

## PD140 A Strengths, Weaknesses, Opportunities, And Threats Analysis Of Prehabilitation Before Elective Surgery For Frail Elderly Patients

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**Introduction:** As part of the prehabilitation of elderly frail or pre-frail patients prior to elective surgery (PRAEP-GO) randomized controlled trial (NCT04418271), we are investigating the approach of multimodal prehabilitation (e.g., physiotherapy) combined with frailty screening and a shared decision-making conference for frail elderly patients prior to elective surgery. The aim of this analysis was to identify strengths, weaknesses, opportunities, and risks of the PRAEP-GO intervention to inform its implementation within the German healthcare system.

**Methods:** This strengths, weaknesses, opportunities, and threats (SWOT) analysis was based on two expert interview studies and a realist review aiming to identify factors that might facilitate or hinder the implementation of prehabilitation from the perspectives of health service providers and patients. As part of the SWOT analysis, one author categorized these factors into external and internal factors, assessed their importance (scale of one [no/barely] to five [very high] points) and visualized it using radar plots, and assigned them to the categories of strengths, weaknesses, opportunities, or threats. Strategies were then developed to address the following combinations of the categories: strengths/opportunities, strengths/threats, weaknesses/opportunities, and weaknesses/threats.

**Results:** In the expert interviews and the realist review, 45 facilitating and 28 hindering factors focusing on health service provision, patients, and the implementation of prehabilitation for frail patients in general were identified. In the SWOT analysis these factors were assigned to 60 internal (resource analysis) and 13 external factors (environmental analysis), and were further sorted into eight and five categories, respectively; for example, “equipment” and “staff” (these two categories were assigned the highest importance [5 points]). Strategies for utilizing strengths and opportunities included, for example, promotion of interdisciplinary cooperation between service providers. The weaknesses and risks of PRAEP-GO might be mitigated, for example, by improving infrastructures.

**Conclusions:** A variety of factors in different categories may facilitate or hinder the implementation of PRAEP-GO. Based on preliminary results from this analysis, the identified strengths of prehabilitation outweigh its weaknesses, but when analyzing the external factors, the identified risks outweigh the benefits. Thus, the implementation of prehabilitation should be prepared by optimizing framework conditions (e.g., transportation for patients and allocation of personnel).

## PD141 Health Technology Assessment Methodology Approach For Precision Personalized Medicine: An Innovative Public Procurement Case Study

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**Introduction:** Innovative public procurement (IPP) is a driver of innovation across sectors. IPP involves the strategic acquisition of cutting-edge technologies and solutions by public entities in collaboration with the private sector. This approach aims to leverage the potential of “omics” technologies, such as genomics and proteomics, within the public sector to advance healthcare solutions.

**Methods:** The IPP process comprises key phases such as needs identification, solicitation preparation, execution, evaluation and awarding, and impact and assessment. The methodology applied was based on the Rapid Assessment Tool for Omics Technologies developed by the Andalusian Agency for Health Technology Assessment, accompanied by clinical validity reports from the impact and evaluation phase of the Technical Office for IPP of Andalusia. The aim was to assess the clinical validation results of two omics technologies, that is, two diagnostic tests. A systematic review was performed to identify existing evidence. We also addressed the challenges associated with implementing the Rapid Assessment Tool in the IPP process.

**Results:** Systematic reviews identifying evidence on the clinical validity and utility of omics technologies provided a foundation for the subsequent evaluation of two technologies in development, once the clinical trials had finished. An analysis of scientific evidence, together with the compilation of information provided by industry, was conducted through a questionnaire and clinical data derived from the company’s studies. The analysis of clinical and diagnostic validity was not conclusive. We delivered the final assessment report to support decision-making in the public health system of Andalusia.

**Conclusions:** Both assessed technologies presented a high degree of innovation, but different challenges and issues were identified during the application of the Rapid Assessment Tool for Omics Technologies. Further improvement in IPP procedures for innovative technologies in Andalusia, including integration of our methodological approach at the start the IPP process, could facilitate the acquisition of cutting-edge technologies in collaboration with public entities.