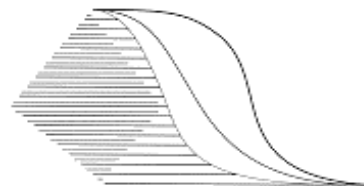


Centre for Health Services
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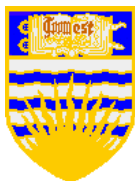


**A Workers' Compensation
Board / HTA Office
Joint Endeavour**

BCOHTA 99:5C JUNE 1999

British Columbia Office of Health Technology Assessment
Workers' Compensation Board of British Columbia

*Presentation at the 15th Annual Meeting of the International Society for
Technology Assessment in Health Care - Edinburgh June 20-23 1999*



UNIVERSITY OF BRITISH COLUMBIA

A Workers' Compensation Board / HTA Office Joint Endeavour

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Sources of support: British Columbia Ministry of Health grant through the Office of the Coordinator of Health Sciences, The University of British Columbia

1.0 BACKGROUND

The mandate of the British Columbia Office of Health Technology Assessment (BCOHTA) is to promote and encourage the use of assessment research in policy, planning and utilization decisions by government, health care executives, and practitioners. Early practice was to produce reports conducted entirely by BCOHTA researchers in response to local requests selected according to predetermined prioritisation criteria. Content and process expertise was thereby stimulated within the health technology assessment organisation, but this development did not extend to the requesting agency. Moreover, in the hospital setting, it was found that evidence-based medicine required local advocates and structural support systems for successful implementation.¹

To remedy these deficiencies and to foster an environment receptive to research uptake, BCOHTA launched a joint technology assessment project series.

One such co-operative initiative was undertaken with the British Columbia Workers' Compensation Board (BCWCB) which, as a third party payer, has frequently to consider payment for or endorsement of health technologies, clinical treatments, assessments or diagnostic procedures. By combining the expertise of the BCOHTA with that of its own staff, the BCWCB was able to introduce a formal process of scientific evaluation. The BCOHTA helped the BCWCB's Technology Assessment Committee (TAC) to develop a process for systematic review, able to generate scientific conclusions subsequently available to the BCWCB for its development of policy and practice.

The first step in expanding local systematic review and critical appraisal expertise involved teaching the scientifically rigorous approach required in gathering and appraising clinical evidence. Equally importantly, BCOHTA was able to demonstrate how research findings might be defended within often contentious committee debates, program planning sessions and policy development processes.

2.0 OBJECTIVE

The objective for both the BCWCB and the BCOHTA is to produce scientifically valid systematic reviews conducted with and supported by key individuals in various centres, and in addition, to further the dissemination of HTA methodology. The purpose of this paper is to describe the structure and processes which developed; and the results, in terms of the advantages to each organization.

3.0 STRUCTURE & PROCESSES

The BCWCB founded a multi-disciplinary Technology Assessment Committee with BCOHTA participation. BCWCB staff generated topics reflecting initiative and institutional needs. The committee drew on BCOHTA expertise in:

- establishing prioritization criteria for selection of project topics;
- setting up library support systems to manage bibliographic and fugitive searches;
- developing systematic review and critical appraisal skills to enable evaluation of scientific evidence; and
- supporting report production.

TECHNOLOGY ASSESSMENT COMMITTEE (TAC) PROCESSES

Establish terms of reference & mandate

- Consultation with stakeholders regarding potential health technology topics to be reviewed. (Employers - Workers - External Organisations - Health Care Practitioners - Internal Departments)
- Prioritisation of topics via predetermined selection criteria
 - ◇ broad potential impact and potential change in quality of life
 - ◇ acquisition and operating costs to the worker's compensation system
 - ◇ potential to influence provider and consumer as a result of review
 - ◇ availability of accurate information and appropriate research skills
 - ◇ ability of researchers/reviewers to produce definitive results
- Steering committee approval

Comprehensive/Extensive Information Collection

- National Library of Medicine databases
- Other specialty databases
- Review of data from other technology assessment agencies (national and international)
- Fugitive data collection (medical specialty associations, manufacturers, committee reports, consensus statements, task force reports).

Critical Appraisal

- Strength of evidence
 - ◇ Canadian Task Force on Preventive Health Care Grades of Evidence²
- Quality of evidence
 - ◇ BCOHTA Intervention Study Appraisal Criteria³
 - ◇ Feinstein's Criteria for Studies of Observer Variability⁴
 - ◇ Hill's Criteria for Examining a Causal Relationship⁵
 - ◇ Sackett's methods for Assessing a Diagnostic Test⁶

Review Process

- Internal and external reviewers
- Steering Committee approval

Production/ Dissemination of Document

- Directly to policy makers within BCWCB
- Through routine dissemination channels of both organisations
 - ◇ Report distribution to regular mailing list of BCOHTA and WCB internal distribution
 - ◇ Full text report on both organisational websites
 - ◇ Newsletters to regular mailing list of BCOHTA and WCB internal distribution
- Academic conferences and publications

4.0 ADVANTAGES

BCWCB

- Includes a variety of WCB professionals within a single process
- Report findings are more effectively defended within the WCB
- Report findings have better external credibility because of rigorous scientific methods which are comprehensive and reproducible
- Stimulates interest in research findings and increases likelihood of utilization

BCOHTA

- Research uptake by the partner organization is enhanced by:
 - ◇ fostering an environment conducive to evidence-based decision making
 - ◇ strengthening the organisation's capacity to conduct systematic reviews
 - ◇ strengthening the organisation's capacity to critically appraise research
- Impact of the reviews on policy is increased by:
 - ◇ directing assessments towards the policy-making process
 - ◇ conducting health technology assessment with and for the policy makers who will use the findings
 - ◇ supporting the development of knowledge and skills of individuals within the organisation who are ideally situated to defend and promote the use of the findings within the organisation
- Dissemination of research findings is multiplied by:
 - ◇ extending along regular dissemination routes within the organisation

5.0 DISADVANTAGES

BCWCB

- Requires consensus on prioritization of topics
- Resource intensive - new roles for staff librarians and reviewers

BCOHTA

- Resource intensive for BCOHTA reviewers who initiate external reviewers as well as conduct assessments
- Project production is slower allowing for the other organisation's schedule, with more extensive group processes and internal review

6.0 RESULTS & CONCLUSIONS

Not only did individuals within the target organisation gain expertise in conducting HTA research relevant to their needs, but they were also able to present and defend the systematic review conclusions during ongoing committee debates within their organisation. This joint project demonstrated effective dissemination of HTA process and research techniques, in fulfilment of BCOHTA's mandate to encourage research uptake.

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