Health System Performance Assessment, Hungary: a step forward toward evidence-informed health policy

Session 5.B. - Evidence into policy
European Public Health Conference
03.11.2017
B Babarczy, P Mihalicza, P Gyenes, F Farkas Borbás, M Gresz, P Kiefer, J Vitrai, P Fadgyas-Freyler, JK Horváth, Sz Szigeti, P Gaál
Contents

• Goals of the Hungarian Health Systems Performance Assessment (HSPA) process
• Description of the process and of its stakeholders
• The analysis framework
• Main outputs and results
• Lessons learned
Goals of HSPA

• To fulfill the goals of the WHO Tallinn Charter (2008)
  – WHO technical support in frame of BCA works (2009-2013)
• To enhance transparency via assessment of health policy outcomes
• To identify possible priority areas for health policy intervention
• To provide a systematic framework of analysis for a large variety of healthcare data (incl. new indicators)
• To create a platform of structured and regular data publication
• To establish an institutional framework of cross-sectoral cooperation
HSPA process

- Process regulated by ministerial decree
- 2-year assessment cycle, with interim report
- Main steps:

  - Creation of the assessment framework
  - Indicator definition
  - Calculation of indicator values
  - Analysis of individual indicators
  - Synthesis and editing
  - Submission to government
  - Publication
HSPA stakeholders

• Cross-sectoral working group
  – Chair from academia
  – Several divisions of the Ministry of Health
  – Government agencies
  – WHO (observer)
• Each organisation is responsible for the calculation and analysis of indicators in its main competence.
• All major decisions and outputs are discussed with a strong intent for reaching consensus.
Analysis framework

HSPA outputs

- Full report (ca. 1100 pages)
- Report summaries
- Infographics
- Prioritised list of key areas for policy intervention
- Website with:
  - Report
  - Indicator definitions (75)
  - Indicator values (75)
HSPA main results

- Improving trends in almost all areas, but still substantial lag vis-à-vis most EU peers
- Considerable regional variance at most indicators
- Differences along socio-economic status, gender and ethnicity
- Well performing areas: vaccination, TB incidence and mortality, uptake of laparoscopic surgery
- Some key areas to be improved: lifestyle (smoking, obesity), unmet need of certain groups, C-sections rate, case-fatality rates for certain procedures
- Identified major data gaps: patient experience, non-SHI healthcare provision
Lessons learned and moving forward

• **Institutionalised cooperation** among different actors is a key enabler of the process that should be carried forward.

• **Some indicators** were less useful than others ➔ those will be changed.

• Beyond the current, descriptive assessment, **causal analysis** could also be included for some indicators.

• The interpretation of certain concepts and indicators is difficult. **Proactive communication** towards the press and the larger public should be planned.
Thank you for your kind attention!