

Topic Overview

Strengthening Public and Patient Engagement in Health Technology Assessment in Ontario

Stakeholder Dialogue 8 May 2014

The McMaster Health Forum convened a stakeholder dialogue on the subject of strengthening public and patient engagement in health technology assessment in Ontario. With the support of the Canadian Institutes of Health Research (through a Roadmap Signature Initiative in Evidence-Informed Health Care Renewal grant for a Healthcare Renewal Policy Analysis) and the Government of Ontario (through a Ministry of Health and Long-Term Care Health System Research Fund grant entitled Harnessing Evidence and Values for Health System Excellence), the dialogue brought together 19 participants – two policymakers, six managers, four researchers and four citizens from across the country and three individuals from outside the country – to examine the problem, elements of a comprehensive approach for addressing it, and key implementation considerations.



Deliberation about the problem

The deliberation initially focused on the desire of Health Quality Ontario (HQO) and the Ontario Health Technology Advisory Committee (OHTAC) to more effectively engage the public and patients after several years of related discussion and experimentation, as well as to fit together the pieces of the puzzle and to generate momentum in this area. A few dialogue participants noted that the features of the problem and its causes that were described in the evidence brief could be more helpfully considered as features of the current context for health technology assessment (HTA). One participant argued that they would like to see the ‘problem’ re-framed as an opportunity to drive towards more (and more meaningful) public and patient engagement in HTA in Ontario. Many participants contributed to articulating three considerations in moving ahead: 1) there are increasing expectations among the public and patients for engagement processes that can inform difficult choices about technologies; 2) many examples (if not strong research evidence) can be offered to demonstrate how such engagements leads to better decisions (and possibly better outcomes); and 3) limited resources mean that the focus needs to be on identifying where the greatest value for money can be achieved (in terms of who to engage, how to engage them, etc.).

The views expressed in the evidence brief are the views of the authors, and the views expressed in the dialogue summary are those of the dialogue participants, and none of these views should be taken to represent the views of the funders.





Participants drawn from government, healthcare organizations, researcher groups and citizen groups gather during a McMaster Health Forum event on 8 May 2014

Deliberation about an approach

Dialogue participants generally supported a re-framed version of the three elements of a potentially comprehensive approach, although their deliberation suggested the need for a re-ordering: 1) create a framework (or what some called a strategy) for public and patient involvement in the HTA process that has six key characteristics (although there were differences of opinion regarding whether the framework should focus on the HTA work at Health Quality Ontario (HQO) or on HQO more generally); 2) develop, monitor and evaluate a broad range of processes that contribute to engaging citizens and patients, including virtual portals and citizen/patient academies that support ‘bottom-up’ approaches, recruitment approaches that give voice to diverse communities, and orientation sessions and on-going support for citizens and patients who wish to get or stay involved; and 3) build capacity within HQO and the virtual community of HTA producers (or possible a much broader community of health organizations across Ontario) to use the approaches and pursue the vision described in the above framework, by disseminating and supporting the use of the framework itself, derivative products (e.g., one-page handouts) that are concise and user-friendly, and resources that are practical and easy to use.

Dialogue deliverables

To learn more about this topic, consult the [evidence brief](#) that was presented to participants before the dialogue, the [summary](#) of the dialogue, and [view](#) or [listen](#) to the [interviews](#) with dialogue participants. For an electronic copy of the evidence brief or dialogue summary, or to view or listen to the interviews, visit our website www.mcmasterhealthforum.com and click on ‘Products’ along the sidebar, or for direct access to our [YouTube](#) and [iTunes U](#) channels, simply click on the icons below.

Deliberation about next steps

Many dialogue participants indicated that they were willing to support the development of a public- and patient-engagement framework, processes and capacity, as well as related efforts to: 1) undertake an inventory of who is doing what in the province and beyond it that could support public and patient engagement in HTA; 2) examine the literature in other areas, such as public and patient engagement in market research, guideline development, and more broadly in research, to spur reflections about public and patient engagement in HTA; 3) develop an implementation plan (alongside the framework) to assist in achieving the objectives of the public- and patient-engagement framework; 4) develop a strategic communications plan to raise awareness among and reach different target audiences; 5) explore how to nurture ‘bottom-up’ efforts among the public and patients (e.g., virtual institutes/academies, networks of excellence, coaching and mentorship activities, and educational grants by industry partners); and 6) build buy-in and leadership along the way, among both internal and external stakeholders.



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