Health Quality Ontario

Let's make our health system healthier

Ultraviolet Light Surface-Disinfecting Devices for Prevention of Hospital-Acquired Infections: OHTAC Recommendation

ONTARIO HEALTH TECHNOLOGY ADVISORY COMMITTEE RECOMMENDATION

• The Ontario Health Technology Advisory Committee recommends against publicly funding ultraviolet light surface-disinfection devices for prevention of hospital-acquired infections

RATIONALE FOR THE RECOMMENDATION

The Ontario Health Technology Advisory Committee accepted the findings of the health technology assessment.¹

The main reason the committee recommended against publicly funding this technology is that, given the available evidence, the committee was uncertain whether or not the technology is better than standard cleaning and disinfection in preventing hospital-acquired infections. OHTAC members were also concerned about practical challenges associated with using this technology.



Public Comment: Held TBD.

Draft — do not cite. Report is a work in progress and could change following public consultation.

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Decision Criteria	Subcriteria	Decision Determinants Considerations
Overall clinical	Effectiveness	
benefit How likely is the health technology/intervention to result in high, moderate, or low overall benefit?	How effective is the health technology/intervention likely to be (taking into account any variability)?	Because of the low to very low quality of evidence, we are uncertain whether UV surface disinfection is better than standard cleaning and disinfection.
	Safety	
	How safe is the health technology/intervention likely to be?	The UV technology is known to be safe. It does not involve contact with patients and leaves no residuals after application.
	Burden of illness	
	What is the likely size of the burden of illness pertaining to this health technology/intervention?	About 200,000 Canadians acquire a health care- associated infection annually, with an estimated 8,000 to 12,000 persons dying as a result of their infection.
	Need	
	How large is the need for this health technology/intervention?	Hospital-acquired infections constitute 10% of acute hospitalizations.
Consistency with expected societal and ethical values ^a How likely is adoption of the health technology/intervention to be congruent with societal and ethical values?	Societal values	
	How likely is the adoption of the health technology/intervention to be congruent with expected societal values?	The UV technology is noninvasive and has safety features. No societal concerns are expected.
	Ethical values	
	How likely is the adoption of the health technology/intervention to be congruent with expected ethical values?	The UV technology is non-invasive and has safety features. No ethical concerns are expected.
Value for money	Economic evaluation	
How efficient is the health technology/ intervention likely to be?	How efficient is the health technology/intervention likely to be?	The value for money (cost-effectiveness) could not be determined on the basis of currently available evidence.
Feasibility of adoption into health system How feasible is it to adopt the health technology/intervention into the Ontario health care system?	Economic feasibility	
	How economically feasible is the health technology/intervention?	Given the high capital cost as well as the ongoing maintenance and operating cost, adoption into
	Organizational feasibility	Ontario hospitals is not economically feasible.
	How organizationally feasible is it to implement the health technology/intervention?	Implementation is likely to be challenging for several reasons, including that hospital rooms in Ontario are usually shared by multiple patients.

Decision Determinants for Ultraviolet Light Surface-Disinfecting Devices for Prevention of Hospital-Acquired Infections

Abbreviation: UV, ultraviolet.

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^aThe anticipated or assumed common ethical and societal values held in regard to the target condition, target population, and/or treatment options. Unless there is evidence from scientific sources to corroborate the true nature of the ethical and societal values, the expected values are considered. Draft — do not cite. Report is a work in progress and could change following public consultation.

REFERENCE

(1) Health Quality Ontario. Ultraviolet light surface-disinfecting devices for prevention of hospital-acquired infections. Ont Health Technol Assess Ser [Internet]. In press.

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Citation

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