

Decision-Making on New Non-Drug Health Technologies by Hospitals and Health Authorities in Canada

Prise de décision par les hôpitaux et les autorités de la santé au sujet des nouvelles technologies non pharmacologiques au Canada

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TABLE 2. Summary of information requirements of business cases/request forms and sources of information used

Characteristic	Processes			
	Capital (N = 28)	Non-capital (N = 3)	Capital and non-capital (N = 24)	All (N = 55)
Type of information required:				
Safety	28 (100%)	3 (100%)	24 (100%)	55 (100%)
Budget impact	28 (100%)	3 (100%)	24 (100%)	55 (100%)
Effectiveness	28 (100%)	3 (100%)	23 (96%)	54 (98%)
Cost-effectiveness	27 (96%)	3 (100%)	20 (83%)	50 (91%)
Availability of an alternative	24 (86%)	2 (67%)	18 (75%)	44 (80%)
Disease burden	23 (82%)	2 (67%)	15 (63%)	40 (73%)
Ethical obligations	19 (68%)	3 (100%)	12 (50%)	34 (62%)
Legal implications	16 (57%)	2 (67%)	16 (67%)	34 (62%)
Patient preferences	14 (50%)	1 (33%)	9 (38%)	24 (44%)
Sources of information used:				
Expert opinion	28 (100%)	3 (100%)	24 (100%)	55 (100%)
Peer-reviewed literature	28 (100%)	3 (100%)	22 (92%)	53 (96%)
Regulatory documents	27 (96%)	3 (100%)	19 (79%)	49 (89%)
HTA reports*	17 (61%)	3 (100%)	18 (75%)	38 (69%)
Promotional material	21 (75%)	2 (67%)	14 (58%)	37 (67%)
Unpublished sources	16 (57%)	2 (67%)	12 (50%)	30 (55%)
Patient or public input	13 (46%)	0 (0%)	8 (33%)	21 (38%)
Best practice guidelines/standards	2 (7%)	0 (0%)	2 (8%)	4 (7%)
Social media	1 (4%)	0 (0%)	2 (8%)	3 (5%)

*HTA report sources: CADTH (16), Ontario Health Technology Committee/Health Quality Ontario (12), Emergency Care Research Institute (9), Institut national d'excellence en santé et en services sociaux (INESSS) (7), searches (6), hospital HTA units (2), Alberta Health Services (1), University of Alberta (2), University of Calgary (2), Institute of Health Economics (2), international HTA organizations (4).

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TABLE 3. Factors considered when formulating recommendations

Factors	Processes			
	Capital (N = 28)	Non-capital (N = 3)	Capital and non-capital (N = 24)	All (N = 55)
Factors considered in decision-making:				
Clinical benefit	28 (100%)	3 (100%)	24 (100%)	55 (100%)
Alignment with priorities	28 (100%)	3 (100%)	24 (100%)	55 (100%)
Cost/affordability/sustainability	28 (100%)	3 (100%)	23 (96%)	54 (98%)
Regulatory status	26 (93%)	3 (100%)	22 (92%)	51 (93%)
Availability of similar services elsewhere	23 (82%)	2 (67%)	18 (75%)	43 (78%)
Speed of uptake	22 (79%)	2 (67%)	17 (71%)	41 (75%)
Desire to please stakeholders	19 (68%)	3 (100%)	19 (79%)	41 (75%)
Institutional liability	17 (61%)	2 (67%)	18 (75%)	37 (67%)
Consumer demand	20 (71%)	2 (67%)	14 (58%)	36 (65%)
Equity	18 (64%)	2 (67%)	16 (67%)	36 (65%)
Precedence	11 (39%)	0 (0%)	16 (67%)	27 (49%)
Prestige of requestor or technology	13 (46%)	3 (100%)	10 (42%)	26 (47%)
Innovativeness/economic development	5 (18%)	0 (0%)	3 (13%)	8 (15%)
Local expertise/volume requirements	10 (36%)	2 (67%)	5 (21%)	17 (31%)
Impact on staff, needs of staff, staff safety	6 (21%)	0 (0%)	2 (8%)	8 (15%)
Maintenance/service requirements	4 (14%)	0 (0%)	1 (4%)	5 (9%)
Staff requirements, training, learning curve	3 (11%)	0 (0%)	2 (8%)	5 (9%)
Capacity to implement change	3 (11%)	1 (33%)	0 (0%)	4 (7%)
Other	9 (32%)	1 (33%)	9 (38%)	19 (35%)