



REPUBLIC OF CROATIA
CROATIAN BUREAU OF STATISTICS



QUALITY REPORT FOR STATISTICAL SURVEY

Hospitals Work Survey, Medical Births Survey, Abortions Survey and Specialist health care Survey (regardless of the owner and the contract with CHIF) for 2023

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0. Basic information

- Purpose, goal, and subject of the survey

Research on the work, organization, established diseases and conditions in inpatient health care institutions, births, abortions and the work of specialist-consulting offices (regardless of the type of ownership and the contract with the Croatian Health Insurance Fund (CHIF)) shows the health sector from a non-monetary perspective. The data explain the number or rate of different health resources, facilities and utilization. A wide range of indicators is collected from a multitude of sources. The collected data is used for national analyses and planning and prevention programs at the national level, as well as reporting to international organizations.

- Reference period

Calendar year

- Legal acts and other agreements

Health Care Act ("Official Gazette", no. 100/18, 125/19, 147/20, 119/22, 156/22, 33/23 and 36/24)

Regulation (EC) no. 1338/2008 of the European Parliament and of the Council of 16 December 2008 on Community statistics on public health and health and safety at work (OJ L 354/70, 31.12.2008)

Commission Regulation (EU) no. 2022/2294 of November 23, 2022 on the implementation of Regulation (EC) no. 1338/2008 of the European Parliament and of the Council regarding statistical data on healthcare institutions, human resources in healthcare and the use of healthcare (OJ L 304/42, 24.11.2022)

- Classification system

National Classification of Activities 2007

National classification of occupations, version 2010

ICD-10-International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Volume 1, 2008 Edition, WHO 2009.

List of diagnostic and therapeutic procedures in healthcare according to the codebook published by the Croatian Health Insurance Fund

- Statistical concepts and definitions

The variables collected through the aforementioned research are used for the organization and monitoring of hospital work, the use of hospital and specialist-consultary health care at the local and national level.

- Statistical units

Reporting units are all inpatient healthcare facilities and specialist-consulting activities, regardless of the type of ownership and the contract with the CHIF.

- Statistical population

Data are collected for the entire population.

1. Relevance

1.1 Data users

Internal - users from Croatian Institute of Public Health (CIPH), national and/or international data users.

Data users at the national level are Ministry of Health, regional institutes of public health as well as researchers and analysts in the area of health care.

1.1.1 User needs

Since CIPH publishes all the results of statistical research, it can not have an insight into all data users. The direct contact is most often made with competent authorities which usually use data, the Ministry of Health and Croatian Health Insurance Fund. With other users of information the contact is made when they need some additional explanations or additional data.

Despite the existence and implementation of the above-mentioned activities, CIPH still does not have formal procedures that regulate it.

1.1.2 User satisfaction

HZJZ does not currently conduct research on user satisfaction.

1.2. Completeness

Priorities and new needs result from the development of social changes, improvement of legislation and its changes and as a result of direct suggestions of users.

1.2.1 Data completeness rate

Indicator was not computed for this survey.

2. Accuracy and reliability

2.1. Sampling error

Not applicable.

2.1.1 Sampling error indicators

Indicator for this survey is not applicable.

2.2. Non-sampling error

Not applicable.

2.2.1. Coverage error

In accordance with legal acts, county institutes of public health, functioning as associates, are included in the implementation of one part of statistical research and they carry out the primary data control. After data delivery, the final data control is carried out in CIPH. The above mentioned data controls are based on logical analyses of data. When noticing certain errors, report units are contacted and data is checked and corrected. Also, there are several technical controls on the entry of data into the National Public Health System managed by CIPH.

2.2.2. Over-coverage rate

Indicator was not computed for this survey.

2.2.3. Measurement error

Not applicable.

2.2.4. Non-response error

In accordance with legal acts, county institutes of public health, functioning as associates, are included in the implementation of one part of statistical research and they carry out the primary data control. After data delivery, the final data control is carried out in CIPH. The above mentioned data controls are based on logical analyses of data. When noticing certain errors, report units are contacted and data is checked and corrected. Also, there are several technical controls on the entry of data into the National Public Health System managed by CIPH.

2.2.5. Unit non-response rate

Indicator for this survey is not applicable.

2.2.6. Item non-response rate

Indicator for this survey is not applicable.

2.2.7. Processing error

In accordance with legal acts, county institutes of public health, functioning as associates, are included in the implementation of one part of statistical research and they carry out the primary data control. After data delivery, the final data control is carried out in CIPH. The above mentioned data controls are based on logical analyses of data. When noticing certain errors, report units are contacted and data is checked and corrected. Also, there are several technical controls on the entry of data into the National Public Health System managed by CIPH.

2.2.8. Imputation rate

Indicator for this survey is not applicable.

2.2.9. Model assumption error

Not applicable.

2.3. Data revision

2.3.1. Data revision – policy

When changing data, or revising preliminary data, a visible trace of the date of publication of the change remains.

2.3.2. Data revision – practice

In accordance with the deadlines from the Annual Implementation Plan of Statistical Research, preliminary and later final data are published on the Internet.

2.3.3. Data revision – average size

Indicator for this survey is not applicable.

2.4. Seasonal adjustment

Not applicable.

3. Timeliness and Punctuality

3.1. Timeliness

According to Annual implementing plan of statistical activities in Croatia, preliminary data are available by the end of June for the previous year.

3.1.1. Time lag – first results

Indicator was not computed for this survey.

3.1.2. Time lag – final results

Indicator was not computed for this survey.

3.2. Punctuality

According to Annual implementing plan of statistical activities in Croatia, preliminary data are available by the end of June for the previous year.

3.2.1. Punctuality – delivery and publication

Indicator was not computed for this survey.

4. Accessibility and clarity

CIPH publishes results of statistical researches in the form of a Croatian Health Statistics Yearbook and separated bulletins on the CIPH official website: <https://www.hzjz.hr/en/> . All stated forms of published results contain the information about the methodology of the statistical processes and the quality of their outputs (for example data source, inclusion and exclusion criteria). All data are published and available to all users free of charge.

Pursuant to the Act on the Right to Access to Information (OG 25/13, 85/15 i 69/22) there is an increasing number of enquiries from the users for the information which require the analysis of indicators which do not belong to the routine data processing. CIPH submits the data within the legal deadline. Legal templates for the users are published on CIPH's official website: <https://www.hzjz.hr/ostvarivanje-prava-na-pristup-informacijama/> .

All templates are according to the Act on the Right to Access to Information and listed on the official website as follows: Request for access to information, Request for supplement or correction of information and Request for re-use of information.

4.1. News release

There were no accompanying press releases with the official publication of the data.

4.2. On-line database

Access to databases is not provided for the public.

4.3. Micro-data access

Microdata is not disseminated.

4.4. Documentation on methodology

There are no individual documents dealing with methodology, but when publishing data, the methodology used is always stated in each individual publication. When preparing data for

international institutions, a default methodology is applied, and if this is not possible, a deviation from the default methodology is always noted.

5. Comparability over time

5.1. Asymmetry for mirror flows statistics

Not applicable.

5.2. Comparability - over time

The data are collected according to the same methodology and are comparable in time.

5.2.1. Length of comparable time series

Indicator was not computed for this survey.

5.2.2. Reasons for break in time series

In 2023, there was no break in the time series.

5.3. Coherence – subannual and annual statistics

Indicator for this survey is not applicable.

5.4. Coherence – national accounts

Indicator for this survey is not applicable.

5.5. Coherence – administrative sources

Indicator for this survey is not applicable.

6. Cost and burden

6.1. Cost

Costs are related to the production of data through material costs and employee salaries.

6.2. Burden

CIPH uses administrative sources for most of the data which reduces respond burden and avoids the reduction in quantity due to the need for additional data entry. Furthermore, data are mainly collected electronically, which also makes collecting easier. CIPH encourages and implements the exchange and linkage of data from multiple sources, thereby improving the quality of data without additional reporting.