METHODS:

The number, types, and methodological attributes of RAs produced over a 25-year partnership with a single requestor were reviewed. The reasons for developmental changes in RA products over time were charted to document the push-pull tension between requestor needs and HTA best practice. The elements contributing to the relevance and impact, or not, of the RAs were also identified.

RESULTS:

Results demonstrated the dynamic relationship required for HTA researchers to meet best practice and requestor needs. As literature search spans lengthened and data analyses became more complex, limitations were imposed on RAs to fulfill the requirements of timeliness, utility, and best practice. Adaptations were driven by requestor, researcher, and the external policy environment. Facilitators of RA utility for HTA requestors include: asking focused, well-articulated questions; specifying the request's purpose; providing detailed information about local context and other relevant issues; and understanding the risk of bias associated with RAs. Considerations for HTA doers include: assembling a team using a triage process; involving requestors throughout RA development; negotiating deliverables and timelines using a HTA product matrix; transparently reporting methods; narratively describing methodological issues; and internally reviewing the draft RAs.

CONCLUSIONS:

RAs are a useful component of HTA programs. To keep these products relevant and useful, HTA agencies must allow RAs to evolve according to need, but with grounding in good practice. Negotiating the line between rigor and relevance is a key skill for HTA agencies. Having the right team is helpful.

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OP78 Code Of Ethics: Missing Cord In The Evidence-To-Action Connection?

AUTHORS:

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INTRODUCTION:

Ethics is a set of moral principles that guide our behavior when it affects others. HTAi acknowledges the fundamental values of "service, collaboration, professionalism and integrity, transparency, accountability". Ethical conduct balances self-interest with consequences of that behavior for others. Unethical behavior has serious personal consequences and in the case of HTA practitioners it can damage stakeholder trust and thereby hinder implementation of evidence by policy makers. Compliance with regulation alone may not suffice in building stakeholder confidence. There is need for individuals and agencies to develop a 'culture of integrity' at all levels in the HTA process above and beyond compliance with the law. A strong ethical culture will foster trust of stakeholders, strengthen collaboration, improve implementation of recommendations and benefit society. This is the importance of developing a code of ethics to guide conduct and detail standards of professional practice expected of HTA practitioners affiliated to HTAi and related agencies.

METHODS:

I will argue for the development of a detailed code of ethics for HTAi and related agencies. To do this, I will explain how the code of ethics gives guidance and informs the users (HTA practitioners), and how they can guide stakeholders in the HTA processes. The public relations benefits of a code of ethics will also be discussed. I will explain why having a mere list of seven words as "values" is not sufficient guidance to professionals with diverse backgrounds who are collaborating in a multidisciplinary team.

RESULTS:

The role of a code of ethics in helping professionals to choose their actions well is an effective way to integrate ethics in HTA, safeguard the integrity of HTA processes, and improve evidence implementation by stakeholders.

CONCLUSIONS:

HTAi should develop a detailed code of ethics for its membership.

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OP79 A Meta-Framework To Inform Health Inequalities In Systematic Reviews

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INTRODUCTION:

Recent equity review guidance encourages reviewers to consider whether it is likely that their findings may impact on health inequalities. Much of the guidance assumes that health inequalities have either already been identified as the focus of the review, or that reviewers are able to recognize if and how health inequalities matter. However, our experience is that this is not necessarily true. Furthermore, theorizing if and how health inequalities matter is not normally integrated into the HTA review process. This presentation describes a novel approach to the development of a theory-led meta-framework to inform health inequality considerations in systematic reviews. The meta-framework aims to increase the usefulness of systematic reviews in informing and implementing changes to practice.

METHODS:

Following the best-fit framework synthesis approach, a meta-framework was generated by 'deconstituting' concepts from theories relating to complex interventions and socio-economic health inequalities into a single framework. Feedback was sought from health inequality experts and reviewers.

RESULTS:

Complex intervention theories identify four domains and key factors that may influence effectiveness; intervention design, implementation, context and participant response. Applying an equity lens, socio-economic health inequality theories identify key factors and mechanisms associated with these domains that may lead to differential effects across disadvantaged populations.

CONCLUSIONS:

The meta-framework has the potential to i) facilitate the identification and understanding of when, why and how interventions may impact on socio-economic health inequalities, ii) promote a theory-led approach to incorporating health inequalities in systematic reviews iii) help reviewers identify data to extract and inform a priori analysis on what factors are associated with differential effects, iv) help reviewers to decide whether it is likely that their review findings may have the potential for an intervention to indirectly widen or narrow socio-economic health inequalities, even when evidence of an impact in the primary research is lacking.

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OP80 Reconciling Ethical And Economic Notions Of 'Value' For HTA

AUTHORS:

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INTRODUCTION:

Different disciplinary frameworks in the field of Health Technology Assessment (HTA) may hold different, and potentially contradictory, assumptions about a technology's value or optimal use. For example, economic analyses may be based on outcome measures that are socially controversial or ethically problematic. This can result in economic and ethical evaluations that are difficult to reconcile, leaving HTA short of its goal to provide policy decision-makers with a holistic assessment of technology. We use the case of non-invasive prenatal testing (NIPT) to explore whether the capabilities approach can be used to align economic and ethical concepts of value in assessments of morally challenging health technologies. The capabilities approach is an economic framework which bases wellbeing assessments on a person's abilities, rather than their expressed preferences.

METHODS:

To develop concepts for capabilities relevant to NIPT, we started with Nussbaum's capabilities framework, and conducted a directed qualitative content analysis of interview data from twenty-seven Canadian women with personal experience of this technology.

RESULTS:

We found that eight of Nussbaum's ten capabilities related to options or choices that women valued in the context of NIPT, and identified one new capability, Care Taking. NIPT has a meaningful impact on women's capabilities, and capabilities concepts can capture the value of NIPT without relying on health outcomes of ambiguous social and ethical value. A capabilities approach may help reconcile ethical and economic value frameworks for NIPT.

CONCLUSIONS:

The capabilities approach can contribute to economic evaluations of morally challenging health technologies that better reflect patient preferences and ethical concerns, and may contribute to more holistic HTAs. It provides a framework within which policy analysts from