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## Abbreviations

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<th>Description</th>
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<tr>
<td>ES</td>
<td>Environmental Scan</td>
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<tr>
<td>F/P/T</td>
<td>Federal, Provincial and Territorial</td>
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<tr>
<td>PAC</td>
<td>Pharmaceutical Advisory Committee</td>
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1. Introduction

1.1 About Product

CADTH Environmental Scan (ES) reports look at the Canadian and/or international health care environment and summarize policies, practices, programs, systems, and research issues related to drug and non-drug technologies, including how technologies are currently being used or projected to be used in the near future.

ES reports involve establishing and maintaining networks with key health care stakeholders and scanning the environment to better understand the policy, practice, and research issues including how both innovative and old health care technologies are being used and reimbursed. To understand and gather information on current or projected future practices, the aforementioned networks may be surveyed, as well as the published literature, to help inform ES reports.

1.2 Scope

Topics selected for CADTH ES reports must be of interest to a majority of CADTH stakeholders (see audience 1.3). Topics suitable for ES reports include policies, practices, programs, systems, and research issues, as well as the current or projected utilization of:

- drugs
- devices
- diagnostic tests
- medical, surgical, and dental procedures; and mental health interventions.

1.3 Audience

CADTH ES reports are produced for federal, provincial, and territorial (F/P/T) government health policy-makers and those working for regional health authorities and hospitals in Canada who make decisions about the access to or reimbursement of medical technologies.

CADTH ES reports are freely available online at cadth.ca (embargo periods may apply).

1.4 Purpose and Application for Decision-Making

The purpose of CADTH ES reports is to provide an overview of current and/or projected policy, practice, and research issues, as well as the use of specific health care technologies including related regulatory and reimbursement processes both nationally and internationally. This information is intended to inform policy- and decision-makers on how policy, practice, research issues, or the access and reimbursement of specific technologies in other environments may be applicable to their own settings. CADTH ES reports are not intended to provide a comprehensive evaluation; rather, they give a snapshot of existing or projected health care issues. ES reports may also highlight the potential financial implications or other issues associated with the introduction, decision not to introduce, or establishment of criteria for using and reimbursing specific technologies.

CADTH ES reports are often prepared in response to specific requests received from CADTH stakeholders to support their decision-making. Topics selected must be of interest to a majority of Canadian jurisdictions. ES reports are not evidence-based reviews and should not be construed as recommendations for or against the use of a particular health technology.
The reports can be used to supplement or contribute to other CADTH products such as Health Technology Assessments.

1.5 Transparency
CADTH attempts to be as transparent as reasonably possible in the production of ES reports. In each report, a copy of the survey questions (if a survey is conducted) is included. Within time constraints, every attempt is also made for external feedback and review including the following:

• The CADTH Formulary Working Group-Health Technology Assessment, a group that reports to the Pharmaceutical Advisory Committee (PAC), is used to validate and prioritize drug topics.
• If a survey is conducted, survey respondents may be given the opportunity to comment on the report.
• Optionally:
  ◦ the draft report may be posted for stakeholder comment
  ◦ the draft report may be externally peer-reviewed by a content expert.

The information selected for possible inclusion in an ES report is identified by CADTH using 1 or more of the following methods:

• a targeted (not systematic) literature search
• a survey of key health care stakeholders
• interviews and consultations.

CADTH ES reports are freely posted on cadth.ca for anyone to access and review, although in exceptional circumstances, embargo periods may be considered. All drafts and working documents used to produce ES reports are archived for 15 years and may be requested, if required (with the exception of copyright-protected documents, confidential survey responses, or information provided in confidence by customers, manufacturers or other agencies).

1.6 Timelines
Timelines will be negotiated between a CADTH representative and the requestor; however, the approximate turnaround time for an ES report is 3 to 6 months.
2. Process Flow

High-Level Flow Chart

Topic Identification Phase
- Topic Identified
  - Topic Filtered
  - Relevant?
    - Yes Devices
    - Validation (for Drug Topics)
      - Yes
      - Scoping Search
    - No
    - Yes Drugs
    - No
    - Request Does Not Proceed
  - No

Refinement Phase
- Consulation with Stakeholders to Refine Proposal
  - Approved by Prioritization Committee & Director

Research Phase
- Project Initiation & Kick-Off Meeting
  - Literature Search/Review
  - Survey/Consultation
  - Literature Search/Review & Survey
  - Environmental Scan – Draft 1
  - Internal Review & Ref Check
  - Manager & Director Approval
    - Yes
    - Stakeholder Feedback and External Review (OPTIONAL)
    - Environmental Scan – Draft 2
    - Internal Review
    - Optional External Review
    - No

Delivery Phase
- Environmental Scan Sent to Customer
  - Sent to Publishing for Copy Edit & Formatting
  - Internal Sign Off
  - Post Environmental Scan & Notify Key Contacts That Report is Available Online.

No
Revision History

Periodically, this document will be revised as part of ongoing process improvement activities and methods updates. The following version control table, as well the version number and date on the cover page, must be updated when any changes are made to the document.

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<tr>
<th>Section</th>
<th>Revision number</th>
<th>Date</th>
<th>Description/change(s) made</th>
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<tbody>
<tr>
<td>All</td>
<td>V1.0</td>
<td>May 2015</td>
<td>First version of document released</td>
</tr>
<tr>
<td>All</td>
<td>V2.0</td>
<td>June 2021</td>
<td>Updates made throughout</td>
</tr>
<tr>
<td>All</td>
<td>V3.0</td>
<td>August 2021</td>
<td>Process further streamlined</td>
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