Health Systems (Performance) Assessments: Scoping the Engagement

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Turkey Health System Performance Assessment
PRESENTATION OUTLINE

- Republic of Turkey brief statistical information
- Total Burden of Non-communicable Diseases
  Age and Gender Distribution
- Background and objective of HSPA in Turkey
- 2011 Turkey Health System Performance Assessment
- 2016 Turkey Health System Performance Assessment
Table 1.1. General Demographic Indicators, Turkey

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>56,473,035</td>
<td>67,803,927</td>
<td>75,627,384</td>
<td>76,667,864</td>
<td>77,695,904</td>
<td>78,741,053</td>
</tr>
<tr>
<td>Rural Population Ratio (%)</td>
<td>48,7</td>
<td>40,8</td>
<td>27,7</td>
<td>13,3</td>
<td>12,8</td>
<td>12,4</td>
</tr>
<tr>
<td>Urban Population Ratio (%)</td>
<td>51,3</td>
<td>59,2</td>
<td>72,3</td>
<td>86,7</td>
<td>87,2</td>
<td>87,6</td>
</tr>
<tr>
<td>0-14 Aged Population Ratio (%)</td>
<td>35,0</td>
<td>29,8</td>
<td>24,9</td>
<td>24,6</td>
<td>24,3</td>
<td>24,0</td>
</tr>
<tr>
<td>65 and Over Aged Population Ratio (%)</td>
<td>4,3</td>
<td>5,7</td>
<td>7,5</td>
<td>7,7</td>
<td>8,0</td>
<td>8,2</td>
</tr>
<tr>
<td>Youth Dependency Ratio (Age 0-14) (%)</td>
<td>57,6</td>
<td>46,3</td>
<td>36,9</td>
<td>36,3</td>
<td>35,8</td>
<td>35,4</td>
</tr>
<tr>
<td>Elderly Dependency Ratio (Aged 65 and Over) (%)</td>
<td>7,0</td>
<td>8,8</td>
<td>11,1</td>
<td>11,3</td>
<td>11,8</td>
<td>12,2</td>
</tr>
<tr>
<td>Total Age Dependency Ratio (%)</td>
<td>64,7</td>
<td>55,1</td>
<td>48,0</td>
<td>47,6</td>
<td>47,6</td>
<td>47,6</td>
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<tr>
<td>Annual Population Growth Rate (%)</td>
<td>21,7</td>
<td>18,3</td>
<td>12,0</td>
<td>13,7</td>
<td>13,3</td>
<td>13,4</td>
</tr>
<tr>
<td>Crude Birth Rate (%)</td>
<td>24,1</td>
<td>21,6</td>
<td>17,2</td>
<td>17,0</td>
<td>17,4</td>
<td>16,9</td>
</tr>
<tr>
<td>Crude Death Rate (%)</td>
<td>7,1</td>
<td>7,3</td>
<td>5,0</td>
<td>4,9</td>
<td>5,1</td>
<td>5,2</td>
</tr>
<tr>
<td>Total Fertility Rate (per Woman)</td>
<td>2,9</td>
<td>2,5</td>
<td>2,1</td>
<td>2,1</td>
<td>2,2</td>
<td>2,1</td>
</tr>
</tbody>
</table>
Total Burden of Non-communicable Diseases Age and Gender Distribution

Total DALY distribution all ages, all genders, percent

1. Group
Communicable, pregnancy, birth, nutrition

2. Group
Noncommunicable

3. Group
Injuries

DALY distribution all age groups, all genders, Million DALY, 2012

1. Group

2. Group

3. Group

<1

Age
In Turkey there is a strong rationale for the Ministry of Health to adopt a systematic approach to HSPA.

Indeed, the Ministry has been implementing the health transformation programme (HTP) aimed at improving the governance, efficiency and quality of the Turkish health sector, and the continued successful implementation of this major reform programme is dependent on tracking its impact on health outcomes, outputs and structures.

The Ministry of Health has identified further monitoring and evaluation (M&E) capacity building as a critical issue for the health transformation programme phase I (HTP–I).

This has become even more important following the development of the Ministry of Health Strategic Plan for 2010–2014 (1).

This effort is part of ongoing reform of the public sector in Turkey that requires all sectors to establish five-year and annual strategic plans and budgets.
2011 Turkey HSPA was conducted in 2009-2011 in collaboration with World Health Organization and was published in 2012. [http://www.euro.who.int/__data/assets/pdf_file/0004/165109/e95429.pdf](http://www.euro.who.int/__data/assets/pdf_file/0004/165109/e95429.pdf)
2011 Turkey Health System Performance Assessment Strategic Map

CRITICAL SUCCESS FACTORS

STEWARDSHIP
- Improving planning, regulation, coordination and supervision capacity of the Ministry
- Creating, monitoring and assessing information
- Developing international and intersectoral collaboration

RESOURCES
- Improving distribution, competency, and motivation of health human resources and ensuring sustainability
- Improving capacity, quality and distribution of health system infrastructure; ensuring its sustainability
- Developing information management systems and information technologies

METHODS
- Encouraging health and empowering protection from diseases
- Improving integration and coordination of primary health services with other service levels
- Increasing quality and safety in the provision of health services and use of medical device and drugs

FINANCING
- Strengthening income collection
- Maintaining universal coverage in health insurance
- Applying active purchasing

HIGHER OBJECTIVES

HEALTHY LIFESTYLE AND ENVIRONMENT
- Efficient and comprehensive personal health service
- Access
- Quality (Results)
- Utilization

GOOD HEALTH LEVEL
- Equity in financial contribution
## 2011 Turkey HSPA
### 9 Dimensions and 61 Indicators

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Health</td>
<td>9</td>
</tr>
<tr>
<td>Equity in Financial Contribution</td>
<td>2</td>
</tr>
<tr>
<td>Healthy Life Style and Environment</td>
<td>6</td>
</tr>
<tr>
<td>Efficient and Comprehensive Personal Health Services (access, quality, use)</td>
<td>10</td>
</tr>
<tr>
<td>Improved Service Provision</td>
<td>8</td>
</tr>
<tr>
<td>Improved Resource Generation</td>
<td></td>
</tr>
<tr>
<td>Increased Efficiency</td>
<td>3</td>
</tr>
<tr>
<td>Adequate Financing</td>
<td>5</td>
</tr>
<tr>
<td>Strengthened Stewardship; Leadership and Governance</td>
<td>9</td>
</tr>
</tbody>
</table>
Key factors for success of the 2011 HSPA in Turkey

- Continuous and ongoing political support at the highest levels, including personal involvement of the Minister of Health
- Engagement of the high-level technical experts from the health sector and beyond
- Leadership of the School of Public Health (TUSAK), which has strong connections to the health ministry, and a well-defined national health reform programme and Strategic Plan of the Ministry of Health, both of which guided the development of the HSPA strategic map
- Development of well-defined objectives for the HSPA
- A broad participatory approach involving actors inside and outside the health sector, leading to a strong sense of ownership of the HSPA process and final product
- Commitment of all stakeholders involved in the identification and selection of performance indicators to spend ample time on finding solutions for problems in data availability and access to available data
- No bottlenecks in financing HSPA
Key Lessons Learned
2011 HSPA in Turkey

- High-level political commitment and support have been essential in launching the HSPA in Turkey.
- The relationship between the HPSA and the national health policy developmental cycle needs to be strengthened.
- Having a national health reform programme and strategic plan in place facilitates the HSPA as it can use the agreed-upon priorities. If a strategic plan is not yet in place, it is important to align the two processes (HSPA and strategic planning) to ensure development of common priorities, goals and objectives.
- HSPA should not be regarded as a separate policy instrument but as a supplement to existing monitoring and evaluation approaches.
- A broad, participatory process will help ensure acceptance and ownership of HSPA.
- The Steering Committee might be an option, especially to get stakeholders to contribute rapidly or ad hoc as needs emerge, but it is important to report periodically to them on progress.
Key Lessons Learned
2011 HSPA in Turkey

- Stability in the membership of the team is important for enhancing the continuity of the process.
- Cooperation with international organizations and consultants provides external technical expertise and maximizes transparency and reliability. HSPA is an excellent instrument for working in partnership with different national and international entities.
- Consideration should be given to sustaining the involvement of national actors, who have a heavy workload due to their regular duties outside the HSPA process. It would be beneficial to streamline the HSPA process, where feasible.
- The different stages of the process require further standardization. The national team should still be able to undertake HSPA, even if international experts are not available. This would require further capacity-building and training. HSPA in Turkey has achieved significant results that justify the sizeable investment of time resources.
Strategic Goal 4: To continue to develop the health sector as a means to contributing to the economic and social development of Turkey and to global health

Objective 4.2: To monitor health system performance and to document its contribution to health and the national economy

Objective-Oriented Strategies 4.2.2:
To develop and institutionalise the Turkish Health System Performance Assessment (THSPA)
- To improve the training, infrastructure and technological capacities to carry out THSPA
- To perform a THSPA study for the Turkish health system every year with the participation of all stakeholders
- To ensure the dissemination of the THSPA results to national and international institutions and organisations
- To monitor and evaluate international health system performance assessment
2016 Turkey HSPA being conducted under consultancy of national academicians who are experts in Public Health and Health Management and international academician who is expert in Health Economics.

Long list of indicators were selected by considering:
- existing indicators of 2011 HSPA,
- 2013-2017 Turkey Strategic Plan,
- Sustainable Development Goals,
- HSPA Country Examples,
- feedback and recommendation from the related departments of our Ministry.

The final list of indicators has been determined by Scientific Advisory Board.
A tool for health governance in the 21st century

IHP+ Joint Assessment of National Health Strategies and Plans

Sustainable Development Goals Report

Pathways to health system performance assessment: A Manual to conducting health system performance assessment at national or sub-national

Performance Measurement for Health System Improvement: Experiences, Challenges and Prospects

Case Studies on Health System Performance Assessment: A Long Standing Development in Europe
Health System Performance Assessment 2017
Litreture Review for Preparation

- Georgia Health System Performance Assessment
- Portugal Health System Performance Assessment
- Estonia Health System Performance Assessment
- Report on the Performance of the Maltese Health System
- Performance of The Belgian Health System Report 2015
- The NHS Outcomes Framework 2014/15
- Health System Performance Assessment Expert Workshop Report
- Copenhagen, Denmark, 12-13 April 2016
Global Reference List of 100 Core Health Indicators, 2015
Qualitative Indicators for Monitoring Health 2020 policy Targets
Targets and Indicators for Health 2020
World Health Statistics 2016
Health at a Glance: Europe 2016
Measuring Up- Improving Health System Performance in OECD Countries
Common criteria for indicator selection:

- Importance
- Relevance
- Validity
- Reliability
- Feasibility

Scientific Advisory Board Members rated each indicator using *sevenpoint Likert scale for the purpose of reducing the pool of prospective indicators.

*Ontario Health System Scorecard Technical Report Health Results Team for Information Management February 2006
<table>
<thead>
<tr>
<th>Dimension</th>
<th>Score</th>
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<tbody>
<tr>
<td>Health Status</td>
<td>11</td>
</tr>
<tr>
<td>Financial Risk Protection</td>
<td>3</td>
</tr>
<tr>
<td>Responsiveness and Citizen Satisfaction</td>
<td>3</td>
</tr>
<tr>
<td>Access and Coverage of Health Services</td>
<td>6</td>
</tr>
<tr>
<td>Quality and Safety</td>
<td>9</td>
</tr>
<tr>
<td>Efficiency</td>
<td>5</td>
</tr>
<tr>
<td>Environment, Healthy Life Styles and Behavior</td>
<td>5</td>
</tr>
<tr>
<td>Financing</td>
<td>5</td>
</tr>
<tr>
<td>Resource Generation</td>
<td>5</td>
</tr>
<tr>
<td>Leadership</td>
<td>7</td>
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Thank you for your attention!