Mini HTA: an effective tool for clinical governance, resource allocation and conflict management at local (Regional) level.

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The Italian National Health System is centrally governed by the Ministry of Health and by Local Health Authorities (ASL) at Regional level. The Region of Liguria is divided into 5 ASL. Each ASL governs hospitals in the territory of competence.

Liguria, for the government of technological innovation, approved with a formal act in 2011 (DGR 295) the creation of a Regional HTA Network in order to implement the process of Health Technology Assessment and to develop the concept of Evidence Based Medicine. The main point of the resolution is the introduction of a Mini HTA grid, that must be filled by proponents before the introduction of any technological innovation.

**Regional HTA Network**

**Organisation & Role**

**Director**

**Coordination group**

Consists of all Professionals who may be involved in the evaluation, depending on the device to be evaluated: doctors with different specialisations, clinical engineers, chemists, health economists and representatives of the citizens.

**Scientific Secretariat**

Consists of a doctor with specific skills in clinical research and HTA methodology, who draft a evidence summary and share the assessment with the Director and with the other stakeholders involved before the dissemination.

**Hospital coordinators**

In every Hospital local health care Professionals assist the Applicant in the Mini HTA grid compilation.

**Workflow**

Hospitals require innovative technologies through Mini HTA grid compilation

Grid submission to Scientific Secretariat

Analysis of quality of data produced in the grid, context and scientific literature by the Scientific Secretariat

Assessment and Dissemination

**The Mini HTA grid explores the main dimensions of technology :**

1. Efficacy
2. Safety
3. Budget Impact
4. Cost Effectiveness
5. Organizational impact
6. Sustainability

Since 2011 the Ligurian Regional HTA Network has evaluated the following devices:

1) Virtual Colonoscopy CAD
2) Portine Dermal Collagen Surgery
3) Sling for urinary incontinence
4) Collagen Matrix for sutures
5) Fixation device in surgery
6) Sterilization devices
7) Implantable device for Glaucoma
8) Intravascular Catheter
9) Optical Coherence Tomography
10) Pneumothorax drainage system
11) Tecar Therapy device
12) CT Contrast Agent Injector
13) Blood glucose controlling device
14) Warmed nest
15) Implantable Intrathecal Pumps
16) Hysterosalpinogo-foam Sonography gel
17) Polysomnography portable device
18) Allux valgus surgery device
19) Orthopedic lithotripsy device
20) Phlebologic surgery device
21) Drug eluting stent
22) Vascular surgery devices
23) Scaffold for nerve regeneration
24) Carpal tunnel syndrome surgery device
25) Cyberknife
26) Laryngeal masks
27) Wound irrigation gel
28) UV Therapy sistem
29) Haemostatic Patch
30) Radiofrequency scalpel
31) Sensor-augmented insulin pump
32) HPV test for screening of cervical cancer
33) Children audiometry device
34) Electronic stapler
35) Pulsed Radiofrequency device
36) Electronic health records
37) Water filtration device
38) Trichotomy devices

Since 2011, the HTA Network has evaluated around 40 devices. The Mini HTA Grids and the corresponding responses are available on the website [http://www.liguriainformasalute.it/ligrw/sanita/ep/home.do](http://www.liguriainformasalute.it/ligrw/sanita/ep/home.do) where it’s present a dedicated space for the HTA Regional Network.

This rigorous evaluation path has allowed us to:

1. Avoid premature insertion in clinical practice of devices which were not adequately assessed.
2. Use a EBM method to handle clinicians requests and govern the introduction of innovative devices
3. Modify some health care practices following new indications from new clinical studies
4. Optimize and control health care expenditure keeping a high quality of care
5. Disinvest from obsolete technologies