

## INTRODUCTION:

The early benefit assessment of drugs was introduced in Germany with the 'Act to Reorganize the Pharmaceuticals' Market in the SHI' (AMNOG) in 2011. Before submitting the manufacturer's dossier, optional scientific advice is offered by the Federal Joint Committee (G-BA). The objective was to elicit manufacturers experience with the scientific advice offered by the Federal Joint Committee.

## METHODS:

To prepare the survey, several manufacturers were interviewed on their experience with the scientific advice offered by the Federal Joint Committee. Subsequently, a questionnaire was developed to collect information for this purpose, comprising eight items on different topics aimed at understanding the perceived quality of the scientific advice provided.

## RESULTS:

The qualitative part comprised seven manufacturers who had received between one and ten advisories before the end of 2012. With regard to the quantitative elicitation part, a total of sixty-one completed questionnaires from nineteen manufacturers were included until the beginning of 2015 (corresponding to almost 25 percent of the overall implemented scientific advice). Fourteen cases were about so called "early" scientific advice in terms of relating to evidence before commencing phase-III trials, forty-four cases concerned "late" scientific advice (pivotal trials were just conducted or already terminated), another two concerned repeated scientific advice and finally, four referred to miscellaneous contents (multiple answers possible). Both, the preceding qualitative and the following quantitative part of the elicitation, highlighted points about the process as well as the content shortcomings from an industry's point of view: inconsistencies, lacking expertise with conducting clinical trials, partially incomplete answers and a low readiness to engage in dialogue were criticized. On the other hand, the majority of respondents showed a positive attitude concerning unambiguousness, completeness, traceability, atmosphere and the protocol of the advice. Over the course of time, propositions on study design, agreement with the determined appropriate

comparative therapy and subgroup definitions improved significantly.

## CONCLUSIONS:

A more active involvement of further stakeholders and the incorporation of procedural elements from other health care systems with longer experience could improve the scientific advice provided.

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## VP108 Environmental Sustainability In Hospitals Health Technology Assessment - A Survey

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### INTRODUCTION:

In the age of limited resources, hospital managers confront the need to strictly balance resource allocation at their disposal between drugs, wages, purchases and operation costs. This entails an endless search for creative pathways to efficiently merge the trends to preserve the environment.

A "green" hospital is an entity that is planned, built and operated so as to minimize the 'ecological footprint': for example, saving energy by utilizing natural light; recycling water, paper or waste; and using insulation and soundproofing (1).

'Evidence-based environmental design', a new approach to advanced building techniques, is gaining momentum worldwide. It synergizes with additional trends: promoting quality, improving potential utility, raising the accountability of hospital workers and involving the public and patients in overcoming health system dilemmas.

The aim was to analyze the standpoints of professionals in health and architecture regarding environmental accountability, in comparison to public opinion, and

enhance the dialogue between these three groups to create wise decision making toward improvements in the health system.

#### **METHODS:**

A structured questionnaire was prepared to examine environmental responsibility, focusing on hospital contours. The questionnaire was distributed among three groups to be completed anonymously: hospital employees (physicians and medical managers), professionals from the field of architecture and the general public. The distribution was via the internet and to the general public through a social network using the “snowball” mechanism.

#### **RESULTS:**

Distribution of the survey raised debates on the subject. We compared the views of 178 respondents (80 healthcare professionals, 47 from the field of architecture and 51 from the general public). Demographic and other criteria included age, gender, profession, priority setting, concepts of environmental responsibility and social values. Physicians prioritized economic factors as the main barrier (more than architects or the general public) and marked internal incentives as key factors. Environmental responsibility correlated with high quality of care and service among healthcare workers.

#### **CONCLUSIONS:**

Logistics and physical infrastructure interventions can enhance economic effectiveness. Moreover, they can initiate social and environmental responsibility and increase the level of confidentiality regarding the accountability of their managers towards quality-targeted work surroundings.

#### **REFERENCES:**

1. Sadler BL, Joseph A, Keller A, Rostenberg B. Using Evidence-Based Environmental Design to Enhance Safety and Quality. IHI Innovation Series white paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2009. Available on [www.IHI.org](http://www.IHI.org)

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## **VP109 Identifying Priorities For A National Health Research Funder**

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#### **INTRODUCTION:**

It is vitally important that research questions posed are important and that funded research meets a research need or a gap in evidence; these needs may be observed at a local, national or international level. Identifying such research priorities for a national research funder can be challenging, particularly for complex health problems such as health inequalities, where there is a need to consult a large number of experts with a range of expertise. Many methods are used in the identification of such research priorities, however, these can be resource intensive, costly, and logistically challenging particularly where large numbers of people are required and geographical distances are great.

#### **METHODS:**

This study investigated the use of Delphi type survey methods in identifying important research priorities related to health inequalities. Public health professionals with an interest in health inequalities were asked to identify research priorities, these research priorities were subsequently compared to those identified using different methods.

#### **RESULTS:**

Fifty-two public health professionals agreed to take part, the response rates were high, (69 percent, 50 percent and 40 percent) across three survey rounds; which indicated that participants were receptive to the methodology and motivated to respond. The themes identified as encompassing the most important research priorities were: mental health, environmental issues and health behaviours. Within these themes, topic areas which emerged most strongly included: community interventions for prevention of mental