CONCLUSIONS:

To explore patients perspectives is thus not to identify one 'true' perspective through an individual interview. Patients perspectives and experiences are emerging, relational and shifting. Therefore, there is a need for enhancing methodological and epistemological reflections and discussions about future development of ethnographic fieldwork in relation to HTA and patient involvement. The potential use of ethnographic fieldwork including participant-observation and ethnographic interviews will be highly relevant in relation to the assessment of new screening procedures, tele-health solutions, and collaboration between different sectors such as hospitals, municipalities and general practice. Furthermore, ethnographic fieldwork would be of importance for exploring how technology is working in local settings.

REFERENCES:

1. Tjørnhøj-Thomsen T, Hansen HP. Ethnographic Fieldwork. In Facey KM, Hansen HP, Single ANV, editors. *Patient Involvement in HTA*. Singapore: Springer 2017. Chapter 12.

VP29 Organizational Aspects In Health Technology Assessment: A New Approach For Future Assessments

AUTHORS:

Maria Lucia Specchia, Pasquale Cacciatore, Francesco Mazzotta, Walter Ricciardi, Gianfranco Damiani (gianfranco.damiani@unicatt.it)

INTRODUCTION:

Organizational aspects influence the behavior of healthcare professionals and managers, and may help to overcome the barriers in the implementation of new health technologies. However, the organizational domain is often under-represented or absent when Health Technology Assessment (HTA) reports are built. The objective of this study was to to explore the

organizational assessment in HTA and build a new framework for applicative experience after the comparison with the European Network for HTA (EUnetHTA's) CoreModel 3.0.

METHODS:

A literature review was performed by extracting full HTA reports through INAHTA (International Network of Agencies for Health Technology Assessment) members websites, HTA agencies and snowball search, and the aspects relating to the organizational assessment were analyzed. A quantitative and qualitative analysis was performed on the retrieved reports and the results were compared with a framework of five domains and fifteen subdomains from EUnetHTA's CoreModel 3.0. A Multiple Correspondence Analysis was carried out in order to evaluate the power of CoreModel and identify new common domains to guide the organizational assessments in HTA reports.

RESULTS:

The assessments of organizational issues in the reports were significantly heterogeneous and less common than inclusion of other classic assessments. When included, domains and subdomains of the CoreModel were not covered homogeneously by the organizational assessments (representation level varied from 19 percent to 62 percent). The statistical analysis performed on the current data and the subsequent clustering of items offered the possibility to develop a new methodology based on three new composite indicators.

CONCLUSIONS:

This ongoing study analyzed the relevance of organizational assessments in current literature and the challenges of promoting an international approach to the matter. In this sense, according to the current state of the research, we proposed a new methodology to cover the most relevant aspects of organizational appraisal according to new, more homogeneous domains and a less context-oriented approach to encourage health professionals to perform organizational analysis and better fulfill the needs of future HTA research.