HOSPITAL BASED HTA in LMIC

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Background
Background

Pre hospital care

- Primary HC Clinic/GP
- patient self-care

HOSPITAL CARE

- clinical diagnosis (history and examination)
- diagnosis (lab and X-ray)
- curative (operations)

Post Hospital care

- discharge+
- patient self care
Background

Past
- Burden of diseases (mainly infective)
- Skill driven
- More reliant on Doctor/ nurses
- Relatively cheaper
- Curative

Current
- Burden of diseases (infective as well as Non-communicable Diseases)
- Technology driven
- Multi-disciplinary
- Relatively more expensive
- Preventive and promotive
- Self-care
### Organizational model

<table>
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<tr>
<th>Organizational complexity</th>
<th>Focus of Action</th>
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<tbody>
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<td></td>
<td>Clinical Practice</td>
</tr>
<tr>
<td>High (Team unit)</td>
<td>Internal committee model</td>
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<tr>
<td>Low (individual)</td>
<td>Ambassador model</td>
</tr>
</tbody>
</table>

_Hospital Based Health Technology Assessment World-Wide Survey, ISG Hospital Based HTA, HTAi, 2007_
Factors Influencing HTA

Skills & Competency
Human resources
Supportive environment
Skills & Competency of Staff

- Multidisciplinary
- Professionalization of HTA
- Adequate training and education
Staff: MULTI-DISCIPLINARY UNIT

- Physicians
- Nurses
- Biomedical and clinical engineers
- Medical technologists
- Managers
- Health economists
- Epidemiologist
- Public Health professionals
- Statisticians
- Lawyers
- Social scientists
- Ethicists
Supportive Environment

- Support of Policy makers and Management
- Evidence Based Decision making
- Funding
Does HTA help us take the right decision?

- Relevant
- Effective
- Efficient
- Sustainable
- IMPACT
Where does HTA fit into Hospital management

The Healthcare Technology Management Cycle from (Lenel, et al., 2005)

HB HTA Methodology
(Technology; patient; economy; organisation)

SAFE
EFFECTIVE
EFFICIENT
Challenge for Hospital management and HTA

Want to use HTA as a basis for decision making
Need to take quick decisions

Salesman
## Challenges/Opportunities

### Challenges
- Shortage of resources
- Skills
- No practice of evidence based medicine
- Funding not available
- Know-how not available – decision makers

### Opportunities
- Systematic assessment of devices from procurement till disinvestment
- Technology driven
- Integrated approach
- Policy tool
Diffusion of Hospital Based HTA in LMIC

- Transparency of HTA methods and processes is crucial among stakeholders
- Dissemination of reports
- Networking (through conferences) and collaboration leading to promotion of HTA among professionals
- Exchange of experience and expertise
- Skills enhancement
- Mentoring program between 'developed agencies' and 'developing agencies'
- National body on medical devices – information on regulation, usefulness, compatibility
Conclusion

- Optimization of scarce resources
- Mainstreaming HTA

USEFUL TOOL FOR UHC!
Thank you!