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The survey results show that

- 79% of respondents was approached by policy making bodies to help implement HTA findings

AETS (Spain)	ICTAHC (Israel)
AETSA (Spain)	INHEM (Cuba)
AHFMR (Canada)	ITA (Austria)
ASERNIP-S (Australia)	NCCHTA (United Kingdom)
CAHTA (Spain)	NHSC (United Kingdom)
CCOHTA (Canada)	NHSCRD (United Kingdom)
CEDIT (France)	NZHTA (New Zealand)
DIHTA (Denmark)	OSTEBA (Spain)
DSI (Denmark)	SBU (Sweden)
FinOHTA (Finland)	SMM (Norway)
HTBS (Scotland)	TNO (Netherlands)
	VATAP (USA)

Some of the responses:

AETSA: Clinical practice guidelines are developed on the requests from the hospitals and primary care centers

AHFMR: "We are actively working with 17 regional health authorities in Alberta in supporting them in using best evidence for decision and policy making. We have distributed a document "Framework for Regional Health Authorities to Make Optimal Use of Health Technology Assessment" which is available on our web site. Along with this effort is support we sponsored a conference in September 2000 on the topic as well as having distributed a Checklist for RHAs to go through to ensure that they have taken all proper steps to assess the appropriateness of introducing a new technology. We have also launched a program called SEARCH which you can explore on our website which describes our activity in supporting the health authorities in building their capacity for using research evidence."

ASERNIP-S: "Credentialling Committees of some hospitals re: introduction of a new surgical procedure. They have queried whether evidence is available to support the introduction of a particular procedure."

DIHTA: Grant-based projects at a local or regional level initiated by hospitals or counties and sponsored by DIHTA

FinOHTA: "The Ministry of Welfare and Health has asked us to produce reports on the effects of screening for breast and colorectal cancer. These are being used as the basis for health policy decisions on the national as well as the municipal level".

NHSCRD: York District Hospital has used our Effective Health Care Bulletins to implement practice according to the best available evidence.

TNO: "On behalf of a funding organization responsible for granting health research (ZON) on behalf of the ministry of health, we are presently carrying out a project aimed at implementing home infusion of antibiotics. The subject had been proven cost-effective in an HTA study we completed earlier. The ZON organization has as one of its primary goals to implement results of (evaluation-) projects into everyday practice."

VA TAP: "The Health Care Financing Administration (HCFA) has approached VA TAP on two occasions for our technology assessments on PET scanning. HCFA's Executive Committee of the Medical Advisory Committee has used the reports in their decisions regarding Medicare coverage recommendations for PET".

- 76% stated that they actively tried to implement HTA findings

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Some of the responses:

AETSA: "GANT: Guía de Adquisición de Nuevas Tecnologías" is a tool intended as a guide for Hospital decision-makers when confronted with the introduction of a new technology. The Andalusian Public Health Service has introduced "GANT" as a basic requirement in 2001. Health Inspectors Authorities will audit the introduction of this tool."

AHFMR: "We are actively involved in supporting health authorities in ensuring they have the elements necessary to implement a practice, policy or decision. Examples are the provincial mammography screening guidelines and our conductive education program where we introduced a newsletter to ensure that all stakeholders we informed of developments. If requested we conduct workshops surrounding the practical aspects of implementing."

ASERNIP-S: "1. Recommendations from systematic literature reviews forwarded to the relevant Division/Section of the Royal Australasian College of Surgeons for dissemination.
2. When recommended that audits be undertaken to provide further data on the procedure, these have been established locally or support provided for other bodies to undertake them."

CAHTA:

- as specific clinical guidelines:

- Guidelines for the use of low-osmolality contrast agents to produce a set of criteria to facilitate the appropriate use of low-osmolality contrast agents in a selective utilization strategy which were adopted by a Tertiary University Catalan Hospital.
- Minimum quality criteria in computed tomography examinations developed in a consensus with the Catalan Association of Medical Radiologists.

- via training activities:

A Master Course with the Autonomous University of Barcelona, undergraduate and postgraduate subjects or courses with different Universities

and special courses or training programs in different Catalan hospitals or medical societies or health care primary centers.

- through other actions:

The development of specific regulations to improve the prescription and the change of the payment system to improve the effectiveness of long-term oxygen therapy.

HTBS: "We will be working closely with a standards setting authority in Scotland (the clinical standards board for Scotland) who will write many of our assessments into documented standards. These standards will then be audited. We will also be setting up other programs to assess impact of our advice from HTAs and obtain feedback about difficulties in implementation of advice. We will also seek to establish creative mechanisms for disseminating advice from HTAs."

OTSEBA: "

– as specific clinical guidelines

We developed several clinical practice recommendations and, along with some local authorities and clinicians, we are involved in the AGREE project, specifically related with CPG, with the aim to improve our methods and products in this sense.

The Spanish Society of Surgeons asked our collaboration to implement a CPG on Preoperative Assessment, based on the Osteba's and INAHTA's reports

– via training activities

During the year 2000: 12 conferences or workshops and 5 specific courses, covering around 1900 people

– through other actions:

The Spanish Contraception Society asked us for methodological support doing the Synthesis of the literature and organizing Consensus Conferences

SMM: "SMM has established a working group to implement the results from the INAHTA-report PSA-screening for prostate cancer. The working group consists of participants from The Norwegian Cancer Organization, The Norwegian Medical Association, The Norwegian Patient Organization and The Norwegian Board of Health. Different communication strategies had been worked out - the most important thing was to gain agreement upon a common statement which can be spread in speeches, newspapers, brochures mainly to general practitioners, but also to patients. The process will mainly start this spring - with a massive dissemination targeted for the doctors."

TNO: "There are several other actions, but these are not specifically aimed at the health professionals like the two mentioned above. For instance for the subject of home infusion implementation includes taking away barriers in the financing structure. Actions for this are aimed at organizational levels such as the ministry and the College of Health Insurance in order to make them aware of their responsibility in this respect. We can not yet boast about our successes..."

In general we feel that implementation activities should not only be aimed at professionals in the field. A good implementation plan aims at lowering barriers at all relevant levels."

VA TAP: "VA TAP has been actively involved in initiating a PET registry for collecting operational and utilization data across all VHA PET centers, as a means to standardize and coordinate PET activities across the VA."

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