

Incorporating public values
and technical information into
health care resource
allocation decision-making.

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Introduction

Growth in
new medical
technologies

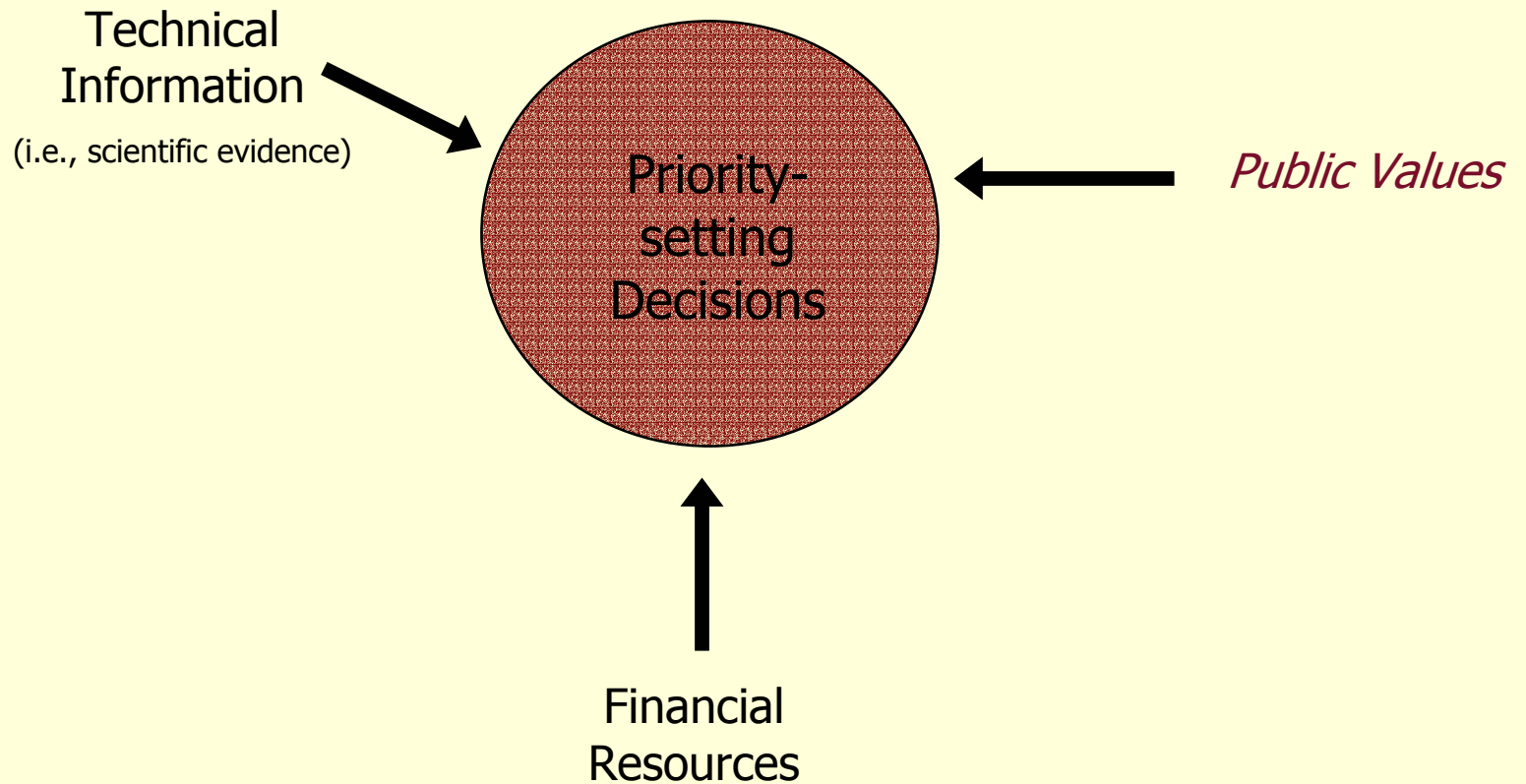
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Limited
health care
resources

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Need for
priority-
setting

Introduction



Study Objectives

1. To synthesize existing research on:
 - Approaches to and factors considered during priority-setting in health care
 - Approaches to engaging the public in priority-setting
2. To assess the utility of existing research to decision-makers
3. To determine the extent to which public values are considered in local priority-setting

Study Components

1. Literature Synthesis
2. Authors' Survey
3. Key Informant Interviews

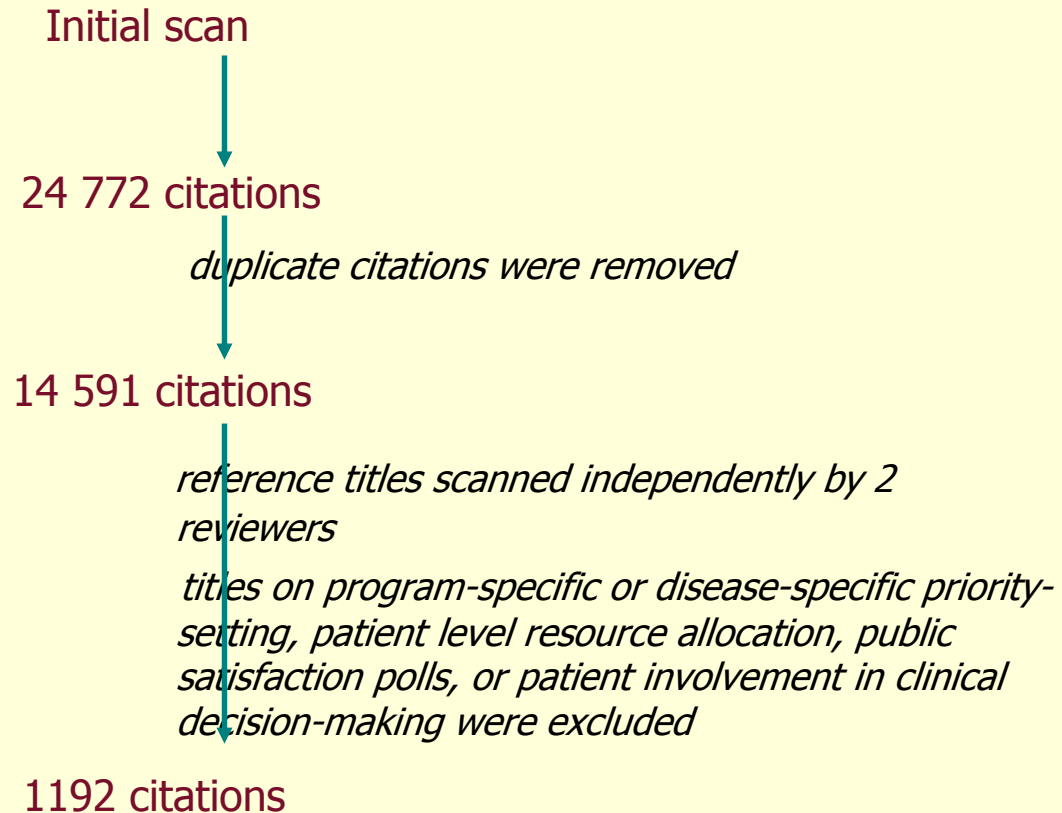
Methods

- Literature Synthesis
 1. Developed search strategy using relevant critical terms (e.g., priority-setting, resource allocation, decision-making, and public values)
 2. Applied strategy to relevant electronic bibliographic databases (PubMed/Medline, HealthSTAR, CINAHL, EconLit, PsycINFO, Centre for Reviews and Dissemination databases, Web of Science, Canadian Case Law Database, etc.)
 3. Completed manual search of relevant journals

Methods

- Literature Synthesis

4. Selected relevant articles for retrieval:



Methods

- Literature Synthesis

4. Selected relevant articles for retrieval continued:

1192 citations

corresponding abstracts were obtained and scrutinized independently by the same 2 reviewers

abstracts on program-specific or disease-specific priority-setting, patient level resource allocation, public satisfaction polls, or patient involvement in clinical decision-making were excluded

315 citations

corresponding papers were retrieved and reviewed independently by the same 2 reviewers

opinion pieces and papers in which no approach to or model for setting priorities or eliciting public values were excluded

144 citations

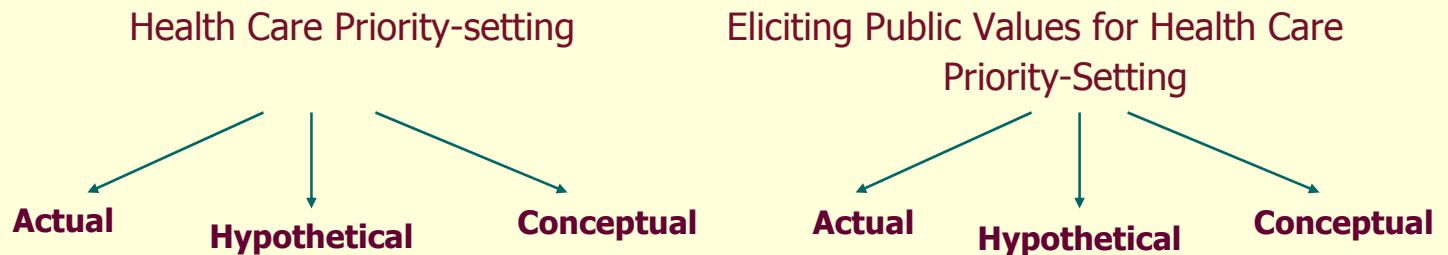
117 studies

27 legal cases

Methods

- Literature Synthesis

5. Grouped studies according to classification scheme:



6. Information extracted independently by two reviewers using data abstraction forms

Methods

- Authors' Survey
 1. Survey population
 - inclusion criteria:
 - Authors of published, peer-reviewed papers reviewed for the literature synthesis
 - exclusion criteria:
 - Authors of grey literature and legal cases reviewed for the literature synthesis
 2. Survey content:
 - open-ended questions
 - Were any decision-makers aware of the author's paper?
 - Was the author's paper used by decision-makers?
 - How was the author's paper used?

Methods

- Key Informant Interviews
 1. Interview population selected
 - 11 health care regulating bodies within Alberta
 - 1) Demographically representative sample of RHAs
 - Purposeful sampling according to geographic location, budget size, and presence/absence of high-risk communities within RHA
 - **8 out of 17 RHAs selected to participate**
 - 2) All provincial health boards/committees
 - › Alberta Cancer Board
 - › Expert Committee on Drug Evaluation and Therapeutics
 - › Alberta Imaging Advisory Committee
 - 3 members of each health care regulating body
 - › Chief Executive Officer, President, or designate
 - › Board Chair, Vice-Chair, or designated Board/Committee Member
 - › Medical Director

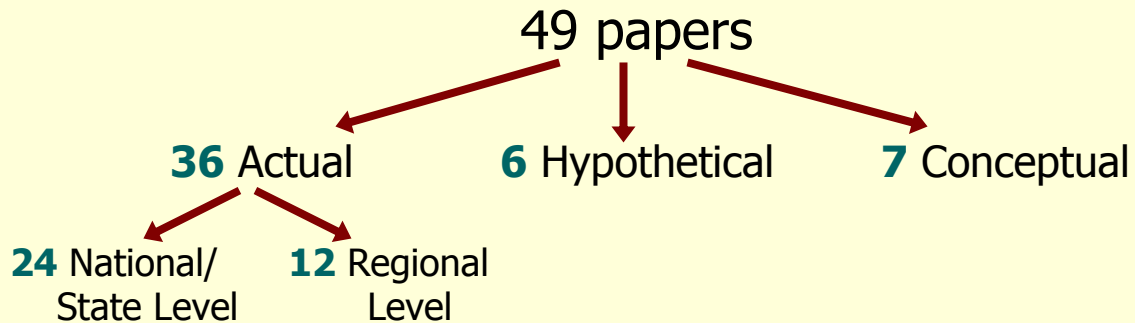
Methods

- Key Informant Interviews
 1. Key informants recruited
 - Information letters sent to potential participants
 - Followed up letters with telephone call
 - 1 hour long, individual interviews scheduled with each key informant at a location of his/her choice
 2. Conducted in-person interviews
 - All carried out by same interviewer
 - All audio-taped and transcribed
 3. Analyzed interview transcripts
 - All analyzed using content analysis
 - All analyzed independently by two researchers

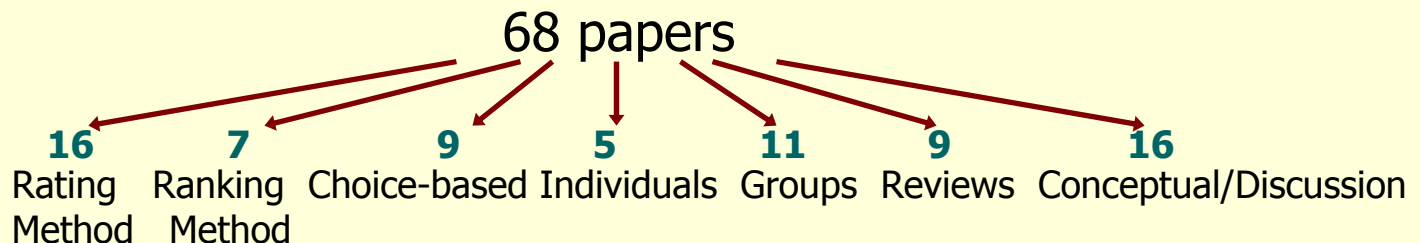
Results

- Literature Synthesis

1. Priority-setting processes



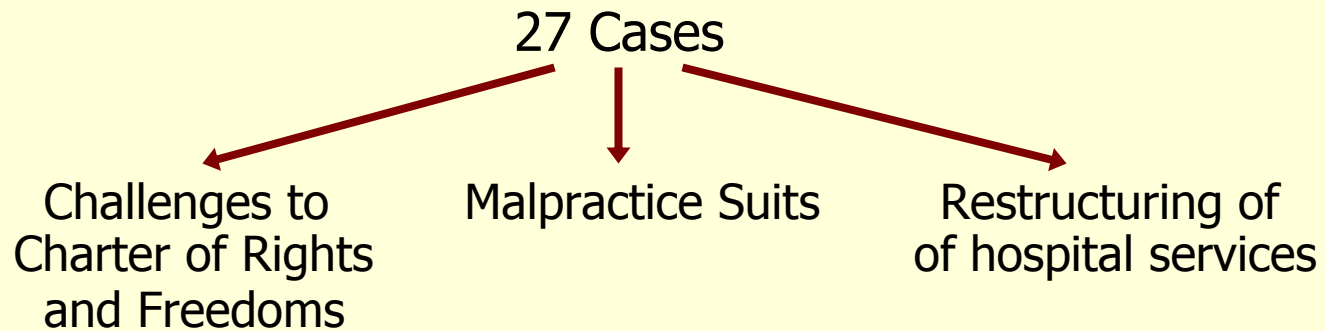
2. Elicitation of public values



Results

- Literature Synthesis

- 3. Legal Cases



Results

- Authors' Survey

- › Response Rate:

1. Authors of priority-setting papers: 90%
2. Authors of eliciting public values papers: 85%

- › Authors reporting that decision-makers were aware of paper:

1. Priority-setting papers: 89%
2. Public values papers: 50%

- › Reported ways in which decision-makers used information:

1. For developing or revising criteria/guidelines
2. To stimulate discussion
3. As a guide for implementing priority-setting framework
4. To support current government policy
5. To form basis for pilot study

Results

- Key Informant Interviews
 - Main Findings
 - Most common approach to engaging public in priority-setting within RHAs: *creation of advisory groups*
 - Provincial boards/committees that currently seek public input: *none*
 - Most key informants viewed *elected* Board members as *public input*
 - Public values-based evidence currently used in decision-making:
 - 1) *Information from formal needs assessment*
 - 2) *Board's awareness of public support for specific need*
 - All key informants agreed on the need to find better ways of involving the public in priority-setting

Recommendations

- A two-day decision-makers' forum to share results this study and develop a consortium between decision-makers and researchers to identify and conduct demonstration projects
- Further research on:
 1. Economics-based approaches
 2. Techniques for collecting and analyzing data from priority-setting studies
 3. Willingness of individuals to participate in priority-setting at different levels
- Surveys to determine decision-makers' views on existing research gaps, as well as the utility of commissioned reports
- A more detailed, focused review of the public involvement literature