

## General information

We need to develop a draft toolkit by December this year.

As discussed at the WP5 meeting in London, the task before you is the main work requirement for WP5 members for this year – developing the content of the toolkit.

The second round Delphi survey questionnaire (sent to WP5 members on 4 July) described the toolkit and its role within the adaptation process. We now have a framework for the toolkit and need to fill the gaps!

In the first round Delphi questionnaire we asked you to rank your preferences for working on developing content under specific headings/domains within the toolkit. (Members have expressed concern with the use of the word ‘headings’ to describe parts of HTA reports as described in the EUR-ASSESS paper. Therefore, what were ‘headings’ will be described as ‘domains’ from here onwards.) We have allocated commentaries on specific ‘domains’ with respect to preferences expressed in your responses, funding commitments to WP5 activities, glossary activities and information attendees provided at the WP5 London meeting. The Excel spreadsheet attached to the accompanying email shows the allocation of tasks to members. If you are unhappy with the selection made for your agency please contact us by Monday 17 July.

You should spend no more than a total of 3 days working on and producing this commentary. **The deadline for this work is Monday 1 September.**

## Instructions for writing commentaries

**You have been allocated the domain:**

**Organisational impact**

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### **With the EUR-ASSESS/ECHTA brief description of:**

Health-care technology both affects and is affected by the organisational structure and other aspects of health services. The nature of the interaction of technology and organisation is strongly influenced by one or more of six factors. For each of these factors, one has to consider the health service as it exists before the introduction of a technology and changes that are needed by or resulting from its introduction: centralisation/decentralisation of information, technology/procedure, clinical decision power, economic decision power; differentiation on personal level (experts), organisational level; flexibility/vulnerability to internal effects and external effects; staff requirements: quantitatively and qualitatively; job satisfaction: physically and psychologically; and channels of communication: clinical data and administrative data

**Your tasks are as follows**

**To identify questions to assess the reliability of information and data in the HTA report for adaptation**

1. To identify quality assessment checklists/tools/guidance to assess the reliability of methods used and results described within a HTA report under your allocated domain.
2. To determine which, or which part(s), of these quality assessment checklists should be included in the toolkit, i.e. which are the most widely used and/or well validated of these checklist questions?
3. If there are not any checklists/tools/guidance for assessing reliability for this 'domain' or if you feel that further quality assessment questions are required, please suggest other evidence-based medicine tools or new questions that could be applied to this context.

**To identify questions and issues to assess the transferability of information and data in the HTA report for adaptation**

4. To identify checklists/tools/guidance to assess the transferability of methods and results described within a HTA report under your allocated domain.
5. To suggest some questions and/or issues for consideration when thinking about transferring information from one context to another.

**Other information**

6. Lastly, we also ask that you consider some of the more practical toolkit issues raised by WP5 members when producing your commentary (as described in the Delphi round 2 survey questionnaire):

'Members identified the need for the toolkit to (a) allow quick (less comprehensive) and slow (more comprehensive) adaptation, (b) support users at different levels, (c) suggest contacting other groups – economic models, etc., (d) have a standard data extraction sheet for input of data (studies, search strategies, economic models – for import into Clearinghouse database), and (e) consider the format of the final HTA report – in particular, that different users want different types of HTA report – e.g. mini-HTA reports.'

**Appendix 1** is a proposed template for your commentary. Please write your commentary using the template structure. As noted above, please spend no more than 3 working days working on and producing your commentary. We recommend that your commentary is no more than 10 pages in length (including any appendices). However, if you wish to submit more information please feel free to do so. Please remember though that the objective of this exercise is to identify questions and issues for incorporation into a practical, usable toolkit.

You will notice from the accompanying Excel spreadsheet (allocation of work to partners) that we have allocated your topic domain to several other WP5 partners as well as to you. There is no need for you to contact these other partners to discuss your commentaries whilst you are working on them.

However, if you feel it would be of benefit please do so (contact information is available on the contact database or the members only site of [www.eunethta.net](http://www.eunethta.net) or please contact me, [dla1@soton.ac.uk](mailto:dla1@soton.ac.uk)).

All commentaries will be collated by the lead partner early in September. **Please ensure that your commentary is emailed to the NCCHTA by 1 September.** We will contact all organisations undertaking commentary work in mid- to late August to monitor progress and provide advice and support where needed. There may be the need for e-meetings in September after the commentaries have been received (to discuss any misunderstandings, need for further information and/or clarification); e-meetings will not be scheduled during July and August.

Good luck! We eagerly await your ideas, suggestions and issues. Please do not hesitate to contact us if you require further information and/or clarification of the task.

Kind regards,  
Debbie Chase  
Nick Hicks  
Ruairidh Milne

June 2006