

Présentation du cadre HSPA pour le Luxembourg



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POUR UNE VIE MEILLEURE



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l'Union européenne**

HSPA au Luxembourg : cadre, gouvernance et prochaines étapes



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The Luxembourg HSPA framework

Sustainability

- Resilience
- Climate change

Outcomes

Health status

- Population outcomes
- Mental health

Person centredness

- Patient-centred care
- Health literacy
- Patient experience

Processes

Access to care

- Financial protection
- Operational access

Value-based care

- Patient safety
- Guidelines compliance
- Quality of care
- Cost-efficiency

Integrated care

- Prevention
- Coordination of care
- Continuity of care

Equity

- Demographic and geographic
- Socio-economic

Inputs

Governance

- Leadership
- Transparency & accountability

Infrastructure

- Physical resources
- Pharmaceuticals
- Digital Health
- R&D

Workforce

- Training
- Workforce capacity

Finances

- Fiscal sustainability
- Financial allocation

Health determinants

- Behavioural risk factors
- Non-behavioural determinants



Outcomes

- Health status**
- Population outcomes
 - Mental health

- Person centredness**
- Patient-centred care
 - Health literacy
 - Patient experience

Processes

Inputs

Outcomes

Health status

- Population outcomes
- Mental health

Person centredness

- Patient-centred care
- Health literacy
- Patient experience

Health status

- **Population outcomes:** state of health of a population assessed by subjective or objective indicators
- **Mental health:** describes the mental health status of the population

6 indicators

Examples:

- Healthy life expectancy
- Current depressive symptoms

Outcomes: Person centredness domain

Outcomes

- Health status**
- Population outcomes
 - Mental health

- Person centredness**
- Patient-centred care
 - Health literacy
 - Patient experience

Processes

Inputs

Example:

Doctor involving patients in decisions about care or treatment during the last visit

Person centredness

- **Patient-centred care:** *treats the person as an equal partner, considering their preferences and background*
- **Health literacy:** *peoples' ability to use health information to make health-related decisions*
- **Patient experience:** *aspects of the care journey that patients consider most important*

9

indicators



Outcomes

Processes

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Inputs

Outcomes

Processes

Access to care

Value-based care

Integrated care

- Prevention
- Coordination of care
- Continuity of care

Access to care

- **Financial protection:** *dimensions of health insurance coverage and level of financial hardship in accessing healthcare*
- **Operational access:** *timeliness of access and geographical accessibility to care, medicines and medical equipment*

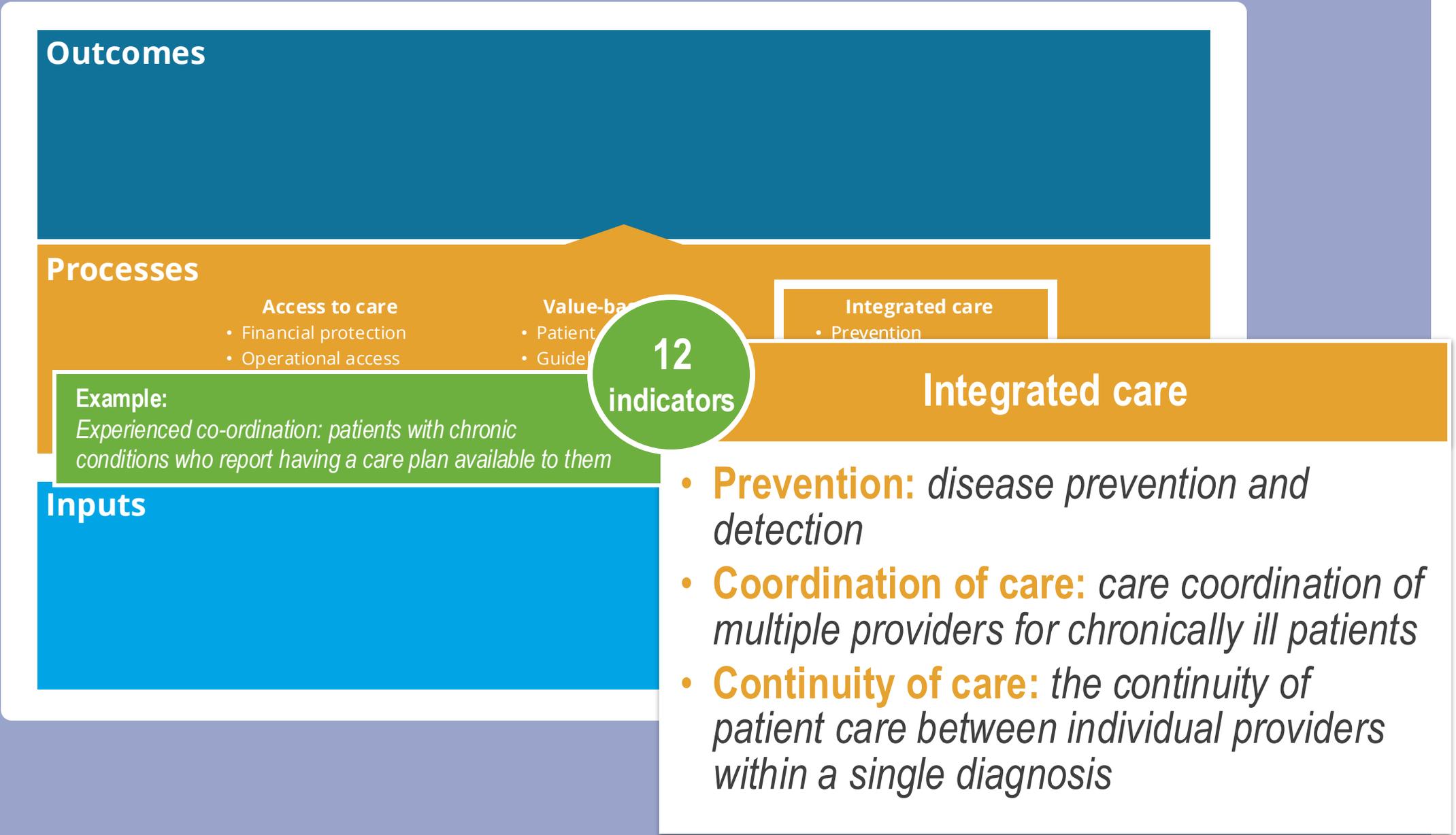
5 indicators

Example:
Waiting times for health services

Processes: Value-based care domain



Processes: Integrated care domain





Outcomes

Processes

Inputs

Governance

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- Transparency & accountability

Infrastructure

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Workforce

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Finances

- Fiscal sustainability
- Financial allocation



Inputs: Governance domain

Governance

- **Leadership:** making, changing, monitoring and enforcing the rules that govern the demand and supply of health services
- **Transparency & accountability:** describes health system mechanisms to achieve trustworthiness and responsiveness to the public

5 indicators

Example:
International Health Regulations capacity score

Inputs

Governance

- Leadership
- Transparency & accountability

Infrastructure

- Physical resources
- Pharmaceuticals
- Digital Health
- R&D

Workforce

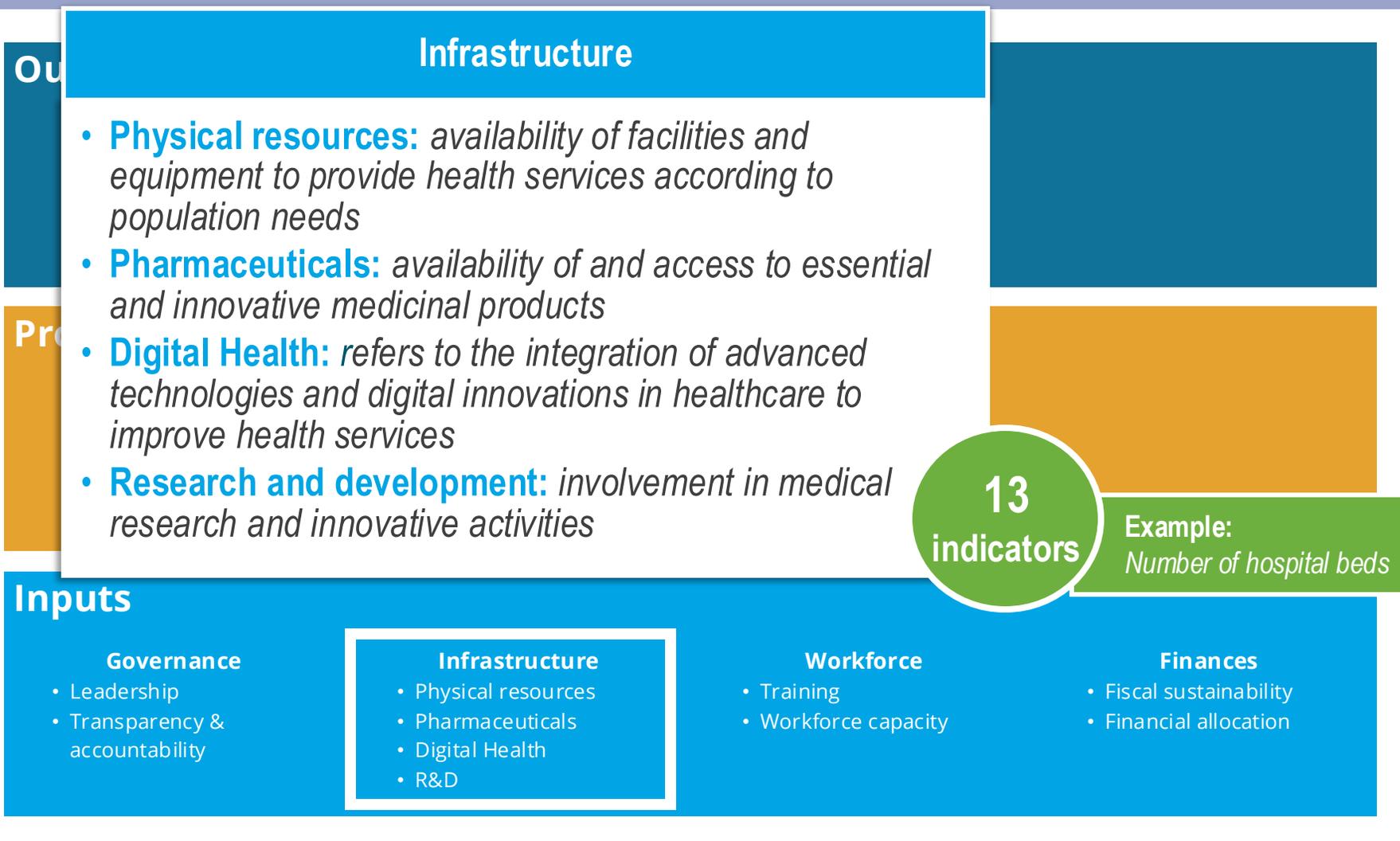
- Training
- Workforce capacity

Finances

- Fiscal sustainability
- Financial allocation



Inputs: Infrastructure domain





Inputs: Workforce domain

Outcomes

Processes

Example:
Number of nursing graduates who obtained their degree in Luxembourg

7 indicators

Workforce

- **Training:** provision of training of medical professionals over their professional lifecourse
- **Workforce capacity:** number, availability, working conditions, migration and skill mix of healthcare service providers

Inputs

- Governance**
 - Leadership
 - Transparency & accountability
- Infrastructure**
 - Physical resources
 - Pharmaceuticals
 - Digital Health
 - R&D

Workforce

- Training
- Workforce capacity

Finances

- Fiscal sustainability
- Financial allocation



Inputs: Finances domain

Outcomes

Processes

Example:
Total healthcare expenditures

10
indicators

Finances

- **Fiscal sustainability:** *availability and stability of financial resources over time, and their adequacy to cover expenditures*
- **Financial allocation:** *distribution of funds and budgetary allocation across the health sector*

Inputs

Governance

- Leadership
- Transparency & accountability

Infrastructure

- Physical resources
- Pharmaceuticals
- Digital Health
- R&D

Workforce

- Training
- Workforce capacity

Finances

- Fiscal sustainability
- Financial allocation



Cross-cutting

Outcomes

Processes

Inputs

Sustainability

- Resilience
- Climate change

Equity

- Demographic and geographic
- Socio-economic

Determinants of health

- Behavioural risk factors
- Non-behavioural determinants

Outcomes

Sustainability

- **Resilience:** *capacity to anticipate, adapt, and respond to changes and challenges*
- **Climate change:** *ability to adapt, respond, and remain resilient to climate-related health threats while minimizing its own environmental impact*

6
indicators

Example:
Greenhouse gas emissions related to healthcare demand

Sustainability

- Resilience
- Climate change

Equity

- Demographic and geographic
- Socio-economic

Determinants of health

- Behavioural risk factors
- Non-behavioural determinants



Cross-cutting: Determinants of health domain



Sustainability

- Resilience
- Climate change

Equity

- Demographic and geographic
- Socio-economic

Determinants of health

- Behavioural risk factors
- Non-behavioural determinants

8 indicators

Example:
Death rate attributed to household and ambient air pollution



Cross-cutting: Equity domain

Outcomes

Processes

Inputs

Example:

Self-perceived health by income and education

8 indicators

Equity

- **Demographic and geographic:** *factors that can affect health, access to health services or the exposure to health risks*
- **Socio-economic:** *factors that shape individuals' and families' socio-economic position*

Equity

- Demographic and geographic
- Socio-economic

Sustainability

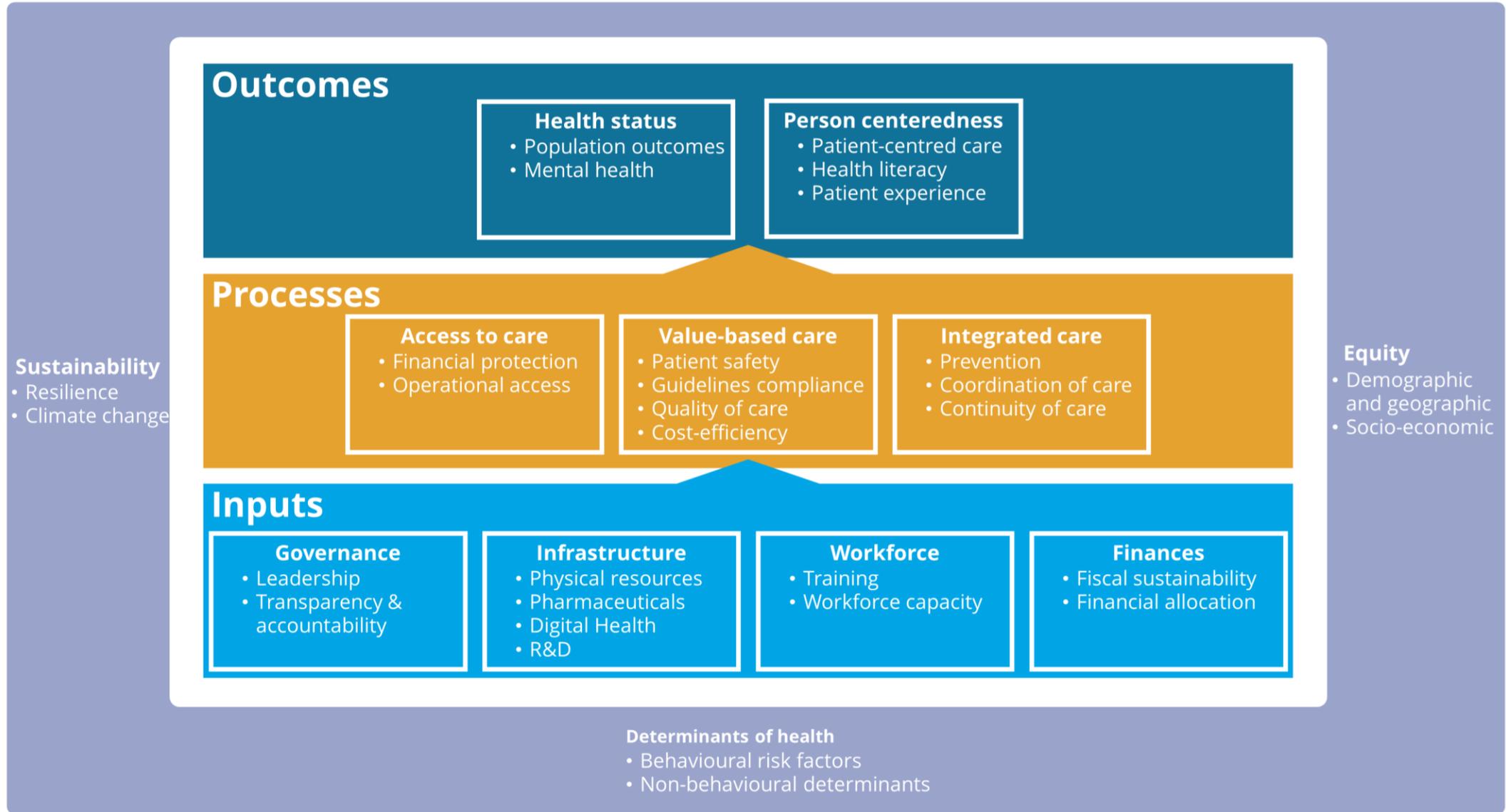
- Resilience
- Climate change

Determinants of health

- Behavioural risk factors
- Non-behavioural determinants



Luxembourg's HSPA framework has 12 domains and 30 subdomains





Implémenter le cadre HSPA : outputs attendus

1/ Production des tableaux de bord d'indicateurs (105)

2/ Analyse des résultats selon le cadre HSPA

3/ Production du rapport d'analyse HSPA



1/ Production des tableaux de bord d'indicateurs (105)

- **Données :**
 - **Sources variées** : *enquêtes en santé de la population, registres, données médico-administratives, ..*
 - **Produites par divers acteurs nationaux**: *IGSS, DiSa, FHL, CNS, INC, RNC, e-Santé, ...*
 - **Extraites majoritairement des bases de données internationales**: *OECD, Eurostat, OMS*
--> Méthodologies harmonisées et comparaisons internationales possibles
- **Collaborations avec les producteurs de données**
- **Centralisation des indicateurs** --> *Tableau de bord d'indicateurs (site web ObSanté)*
Présentation standardisée, commentaires facilitant l'interprétation, fiches descriptives

2/ Analyse des résultats selon le cadre HSPA

3/ Production du rapport d'analyse HSPA



Implémenter le cadre HSPA : outputs attendus

1/ Production des tableaux de bord d'indicateurs (105)

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3/ Production du rapport d'analyse HSPA

→ Analyse systématique selon un cadre adapté au contexte national

- **Suivi dans le temps**

- *Repérer d'éventuelles détériorations des résultats*
- *Identifier les domaines ou sous-domaines à améliorer*

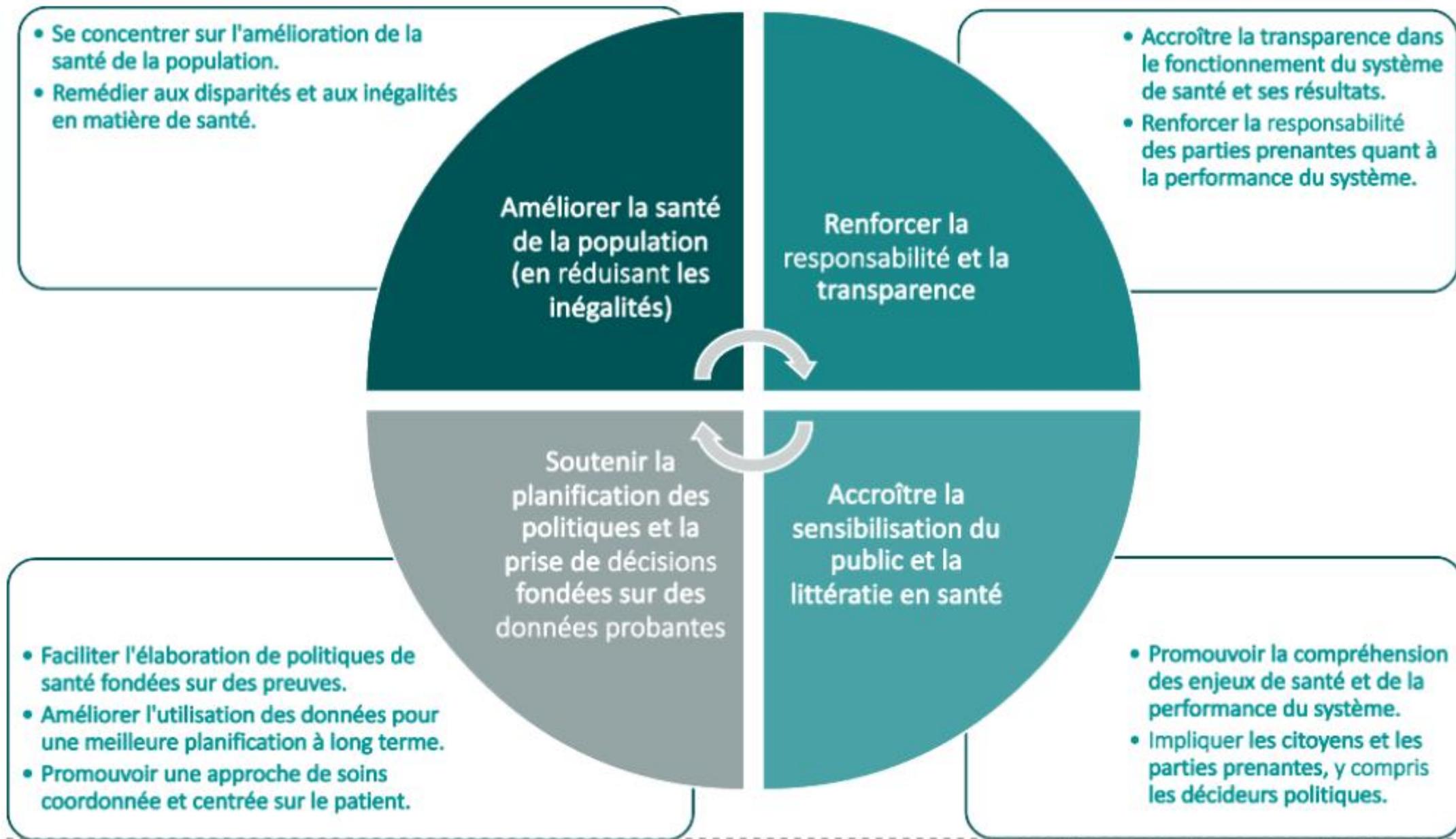
- **Comparaison internationale**

- *Situer le Luxembourg par rapport à la moyenne européenne et à ses voisins*

- **Stratification des données**

- *Analyse selon le sexe, l'âge, le niveau d'éducation*
- *Détecter d'éventuelles inégalités*

Les finalités de la HSPA luxembourgeoise

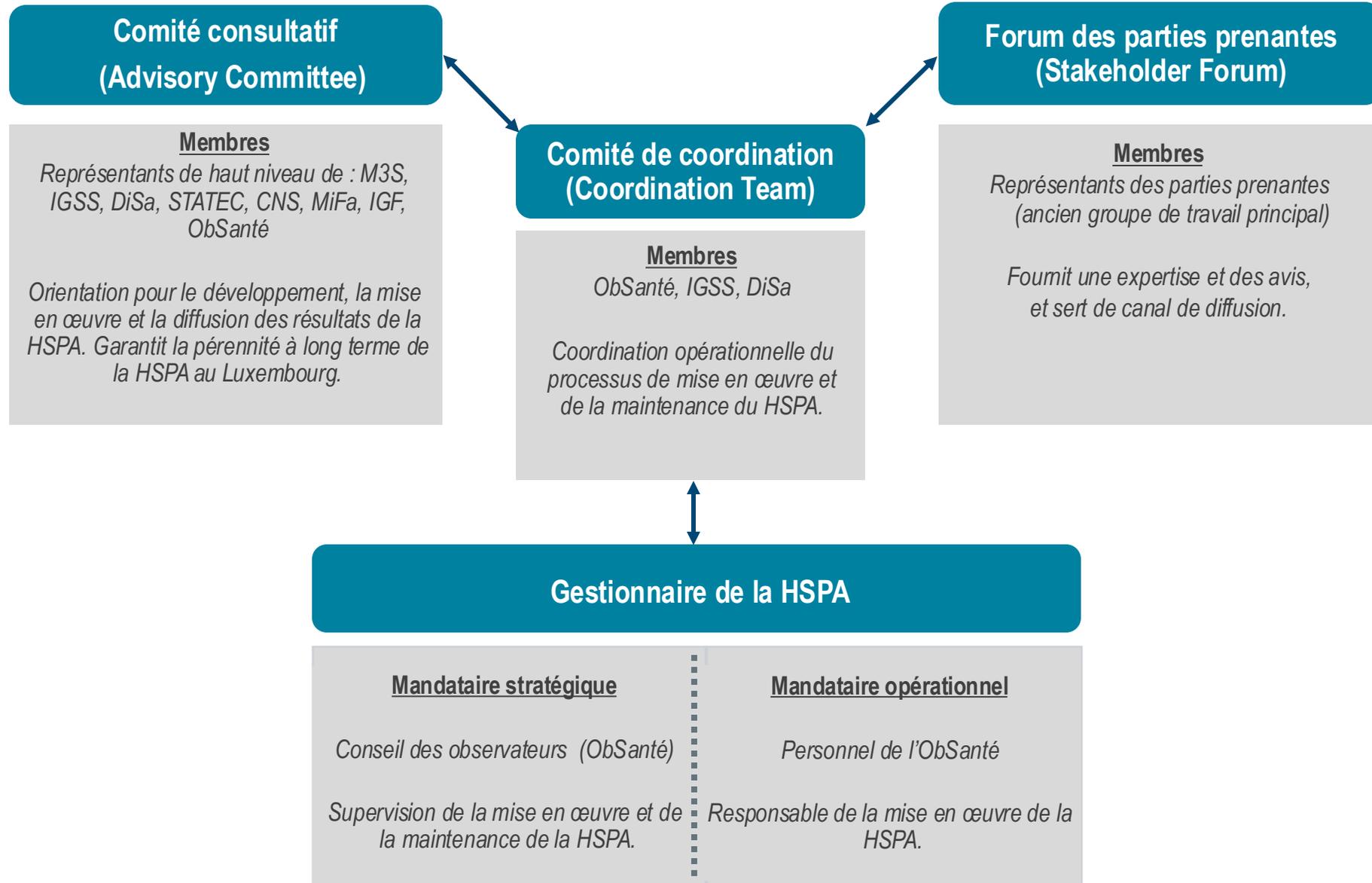




- **Rôle central de l'ObSanté** dans la gouvernance de la HSPA :
 - *Mandat légal (loi du 2 mars 2021) : Produire un rapport national tous les trois ans : description, analyse et évaluation de l'état de santé de la population, des déterminants de la santé, du système de santé et des politiques menées en matière de santé publique*
 - *Garant de l'indépendance des analyses qui en découlent*
- **Diversité des acteurs** représentés dans les organes de gouvernance : décideurs, producteurs de données, associations professionnelles, prestataires institutionnels, de la santé, patients, recherche

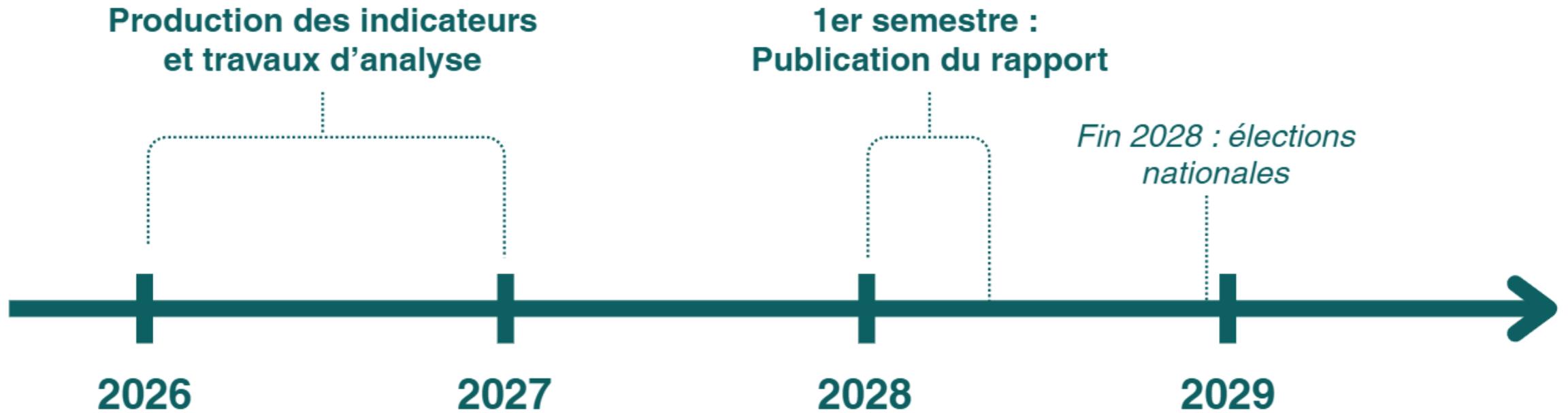


HSPA Luxembourg : une gouvernance multi-acteurs

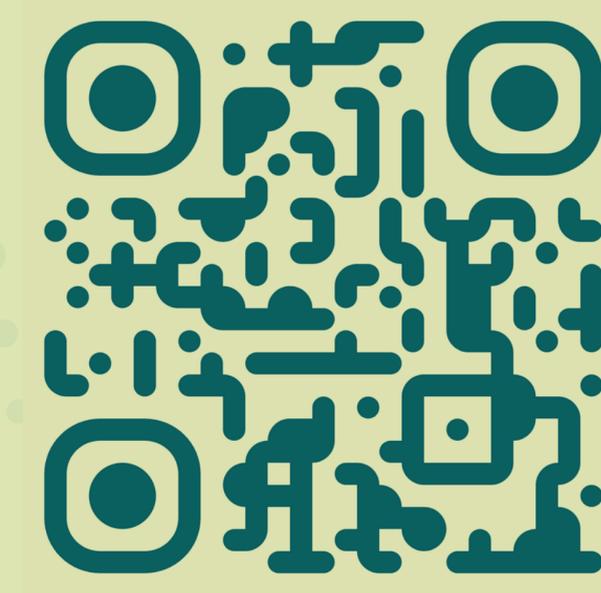
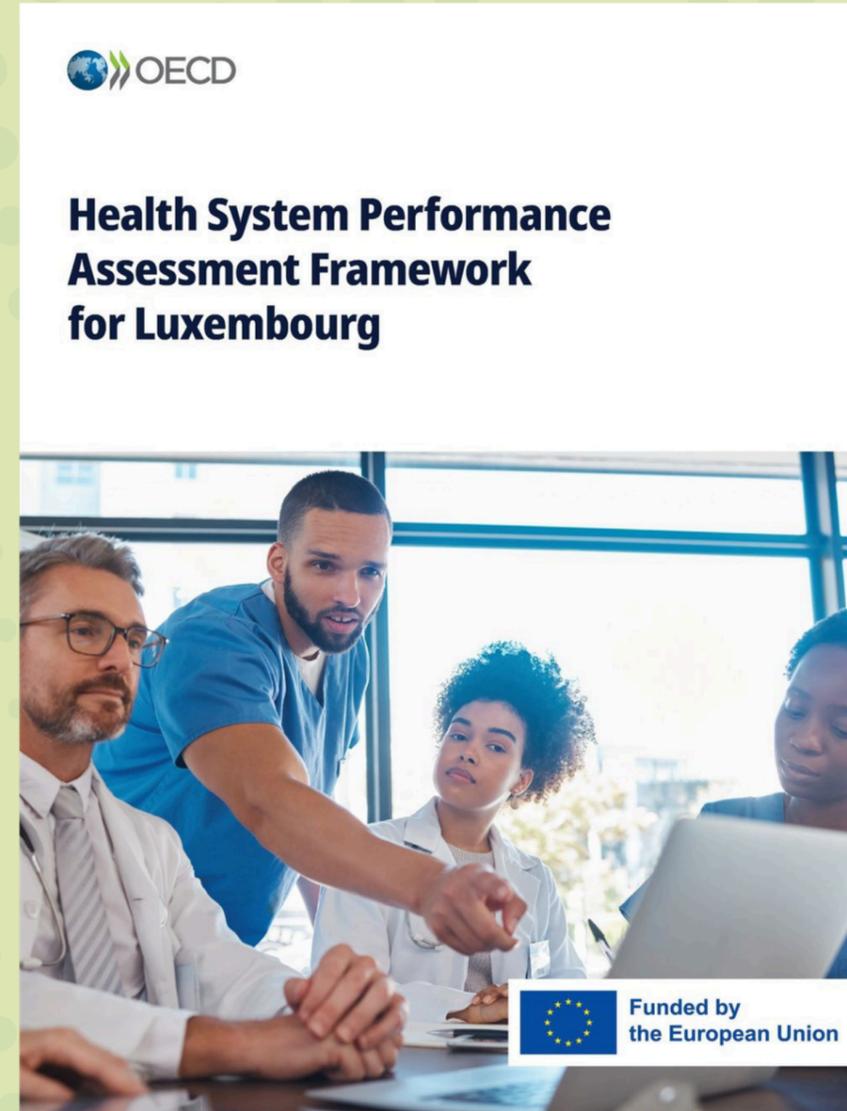




Calendrier de déploiement



French version will be available in May 2026



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