Project Updates

Effectiveness and Cost-Effectiveness Assessment of Heart Failure Clinics in Ontario

The overall research question for this field evaluation is to understand the current service models used and to evaluate the clinical effectiveness and cost-effectiveness of heart failure (HF) clinics for the ambulatory management of HF in Ontario. Specific objectives include: Phase 1- Identify all specialized HF clinics in Ontario; Phase 2- Describe the scope of current service models for patients in specialized HF clinics; Phase 3- Understand practice patterns for patients in a subset of identified clinics; and Phase 4- Assess the clinical effectiveness and cost-effectiveness of HF clinics in Ontario. Analysis for phases 1, 2 and 4 are complete and analysis for phase 3 is underway and projected to be completed by the end of summer.

Pressure Ulcer Multi-Disciplinary Teams via Telemedicine (PUMTT): A Cluster Pragmatic Randomised Controlled Trial

The purpose of this field evaluation is to evaluate the clinical and cost effectiveness of ‘enhanced’ multi-disciplinary wound care teams vs. ‘usual’ care teams in long term care (LTC) homes in the Greater Toronto Area for the treatment of pressure ulcers. The study began in October 2010, with baseline data collection at all LTC homes (n=10).

These homes were randomly selected from those eligible to participate (n=15) i.e. LTC homes had to have over 100 beds, be within a 100 km radius from the acute wound team, the administrator had to agree to participate, and the home had to have a higher than average pressure ulcer prevalence rate (>5.5 %). The study adopts a stepped wedge design, with homes randomized to start date of the intervention (i.e. an advance practice nurse (APN) on site homes one day/week for 12 weeks, who is linked to a comprehensive wound care team located in an acute care centre). The team is then available remotely for 3-11 months, depending on the order in which the home has been randomized to intervention start date. Baseline data collection ranges from 3-11 months, depending on the order in which the home has been randomized to intervention start date. The team began at the first facility in January, 2011. Data collection for this study will continue until March, 2012.

Turning for Ulcer Reduction (TURN) Study

Recruitment was completed in the US on June, 23.
Project Updates

**Specialized Multidisciplinary Community-Based Care for Chronic Wounds: A Field Evaluation**

The objective of this field evaluation is to: 1) identify all out-patient multidisciplinary wound care teams (MWCTs) across the province; 2) conduct a survey in order to understand the scope of service models of the identified MWCTs; 3) evaluate the clinical effectiveness; and 4) evaluate the cost effectiveness.

This field evaluation has 3 phases: Phase 1: Identification of teams; Phase 2: Survey of teams; Phase 3: Pragmatic randomized controlled trial to evaluate clinical effectiveness, and cost effectiveness of MWCTs.

Phases 1 and 2 are complete. A total of 49 teams were identified and 44 teams participated in the phase 2 surveys. Phase 3 began in May, 2011 and thus far 26 participants have been recruited. Data collection is expected to continue for two years. A total of 450 participants will be recruited.

*You can read more about THETA’s projects [here](#).*

In the Spotlight

THETA Collaborator Harindra Wijeysundera has been awarded the 2011 CCS Young Investigator Award – Clinical Science Category by the Canadian Cardiovascular Society. He will be presenting his work at the Canadian Cardiovascular Congress in October in Vancouver.

Mike Paulden has been awarded the Best Podium Presentation at ISPOR 2011 and Best Poster at HTAi 2011 for his project entitled Cost-effectiveness analysis and budget impact assessment: a graphical way to combine the two for the aid of decision makers.

The [TASK](#) web page has had a facelift, bringing you more information about the exciting research going on at TASK!
THETA “KT to Policy” Day & Fourth Annual Symposium

THETA hosted its Second Annual “Knowledge Translation to Policy” Day on May 13th at The Estates of Sunnybrook. The day focussed on our work in the areas of Cardiovascular Research and Personalized Medicine.

THETA’s Fourth Annual Symposium: Scientific & Pragmatic Challenges in Field Evaluations took place on June 4th at Niagara-on-the-Lake, Ontario.

Both events were attended by over 70 delegates who represented diverse local, national and international organizations and backgrounds, including universities, research institutes, provincial organisations and hospitals, various academic departments, THETA staff, students, and government.

THETA Collaborative would like to thank you very much for your attendance. Once again, both events proved to be very successful, with an excellent turnout, beautiful weather, and really great external and local speakers.

Presentation material can be found here.
THETA in collaboration with the Department of Health, Policy, Management and Evaluation, Leslie Dan Faculty of Pharmacy, and Health Care, Technology and Place Program hosted the inaugural Health Technology Assessment Institute for Decision Makers on July 20-22, 2011.

The HTA Institute gathered experts from a range of disciplines to provide attendees with pragmatic tools for HTA. The course examined three key dimensions of HTA: clinical evidence, economic evidence, and social and ethical implications of health technologies. The three-day intensive course was filled with theory and interactive sessions.

There were 25 registrants from government agencies, hospitals, pharmaceutical companies, and academia. Participants were comprised of managers in the top and middle management levels (72%) and HCTP doctoral and post-doctoral Fellows (28%). The range of HTA knowledge greatly varied among participants.

Almost all participants (95%) deemed the quality of the curriculum as excellent and very good. The balance of didactic and interactive sessions was well commended. The quality of faculty and their presentations were reviewed as remarkable by most of the participants (75%). The small group interactive sessions and decision maker panel session were greatly valued.

Overall, the course was reviewed favourably. All participants considered the course useful and relevant in varying degrees. The feedback we received from the inaugural Institute will enable improvements that can ensure the Institute’s long term success.


