CHE Research Summary 3

Creating open-access resources for undertaking expert elicitation in healthcare decision-making

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Making informed decisions about healthcare interventions relies on good quality evidence about a range of factors such as long-term health outcomes and costs. However, sometimes elements of this evidence base are missing because the specific topic area is less well-developed e.g. diagnostics, medical devices, early access to medicines scheme or public health; or the evidence is of limited use because it is flawed, contradictory or less relevant.

In these situations, structured expert elicitation can provide valuable additional information to supplement health and care decision-making (see Box 1). Elicitation is the process of transforming the knowledge of experts into quantifiable measures. While the use of expert elicitation in healthcare decision-making has increased in recent years, the methods used vary widely and there are no published guidelines for analysts to follow.

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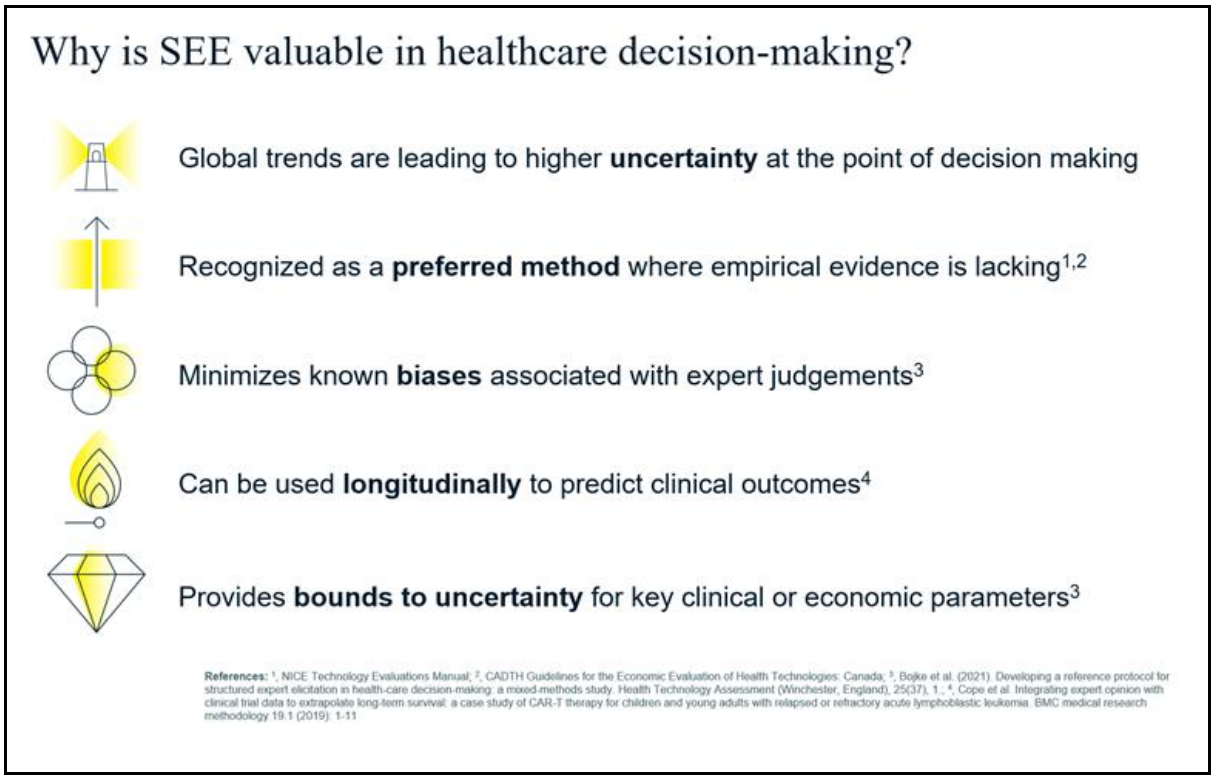
Box 1



Our research has developed guidance for structured expert elicitation to inform healthcare decision-making. The National Institute for Health and Care Excellence in England & Wales and the Canadian Agency for Drugs and Technologies in Health have integrated this guidance into their methods for health technology assessment. However, there are still barriers to the use of elicitation in formal decision-making processes. We surveyed members of the International Pharmacoeconomics and Outcomes Research community and found that one of the biggest barriers is a lack of accessible resources for conducting structured expert elicitation.

To help overcome this obstacle, we developed the STEER (Structured Expert Elicitation Resources) project to produce resources that help analysts and decision-makers to use the elicitation guidance in practice. Along with stakeholders, including academic and consultancy analysts, we have produced materials that cover the entire structured expert elicitation (SEE) process from the design to reporting stage. This includes (1) an overview and a practical guide for conducting SEE in healthcare, (2) adaptable tools for building bespoke SEE exercises, (3) training materials for experts taking part in SEE, (4) resources used in previous SEE exercises, and (5) examples of published SEE in healthcare decision-making. The materials cover practical considerations such as timelines, skills requirements, and administrative requirements, such as contracting with experts and writing consent forms.

The use of off-the-shelf resources can streamline the structured expert elicitation process whilst maintaining the robustness required for healthcare decision-making.

Further information on the guidance is available here.

The STEER resources are available here.

The materials were developed as a collaboration between CHE which co-authored the original protocol for structured expert elicitation (SEE) funded by the Medical Research Council (MR/NO28511/1-HEE) and Lumanity, a healthcare consultancy company.

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