Using the best available evidence to inform decision making on complex interventions: Building the future through increasing public and patient involvement in Health Technology Assessment

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Issue
Patient and public involvement (PPI) in the evaluation of health services and health service research is well developed in some European countries. However, PPI in Health Technology Assessment (HTA) and in the synthesis and implementation of evidence to inform policy more widely is less common.

Description of policy
The value of HTA, particularly of complex and public health related interventions, might be enhanced by actively involving lay people and taking account of their issues and perspectives. This would ensure these sources of evidence can inform decisions across all HTA domains that directly affect patients and their families and carers. This is an element of the current collaborative activities of EUnetHTA [http://www.euneththa.eu/] and a component of a number of ongoing projects which are exploring the contribution that lay people, as individual contributors or as panels, can make to different elements of the HTA process for complex interventions.

Results
Work to date suggests that mechanisms for lay involvement vary across Europe and are facilitated by the existence of patient or community groups who can be invited to contribute. The time and resources required are likely to be greater where there are no appropriate pre-existing organisations. Exploration of the feasibility of methods in different settings is therefore required. The INTEGRATE-HTA project, co-funded by the European Union under the Seventh Framework Programme (FP7-Health-2012-Innovation, grant agreement no. 306141) and coordinated by the University of Bremen, will be recruiting lay stakeholders to panels in seven European countries (United Kingdom, Germany, The Netherlands, Norway, Italy, Poland and Serbia) to inform both the initial scoping of an HTA on specialist palliative care, and subsequent interpretation of the evidence base.
Lessons
Although there is some experience in a few settings of using lay input to evidence synthesis and HTA processes, there is a lack of research into how such policies might best be implemented at all stages of the process in different settings and health systems. Developing practical mechanisms for ensuring effective input from lay people into HTA processes, and establishing both the costs and benefits of implementing PPI will have significant policy implications.

Key messages
- Successful involvement could greatly enhance the value of HTA and evidence synthesis more generally.
- More experience of different methods of lay involvement across different European countries is needed; the INTEGRATE-HTA project will explore this through a case study in specialist palliative care.