

**Conclusions:** Interpreting the diffusion of HB-HTA, its integration with other HTA processes, and the perceptions of its pros and cons should be both country specific and be conducted from an international perspective. The analysis demonstrated the need for specific policies and for better dissemination and promotion of HB-HTA activities and collaborations with HTA agencies.

## PD195 Variation In Decision-Making And Market Access Routes For Vaccines: Insights From Seven Countries

---

Emily Gregg, Karina Watts ([karina.watts@york.ac.uk](mailto:karina.watts@york.ac.uk)),  
Charlotte Graham and Stuart Mealing

---

**Introduction:** Quick and equitable market access to vaccines is a global priority. However, market access routes for vaccines are complex and differ from those for pharmaceuticals. Furthermore, there is variation in decision-making between countries due to local requirements. This work aimed to increase awareness of the key elements of these pathways and the stakeholders involved in European Union (EU) and non-EU countries.

**Methods:** Pragmatic desk-based research was undertaken in November 2023 to explore key elements of the market access pathways for vaccines and how these differ between countries. Specifically, the countries of interest were Canada, England, France, Germany, Italy, Spain, and the USA. Where available, information was extracted about the key stages and stakeholders involved in the decision-making pathway as well as details about any post-licensing monitoring, the value assessment framework used, vaccine pricing, and the procurement process. In addition, examples of barriers to vaccine access were extracted. The key findings and between-country differences were summarized narratively.

**Results:** National Immunization Technical Advisory Groups (NITAGs) were key stakeholders in all countries explored and had varying roles. The evidence requirements differed among countries, such as Germany's requirement for economic and epidemiological modeling. The Vaccine Monitoring Platform coordinates studies for post-authorization monitoring of vaccines across EU countries. However, England is not part of this network and uses a national agency instead. Vaccine procurement and pricing also differed (e.g., France uses individual reimbursement, England uses national tendering, and Canada uses regional tendering). There was variation in vaccine pricing within the USA, depending on the healthcare provider. Barriers to vaccine access were well reported.

**Conclusions:** These results can influence the market access strategy of vaccine developers to ensure rapid and equitable vaccine access across countries. Several between-country differences in vaccine

market access routes were identified; for example, the role of NITAGs, evidence requirements, and post-licensing monitoring processes. Barriers to vaccine access have been reported in the literature, with some organizations providing recommendations to overcome these.

## PD196 The Importance Of Promoting The Culture Of Health Technology Assessment Among Healthcare Professionals

---

Laura Llinàs-Mallol ([laura.llinas@gencat.cat](mailto:laura.llinas@gencat.cat)),  
Berta Mestre-Lleixà and Rosa Maria Vivanco-Hidalgo

---

**Introduction:** Last year we developed a survey focused on decision-making in health innovation within the health system of Catalonia. Evaluation of the survey results, coupled with the relationships we established with various members of the Catalan health ecosystem, has highlighted the need for informative activities on health technology assessment (HTA) that aim to bring HTA closer to healthcare professionals.

**Methods:** We designed a two-hour training workshop divided into three thematic blocks and a group dynamic. The first block addressed HTA and the lifecycle of a health technology. The second and third blocks delved into the development of an HTA report, the role of healthcare professionals, and the formulation of a research question. During the workshops, we showcased a video and an infographic and distributed promotional bags to the attendees. A satisfaction survey was distributed at the conclusion of the workshop. We have conducted three editions of the workshop in a face-to-face format and one in a virtual format.

**Results:** Of the 56 people who participated in the workshops, 48 responded to the satisfaction survey. The most frequent participants were directors, care coordinators, and health managers. The attendees rated the workshops with 4.6 out of five points. About 66.7 percent of attendees indicated that the workshop had met their training needs. Most attendees (79.2%) considered that the workshop had provided knowledge that they could apply to their daily tasks. Finally, when asked about topics of interest for future workshops, the participants voted for advanced HTA methodology, the development of HTA in healthcare centers, and the evaluation of digital health.

**Conclusions:** The feedback from participants across all the workshops was very positive. The degree of satisfaction among attendees was high, with the main area for improvement being the need to develop new workshops to delve deeper into HTA. In 2024, we aim to design a training program consisting of HTA workshops that fulfil the requests of the attendees.