Evidence-informed Policy Network (EVIPNet) Europe

Stakeholder consultation on the situation analysis findings and country team establishment in Budapest, Hungary, 5 November 2015

Introduction
EVIPNet Europe is a WHO Regional Office for Europe initiative. It aims to increase country capacity in developing health policies informed by the best available research evidence – in line with and in support of “Health 2020” implementation (1). EVIPNet Europe institutionalizes knowledge translation (KT) – the process of fostering research use in policy-making – through the establishment of national country teams. These groups plan and implement KT activities at country level. This summary describes the stakeholder consultation regarding the recently conducted situation analysis (SA) and the establishment of the future country team (2) in Hungary.

Key stakeholders take EVIPNet Hungary to the next level
A high-level stakeholder meeting on SA and country team establishment in Hungary was conducted on 5 November 2015. During the event, the findings of the Hungarian SA were presented and validated, and remaining gaps identified. Three predetermined options regarding the country team establishment were discussed. Policy-makers, researchers and other key stakeholders in the Hungarian health system participated in the event, including the Deputy State Secretary and stakeholders from the Ministry of Human Capacities, the Healthcare Service Centre, Semmelweis University, the University of Debrecen, the National Institute for Health Development, the Hungarian Academy of Sciences, the Health Insurance Fund and the National Patient Forum.

The Hungarian situation analysis
The purpose of the SA discussion was to recognize key moments in the policy-making process, describe the main features of the public health research and the health care system relevant to policy-making, identify how a country team can support policy-making in the Hungarian context, and use the SA findings to present recommendations for the establishment of a country team.

The SA was guided by the EVIPNet Europe SA Manual and authored by Péter Mihalicza and Ilona Borbás, National Healthcare Service Centre; Ildikó Lelkes, Ministry of Human Capacities; and Szabolcs Szigeti, WHO Country Office for Hungary. Technical support was provided by the EVIPNet Europe Secretariat – in particular by Tanja Kuchenmüller coordinating EVIPNet at regional level. Zsófia Pusztai, Head of the WHO Country Office for Hungary, supported the process. The authors took into consideration the conclusions derived from the EVIPNet Europe country launch (April 2015), focus group discussions, semi-structured interviews and online questionnaires with representatives of the Hungarian research and expert society and decision-makers.

Based on the SA results and stakeholders’ discussions, evidence-informed policy-making in Hungary requires improvements with regard to:
- distribution of experts (i.e. currently, national expertise exists but is fragmented);
• evidence use – towards the systematic and transparent use of high-quality, timely evidence (need for a repository);
• monitoring – from data production, to KT and applying evidence – and feedback mechanisms (to be included in new programmes and planned in advance);
• communication (e.g. about evidence and with stakeholders);
• coordination (e.g. aligning parallel efforts of stakeholders related to a given issue);
• enhanced civil society/nongovernmental organization involvement in policy-making processes (e.g. patient organizations); and
• environment – supporting one favourable for evidence-informed policy-making (e.g. capacity-building with government and other stakeholders).

Scenarios for establishing the Hungarian Country Team
For the establishment of a country team based on the SA, the team led by Péter Mihalicza identified three possible options for a basic organizational structure consisting of an office with dedicated staff, a board of trustees and a network of independent scientific advisors. At the high-level stakeholder meeting, the three different scenarios to institutionalize this structure were discussed: to develop the country team (i) as a national methodological institute, (ii) at the Professional College, or (iii) at the State Secretariat for Healthcare.

Participants strongly supported the establishment of a country team. The discussions were based on, but not limited to, the above-mentioned options. Different arguments emerged that built on the second scenario. The country team should be an independent organization owned by the country yet embedded in an existing institution. It should ensure that it:
• built on existing capacity and institutions;
• involved key stakeholders;
• developed a network to work with; and
• linked to the government and WHO to reduce bias and ensure sustainability.

Legal clearance would be required, not only for the institutionalization of the country team but also for legitimizing tasks (e.g. related to data management and data protection). The need to highlight complementary action, not competing action, was emphasized.

The way forward for EVIPNet Hungary
• The SA report will be revised based on stakeholders’ comments, and published.
• A decision on where to establish the country team has not yet been taken. In the last week of November 2015, the new State Secretary and his Deputy, the SA team and the WHO Country Office will meet to determine the set-up of the future country team.
• Legislative issues related to the country team establishment will be clarified.
• An operational and work plan for the country team will be developed.
• An evidence brief for policy workshop will take place in early 2016 to empower the SA team and other stakeholders to develop an evidence brief for policy on a priority topic.
• The EVIPNet Hungary Country Team will be established in the end of the summer 2016.
• A policy dialogue will be organized in autumn 2016.

References