Strategies for the Contextualization of Research Evidence to Meet Local Needs

Hospital/Regional HTA: Local Evidence-Based Decisions for Health Care Sustainability
Ottawa, ON, Canada

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Overview

Discussion of

- Decision-making process

- Types of decisions

- Options for supporting the use of research evidence from HTA in a local setting

Insights on

- Selecting, assessing and packaging research evidence to support decisions and knowledge translation

Caveat

My comfort zones

- Governments > regions > hospitals

- How (we get programs, services and drugs to those who need them) > What (programs, services, drugs and other 'technologies' we offer)

  - i.e., Organizational and system arrangements > technologies

Decision-Making Process

Decision-making processes are needed to decide

- Which topics to prioritize for decision-making (and how to frame the underlying problem and its causes as well as appropriate options to address the problem, although this is often self-evident with technologies)

- Which option to pick (this is where HTAs come in if the focus is technologies)

- Which implementation strategy to use (although this is often comparatively easy to determine with technologies)

Decision-Making Process (2)

Research evidence competes with many other factors in the decision-making process

- Institutional constraints (e.g., governing legislation, organizational policy)

- Stakeholder pressure (e.g., physicians, nurses)

- Other 'ideas' such as values and preferences, tacit knowledge, and real-world views and experiences

- External events

Decision-making about 'what' can be is one of the rare types of decisions where this process is often made more 'technical' than 'political' (vs 'how' decisions)

Types of Decisions

Select which technologies (programs, services, drugs, devices, etc.) to fund/cover/provide

- A single type of advice (e.g., HTA report) or decision

- Made at a single point in time

- By a clearly defined advisory or decision-making body

- As part of a highly routinized process

Optimal sources of synthesized research evidence to inform such advice (HTA reports) and decisions

- Cochrane Library for clinical programs and services and for drugs

- Health Evidence for public health programs and services

Types of Decisions (2)

Start/stop, accelerate/decelerate or consolidate a move towards a new organizational or system arrangement (while juggling a range of interlinked changes)

- A number of heterogeneous pieces of advice or decisions (small & big, visible & traceable or not)

- Made over a long period of time

- By a broad range of advisory and decision-making bodies

- With little to no routinization possible

Optimal sources of synthesized research evidence to inform such advice and decisions

- Health Systems Evidence

Options for Supporting the Use of Research Evidence from HTA

Prepare your own HTAs using a process that is

- Systematic

- Transparent

- Participatory

Contextualize others' HTAs

- Challenge is that most national and provincial HTA agencies prepare HTAs, not 'workbooks' that can support local processes that are systematic, transparent and participatory

One contextualization process for 'how' decisions

- Evidence briefs
  - Report that begins with a priority issue and mobilizes the relevant synthesized research evidence and local data and research studies about the underlying problem and its causes, options for addressing the problem, and related implementation considerations

- Stakeholder dialogues
  - Meeting that convenes decision-makers, stakeholders and researchers to deliberate about an issue, informed by a pre-circulated evidence brief and organized to allow for a full airing of participants' tacit knowledge and real-world views and experiences

Selecting, Assessing and Packaging Research Evidence

Selecting research evidence (1) – Match the questions to the right types of research evidence

- Problem
    - Comparisons (administrative database studies and community surveys)
    - Framing (qualitative studies)
- Options
    - Benefits (effectiveness studies)
    - Harms (effectiveness or observational studies)
    - Costs and cost-effectiveness
    - How and why the option works (process evaluations)
    - Stakeholders' views and experiences (qualitative studies)

Selecting research evidence (1) – Match the questions to the right types of research evidence

- Implementation considerations
  - o Barriers and facilitators (qualitative studies)
  - o Implementation strategies – benefits, harms, costs, etc. (same as for options)

Selecting research evidence (2) – Match the types of research evidence to the right sources

- Clinical programs, services and drugs

    o Cochrane Library for systematic reviews of effects and for cost-effectiveness analyses

    o PubMed's 'hedges' for other types of studies

- Public health programs and services

    o Health Evidence for systematic reviews of effects

    o Cochrane Library for cost-effectiveness analyses

    o PubMed's 'hedges' for other types of studies

- Organizational and system arrangements

    o Health Systems Evidence

Selecting, Assessing and Packaging Research Evidence (4)

Assessing research evidence – Take advantage of existing supports

- Ratings of quality of systematic reviews in Health Evidence and Health Systems Evidence (e.g., AMSTAR)

- Grading of quality of research evidence in user-friendly summaries linked to by Health Systems Evidence (e.g., GRADE in SUPPORT summaries)

- List of countries (where included studies were conducted) in Health Systems Evidence

- Questions to ask when conducting local applicability assessments (e.g., SUPPORT tool 9)

Selecting, Assessing and Packaging Research Evidence (5)

Packaging research evidence – Consider BRIDGE criteria

- **What it covers**: Does it cover a topical/relevant issue and address the many features of the issue based on the best available evidence?

- **What it includes**: Does it include knowledge from synthesized, assessed evidence and from the tacit knowledge, views and experiences of policymakers and stakeholders?

- ***For whom it's targeted**: Does it explicitly target policymakers and stakeholders and engage them in reviewing the product for relevance and clarity?

- ****How it's packaged**: Is it organized to highlight decision-relevant information, written in understandable language, and prepared in a format that makes the evidence easy to absorb?

- **How its use is supported**: Is it supported through online commentaries or briefings that contextualize the evidence and through ongoing communication that brings new evidence to attention?

Conclusion

Stand on the shoulders of those who've gone before (in selecting, assessing and packaging research evidence and in adapting HTA reports and innovations such as stakeholder dialogues)

Push for (and use) 'work books' that supply the synthesized research evidence, highlight the types of local data and research evidence needed, and support the types of local processes needed to contextualize the evidence

For Those Who Want to Know More

Resources available on Health Systems Evidence

- 'Finding and using research evidence' (one-page PDF, three videos and soon a full online course on Health Systems Learning)

- SUPPORT tools (two-page PDF with hyperlinks), particularly the ones about local applicability assessments, evidence briefs and stakeholder dialogues

- Health Systems Evidence (four-page PDF and video)

- Evidence-Informed Healthcare Renewal (EIHR) Portal (video)

Paper about evidence briefs in the January issue of BWHO

BRIDGE summaries available on the website of the European Observatory on Health Systems and Policies

A [Revised] Quote from Atul Gawande

"Congress has provided vital funding for research that compares the effectiveness of different treatments, and this should help reduce uncertainty about which treatments are best.

But we also need to fund research **[and reviews]** that compare the effectiveness of **[and address many other questions about]** different systems of care – to reduce our uncertainty about which systems work best for communities.

These are empirical, not **[just]** ideological questions."

The New Yorker, 1 June 2009, p. 44