#### SELECTION OF A SET OF 'CORE INDICATORS' FROM THE ECHI-2 COMPREHENSIVE INDICATOR LIST OF MAY 16, 2003

**Exclusive presentation of selected indicators** with all section headings retained

(ECHI-2 = European Community Health Indicators project, 2nd phase)

Process:

- \* Draw-up of comprehensive indicator list by ECHI-2, based on results of ECHI-1 and all recently available HMP results.
- \* Selection of 50 first choice and 50 second choice indicators (out of 400) by a panel of 19 public health generalists, mostly the ECHI-2 team.
- \* After addition, the scores shown in the column 'original panel selection' were calculated as 2\* first choice plus 1\* second choice score.
- \* The results were discussed in the meeting of the ECHI-2 team of June 19-20, 2003.
- \* It was proposed to include all indicators receiving 15 points or more as the basis for the core list (leaving 46 indicators).
- \* Some additions and deletions were proposed by the ECHI-2 team, leading to the selection as given by grey shade on the indicator names
- \* After the ECHI, meeting, indicators from the chapters 1, 3 and 4, given 12 points or more were marked in the list as optional additions, to compensate for the dominance of mortality/morbidity indicators from chapter 2 (lighter shading)
- \* Follow-up: in the next phase, operational definitions and data availability have to be checked with Eurostat core groups and HMP projects

- \* Indicators are mostly worded as an item, not as operational definition
- \* Sometimes this implies a reference to a data source from which many indicators can theoretically be calculated (e.g. mortality data, hospital data). These issues count as one choice
- \*in general, the obvious need to stratify by gender, age (children, elderly), region, SES, is left implicit

Details:

\* see: 'Selection of a first phase set of core indicators from the comprehensive ECHI indicator list; rationale and procedures'

#### Selection of June 19-20: shaded

Possible additions from socio-economic, determinants and health systems (chapters 1, 3 and 4) on the basis of cut-off at 11-12 points: lighter shading

#### CLASS 1 DEMO-GRAPHIC AND SOCIO-ECONOMIC FACTORS

#### 1.1 Population

\* mother's age distribution \* induced abortions

This column: Original panel score; selection on basis of >14 shaded XX

> This column: Amended by ECHI meeting; with considerations:

XX

### **Eurostat's** preliminary assessment of availability

ves: available ?: not clear yet n.a.: not assessed

For section 1.1: no need to include background indicators in core set; they are available anyway.

14 14

yes

1.2	* population by 4 ISCED education classes  * total employment rate 15-64/total unemployment  * % population with income below 60% national median (Eurostat def.)	25 16/17 15	For section 1.2: see remark under 1.1; still, some indicators that are considered sufficiently strong (distal) determinants of health are retained.  Choose one relevant indicator of (un)employment	yes yes ?
CLASS 2	2 HEALTH STATUS  Mortality general		General observation: panel selection conservative, based on the medical model; some changes suggested to improve this	
	* Life expectancy at various ages * infant mortality (birth -> 1 year)	36 30	check with Peristat project: best choice in the area? alternative: neonatal+fetal death by birthweight etc?	yes yes
2.2	Cause-specific mortality			
	* standardised death rate Eurostat 65 causes, age 0-65  * standardised death rate Eurostat 65 causes, age 65+  AIDS  all cancers  lung etc. cancer  breast cancer  prostate cancer  diabetes  ischaemic heart disease  stroke  COPD  rheumatoid arthritis  preinatal conditions  transport accidents  suicide  * smoking-related deaths  * alcohol-related deaths	26 20 15 14	For the 65 causes, all data are there; those causes selected that appear in the morbidity section.  These two items included both to emphasise prevention approach.	yes yes n.a. n.a.
0.0		14		II.a.
2.3	Morbidity disease-specific generally incidence and/or prevalence; for different diseases data come from different sources.		General observation: too little on non-fatal diseases and mental health; several proposals to improve this.	

, , , , , , , , , , , , , , , , , , ,	* HIV/AIDS * all cancers * lung etc cancer * breast cancer * prostate cancer * diabetes all types prevalence * Dementia/Alzheimer * Depression * suicide attempt * acute myocardial infarction (AMI) * stroke * COPD * Musculoskeletal system indicator	26 24 19 21 15 18 16 14 6 23 24 15	Added for mental health priority Added for mental health priority  Check HMP project which is best choice to add as non-fatal cause of morbidity.	? yes yes yes ? ? n.a. ?
	* (low) birth weight * road traffic injuries	23 17	Peristat project: combine with (pre)term births	yes yes
,	* self-reported health  * Prevalence of any chronic illness or condition  * Limitations in seeing, hearing, mobility, speaking, biting, agility  * limitations of usual activities, past 6 months, health related	29 21 10 9	The ECHI team noted a scarceness of indicators in this group compared to 2.3. Additions are made.  Included since this is basically the classical disability. Included since this is included in SILC questionnaire	yes yes n.a. n.a.
2.5	* Health expectancy based on: Limitations in seeing, hearing, mobility, speaking, biting, agility	12	Included: this is the most common health expectancy	n.a.
CLASS 3	DETERMINANTS OF HEALTH  Personal and biological factors		The ECHI team noted a scarceness of indicators in this field except for the classical cardiovascular and cancer determinants; additions made	
4	* body mass index * blood pressure/hypertension	34 24		yes ?
3.2	Health behaviours  * regular smokers	35		yes

,	* pregnant women smoking * alcohol: % of heavy drinkers, frequency of heavy drinking	11 22	Added: importance for perinatal health	n.a. ?
•	* total alcohol consumption	17		yes
	* use of illicit drugs (incl. Children)	12	Added: children and societal problem.	?
	* total energy uptake/person	14 12		?
,	* % energy from fat	12	These two added as core for the food intake item	n.a. ?
,	* intake of fruit excluding juice	13	These two added as core for the food intake item	?
,	* intake of vegetables excl. potatoes and juice * physical activity (time spent, energy expenditure)	22	1	
,	* contraceptive use (type, general, 1st intercourse)	13		yes ?
,	* breastfeeding at various ages	10	Added: nublic health issue of rising importance	n.a.
	breastieeding at various ages	10	Added: public health issue of rising importance	II.a.
3.3	Living and working conditions		The ECHI team noted the absence of selected items	
			in this group. To be filled later with future HMP results	
CLASS 4	HEALTH SYSTEMS			
4.1	Prevention, health protection and health promotion		Also in this section, there is too much emphasis on	
			the classical issues; additions/deletions are made	_
,	* vaccination coverage in children	28		?
	* blood pressure measurement	12		?
	antihypertensive drug treatment	13	The second second section of the second	n.a.
	* policies on healthy nutrition	6	These three issues added to implement	n.a.
	* campaigns on smoking, alcohol, diet, safe sex, drug use, sunlight exposur	re, 10	a more modern health promotion approach;	n.a.
,	physical activity, injury prevention	2	even though these are development areas.	
	* integrated programmes in settings: e.g. schools, workplaces	3		n.a.
4.2	Health care resources		In sections 4.2-4.4 not much was selected. Many indicators here are less related to public health; the ECHI team was not very satisfied with the few selections made and could not come to	
			a conclusion. It was agreed that selected indicators should have a clear-cut relation with health	
			outcomes. This has to be worked out later.	
•	hospital beds total	12		yes
•	hospital beds acute care	14		yes
,	* physicians employed	21	Check with manpower project whether this is	?
•	* nurses employed	21	acceptable choice	?

	* general practitioner utilisation	17		yes
	* utilisation of medicines and medical aids	12		n.a.
4.4	Health expenditures/financing			
	* total/public/private expenditures on health	26	check whether this is acceptable for SHA	yes
	* expenditures on in-patient care	14	(System of Health Accounts)	yes
	* expenditures on out-patient care	12		yes
	* expenditures on pharmaceuticals and other non-durabl	les 13		yes
4.5	Health care quality/performance			
	* satisfaction with the health system	14		?
	* waiting lists	15	problem of operationalisation; link to surgeries?	?
	* cancer survival rates	17		yes

#### The total number resulting is:

Chapter 1: 3 (+2, with lower cut-off)

Chapter 2: 26 (with Eurostat causes of death counted as 2)

Chapter 3: 11 (+3, with lower cut-off) Chapter 4: 10 (+9, with lower cut-off) Total: 50 (+14, with lower cut-off)

The impression remains that the list is (too much) dominated by disease-specific items, whereas from a public health point of view one would expect more on determinants and public health actions.

#### For a follow-up it is necessary:

- \* to assess availability and comparability of data; this will split the list into (1) quickly implementable and (2) development items.
- \* to check specific indicator definitions and questions with the appropriate HMP projects (partly indicated).
- \* to have further discussions on areas not adequately covered (other than classical disease-oriented, environmental indicators, health promotion indicators, health system performance indicators from the health systems chapter.

Finally, the big field of tension that remains is between, on the one hand, wanting a quick implementation with available material, necessarily on the basis of existing databases, and on the other hand fully exploiting the accomplishments of the HMP projects. For the latter, follow-up actions outside the 'core-indicators-track' are obviously needed.

We might start a separate development track for this, to keep the momentum for innovation!!

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Placed in the context of the full ECHI list. (ECHI-2 = European Community Health Indicators project, 2nd phase)

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region, SES, is left implicit

Details: \* see: 'Selection of a first phase set of core indicators from the comprehensive ECHI indicator list; rationale and procedures'

	Selection of June 19-20: shaded	Original panel score and selection
	Possible additions from socio-economic, determinants and	Amended by ECHI meeting; considerations.
	health systems (chapters 1, 3 and 4) on the basis of	1
	cut-off at 11-12 points: lighter shading	1
		1
CLASS 1	DEMO-GRAPHIC AND SOCIO-ECONOMIC FACTORS	1
		1
1.1	Population	\ For section 1.1: no need to include background
		\ indicators in core set; they are available anyway.
1.1.1	Population status	1
*	Total population	16 deleted
	Population by age	32 deleted
	Population by region	7
-	Population by urbanisation	3
1.1.2	Population dynamics	
*	birth rate	20 deleted
*	fertility rate	21 deleted
*	mother's age distribution	14
*	specified from above: teenage births	10
*	specified from above: maternal age at 1st birth	10
	distribution of parity	2
	induced abortions	14 11
*	death rate	4
*	net migration annual population change	1
*	population projections	16 deleted
	population projections	10 dolotod
1.2	Socio-economic factors	For section 1.2: see remark under 1.1; still, some
		indicators that are considered sufficiently strong
1.2.1	Household situation	(distal) determinants of health are retained.
_		45
	population by household type	15 deleted
-	% children in single-parent household	6
1.2.2	population by ethnicity	
	population by ournierly	
*	population by ethnic origin/citizenship	11
*	mothers by country of origin	0
*	% children seeking asylum	0
400		
1.2.3	education	
*	population by 4 ISCED classes: elementary, lower sec., upper	sec., tertiary 25
*	% of 18-24 not in education and with low qualifications	4
*	% children with 'current' mother in each of 4 ISCED classes	0
*	% mothers delivering babies in each of 4 ISCED classes	4
*	education enrolment, % in each of 4 ISCED classes	1
*	literacy rate	11
*	early school leavers	7
*	pre-primary education ages 3-5	4
1.2.4	employment	
*	nonulation by ISCO 2 digit ampleyment type	0
*	population by ISCO 2-digit employment type	8 13
	population by current or last occupation in 6 ISCO groups (upper non-manual, lower non-manual, skilled manual, unsi	
	self-employed, farmer)	diled manual, 0
	oon omployed, farmer j	v

*	% children living in household of 6 ISCO classes (highest of father/mother)	2	
*	total labour force	5	
*	total employment rate 15-64	16	
*	total unemployment	17	choose one relevant indicator of (un)employment
1.2.5	income distribution		
*	gini co-efficient	13	
*	% population with income below 60% national median (Eurostat def.)	15	
*	% children living in household as above 80/20 share ration of total income by quintile	6 0	
	os. 20 onaro ration or total mosmo sy quintilo	· ·	
1.2.6	general economics		
	CDD	0	
*	GDP GDP PPP(purchasing power parity)	8 15	deleted
	ODI 111 (parcitasing power painty)	13	ucicica
CLASS 2	HEALTH STATUS		General observation: panel selection conservative,
OLAGO Z	HEALITIOTATOS		based on the medical model; some changes
2.1	Mortality general		suggested to improve this
0.4.4			
2.1.1	Life expectancy and related Life expectancy at various ages	36	
	(or chance of dying in age intervals)	30	
2.1.2	Death rates		
*	crude death rate	3	
*	crude death rate, age intervals	8	
*	standardised death rate	23	deleted; not useful besides life expectancies
*	infant mortality (birth -> 1 year)	30	check with Peristat project: best choice in the area?
*	neonatal mortality (birth -> 28 days) postneonatal mortality (28 days -> 1 year)	13 6	alternative: neonatal+fetal death by birthweight etc?
*	perinatal mortality (25 days -> 1 year) perinatal mortality (stillbirths + birth -> 1 week)	12	
*	causes of perinatal mortality	2	
*	fetal mortality	6	
*	inequality in deaths	5	
2.2	Cause-specific mortality		For section 2.2: all data are there; select those
			causes that appear in the morbidity section.
	below issues as one indicator for all 65 causes selected by Eurostat		
*	since these are from one database numbers of deaths	10	
*	crude death rate	11	
*	standardised death rate 0-65	26	
*	standardised death rate 65+	20	
*	potential years of life lost (PYLL) PYLL fraction	13 5	
	Eurostat 65 causes: all ICD chapters plus major subdivisions:	3	
	Infectious; tuberculosis, meningitis, AIDS, viral hepatitis		
	Neoplasms; lip/oral/pharynx, oesophagus, stomach, colon, anorectal,		
	liver+, pancreas, lung+, melanoma, breast, cervix, other uterus,		
	ovary, prostate, kidney, bladder, haematopoietic tissue Blood, immunological disorders		
	Endocrine; diabetes		
	Mental; alcohol abuse, drug dependence		
	Nervous/sense; meningitis		
	Circulatory; ischaemic heart disease, other heart disease, stroke Respiratory; influenza, pneumonia, COPD, asthma		
	Digestive; ulcer of stomach+, chronic liver		
	Skin		
	Musculoskeletal; rheumatoid arthritis, osteoarthrosis		
	Genitourinary; kidney and urether Pregnancy, childbirth		
	Perinatal conditions		
	Congenital malformations; nervous, circulatory		
	Symptoms, ill-defined causes, sudden infant deaths, unknowns		
	External causes; transport, falls, poisoning, suicide, homicide, unknown		
	causes below were indicated by HMP projects, to be selected separately		
*	*diabetes primary & other causes	6	
*	*young age bands for infectious,	0	
*	perinatal, congenital, some injuries *avtra cancer sites from 23 of Fucan:	0 1	
	*extra cancer sites from 23 of Eucan: gallbladder, testis, brain/CNS,	0	
	mesothelioma,	0	
	thyroid, childhood cancers,	0	
	lymphoma, multiple myeloma, leukemia	0	
*	(last three lumped in Eurostat 65) *extra causes from Eurociss project:	0 2	
	AMI (ICD-9: 410), acute coronary syndromes	2	
	(410-411) heart failure (428)	0	
	other forms of heart disease and stroke	0	

*	*maternal mortality, also by cause of death	7	
*	*smoking-related deaths	15	These two items included both to emphasise
*	*alcohol-related deaths	14	prevention approach.
*	*fatal accidents at work	12	
*	*drug-related deaths	11	
2.3	Morbidity disease-specific		General observation: too little on non-fatal diseases
	generally incidence and/or prevalence; for different diseases da	ta e	and mental health; several proposals to improve this.
	come from different sources.		
2.3.1	infectious/parasitic		
*	HIV/AIDS	26	
*	HIV seroprevalence in pregnant women	9	
*	STD, specif. Chlamydia	10	
*	tuberculosis	13	
*	measles	5	
*	meningitis	8	
*	hepatitis B	13	
*	vaccination scheme diseases	10	
	Tassination continue discusses		
2.3.2	neoplasms		
*	all cancers	24	
*	mouth/pharynx/larynx	2	
*	oesophagus	3	
*	stomach	8	
*	colorectal	13	
*			
*	liver	3	
*	gallbladder/biliary tr.	2	
*	pancreas	2	
_	lung etc	19	
-	melanoma	11	
	breast	21	
	cervix	13	
*	endometrium	4	
*	ovary	3	
*	prostate	15	
*	testis	2	
*	bladder	2	
*	kidney	2	
*	brain/CNS	2	
*	thyroid	3	
*	lymphomas	5	
*	multiple myeloma	2	
*	leukemia	6	
*	childhood cancers	6	
*	mesothelioma	2	
*	Kaposi	2	
	•		
2.3.4	Endocrine		
*	diabetes type 1 incidence in children	9	
*	diabetes all types prevalence	18	
*	proportion of blindness incidence due to diabetes	3	
*	retinopathy and nephropathy B544linked to diabetes	2	
	reamopastry and mopiniopastry 20 minious to diabotics	_	
2.3.5	Mental/behavioral		
*	Dementia/Alzheimer	16	
*	Depression	14	Added for mental health priority
*	Generalised anxiety disorder	6	
*	post-partum depression	4	
*	Alcohol-related disorders	5	
*	suicide attempt	6	Added for mental health priority
	ouloide attempt	U	Adda for mental health priority
2.3.6	Nervous system/senses		
*	cataract	4	
*			
	migraine/frequent headache	0	
2.3.7	Circulatory system		
2.3.7		22	
	acute myocardial infarction (AMI)	23	I
_	acute coronary syndromes	4	
	heart failure	5	
	other heart disease	3	
-	stroke	24	I
	prevalence of effort angina	5	
*	AMI case fatality	9	
*	stroke case fatality	6	
2.3.8	Respiratory system		
*	COPD	15	
*	childhood asthma	9	
*	general and allergic asthma	5	
2.3.9	Digestive system		
*	Decayed etc. teeth: mean DMF-12 index	13	
*	prevalence of gastric or duodenal ulcer	2	
*	water-foodborne diseases	2	

2.3.11	Musculoskeletal system rheumatoid arthritis (incidence, prevalence) osteoarthritis (prevalence)	10 4	Check HMP project which is best choice to add as non-fatal cause of morbidity.
2.3.12	Genitourinary system urinary incontinence in women erectile dysfunction	5 3	
2.3.13	Pregnancy/childbirth problems in getting pregnant deliveries with assisted reproductive technology severe maternal morbidity (composite measure) trauma to perineum fecal incontinence chronic	6 5 0 0	
2.3.14	Perinatal conditions (low) birth weight gestational age distribution (pre-term births) APGAR score	23 9 1	Peristat project: combine with (pre)term births
*	prevalence of cerebral palsy prevalence of hypoxic-ischemic encephalopathy	3 2	
2.3.15	Congenital malformations Down's syndrome neural tube defects	7 6	
2.3.17	External causes road traffic injuries occupational injuries home/leisure injuries burns, in children poisoning, in children	17 13 10 2 2	I
*	hip fracture incidence long-bone fractures, in children alcohol-related traffic accidents	13 0 7	
2.3.18	Certain avoidable causes occupational injuries occupational diseases Creutzfeld-jacob disease	9 8 8	
2.4	Perceived and functional health		The ECHI team noted a scarceness of indicators in this group compared to 2.3. Additions are made.
2.4.1 * * *	Perceived health self-reported health self-reported musculoskeletal pain self-reported sexual health	29 3 2	I
2.4.2	Chronic disease general Prevalence of any chronic illness or condition	21	ı
2.4.3	Functional limitations Limitations in seeing, hearing, mobility, speaking, biting, agility Cognitive limitations in memory, learning, literacy, attention	10 7	Included since this is basically the classical disability.
2.4.4	Activity limitations limitations of usual activities, past 6 months, health related limitations in personal care (feeding, dressing, toilet, washing, etc.) limitations in household activities (shopping, cooking, laundry, finances, etc.) limitations in school, work, leisure, social activities limitations of activities due to circulatory disease	9 9 4 3 2	Included since this is included in SILC questionnaire
2.4.5	Short-term activity restrictions temporary limitations by health problem, past 2 weeks	2	
2.4.6	General mental health psychological distress psychological well-being happiness	2 1 1	
2.4.7	role limitations by emotional problem  General quality of life Euroqol instrument Euroqol for circulatory disease patients	3 6 0	
2.4.8	Absenteeism from work etc. Absenteeism from work disability pensions	3 3	
2.5	Composite measures of health status		
*	Health expectancy based on: self-reported health Prevalence of any chronic illness or condition	14 7	

	Limitations in seeing, hearing, mobility, speaking, biting, agility Cognitive limitations in memory, learning, literacy, attention Limitations of usual activities, past 6 months limitations in personal care (feeding, dressing, toilet, washing, etc.) limitations in household activities (shopping, cooking, laundry, finances, etc.) limitations in school, work, leisure, social activities temporary limitations by health problem, past 2 weeks psychological distress psychological well-being happiness role limitations by emotional problem Euroqol instrument  DETERMINANTS OF HEALTH	12 2 3 4 2 2 0 0 0 0	Included: this is the most common health expectancy  The ECHI team noted a scarceness of indicators in this field except for the classical cardiovascular
3.1	Personal and biological factors		and cancer determinants; additions made
3.1.1 *	Biological (risk) factors body mass index	34	
* * * * * * * * * * * * * * * * * * * *	waist/hip circumference and ratio sagittal abdominal diameter blood pressure/hypertension total serum cholesterol cholesterol fractions and fatty acid cholesterol esters glucose tolerance nutritional status indicators: serum ferritin, transferrin receptors, retinol, carotenoids, folate, selenium, 25-hydroxy vitamin D3 osteoporosis multiple births distribution of parity in births  Personal conditions sense of mastery (coping ability)	0 4 1 24 9 7 9 3 0 4 3 0	
*	optimism (life orientation) knowledge of health risks (uv radiation, smoking, etc.)	0 2	
3.2	Health behaviours		
3.2.1	Substance use	25	
*	regular smokers former smokers	35 6	
*	never smokers	6	
*	amount smoked/person	10	Added to the control of the control of the control
*	pregnant women smoking occasional smokers; smoking frequency	11 2	Added: importance for perinatal health
*	smokers among diabetics	0	
*	alcohol: non-drinkers	10	
*	alcohol: % of heavy drinkers, frequency of heavy drinking	22	
*	drinking in children	2 17	
*	total alcohol consumption % of alcohol consumed as toxicant/with meals	3	
*	use of illicit drugs (incl. Children)	12	Added: children and societal problem.
3.2.2	Nutrition total energy uptake/person	14	
*	% energy from fat	12	
*	% energy from saturated fatty acids	11	
*	% energy from protein	4	
*	typical diet content of mono- and poly-unsaturated fatty acids intake of bread/cereals	5 7	
*	intake of bread/cereals	13	These two added as core for the food intake item
*	intake of vegetables excl. potatoes and juice	14	
*	intake of fish	8	
*	intake of meat and meat products	6	
*	intake of non-starch polysaccharides intake of vitamin D, folate, carotenoids	4 1	
*	intake of iron, iodine, calcium	2	
*	contaminants in food	0	
2 2 2	Other health related helpovious		
3.2.3	Other health-related behaviours physical activity (time spent, energy expenditure)	22	I
*	sexual behaviour (partners, frequency)	3	
*	sexual behaviour: sexual experience in age 15-24	3	
*	contraceptive use (type, general, 1st intercourse)	13 10	Added: nublic health issue of vising important
*	breastfeeding at various ages exposure to UV	10 1	Added: public health issue of rising importance
*	traffic behaviour	2	
3.3	Living and working conditions		The ECHI team noted the absence of selected items in this group. To be filled with future HMP results
3.3.1	Physical environment		- · · · · · · · · · · · · · · · · · · ·
*	PM10 exposure/emissions	6	
*	other outside air pollutants indoor tobacco smoke exposure (esp children)	0 3	
		v	

*	indoor radon exposure	5	
*	housing space	4	
*	environmental determinants of physical activity:	7	
*	drinking water supply	3	
*	sewage system connection	3 2	
*	cumulative exposure to ionising radiation noise exposure	8	
	Tiolog exposure	Ü	
3.3.2	Working conditions		
*	occupational exposure to carcinogenic chemicals	5	
*	occupational exposure to noise, vibrations, other	4	
*	tobacco smoke exposure at work site	4 2	
*	inconvenient/health-damaging working positions mental stress factors at work	4	
	The first state of the first sta	•	
3.3.3	Social and cultural environment		
*	social support	7	
*	social isolation/participation parental support for children	7 3	
*	children in social care	6	
*	life events	2	
*	experience of violence	4	
*	experience of sexual abuse and violence	2	
CL ASS 4	HEALTH SYSTEMS		
			Also in this continue the section of
4.1	Prevention, health protection and health promotion		Also in this section, there is too much emphasis on the classical issues; additions/deletions are made
4.1.1	Disease prevention		
*	vaccination coverage in children	28	
*	influenza vaccination coverage	10 24	Deleted: these cancers included in health status
*	breast cancer screening cervical cancer screening	20	and survival indicators.
*	colorectal cancer screening	12	and darvivar maldators.
*	blood pressure measurement	12	
*	serum cholesterol measurement	9	
*	antihypertensive drug treatment	13	
*	lipid-lowering drug treatment counsel+B499ling on smoking by health professionals	9 5	
*	general preventive examination	4	
*	prenatal screening	9	
*	prenatal care attendance	11	
*	neonatal screening	5	
*	integrated children's health monitoring	2 5	
*	HIV testing among pregnant women hormone replacement therapy	3	
	, , , , , , , , , , , , , , , , , , , ,		
4.1.2	Health promotion		The issues in this section added to implement
*	policies on healthy nutrition campaigns on smoking, alcohol, diet, safe sex, drug use, sunlight exposure,	6	a more modern health promotion approach;
	physical activity, injury prevention	10 0	even though these are development areas.
*	awareness of elevated blood pressure, cholesterol	4	
*	integrated programmes in settings: e.g. schools, workplaces	3	
*	physical punishment of children	0	
*	anti-bullying policies in schools	0	
	mental health promotion	4	
4.1.3	Health protection		
*	regulations on public smoking	9	
*	smoking advertisement restrictions	1	
*	tobacco prices regulations on alcohol and driving	6 1	
*	regulations on seat belts, helmets	1	
*	policies on healthy nutrition, e.g. food/drink fortification	4	
*	regulations on food safety and quality	1	
*	regulations on air/water quality	0	
*	regulations on noise	0	
	regulations on lead exposure	U	
4.2	Health care resources		In sections 4.2-4.4 not much was selected. Many indicators here are less related to public health;
4.2.1	Facilities		the ECHI team was not very satisfied with the few
*	hospital beds total	12	selections made and could not come to
*	hospital beds acute care	14	a conclusion. It was agreed that selected indicators
*	hospital beds psychatric	8	should have a clear-cut relation with health
*	beds nursing/elderly home care stroke units	5 0	outcomes. This has to be worked out later.
		•	
4.2.2 *	Manpower total health services employment	7	
*	total hospital employment	6	
*	employment in nursing and residential care	5	
*	employment in ambulatory care	5	
*	employment in sales and proving of medical goods	0	
•	employment in public health programmes	0	

*	employment in health administration and insurance	0	
*	hospital staff per bed hospital nurses staff per bed	1 1	
*	physicians employed	21	Check with manpower project whether this is
*	nurses employed	21	acceptable choice
*	midwives employed	8	
*	dentists employed	9	
*	pharmacists employed	10 2	
*	paramedical professions psychiatrists, psychologists	0	
*	incomes of doctors	0	
*	unemployment rate in medical personnel	1	
*	shortage of medical personnel	2	
4.2.3	Education		
*	physicians graduated	3	
*	nurses/midwives graduated	0	
*	pharmacists graduated	0	
*	dentists graduated	0	
4.2.4	Technology		
*	radiation equipment	2	
*	CT scans	7	
*	MRI units	6	
*	PETs (positron emission tomography)	0	
*	linear accelerators lithotriptors	0	
*	haemodialysis stations	4	
*	mammographs	4	
4.3	Health care utilisation		
4.0	ricular care dansation		
4.3.1	In-patient care		
*	beddays in-patient care	10	
*	beddays acute care, selected diagnoses	9 2	
*	beddays acute care circulatory diseases occupancy rate in-patient	6	
*	occupancy rate acute	3	
*	average length of stay (ALOS) in-patient care	8	
*	ALOS acute care, selected diagnoses	10	
*	ALOS acute care circulatory diseases	0	
*	hospital discharges	6	
*	hospital discharges for selected diagnoses	10 1	
*	hospital; discharges for circulatory diseases maternity units: distribution of place of birth	1	
*	maternity units: percentage of very preterm births in units without NICU	1	
400	Out and hard access of the affine		
4.3.2	Out-patient care utilisation general practitioner	17	
*	dentist	7	
*	physiotherapist	2	
*	alternative practice	2	
*	maternal/child care	2	
*	births attended by midwives mental health care	2 7	
	mental neatth care	,	
4.3.3	Surgical operations and procedures		
*	total procedures in-patients	10	
*	total procedures daycases CABG	6 9	
*	PTCA	8	
*	heart transplants	2	
*	other heart/circulatory operations	0	
*	hip replacement	11	
*	knee replacement	2	
*	cataract operations laser treatment in diabetics retinopathy	7 0	
*	renal replacement in diabetics	1	
*	cancer palliative radiotherapy	0	
*	hysterectomy	1	
*	births by mode of delivery: spontaneous, assisted, caesarean	10	
*	onset of labour	0	
*	percent vaginal births with episiotomy	0	
*	percent births following fertility treatment percent births without medical intervention	3 0	
121	Use of medicines and medical side		
4.3.4 *	Use of medicines and medical aids utilisation	12	
*	price of active ingredient	0	
*	cost per DDD	2	
4.4	Health expenditures/financing		
4.4.1 *	Health care system	4	
	insurance coverage	4	

*	distribution of household expenditures on health		2	
4.4.2	National expenditures on health			
*	total/public/private expenditures on health		26	check whether this is acceptable for SHA
*	total/public/private expenditures on personal health		3	(System of Health Accounts)
*	total/public/private expenditures on collective health		2	(Oyotem of Hodian Accounts)
	total public private experience on concentre ricular		_	
4.4.3	Expenditures on medical services			
*	expenditures on in-patient care		14	
*	expenditures on out-patient care		12	
*	expenditures on ancillary services		2	
*	expenditures on home care services		6	
4.4.4	Medical goods for out-patients			
*	expenditures on pharmaceuticals and other non-durables		13	
*	expenditures on medical appliances and other durables		3	
			-	
4.4.5	Health expenditures by age, diagnosis, etc.			
*	Health expenditures by age		8	
*	expenditures for cancer prevention, registries, drugs, rese	earch	0	
*	cost of a cancer patient		1	
4.4.6	Health expenditures by fund source			
*	Health expenditures by fund source		8	
4.5	Health care quality/performance			
4.5.4	and to although a dispersion			
4.5.1	subjective indicators		4.4	
	satisfaction with the health system		14	
	responsiveness of the health system		4	
	satisfaction of mothers with perinatal care		0	
4.5.2	health care process indicators			
*	autopsy rate		5	
*	waiting lists		15	problem of operationalisation; link to
*	compliance with oncology practice		0	specific operations in 4.3.3?
*	inappropriate diabetes monitoring (HbA1c)		1	
*	28-day emergency readmission rate		5	
*	quality of blood products		2	
*	accessibility of care		7	
*	parental accompaniment in children's hospitals		0	
*	delay in cancer treatment		7	
*	support to women in perinatal period		0	
4.5.3	health outcome indicators			
*	avoidable deaths: asthma		3	
*	30-days mortality after AMI		8	
*	30-days mortality after stroke		7	
*	30-days mortality after CABG		3	
*	surgical wound infection		3	
*	nephropathy from diabetes		3 1	
*	antibiotic resistance		7	
*	cancer survival rates		17	1
*	stage at cancer diagnosis		9	1
*	population coverage by cancer registration		7	
	population coverage by cancer registration		,	

## The total number resulting is:

Chapter 1: 3 (+2, with lower cut-off)

Chapter 2: 26 (with Eurostat causes of death counted as 2)

Chapter 3: 11 (+3, with lower cut-off) Chapter 4: 10 (+9, with lower cut-off) Total: 50 (+14, with lower cut-off)

The impression remains that the list is (too much) dominated by disease-specific items, whereas from a public health point of view one would expect more on determinants and public health actions.

According to Eurostat's preliminary check, the great majority of initially selected indicators are readily available, although not always comparable; also, an assessment of precise operational definitions has not yet been made.

#### For a follow-up it is necessary:

- \* to assess availability, comparability and indicator definitions; this will split the list into (1) quickly implementable and (2) development items.
- \* to check specific questions with HMP projects (indicated).
- \* to have further discussions on areas not adequately covered (other than classical disease-oriented, environmental indicators, health promotion indicators, health system performance indicators from the health systems chapter.

This proposed core list was purposely set out within the comprehensive ECHI-2 list version May 2003, in order to enable better understanding of the overall context

Finally, the big field of tension that remains is between, on the one hand, wanting a quick implementation with available material, necessarily on the basis of existing databases, and on the other hand fully exploiting the accomplishments of the HMP projects. For the latter, follow-up actions outside the 'core-indicators-track' are obviously needed.

We might start a separate development track for this, to keep the momentum for innovation!!

# CORE LIST INDICATORS

# Ranking of first choice indicators only

ranking	1st choice
1 Life expectancy at various ages	18
2 body mass index	17
3 regular smokers	17
4 Population by age	15
5 infant mortality (birth -> 1 year)	14
6 vaccination coverage in children	14
7 standardised death rate 0-65	13
8 self-reported health	13
9 HIV/AIDS incidence	12
10 stroke incidence/attack rate	12
11 total/public/private expenditures on health	12
12 population by 4 ISCED classes: elementary, lower sec., upper sec., tel	
13 standardised death rate	11
14 all cancers, incidence	11
15 acute myocardial infarction (AMI), incidence	11
16 breast cancer screening	11
17 (low) birth weight	10
18 blood pressure/hypertension	10
19 physical actvity (time spent, energy expenditure)	10
20 physicians employed	10
21 nurses employed	10
22 fertility rate	9
23 standardised death rate 65+	9
24 breast cancer incidence	9
25 Prevalence of any chronic illness or condition	9
26 alcohol: % of heavy drinkers, frequency of heavy drinking	9
27 Total population	8
28 birth rate	8
29 population projections	8
30 lung cancer incidence	8
31 diabetes all types prevalence	8
32 cervical cancer screening	8
33 total unemployment	7
34 Dementia/Alzheimer	7
35 total alcohol consumption	7
36 general practitioner visits	7
37 cancer survival rates	7
38 mother's age distribution	6
39 population by household type	6
40 population by current or last occupation in 6 ICO groups	6
41 total employment rate 15-64	6
42 gini co-efficient	6
43 % population with income below 60% national median (Eurostat def.)	6
44 GDP PPP(purchasing power parity)	6
45 potential years of life lost (PYLL)	6
46 prostate cancer incidence	6
47 Depression prevalence etc	6
48 COPD prevalence	6
49 road traffic injuries	6
50 self-reported health	6
51 total energy uptake/person	6
· · · · · ·	

ranking		1st choice	
52	intake of fruit excluding juice		6
	intake of vegetables excl. potatoes and juice		6
	hospital beds total		6
55	hospital beds acute care		6
	expenditures on in-patient care		6
	expenditures on pharmaceuticals and other non-durables		6
	specified from above: teenage births		5
	induced abortions		5
	death rate (all causes)		5
	perinatal mortality (stillbirths + birth -> 1 week)		5
	numbers of deaths, Eurostat 65 causes		5
	crude death rate, Eurostat 65 causes		5 5 5 5 5 5
	*smoking-related deaths		5
	*alcohol-related deaths		5
	tuberculosis incidence		5
	hepatitis B incidence		5
	colorectal cancer incidence		5
	cervix cancer incidence		5
	occupational injuries		5
	hip fracture incidence		5
	use of illicit drugs (incl. Children)		5
	colorectal cancer screening		5
	blood pressure measurement		5
	prenatal care attendance		5
	beddays in-patient care		5 5
	utilisation of medicines and medical aids		5
	expenditures on out-patient care		5
	waiting lists		5
	specified from above: maternal age at 1st birth		4
	•		4
	population by ethnic origin/citizenship		4
	neonatal mortality (birth -> 28 days) fatal accidents at work		
	STD, specif. Chlamydia, incidence		4
	vaccination scheme diseases		4
			4
	Decayed etc. teeth: mean DMF-12 index		4
	rheumatoid arthritis (incidence, prevalence)		4
	occupational injuries		4
	limitations of usual activities, past 6 months, health related		4
	Limitations in seeing, hearing, mobility, speaking, biting, agility		4
	alcohol: non-drinkers		4
	% energy from saturated fatty acids		4
	contraceptive use (type, general, 1st intercourse)		4
	serum cholesterol measurement		4
	antihypertensive drug treatment		4
	prenatal screening		4
	campaigns on smoking, alcohol, diet, safe sex, drug use, sunlight expo		4
	dentists employed		4
	pharmacists employed		4
	average length of stay (ALOS) in-patient care		4
	total procedures in-patients		4
	hip replacement		4
	satisfaction with the health system		4
	literacy rate		3
	early school leavers		3
106	population by ISCO 2-digit employment type		3

407 ODD	
107 GDP	3
108 crude death rate, age intervals	
109 fetal mortality	3
110 *diabetes primary & other causes	3 3 3 3 3 3
111 *drug-related deaths	3
112 HIV seroprevalence in pregnant women	3
113 melanoma	3
114 diabetes type 1 incidence in children	3
115 AMI case fatality	3
116 childhood asthma	3
117 home/leisure injuries	3
118 occupational diseases	3
119 Creutzfeld-jacob disease	3
120 Limitations in seeing, hearing, mobility, speaking, biting, agility	3
121 limitations in personal care (feeding, dressing, toilet, washing, etc.)	3
122 Prevalence of any chronic illness or condition	3
123 amount smoked/person	3
124 pregnant women smoking	3
125 % energy from fat	3
126 intake of bread/cereals	3
127 intake of fish	
128 breastfeeding at various ages	3
129 environmental determinants of physical activity:	3
130 social isolation/participation	3
131 influenza vaccination coverage	3
132 policies on healthy nutrition	3
133 midwives employed	3
134 CT scans	3
135 MRI units	3
136 beddays acute care, selected diagnoses	3
137 occupancy rate in-patient	3
138 ALOS acute care, selected diagnoses	3
139 hospital discharges	3 3 3
140 hospital discharges for selected diagnoses	3
141 dentist	3
142 mental health care	3
143 total procedures daycases	3
144 CABG	3
145 births by mode of delivery: spontaneous, assisted, caesarean	3
146 expenditures on home care services	3
147 Health expenditures by age	3
148 Health expenditures by fund source	3
149 accessibility of care	3
150 delay in cancer treatment	3
151 Population by region	2
152 % children in single-parent household	2
153 % of 18-24 not in education and with low qualifications	2
154 total labour force	2
155 % children living in household as above	2
156 postneonatal mortality (28 days -> 1 year)	2
157 *maternal mortality, also by cause of death	2 2 2 2
158 measles	2
159 meningitis	2
160 stomach	2 2 2 2
161 lymphomas	2

# CORE LIST INDICATORS Ranking of indicators 1st and 2nd choice combined

ranking	(2x1st+2nd)
1 Life expectancy at various ages	36
2 regular smokers	35
3 body mass index	34
4 Population by age	32
5 infant mortality (birth -> 1 year)	30
6 self-reported health	29
7 vaccination coverage in children	28
8 standardised death rate 0-65	26
9 HIV/AIDS incidence	26
10 total/public/private expenditures on health	26
11 population by 4 ISCED classes: elementary, lower sec., upper sec., tertiat	r 25
12 stroke incidence, attack rate	24
13 all cancers incidence	24
14 breast cancer screening	24
15 blood pressure/hypertension	24
16 standardised death rate all causes	23
17 acute myocardial infarction (AMI) incidence	23
18 (low) birth weight	23
19 physical activity (time spent, energy expenditure)	22
20 alcohol: % of heavy drinkers, frequency of heavy drinking	22
21 physicians employed	21
22 nurses employed	21
23 fertility rate	21
24 breast cancer incidence	21
25 Prevalence of any chronic illness or condition	21
26 standardised death rate 65+	20
27 birth rate	20
28 cervical cancer screening	20
29 lung cancer incidence	19
30 diabetes all types prevalence	18
31 total unemployment	17
32 total alcohol consumption	17
33 general practitioner visits	17
34 cancer survival rates	17
35 road traffic injuries	17
36 Total population	16
37 population projections	16
38 Dementia/Alzheimer prevalence	16
39 total employment rate 15-64	16
40 population by household type	15
41 % population with income below 60% national median (Eurostat def.)	15
42 GDP PPP(purchasing power parity)	15
43 prostate cancer incidence	15
44 COPD prevalence	15
45 smoking-related deaths	15
46 waiting lists	15
47 mother's age distribution	14
48 Depression incidence/prevalence	14
49 self-reported health	14
50 total energy uptake/person	14
51 intake of vegetables excl. potatoes and juice	14
, ,	

ranking		(2x1st+2nd)
52	hospital beds acute care	14
53	expenditures on in-patient care	14
54	induced abortions	14
55	alcohol-related deaths	14
56	satisfaction with the health system	14
57	population by current or last occupation in 6 ICO groups	13
	gini co-efficient	13
	potential years of life lost (PYLL)	13
60	intake of fruit excluding juice	13
	expenditures on pharmaceuticals and other non-durables	13
	tuberculosis incidence	13
63	hepatitis B incidence	13
	colorectal cancer incidence	13
65	cervix cancer incidence	13
66	occupational injuries	13
	hip fracture incidence	13
	neonatal mortality (birth -> 28 days)	13
	Decayed etc. teeth: mean DMF-12 index	13
	contraceptive use (type, general, 1st intercourse)	13
	antihypertensive drug treatment	13
	hospital beds total	12
	use of illicit drugs (incl. Children)	12
	colorectal cancer screening	12
	blood pressure measurement	12
	utilisation of medicines and medical aids	12
	expenditures on out-patient care	12
	fatal accidents at work	12
	% energy from fat	12
	death rate all causes	11
	crude death rate, Eurostat 65 causes	11
	prenatal care attendance	11
	population by ethnic origin/citizenship	11
	% energy from saturated fatty acids	11
	hip replacement	11
	literacy rate	11
	drug-related deaths	11
	melanoma incidence	11
	pregnant women smoking	11
	specified from above: teenage births	10
	perinatal mortality (stillbirths + birth -> 1 week)	10
	numbers of deaths, Eurostat 65 causes	10
	beddays in-patient care	10
	specified from above: maternal age at 1st birth	10
	STD, specif. Chlamydia, incidence	10
	vaccination scheme diseases incidence	10
		10
	rheumatoid arthritis (incidence, prevalence)	
	Limitations in seeing, hearing, mobility, speaking, biting, agility alcohol: non-drinkers	10
		10
	campaigns on smoking, alcohol, diet, safe sex, drug use, sunlight exposure	
	pharmacists employed	10
	total procedures in-patients	10
	home/leisure injuries	10
	Limitations in seeing, hearing, mobility, speaking, biting, agility	10
	amount smoked/person	10
106	breastfeeding at various ages (of child)	10

ranking	(2x1st+2nd)
107 influenza vaccination coverage	10
108 ALOS acute care, selected diagnoses	10
109 hospital discharges for selected diagnoses	10
110 births by mode of delivery: spontaneous, assisted, caesarean	10
111 occupational injuries	9
112 limitations of usual activities, past 6 months, health related	9
113 serum cholesterol measurement	9
114 prenatal screening	9
115 dentists employed	9
116 HIV seroprevalence in pregnant women	9
117 diabetes type 1 incidence in children	9
118 AMI case fatality	9
119 childhood asthma	9
120 limitations in personal care (feeding, dressing, toilet, washing, etc.)	9
121 beddays acute care, selected diagnoses	9
122 CABG	9
123 gestational age distribution (pre-term births)	9
124 glucose tolerance	9
125 lipid-lowering drug treatment	9
· · · · · · · · · · · · · · · · · · ·	9
126 stage at cancer diagnosis 127 total serum cholesterol	9
	9
128 regulations on public smoking	9
129 average length of stay (ALOS) in-patient care	8
130 population by ISCO 2-digit employment type 131 GDP	9 8 8 8
	8
132 crude death rate, age intervals	8
133 occupational diseases	8
134 Creutzfeld-jacob disease	8
135 intake of fish	8
136 midwives employed	8
137 Health expenditures by age	8
138 Health expenditures by fund source	8
139 meningitis	8
140 stomach	8
141 noise exposure	8
142 hospital beds psychatric	8
143 PTCA	8
144 30-days mortality after AMI	8
145 early school leavers	7
146 Prevalence of any chronic illness or condition	8 7 7 7 7
147 intake of bread/cereals	7
148 environmental determinants of physical activity:	7
149 social isolation/participation	
150 CT scans	7
151 dentist	7
152 mental health care	7
153 accessibility of care	7
154 delay in cancer treatment	7
155 Population by region	7
156 *maternal mortality, also by cause of death	7
157 Down's syndrome	7
158 alcohol-related traffic accidents	7
159 Cognitive limitations in memory, learning, literacy, attention	7
160 social support	7
161 total health services employment	7