Single Integrated Metadata Structure (SIMS)

Country: Greece

Compiling agency: ELSTAT

Domain name: Hospital Census

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1. Contact	Тор
1.1 Contact organisation	Hellenic Statistical Authority (ELSTAT)
1.2 Contact organisation unit	Division of Social Statistics, Department of Health Statistics and Social Security and Protection, code 010104Γ6
1.3 Contact name	Alexandra Zografou, Employee of the Department
1.4 Contact person function	Transmission, collection, codification, data processing and corrections, compilation of tables, checks and update of the Hospitals Register (changes in trade name, speciality, closing of current units and operation of new ones).
1.5 Contact mail address	46, Peireos & Eponiton str., 185 10 Piraeus

1.6 Contact email address	a.zografou@statistics.gr
1.7 Contact phone number	+30 213 1352785
1.8 Contact fax number	+30 213 1352763

2. Introduction	Тор
2.1 Introduction	The purpose of the census is to record the number of hospitals in Greece on a yearly basis. The recording includes public and private Hospitals along with private clinics by Department (NUTS 3), as well as number of beds, high technology medical equipment and medical and non-medical staff.

3. Metadata update	Тор
3.1 Metadata last certified	October 2014
3.2 Metadata last posted	October 2014
3.3 Metadata last update	October 2014

4. Statistical presentation

4.1 Data description

The survey is a census survey conducted on a yearly basis. The purpose of the census is to collect non – financial data that refer to all Hospitals of the country (Legal Entities of Public Law, Legal Entities of Private Law and private clinics). The census is surveying the characteristics of each hospital (beds, medical and non-medical staff, equipment). The source of the census is the hospitals themselves that were operating on the 31st of December of the reference year. The survey is based on the Hospitals register with a unique number-identity for every unit, which is updated for any changes that may occur on an annual basis (opening of new hospitals, closing or intermission of existing ones, change of speciality, trade name and owner).

4.2 Classification system

The classification system used for the hospitals, medical equipment, medical specialities, non-medical speciality by education level and by high technology medical equipment is set out by ELSTAT.

Geographical classification is in accordance with NUTS: the survey is conducted at NUTS 3 level and the survey results are presented at NUTS 2 level. The results of the census (number of hospitals per legal entity, number of beds per medical section and department, physicians per speciality, nurses, other paramedical and non-paramedical specialities along with the equipment of high technology, refer to the total of the country, the geographical regions (NUTS 2) and regional units (NUTS 3).

4.3 Sector coverage

Public health.

4.4 Statistical concepts and definitions

The surveyed variables are:

1. Legal form of the hospitals. 2. Hospitals speciality. 3. Medical staff by speciality. 4. Non-medical staff by speciality (Nursing, Administrative etc.) and educational level (university education, technological education of third level, secondary and post-secondary education, compulsory education). 5. Number of beds by Sector (pathological etc.) and Department (paediatrics, cardiology etc). 6. Medical equipment of high technology.

"Hospital" shall mean an institution of secondary healthcare in which specialized staff with specialized equipment provides medical treatment and often but not always it provides long-term health care.

Hospitals, according to their legal form are divided into Legal Entities of Public Law, Legal Entities of Private Law and private clinics. Depending on the incidents, they are divided into General, Combined and Specialized Hospitals (of Medical Specialities such as Cancer hospitals, V.D. and skin diseases,

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Cardiological, Infectious diseases and leprosy, Obstetrical-Gynaecological, Neuro-psychiatric, Orthopaedic, Ophthalmological, Pathological, Paediatrics, Tubercular, Surgical, Otorhinolaryngological).

The Hospital Departments are: Pathological, Surgical, Psychiatric and Other Sections. The Pathological Department includes the following sections: haematology section, radiotherapy section, allergology section, immunology section, gastroenterology section, dermatology and venereology section, endocrinology section, cardiology section, infectious diseases section, neonatal section, neurology section, nephrology section, oncology-chemotherapy section, paediatrics section, pulmonology section, rheumatology section, section of physical medicine and rehabilitation, decompression section, outpatient section, short-hospitalisation section and myocardial infarction unit. The Surgical Department includes the following sections: general surgery section, vascular surgery section, obstetrical-gynaecological surgery section, thoracic surgery section, cardiac surgery section, neurosurgery section, orthopaedic surgery, urological surgery section, ophthalmic surgery section, paediatric surgery, pediatric orthopaedic surgery, otolaryngology surgery section, oral and maxillo-facial surgery, plastic and burn surgery section. Psychiatric department includes the following sections: general psychiatry section, paediatric psychiatry section and geriatrics psychiatry section.

The specialities of medical staff are: haematologists, clinical radiologists, radiotherapists, allergologists, anaesthesiologists, gastroenterologists, general practitioners, dermatologists, infectious diseases specialists, occupational doctors, coroners, cardiologists, clinical chemistry specialists, public health and medicine specialists, cytologists, obstetricians-gynaecologists, microbiologists preventive and immunologists, neurologists, neurosurgeons, nephrologists, dentists, orthopediatricians, urologists, ophthalmologists, hygienists, pulmonologists, physical medicine and rehabilitation specialists (physiatrists), surgeons of general surgery, plastic surgeons, psychiatrists, otorhinolaryngologists, oncologists, intensive care specialists, medical doctors under specialization and medical doctors with no speciality.

Non medical staff is divided into: Administrative staff, pharmacy staff, special non medical staff, nursing staff, paramedical staff, social care staff, integrated technology staff, technical staff, nutrition staff, and administrative care staff.

Equipment of high technology are: angiography equipment, equipment for radio-diagnosis, computed axial tomography (CTs), automatic analysers, linear accelerators, C cameras (radioisotopes), lithotripters, MRIs, kidney machines, equipment for echocardiography, ultrasounds, CTGs, electron microscopes, heart catheterization systems, electroencephalographs, laser scanning cytometers, holter monitors and radiotherapy equipment.

4.5 Statistical unit
The Hospital
4.6 Statistical population
All hospitals in Greece.
4.7 Reference area
Regional Unit (NUTS 3) and Greece total.
4.8 Time coverage
Annual census. Data are available in hardcopies from 1992 onwards. From 2000 onwards, data are available in an electronic format.
4.9 Base period

5. Unit of measure

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Number of hospitals by speciality, the number of personnel (medical and non-medical staff), the number of high technology equipment by type and the number of beds available at those hospitals.

6. Reference period

The 31st of December of every year of the survey.

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7.1 Legal acts and other agreements

The legal framework concerning the organization and operation of ELSTAT is as follows:

- Law 3832/2010 (Government Gazette No 38, Issue A): "Hellenic Statistical System Establishment of the Hellenic Statistical Authority (ELSTAT) as an Independent Authority", as amended by article 90 paragraphs 8 and 9 of the Law 3842/2010 (Government Gazette No 58, Issue A): "Restoration of fiscal justice, confrontation of tax evasion and other provisions", by article 10 of the Law 3899/2010 (Government Gazette No 212, Issue A): "Urgent measures for the implementation of the assistance program of the Greek Economy", by article 45 of the Law 3943/2011 (Government Gazette No 66, Issue A): "Combating tax evasion, staffing of auditing services and other provisions falling within the competence of the Ministry of Finance", by article 22 paragraph 1 of the Law 3965/2011 (Government Gazette No 113, Issue A): "Operations Reform of the Consignment and Loan Fund, Public Debt Management Agency, Public Enterprises and Government bodies, the establishment of the General Secretary of Public Property and other provisions" and by article 51 of the Law 4021/2011 (Government Gazette No 218, Issue A): "Enhanced measures for the supervision and restructuring of Credit Institutions – Regulation of issues of financial nature – Ratification of the European Financial Stability Facility (EFSF) Framework-Agreement and its amendments and other provisions."
- Regulation (EC) No 223/2009 of the European Parliament and of the Council, on the European statistics (Official Journal of the European Union L 87/164).
- Article 14 of the Law 3470/2006 (Government Gazette No 132, Issue A): "National Export Council, tax regulations and other provisions".
- Article 3, paragraph 1c, of the Law 3448/2006 (Government Gazette No 57, Issue A): "For the further use of information coming from the public sector and the settlement of matters falling within the responsibility of the Ministry of Interior, Public Administration and Decentralization".
- European Statistics Code of Practice adopted by the Statistical Programme Committee on 24 February 2005 and promulgated in the Commission Recommendation of 25 May 2005 on the independence, integrity and accountability of the national and Community statistical Authorities, after its revision, which was adopted on 28 September 2011 by the European Statistical System Committee.
- Presidential Decree 226/2000 (Government Gazette No 195, Issue A): "Organization of the General Secretariat of the National Statistical Service of Greece".
- Articles 4, 8, 9, 10, 12, 13, 14, 15 and 16 of the Law 2392/1996 (Government Gazette No 60, Issue A): "Access of the General Secretariat of the National Statistical Service of Greece to administrative sources and administrative files, Statistical Confidentiality Committee, settlement of matters concerning the conduct of censuses and statistical works, as well as of matters of the General Secretariat of the National Statistical Service of Greece".

Joint Ministerial Decision 26262/128/59, Joint Ministerial Decision 4108/B 2.6.1968

7.2 Data sharing

Joint questionnaire (EUROSTAT/OECD/WHO) on non-financial health care statistics.

8. Confidentiality

8.1 Confidentiality policy

The issues concerning the observance of statistical confidentiality by the Hellenic Statistical Authority (ELSTAT) are arranged by articles 6, 7 and 8 of the Law 3832/2010, as amended by article 90 paragraph 8 of Law 3842/2010 and by article 10 of Law 3899/2010, as well as by article 8 of Law 2392/1996, which was brought back into force, in accordance with article 90 paragraph 8 of Law 3842/2010.

Furthermore, ELSTAT disseminates the statistics in compliance with the statistical principles of the European Statistics Code of Practice and in particular with the principle of statistical confidentiality.

8.2 Confidentiality – data treatment

 ELSTAT protects and does not disseminate data it has obtained or it has access to, which enable the direct or indirect identification of the statistical units that have provided them by the disclosure of

individual information directly received for statistical purposes or indirectly supplied from administrative or other sources. ELSTAT takes all appropriate preventive measures so as to render impossible the identification of individual statistical units by technical or other means that might reasonably be used by a third party. Statistical data that could potentially enable the identification of the statistical unit are disseminated by ELSTAT if and only if:

a) these data have been treated, as it is specifically set out in the Regulation on Statistical Obligations of the agencies of the Hellenic Statistical System (ELSS), in such a way that their dissemination does not prejudice statistical confidentiality or

b) the statistical unit has given its consent, without any reservations, for the disclosure of data.

- The confidential data that are transmitted by ELSS agencies to ELSTAT are used exclusively for statistical purposes and the only persons who have the right to have access to these data are the personnel engaged in this task and appointed by an act of the President of ELSTAT.
- The Statistical Confidentiality Committee (SCC) operating in ELSTAT examines issues referring to the observance of statistical confidentiality. The responsibilities of this Committee are to recommend on:
 - the level of detail at which statistical data can be disseminated, so as the identification, either directly or indirectly, of the censured statistical unit is not possible;
 - the anonymization criteria for the microdata provided to users;
 - the granting to researchers access to confidential data for scientific purposes.

The staff of ELSTAT, under any employment status, as well as the temporary survey workers who are employed for the collection of statistical data in statistical surveys conducted by ELSTAT, who acquire access by any means to confidential data, are bound by the principle of confidentiality and must use these data exclusively for the statistical purposes of ELSTAT. After the termination of their term of office, they are not allowed to use these data for any purpose.

Violation of data confidentiality and/or statistical confidentiality by any civil servant or employee of ELSTAT constitutes the disciplinary offence of violation of duty and may be punished with the penalty of final dismissal.

ELSTAT, by its decision, may impose a penalty amounting from ten thousand (10,000) up to two hundred thousand (200,000) euros to anyone who violates the confidentiality of data and/or statistical confidentiality. The penalty is always imposed after the hearing of the defence of the person liable for the breach, depending on the gravity and the repercussions of the violation. Any relapse constitutes an aggravating factor for the assessment of the administrative sanction.

9. Release policy

9.1 Release calendar

There is no predefined date for the release of data. Final data are to be announced approximately twelve months after the end of the reference year.

9.2 Release calendar access

There is no announcement calendar.

9.3 User access

According to the legal framework of the Community and the «European Statistics Code of Practice», ELSTAT announces the results of the survey at its website at: (<u>http://www.statistics.gr</u>) at «Population and Social Conditions – Health Care – Hospitals and local health centers». Equal user access to data is defined by the European Statistics Code of Practice of Eurostat with respect to the professional independency and in objective, professional and transparent manner in which all users all users are treated equally. Data are not disseminated to users prior to their announcement.

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10. Frequency of dissemination

Annually. Final data are usually announced fourteen (14) months after the end of the reference year.

11. Dissemination format Top
11.1 News release
No press release is compiled.
11.2 Publications
 «Statistical Yearbook of Greece». It is provided to subscribers for a fee or after an application to the Hellenic Statistical Authority. «Concise Statistical Yearbook of Greece». ». It is provided to subscribers for a fee or after an application to the Hellenic Statistical Authority. All above mentioned data are available upon request at: Division of Statistical Information and Publications Peireos & Eponiton str., 185 10 Piraeus Tel. (+30) 213-1352173, FAX : (+30) 213-1352022 e-mail : data.dissem@statistics.gr Eurostat's publications: OECD, WHO-Europe (eg. Health in Europe, Health in Statistics).
The total access to the web page of the relevant survey for the year 2013 amounts to 1,393 page views (total bits).
11.4 Micro-data access
Micro data are available to users upon request at:
Division of Statistical Information and Publications
46, Peireos & Eponiton str., 185 10 Piraeus
Tel. (+30) 213-1352173, FAX: (+30) 213-1352022
E-mail: data.dissem@statistics.gr
Confidentiality of data is always ensured (Chapter 8). Due to confidentiality reasons, access to microdata is allowed only under strict conditions.
11.5 Other
Joint Questionnaire Eurostat – WHO – OECD
Another source for data dissemination are the International organizations, like Eurostat:
http://ec.europa.eu/eurostat/web/health/statistics-illustrated and ELSTAT's website at:
http://www.statistics.gr/en/statistics/-/publication/SHE06/-
http://dlib.statistics.gr/portal/page/portal/ESYE/
11.5.1 Metadata – consultations
Not measured. The latest metadata were validated in October 2014.
12. Accessibility of documentation Top

12.1 Documentation on methodology

There is no documentation or methodological note available.

12.1.1 Metadata completeness - rate

The metadata completeness rate is 100%.

12.2 Quality documentation

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No quality report is compiled.

13. Quality management

13.1 Quality assurance

Quality management is been performed throughout the whole process from data collection to the compilation of tables with the annual data.

Data are collected in hardcopies through the completion of a questionnaire by every hospital. These data are codified, are summed, in cases there is aggregation of data, are checked for completeness and correctness after communication with the administrative sources and are compared with the data of the previous years. The Register of Hospitals is updated on the basis of the reference year (opening of new units, final closure of existing ones, temporary closure, changes in specialty, changes in trade names and ownership). During computer processing, data checks are conducted for the correction of errors. The produced tables are also checked in order to ensure comparability of the time series.

13.2 Quality assessment

The quality of data is considered satisfactory. Quality checks are conducted throughout the whole process from data collection to the compilation of tables with the final data.

14. Relevance

14.1 User needs

Users are individuals or agencies involved in the health sector, International Organizations such as OECD, EUROSTAT and WHO. The survey data are also used for professional or education and research purposes.

14.2 User satisfaction

User's needs are to be followed on a regular basis by the Division of Social Health Statistics and the Department of Health Statistics and Social Insurance and Protection. In general, there is smooth cooperation and as far as possible direct response to requests. At the same time, the Division of Statistical Information and Publications of ELSTAT conducts the user's satisfaction survey every six months:

http://www.statistics.gr/user-satisfaction-survey

14.3 Completeness

Completeness is considered satisfactory. There is an ongoing improvement for the provision of complete information to users.

15. Accuracy	and reliability
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15.1 Overall accuracy

Overall accuracy and reliability of data are considered high since the data refers to census and data questionnaires are completed by the responsible sources with a great response rate amounting to 100%.

15.2 Sampling error

The survey is a census survey.

15.3 Non-sampling error

Lack of response (almost <1%), delays from the administrative sources, incorrect filling in of questionnaires.

15.3.1 Coverage error

The survey is a census survey; there is no coverage error.

15.3.1.1 Over-coverage rate

No

15.3.1.2 Common Units – proportion

Not applicable, the data are collected only from administrative sources.

15.3.2 Measurement error

Any erroneous data related to values of specific variables are corrected after communication with the

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15.3.3 Non response error

Non response of the surveyed units, which is corrected after specific actions of the competent employee (by sending a reminder letter, or paying a visit, etc) or by filling in the corresponding data of the previous year (<1%) given the fact that there is information that there are no significant differences from one year to the next one.

15.3.4 Processing error

Checks on questionnaires and on the registered data.

15.3.5 Model assumption error

Not applicable.

16. Timeliness and punctuality

16.1 Timeliness

Data are published annually, 360 days after the end of the reference year.

16.2 Punctuality

Data of every year are to publish 12-14 months after the end of the reference year and are transmitted to Eurostat through the Joint Questionnaire.

17. Comparability

17.1 Comparability – geographical

There is comparability at the level of the Region (NUTS 2) I since the methodology that is applied is the same all over Greece. Moreover, data are comparable with other countries within the framework of filling in the « OECD Eurostat-Who-Europe Joint Questionnaire» on Non Financial Health Care Statistics.

17.1.1 Asymmetry for mirror flows statistics - coefficient

Not applicable.

17.2 Comparability – over time

The data are comparable over time.

18. Coherence

18.1 Coherence cross-domain

There is cross-domain coherence. A common Register of Hospitals is used by the Division of Social Statistics for both the survey on «Hospital discharged in-patients» and the «Hospital census».

18.1.1 Coherence – sub annual and annual statistics

Not applicable, the census is conducted annually.

18.1.2 Coherence – National Accounts

Not applicable, there are no common data with the surveys of National Accounts.

18.2 Coherence – internal

The variables, the definitions and the classification systems that are used are internally coherent with the definitions provided by the Joint Questionnaire («OECD Eurostat –Who-Europe Joint Questionnaire» on Non Financial Health Care Statistics).

19. Cost and burden

There is no extra cost and burden apart from the operating expenses of the relevant department of Social Statistics Division of ELSTAT.

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20.1 Revision policy

The Hellenic Statistical Authority (ELSTAT) implements the following revision policy:

http://www.statistics.gr/en/policies

20.2 Revision practice

The Revision Policy of ELSTAT is implemented.

21. Statistical processing

21.1 Source data

Primary data are collected by the administrative sources such as Hospitals of Public Law, Hospitals of Private Law and private clinics.

21.2 Frequency of data collection

The frequency of data collection is annual.

21.3 Data collection

Questionnaires are filled by the administrative sources of the hospitals and are transmitted to ELSTAT completed.

21.4 Data validation

Data are validated through qualitative and quantitative checks that are based on crosschecking of primary data with the corresponding data of the previous year.

21.5 Data compilation

Tables containing final data are compiled and published on ELSTAT's website.

21.5.1 Imputation - rate

Not applicable, the survey is a census survey.

21.6 Adjustment

There is no adjustment.

21.6.1 Seasonal adjustment

Not applicable.

22. Comment

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