissues such as the rectum. Radiation to the rectum can be reduced by increasing the distance between prostate and rectum with a hydrogel spacer. Despite National Institute of Health and Care Excellence guidance, spacers are not widely funded in the UK. Limited funding has necessitated patient prioritization, without any existing consensus on method.

https://doi.org/10.1017/S0266462322002616 Published online by Cambridge University Press