**Tool 4** AdHopHTA mini-HTA template

**What is this tool for?**

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| The“AdHopHTA mini-HTA template” aims at providing guidance to perform the assessments of health technologies in hospital contexts. The tool constitutes an evolution of the mini-HTA developed by DACEHTA and integrates the research coming from the AdHopHTA project regarding the informational requirements of hospitals’ decision-makers. |

**Who is this tool for?**

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| The tool is designed to be used by HB-HTA units (or other organizations performing  HB-HTA) as a guidance for preparing HB-HTA reports of high quality. |

How to cite the Toolkit: AdHopHTA partners. The AdHopHTA toolkit: a toolkit for hospital-based Health Technology Assessment (HB-HTA); Public deliverable, The AdHopHTA Project (FP7/2007-13 grant agreement nr 305018); 2015. Available from: <http://www.adhophta.eu/toolkit>

🗐 🗁 **AdHopHTA mini-HTA template**

**QUESTION 1▸ SUMMARY**

1. **Summary of effects**

Please provide a short summary (in bullet points, maximum 1 page) describing why the assessment of the technology is being undertaken (rationale) and the effects and safety of the technology/proposal (main results). Compare these to similar effects of comparator(s).

Please include also the recommendations of the assessment, if any.

Click here to enter details

**QUESTIONS 2-7▸ BASIC INFORMATION**

1. **Who is the proposer of the technology?**

Please specify who proposed the acquisition / implementation of the specific technology (industry, company, hospital, department, individual).

Click here to enter details

1. **Who are the authors of the HB-HTA report?**

Please specify the names of the authors of the HB-HTA report including appropriate contact details for provision of further information (hospital, department, e-mail address, phone number, date).

Click here to enter details

1. **Are other parties/stakeholders involved in the proposal?**

Often it is beneficial to discuss a proposal with e.g. a local drug or device committee, other affected hospital departments or relevant cooperation forum. Please state with whom the proposal has been discussed, if with anyone, and the conclusion reached. **[**[**🡪 Click to see tool 12**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool12_document.pdf)**]**

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1. **Are there any possible conflicts of interest?**

Please state any possible conflicts of interest for both authors of the HB-HTA and other parties/stakeholders involved in the proposal. **[**[**🡪 Click to see tool 13**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool13_document.docx)**]**

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1. **Has the HB-HTA report been reviewed (internally or externally)?**

Please state whether the HB-HTA report has been reviewed or not. If it has, was the review internal or external? An internal review may be carried out by e.g. HTA experts or healthcare professionals inside the hospital. An external review may be carried out by partners outside the hospital, e.g. healthcare professionals from another hospital or region or by industry representatives.

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1. **Define the goal and scope of the HB-HTA report (TICO)**

Please define the goal and scope of the HB-HTA report in short using the TICO abbreviation (technology, indication, comparison and outcome). **[**[**🡪 Click to see tool 3**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool3_document.pdf)**]**

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|  | **QUESTIONS WITH INSTRUCTIONS** |
| **T**  **Technology** | **TECHNOLOGY**  What technology will be assessed?  *Please state the name of the technology and describe the type, classification, dosage, frequency, timing, duration and setting of the technology. If relevant, please specify whether the technology is compatible with the current IT-system of the hospital.* |
| **I**  **Indication** | **TARGET DISEASE**  What condition/disease is targeted?  *Please describe the disease or condition which is targeted.*  **TARGET POPULATION**  What population/group of patients does it concern? Who should receive the treatment/service?  *Please describe the target population in terms of e.g. age, gender, education, ethnicity, level of risk etc. Please specify the number of patients per year.*  **INTENDED USE**  What is the purpose of use of the technology?  *Please describe whether the technology is used for prevention of or screening for the target condition; for diagnosing the target condition; for treatment of the target disease; for treatment selection, evaluating prognosis, monitoring, rehabilitation or for other purposes.* |
| **C**  **Comparison** | **ALTERNATIVE TECHNOLOGIES/INDICATIONS**  What are the alternatives to the technology/intervention? What is the technology/intervention compared to? e.g. usual practice at the hospital (available technology), conventional practice (gold standard), none/placebo, another population, dosage or mode of use?  *Please describe all possible alternative technologies and highlight which specific alternative the technology/intervention is compared to in this assessment. Please specify the name of the alternative technology or indication used as comparator.* |
| **O**  **Outcome** | **RELEVANT MEASUREABLE OUTCOMES**  What relevant endpoints/outcome measures are used? E.g. change in mortality, morbidity, side effects, quality of life, cost-effectiveness, length of stay, number of (re)admissions, ICER, budget impact, costs per correct diagnoses etc.  *Please describe all relevant and important outcomes for this technology and indication and highlight which specific outcomes are included in this assessment.* |

**QUESTIONS 8-12 ▸ GENERAL METHODOLOGICAL ASPECTS & REPORTING**

1. **Has a review of relevant literature been carried out (by the hospital or by others)?**

A mini-HTA should to a large extent be based on documented knowledge. If a review or assessment of relevant literature or HTA reports has been carried out, please provide details of the search, review and assessment of this (date of search, key search terms, databases, selection criteria, number of hits, flow diagram etc.). **[**[**🡪 Click to see tool 8**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool8_document.pdf)**]**

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1. **Is additional material/data included in the HB-HTA report?**

If additional material or data is included please describe the sources of the data or material and the process for gathering it. Additional material or data can be, for example, local register data, activity data, interview data, data from the manufacturer, non-published data etc.

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1. **What is the quality of information/data/studies included?**

Please specify the types of studies included and make an assessment of the quality of the information or data included, e.g. by means of a checklist for the assessment of internal or external validity of literature included (e.g. potential problems with bias, sample size, transferability etc.). **[**[**🡪 Click to see tool 8**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool8_document.pdf)**]**

Please rate the strength of the evidence using a relevant evidence hierarchy. **[**[**🡪 Click to see tool 8**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool8_document.pdf)**]**

A rating of the strength of the evidence using an evidence hierarchy can be used as a sole instrument in a “fast track” process when the timeframe for the assessment is very tight. In normal circumstances, an assessment of the quality of information/data included is however mandatory.

Click here to enter details

1. **List of references**

Please provide a list with the most important references.

Click here to enter details

1. **Are there any ongoing studies of the effect of the proposal/technology?**

Please specify any ongoing studies of the effect of the proposal/technology. **[**[**🡪 Click to see tool 8**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool8_document.pdf)**]**

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**QUESTIONS 13-23 ▸ RESULTS WITHIN DOMAINS**

*When describing results of the assessment within the different domains below, please compare the results to similar results/effects of the relevant comparator(s).*

1. ***Clinical effectiveness***

*What are the clinical effects of the proposal/technology?*

Please describe the clinical effects of the proposal/technology, e.g. on the health of the patients (e.g. mortality, morbidity, disability/functional capacity, health-related quality of life, pain) or on the length of stay, number of admissions etc.The clinical effects should as far as possible be quantitatively described (e.g. response rate, average number of years of life gained per patient, number of QALY gained) by at least one relative measure (RR, OR, RRR) and one absolute measure (ARR, NNT/NNH). If the clinical effects are expressed as intermediate end-points (e.g. change in SBP, DBP) please describe how these end-points are linked with relevant final end-points.

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1. **Patient safety**

*Are there any potential adverse effects associated with the proposal/technology?*

Please describe any potential adverse effects associated with the proposal/technology with regard to e.g. timing, severity and frequency. The risks, side effects and other adverse effects should be assessed against the benefits of the technology. These disadvantages should be compared with the disadvantages of current practice and any other possible alternatives.

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1. ***Economic aspects (1/4)***

*What is the additional or saved annual cost for the hospital?*

Please specify the direct additional or saved cost per year for the hospital if the proposal/technology is implemented. Please describe the types of costs included – both start-up costs (e.g. equipment, rebuilding, training/education etc.) and running costs (e.g. staff salaries, maintenance of equipment etc.) should be included. Costs should be presented quantitatively. Additional or saved costs in other departments of the hospital should also be included.

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1. ***Economic aspects (2/4)***

*What are the implications of the proposal/technology for the reimbursement of the hospital per year?*

Please specify the implications for hospital reimbursement per year. Implications for hospital reimbursement may be estimated using the number of patients, discharges, outpatient visits, bed days, DRG-weights etc. Implications for reimbursement should be presented quantitatively. Implications for reimbursement in other departments of the hospital should also be included.

The relevance of this question may depend on the specific financing scheme of the hospital.

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1. ***Economic aspects (3/4)***

*Which additional or saved costs can be expected for other hospitals, sectors etc.?*

Please specify whether the proposal/technology causes additional expenses or savings for other hospitals, regions, sectors or for the patients. Costs should be presented quantitatively.

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1. ***Economic aspects (4/4)***

*Has an economic evaluation of the proposal/technology been carried out from a societal point of view   
(by the hospital or by others)?*

Please specify whether a societal economic evaluation (e.g. cost-effectiveness analysis, cost-utility analysis etc.) of the proposal/technology has been carried out. If so, by whom and what were the main results? The economic effect of the proposal/technology should be quantitatively presented.

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1. ***Organisational aspects (1/2)***

What are the organisational consequences *inside* the hospital department?

Please describe any organisational consequences *inside* the hospital department associated with the introduction of the proposal/technology, e.g. physical space impact, workload and workforce implications, impact on staff regarding information, education/training, working environment and organisation of work, working hours etc. When can the proposal/technology be implemented/introduced in the hospital?

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1. ***Organisational aspects (2/2)***

*What are the organisational consequences outside the hospital department?*

Please describe any organisational consequences *outside* the hospital department associated with the introduction of the proposal/technology. A proposal/technology will often entail changes in the cooperation with other hospital departments or health care sectors. If so, please describe in what way this is expected to affect the departments/service functions or sectors, e.g. altered patterns of cooperation, differences in workload, changes in criteria for referral etc.

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1. ***Patients’ perceptions***

*What is the patients’ experience of the proposal/technology and its implications?*

Please describe the patients’ experience of the proposal/technology and its implications, e.g. satisfaction, compliance, empowerment etc. This information may be found in the scientific literature or be collected by interviewing relevant patients in the hospital.

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1. ***Strategic aspects***

*Are there any strategic implications associated with the introduction of the proposal/technology?*

Please describe any strategic implications associated with the proposal/technology, e.g. fit between the proposal/technology and the research strategy, the local values of the hospital or national/regional health care strategies; implications for prestige and competition among hospitals in connection with the proposal/technology etc. Can the proposed technology be considered an innovation compared to current practice? If so, how?

Click here to enter details

1. ***Other potentially important aspects***

*Are there any other important aspects associated with the proposal/technology that should be considered?*

Please describe any additional influencing factors associated with the proposal/technology, e.g. ethical implications (access, equity etc.), social implications (family dynamics, occupational status, early return to work etc.) or legal implications (FDA-approval, CE marking etc.). These considerations should be compared with usual practice and other possible alternatives.

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**QUESTIONS 24-28 ▸ DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

1. **Discussion of uncertainties**

Please describe and discuss the uncertainties in the answers to the questions above. Are there any possible limitations to the methods/approaches used or sources of bias from different types of evidence? Are the patients in the included studies similar to the patients in clinical practice (transferability)? Do the results point in the same direction? The implications of some uncertainties can be illustrated in a sensitivity analysis.

Click here to enter details

1. **Has the proposal/technology been implemented in other hospitals, in this country or internationally?**

Please indicate if the proposal/technology is being used –or is planned to be used– elsewhere. Depending on the nature of the proposal/technology it may be relevant to explain why increased decentralisation is considered to be necessary. **[**[**🡪 Click to see tool 10**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool10_document.pdf)**]**

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1. **Is the proposal/technology recommended by any other relevant national/international institutions or organisations*?***

*(e.g. the national board of health, relevant medical associations/societies, EMA, AMA, NICE etc.)*

If yes, please specify by whom. Please state any recommendations. **[**[**🡪 Click to see tool 24**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool24_document.pdf)**]**

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1. **Based on the assessment of the proposal/technology, what are the recommendations?**

Please describe any recommendations from the assessment of the proposal/technology. Should the new technology be introduced in your hospital? **[**[**🡪 Click to see tool 7**](http://www.adhophta.eu/toolkit/assets/tools/AdHopHTA_toolkit_tool7_document.pdf)**]**

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1. **Are there any suggestions for further actions?**

Please specify any suggestions for further actions, e.g. a new scientific study of the effect of the proposal/technology, other research projects, quality assurance initiatives, monitoring of the effect and safety of the proposal/technology, updating the review of literature after a period of time etc.

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