**Supplementary table 2 Guiding principles for good practices in HB-HTA units by level of consensus and importance rating assigned by Delphi panel\***

|  | | **Importance rating\*\*** | |
| --- | --- | --- | --- |
| **Most important** | **Less important** |
| **Level of consensus\*\*\*** | **High** | 1. Mission, vision & values  2. Place in the hospital's organisation  5. Role of HB-HTA unit in the technology adoption process  6. System for prioritisation of health technologies  8. Capacity to learn from experience and adapt  10. HB-HTA unit's independence  14. Good working environment and culture  18. Link to key allies, network and partners  19. The assessment process of health technologies  21. Unbiased and transparent assessment process  22. Involvement of stakeholders  26. Follow-up process on implementation of results  35. Impact of HTA results on adoption and implementation process  36. Schedule compliance (timely delivery of results)  42. HB-HTA unit's impact on society | 9. Generalisability of the HB-HTA process  30. HB-HTA unit's staff satisfaction  38. External recognition (reputation & market position) |
| **Medium-high** | 3. Active leadership role  7. Communication strategy  12. Established human resources’ profiles  16. Specific budget covering operational costs  25. Process of disinvestment  27. Customer's perception on the HB-HTA value  32. Awareness of the relevance of HB-HTA unit  33. Communication to stakeholders | 4. Strategy of HB-HTA unit aligned with hospital's strategy  13. Career development plan  15. Adequate facilities  17. Funding strategy  28. Meeting customers’ expectations by HB-HTA unit's  29. Positive reviews on HB-HTA unit's work  31. Perceived career opportunities at the HB-HTA unit  34. Wide dissemination of generated knowledge  39. Budget compliance  40. Derived return on investment (ROI)  41. Availability of productivity indicators |
| **Medium** | *None* | 11. Link between HB-HTA unit and HTA strategies at different healthcare levels  20. Assessment customised for specific hospital setting  23. Patients’ involvement  24. Communication of results to patients  37. Demand satisfaction |
| (\*) hospital managers and heads of clinical departments as well as of professionals with expertise in HTA and patient representatives.  (\*\*) importance of guiding principle was assessed from 1 (less important) to 6 (very important) with the average rating of 4.86 (most important means higher than 4.86).  (\*\*\*) The top 2 measures rated on the 6-point Likert scale were identified and the percentage of answers summed: more than 80% in the top 2 measures was considered as high consensus; between 70% and 80% in the top 2 measures was considered as medium-high consensus; between 60% and 70% in the top 2 measures was considered as medium consensus. | | | |

Source: Danglas L, Ribeiro M, Rosenmöller M, Sampietro-Colom L, Soto M, Lach K. et al. D4.2 Guiding principles for best practices in hospital-based HTA. 2014. Confidential Deliverable; The AdHopHTA Project (FP7/2007-13 grant agreement nr 305018).