



Health Technology Assessment International

An International Society for the
Promotion of Health Technology Assessment

Eliciting patient views to improve Health Technology Assessment (HTA)

Organized by HTAi Interest Group on
Patient/Citizen Involvement in HTA



6TH ANNUAL MEETING
HTAi
SINGAPORE 2009



Acknowledgements

Thanks to HTAi
for providing grants
to Helle Ploug Hansen and Ann Single
to attend conference and
present this workshop



Outline of *workshop*

- Introduction – The patient and HTA
- Qualitative interviews and participant observations (Helle Ploug Hansen)
- Inclusive HTAs – patient involvement practices in HTA (Ann Single)
- Value of patient involvement in HTA
- HTAi Interest Group
- Close

Lots of interaction with you.....



'Patient'

- Broad term
 - service user and other beneficiaries of a health technology (including health promotion technologies)
 - carer/care-giver (one who looks after a patient)



HTAi definition of HTA

- HTA is the research-based, practice-oriented assessment of relevant available evidence and knowledge on the direct and intended effects of health care technologies, as well as the indirect and unintended consequences
- The goal of HTA is to support rational decision making in policy and practice that is context specific



Focus of HTA

- HTA is the research-based, practice-oriented assessment of relevant available evidence and knowledge on the direct and intended effects of health care technologies, as well as the indirect and unintended consequences



ECHTA and the patient

(IJTAHC, 2002)

Assessment of the impact, or the use or non-use, of a technology in terms of psychological, social and ethical benefits or harm is an important part of HTA

- Psychological (subjective) effects
 - feeling labelled, fear, anxiety, satisfaction
- Social effects
 - access to care
- Ethical effects (affecting values)
 - discrimination, human rights, consent, moral issues



HTA is evidence based

- HTA is the research-based, practice-oriented assessment of relevant available evidence and knowledge on the direct and intended effects of health care technologies, as well as the indirect and unintended consequences



The 'expert patient'

There are at least two bodies of knowledge that are relevant to the exchange between a doctor and a patient – the doctor's and the patient's.

Both are experts in their own fields

- the doctor in clinical matters,
- the patient in his or her experiences, feelings, fears, hopes, and desires.

Sir Ian Kennedy, chairman of the Bristol heart inquiry (1997)



HEE 'Understanding HTA' (A guide for patients, 2008)

'No one knows better what it is like to live with an illness ...than those who are doing this – the patients and their family and friends who care for them. It is this unique insight that patients and patient groups can most usefully contribute to the HTA process.'

Patients and carers can provide experiential evidence to an HTA of the true benefits and extent of unwanted effects



Engaging patients in HTA

- Through generation of robust evidence about patients' views on the intended and unintended consequences of using a health technology
 - Well planned and structured
 - Systematic
 - Presented clearly showing sources, methods, assumptions and findings
- Through effective 'involvement' processes to enable participation in the deliberative process of HTA



Programme

- Introduction – The patient and HTA
- **Qualitative interviews and participant observations (Helle Ploug Hansen)**
- Inclusive HTAs – patient involvement practices in HTA (Ann Single)
- Value of patient involvement in HTA
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Programme

- Introduction – The patient and HTA
- Qualitative interviews and participant observations (Helle Ploug Hansen)
- Why are patients important to our work in Asia (Karen for Fiona McMaster)
- **Inclusive HTAs – patient involvement practices in HTA (Ann Single)**
- Value of patient involvement in HTA
- HTAi Interest Group
- Close