

System contains a database about an organization's maintenance operations.

**Methods.** The pilot study of observational and descriptive design will include all the medical/laboratory equipment that the Research Institute of Health Sciences (IICS) has that meets the inclusion criteria. The work will be carried out at the IICS, which aims to develop a computerized system for the maintenance of equipment that allows the linking of Quick Response (QR) codes to an application (WebApp) by means of cameras in smartphones, able to relate each QR code (attached to a medical/laboratory equipment) to its corresponding URL, and thus able to access all the technical information of each IICS team and therefore monitor their maintenance (preventive, corrective, predictive), history, spare parts, budgets, and technical specifications.

**Results.** We have a database of all medical devices installed in the research center; we look forward to developing the program to include the data. The project focuses on the effective tool for decision making regarding the evaluation of the installed sanitary technology and those that will be installed.

**Conclusions.** The study proposes an effective solution for maintenance management, using data that supports administrative decisions regarding the acquisition of equipment in the future; that is, the system can contribute when it comes to evaluating installed and acquired sanitary technology.

## PP05 The First Choice Of Health Institutions Of Elderly In Zhejiang And Qinghai, China

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**Introduction.** The utilization of medical resources in China is unbalanced and insufficient. In order to find a way to maximize their utilization to face challenges in the upcoming decade, this study aims to investigate the elderly's first choice of health institutions when they were ill in the Zhejiang and Qinghai provinces, and to explore the potential pathways related to their choices, respectively.

**Methods.** The data used in this study was from cross-sectional surveys in Zhejiang and Qinghai. According to the Anderson Health Service Utilization Model, we applied structural equation modeling to explore the complex pathways from socioeconomic status (SES), accessibility, and health status to the elderly's first choice of health institutions.

**Results.** The proportion of the elderly who selected community health institutions (CHI) as their first choice of medical institutions in Qinghai was higher than in Zhejiang. The Zhejiang model revealed a significantly negative direct effect of SES and significantly positive direct effects of accessibility to CHI and health status on the choice of institutions, and a significantly positive indirect effect of SES on choice of institutions, through the mediating factor of health status. SES played an important role in the Zhejiang model in direct and indirect ways. In the Qinghai model, only SES and accessibility to CHI had significantly direct effects on the choice of institutions, with accessibility to CHI having the biggest effects. SES had a significant and

positive indirect impact on choice of institutions, through the factor of accessibility to CHI.

**Conclusions.** A better understanding of the complex pathways from factors to elderly's choices of health institutions was essential, which may inform priorities for maximizing the utilization of CHI further and prepare to face challenges in the new decade. Through this research method, policymakers could explore the specific pathways based on their own economic and societal status.

## PP08 Evaluation Of The Brazilian Health Technology Assessment Network

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**Introduction.** The Brazilian Network for Health Technology Assessment (REBRATS) is a network of collaborating centers and teaching and research institutions, focused on the generation and synthesis of scientific evidence in the field of health technology assessment. Currently, the network is composed of 119 member institutions and mobilizes approximately 1,094 researchers and 4,998 relations. The objective of this study was to evaluate the member institutions of REBRATS.

**Methods.** The evaluation process was developed in seven stages, including the identification of the objectives of the Network; identification of evaluation criteria; selection of performance indicators for each criterion; identification of the measures appropriate to each indicator; data collection and analysis; classification of the institutions and production of the final report.

**Results.** The evaluation of the member institutions of REBRATS mapped the capacity of these institutions to produce health technology assessment activities. The evaluation also provided information on the advances and challenges of health technology assessment in the country. In the long term, the initiative will contribute to the strengthening of the evaluation of health technology in Brazil, since the weaknesses of these institutions in the development of activities were mapped.

**Conclusions.** The production of this study will contribute to the dissemination of the evaluation methodology at the national and international level. This study is one of the few initiatives that exist in the world on the evaluation of networks and will contribute to the strengthening of the evaluation of health technology in Brazil.

## PP09 Cost-Effectiveness Of Chronic Obstructive Pulmonary Disease Management

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