



**THE NATIONAL SCHOOL OF PUBLIC HEALTH, MANAGEMENT
AND PROFESSIONAL DEVELOPMENT, BUCHAREST
(NSPHMPD)**

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ACTIVITY REPORT
2017



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Summary

The activity of the National School of Public Health, Management and Professional Development, Bucharest (NSPHMPDB), during 2017, has been carried out according with the objectives of our annual Activity Plan, corresponding to the Institutional Development Strategy for 2016-2020. The results of the activities performed within the three main guidelines established in this Strategy highlight the achievement of the objectives for the year 2017, as following:

Organizing and delivering training programmes for professional development relevant to existing needs, at the best possible quality

During 2017, NSPHMPDB has carried out a number of 8 training programmes in the field of public health and health services management, totalizing 28 series and 931 participants. NSPHMPDB have also organized 156 series of training programmes for professional training and development for the health personnel, totaling a number of 4.167 participants.

An increasing number of participants in our training programmes have been registered in 2017. At the same time, activity of our training centers organizing the programmes has also been oriented to diversification of the existing programmes in order to be offered to other target groups, developing new ones and reviewing the programmes in accordance to changes in the training needs.

Hereby, in 2017, we created the opportunity to participate in only one or a few modules within the Hospital Management Programme, usually dedicated to the hospital managers, in order to respond to the interest expressed by the hospital personnel for participating in short courses in different hospital management areas.

During the year 2017, The National Center for Professional Development in Health (NCPDH) has collaborated with the Ministry of Health for the purpose of elaborating the legislative framework regarding the organization and provision of training programmes for nurses in 19 specialties, and also the training for embalmers. For the first time, five programmes of continuous medical education (e-learning type) have been provided, four of them being conceptually developed in 2016 and the other one in 2017, while other two ones have been developed and are to be provided during 2018.

The Center for Management and Health Promotion (CMHP) has reviewed the curriculum and/or the course materials for four of its training programmes: the Hospital Management dedicated to hospital managers, the Hospital Management dedicated to nursing superiors and head nurses, the Quality Management in Hospital, and the Training Programme dedicated to the hospital evaluators.

In order to increase the quality of our training programmes in public health and health management, criteria for calling external lecturers have been updated, regulations for course organizing and delivering have been up-to-dated, and 11 operational procedures regarding different training activities within the CMHP programmes have been reviewed. Two new operational procedures have been elaborated relative to the new training programmes developed: e-learning and specialization for nurses. Operational procedures ruling other five training programmes organized by the NCPDH have also been reviewed.

Developing our scientific research activity and improving the capitalization of research results

During 2017, three projects financed through the European Commission programmes have been carried on by the NSPHMPDB, as following:

- EUnetHTA JA3 – „European Network for Health Technology Assessment - Joint Action 3”;
- ADVANTAGE – “Managing Frailty. A comprehensive approach to promote a disability-free advanced age in Europe: the ADVANTAGE initiative“;
- CEPHOS-LINK – “Comparative Effectiveness Research on Psychiatric Hospitalization by Record Linkage of large Administrative data Sets”.

Subject matters of these projects running out with NSPHMPDB participation are concordant with the priorities identified at European level, but also with the current needs of the Romanian Health care system, which, besides its need for implementing EU health legislation (participation in the HTA European network), is facing the phenomenon of population ageing while some healthcare services are undersized and hospital services are overused, including avoidable hospital admissions.

Scientific research in the field of hospital services management has been continued during the year 2017 by identifying the main system problems impacting the reimbursement and, on the basis of research results obtained, technical assistance and methodological support have been provided to those employees of the social health insurance system responsible for controlling the quality of clinical coding in the hospitals. Technical assistance has also been provided to the National Health Insurance Fund by participating to the working group aimed to elaborate the Methodological Norms for applying the 2018 Framework Contract.

Data basis DRG_National has also been utilized for elaborating research papers published or presented in scientific events, and for specific activities de consultancy and technical assistance provided to public authorities at central and local level.

Our studies on training needs assessment have highlighted the increased interest for training in hospital clinical coding, and their results are to be consequently considered at elaboration of the DRG training programmes.

Research results have been disseminated by publishing 43 articles, out of which 32 articles published in ISI journals, HTA report within the EUnetHTA JA3 Project having NSPHMPDB as co-author, eight communications in international conferences, and four communications in national conferences. NSPHMPDB experts have also achieved a number of 18 protocol reviews and/or systematic literature reviews, thus being publicly recognized by the editors of the Joanna Briggs Institute (JBI) scientific journal.

In order to continuously improve the quality of our scientific research activities, 18 procedures have been reviewed and updated during the year 2017. Two new procedures regarding the consultancy services offered to the hospitals or to other organizations/entities, have also been elaborated.

Strengthening the institutional capacity for research and development of NSPHMPDB

21 employees of the NSPHMPDB have benefited from professional training in 2017. Out of those, 13 specialists have participated in educational programmes in areas where the volume of activity is supposed to be increased, or there is a need for increasing the number of persons skilled in a certain field. Therefore, training of our personnel targeted the improvement of expertise in the field of: hospital services quality, performing systematic literature reviews, including electronic documentation for literature reviews, and database administration.

The NSPHMPDB has continued, in 2017, its active participation in international professional networks of which we are part of, by punctual collaborations or discussions for future collaborations with other institutions, such as: the European Observatory for Health Systems and Policies, the National Agency for Quality Management in Health, the National Institute of Public Health, the National Institute of Statistics, Faculty of Administration and Business and Faculty of Geography within the University of Bucharest, the Romanian College of Physicians, the Romanian Order of General Nurses, Midwives and Professional Nurses (ROGNMPN), the Institute for Public Policies, the Medical School of Varna University.

NSPHMPDB has signed partnerships with nine hospitals in Bucharest in order to cover the applicative training of their course participants. Four of these partnerships (with Clinical Emergency Hospital “Bagdasar Arseni”, Clinical Hospital for Communicable Diseases “V. Babeş”, Bucharest Oncological Institute and National Institute for Mother-and-Child Health “Alessandrescu-Rusescu” Bucharest), have been signed during 2017.

Our three institutional websites of the NSPHMPDB (<http://www.snspps.ro/>, <https://www.perfmed.ro/>, and <http://www.drg.ro/>) have continuously been used in order to communicate information about our activities of training, research and professional development, while the journal Management in Health (<http://www.managementinhealth.com>) has published a number of 29 original articles in 2017, out of which six articles had as authors or co-authors NSPHMPDB specialists.

In conclusion, NSPHMPDB did reach its objectives proposed for the year 2017, thus contributing to the achievement of the objectives established for each of the three action directions of our institutional development Strategy for 2016-2020: during this period, NSPHMPDB organizes and provides programmes of training and professional development relevant to the existing needs, at the highest quality as possible, and develops the research and capitalization of results through a continuous strengthening of institutional capacity for research & development.

I. Organizing and delivering programmes of training and professional development relevant to the existing needs at the highest quality as possible

NSPHMPDB provides training in the field of public health and health management, and at the same time, organizes programmes of education and professional development for the health personnel in other fields.

The objectives of NSPHMPDB Development Strategy 2016-2020 regarding training and professional development, are as following:

- Diversification of the training and professional development programmes, as for more target groups of specialists working in the health system;
- Initiating new programmes of training and professional development according to the training needs as identified;
- Updating the existing training programmes, in terms of their contents and/or teaching methods or course organization, in order to meet the needs of course participants;
- Implementing those mechanisms and processes able to allow continuous improvement of the training quality.

During 2017, our activity of *training in the field of public health and health management* has registered and increase in both the number of course series, and in the number of course participants, as well as in terms of new programmes and revision of the existing ones.

Evolution of the number of course series is constantly increasing, since year 2014 (see Table 1 below). Decrease registered in 2014 was due to the preparation of a new programme type – the Training Programme for hospital evaluators, and also to the review of the training Quality Management in hospitals.

Table 1. Evolution of the number de series per type of training programme in public health and health management as provided during 2013 - 2017

Type of training programme	Number of series per each type of programme, per year				
	2017	2016	2015	2014	2013
Certification Programme in Health Services Management (for medical doctors) - AT	6	6	6	6	7
Hospital Management - MS	4	3	3	5	4
Hospital Management for hospital head nurses and nurse superiors	2	1	1	2	3
Quality Management in hospitals	7	5	1		4
Training Programme for hospital evaluators	6		4		
Professional Development Programme for hospital evaluators		9			
Reporting, contracting and reimbursing the hospital services	2	2	2	2	6
Managerial internal control, risk management, ethics, organizational integrity and transparency	1				
Total	28	26	17	15	24

The Training Programmes in public health and health management are organized, coordinated and provided by our *Center for Management and Health Promotion (CMHP)*, except for the training in Reporting, contracting and reimbursing the hospital services, which is organized by our Center of Research and Evaluation of Health Services (CREHS).

Certificate Training Programme in Health Services Management has totalized, in 2017, a number of six series, out of which three have been provided at Bucharest, one series at Covasna, and the other two of them have been organized in collaboration with the Departments of Public health and health management from the University of Medicine and Pharmacy “Gr. T. Popa” Iași, and from the University of Medicine and Pharmacy “Victor Babeș” Timișoara. The total number of participants in this certification programme was 231, in 2017.

The training programme in *Hospital Management*, dedicated to hospital managers, having a time period of 132 course hours, has been attended by a number of 156 participants, within four series, while the *Hospital Management training* dedicated to hospital head nurses and nurse superiors, having a time period of 60 course hours, has registered two series, with a total of 77 course participants.

The training Programme *Quality Management in hospitals* accounted seven series amounting 222 participants, as employees of the quality management structures within the hospitals. This training programme has been developed in 2016 per two different levels of knowledge and hospital work experience of the participants. The two sub-programs have been launched at the beginning of the year 2017, so a number de 4 series out of the total seven series, have been provided for the persons without a previous working experience with/within a hospital.

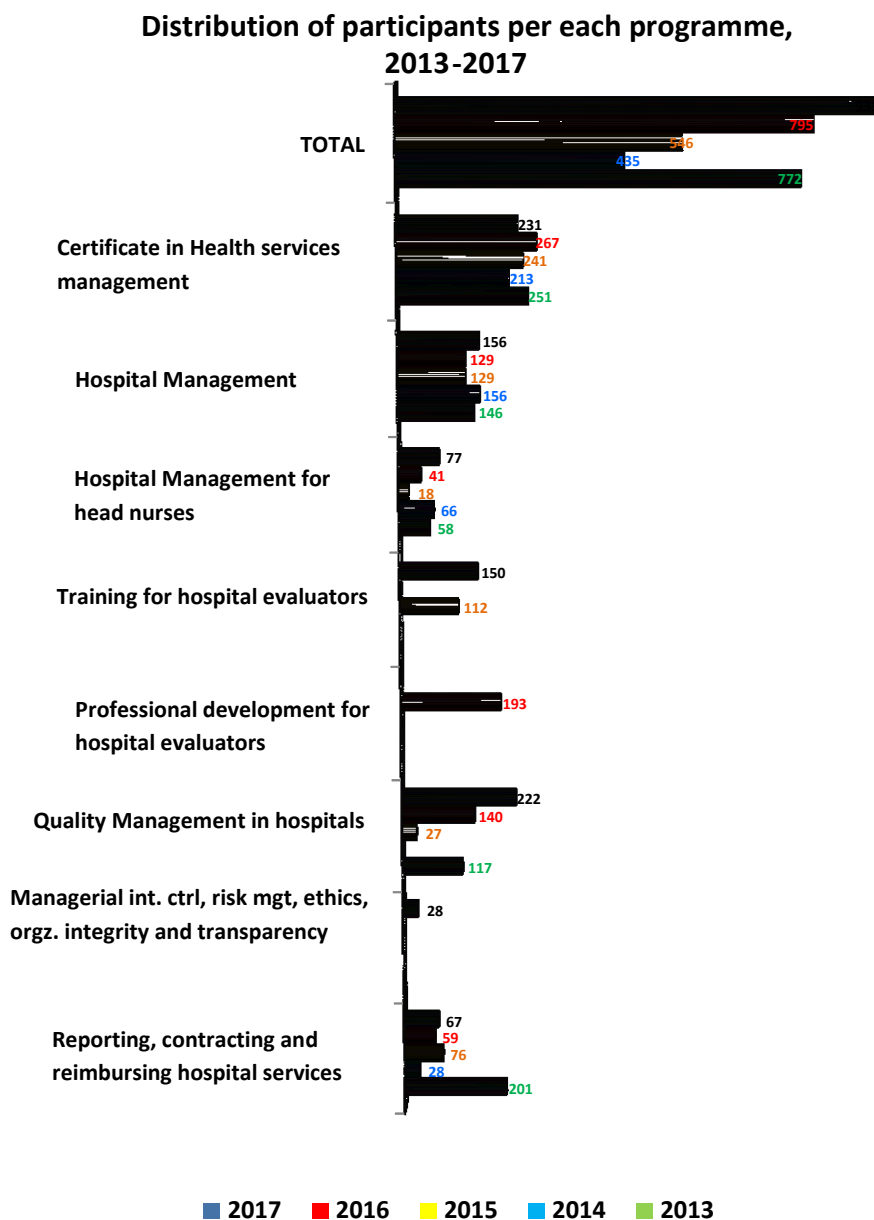
The Training Programme for hospital evaluators, organized in collaboration with the National Authority for Quality Management in Health (NAQMH), stopped in 2016 in order to prepare the professional development for hospital evaluators trained by the NAQMH before this collaborative program, had six series and 150 course participants.

In 2017, at request of the Public Health Authority of Bacău County, CMHP has provided a short training programme (30 course hours) on the subject “*Managerial internal control, risk management, ethics, organizational integrity and transparency*”, for a number of 28 participants working in PHA Bacău.

Our Center of Research and Evaluation of Health Services has organized and delivered in 2017 two series of training on the subject of reporting the patient minimum data set, dedicated to personnel in charge with reporting and monitoring of hospital clinical activities, named *Reporting, contracting and reimbursing the hospital services*, and amounting a number of 67 attendants.

Analyzing the evolution of number of participants in training programs provided by NSPHMPDB during the period 2013-2017 (see Figure 1), as well as for the number of series, a continuous increase in the number of total participants, since 2014, is observed. This ascent is caused by the new programmes of training and professional development dedicated to hospital evaluators, and re-launch /review of training programme Quality management in hospitals, on one hand, and by an increase in the number of requests for training in hospital management, for both hospital managers and head nurses, on the other hand.

Figure 1. Distribution of number of course participants per programme type during the period 2013-2017



NSPHMPDB lecturers have taught a total number of 1,832 course hours during the year 2017, an increase in comparison with the courses held previous years (1,626 in 2016, 1,216 in 2015, and 928 in 2014). The share of course hours taught by our own lecturers, of 71% out of the total 2,572 hours in 2017, has increased towards 2016, when it was 68%, the rest of courses being taught by external collaborators.

Besides the partnership with the National Authority for Quality Management in Health (NAQMH) signed for the training and professional development of the hospital evaluators, NSPHMPDB has also done partnerships with nine hospitals from Bucharest, in order to offer a practical training for NSPHMPDB course participants. Four of these partnerships (signed with Emergency Clinical Hospital “Bagdasar Arseni”, Clinical Hospital for Infectious Diseases

“Victor Babeș”, Oncological Institute Bucharest and National Institute for Mother-and-Child Health “Alessandrescu-Rusescu”) have been signed in 2017.

NSPHMPDB has signed over 30 partnerships with hospitals interested in offering professional continuous education for their employees. These contracts are renewed every year. 12 of those partnerships (with City Hospital “King Carol I” Costești – Argeș County, County Emergency Hospital Vaslui, National Institute for Mother-and-Child Health “Alessandrescu-Rusescu”, Municipal Clinical Hospital Cluj Napoca, Municipal Hospital Fălticeni, City Hospital Găești, City Hospital Abrud, Rehabilitation Hospital Brădet, County Emergency Hospital Pitești, Obstetrics & Gynecology Hospital Buftea, “Bioderm Medical Center” Ltd. Hospital, and BAU MAN Construct Ltd. Hospital) have been active in 2017.

Given the interest expressed by the hospital specialists to participate in short courses on different fields of hospital management, in 2017 we developed and approved a methodology of registration for participation in distinct modules within the *Hospital Management* programme, depending on participant interests, in order to facilitate participation in such courses. After attending, a participation certificate is issued mentioning the course module name and period.

Both the contents and organizing manner of our training programmes have been reviewed during 2017, for the purpose of continuous quality improvement of the training offered by NSPHMPDB. In terms of training contents, the structure of *Hospital Management* training Programme has been updated, by introducing a new module titled “Public finances at hospital level” and changing the order of modules “Financial management” and “Health systems comparative analysis” within the general structure. Scope and content of the module “Standardization, accreditation and internal control in hospitals” have also been updated, given the changes brought by forthcoming of the second edition of Hospital Accreditation Standards. Other three training programmes updated in terms of structure, curriculum and/or course materials, are as following: *Hospital Management for head nurses and nurse superiors*, *Quality Management in hospitals*, and *Training programme for hospital evaluators*.

In order to provide quality training, criteria of selecting external lecturers for the training and professional development programmes offered by NSPHMPDB, have been updated, while minimum grade at the two examinations within the final exam has been set as 7.00 for graduation the Programme *Hospital Management*. Changing the regulations of organizing and providing our training programmes has aimed the clarification or complementation of provisions, in order to get a better explanation and eliminate the risk of misinterpretation, and also to get a more accountable secretariat. Changes and addendum of the course regulations have pointed aspects such as: applicant registration, payment of the tuition fees, terms of issuing scripts to the course attendants by request, organization of the final exam. 11 operational procedures of various activities associated with training within the CMHP, have also been reviewed.

In 2017, the National Center for Professional Development in Health (NCPDH) has organized a number of 156 course series in total, for 4,167 course participants. Out of the eight programme types organized by NCPDH, the e-learning programmes, conceptually developed during the year 2016, have been provided in premiere in 2017. The structure of training programmes, the number of course series, and the number de participants in 2017, is presented in Table 2 below.

Table 2. Number of training programmes, series and participants per each program type as organized by NCPDH during 2017

Training programme	Number of programmes per type	Total no. of series per each program		Total no. of participants per each program type	
		2017	2016	2017	2016
Certificate Programme	20	42	69	856	1163
CME for personnel with higher education	7	23	28	792	1105
CME nurses, ambulance drivers, caregivers	9	41	39	1608	898
CME physiotherapists	2	2	7	37	128
Training and evaluation of trainers	5	5	4	64	51
Specialization for nurses	5	23	22	685	729
Internships	6	15	25	28	80
DCME e-learning	5	5	-	97	-
Total	59	156	194	4167	4154

A comparative analysis of NCPDH activities in time (Figure 2, Figure 3) indicates that, whereas the total number of course series have decreased in 2017 comparative with 2016, coming back to the previous values (since 2014-2015), the number of course participants in these programmes has slightly increased towards 2016. This is explained by the fact that for many programmes, the number of attendants registered per series was bigger than the one in 2016. In the case of certificate programmes, for example, although the number of series organized in 2017 dropped by 40% compared to 2016, number of participants has decreased of just 26%. An important increase of number of trainees (56%), and not of the series organized, has been registered for continuous medical education dedicated to nurses, ambulance drivers and caregivers. Expansion was due especially to the large number of requests for training in transfusion medicine and also for training the ambulance drivers. 97 participants have been registered for our e-learning programmes, conceptually and factually introduced in 2016, but running since 2017.

This change has influenced the distribution of course participants depending on the program type, so, if in 2016 the most attendants were registered at certificate training programmes (28%), followed by the participants in continuous medical education for physiotherapist (26.6%), the highest share of attendants (38.5%) has been registered in 2017 for continuous medical education dedicated to personnel with secondary education (Figure 4).

Figure 2. Evolution of each type of training programme organized by the NCPDH during 2014-2017

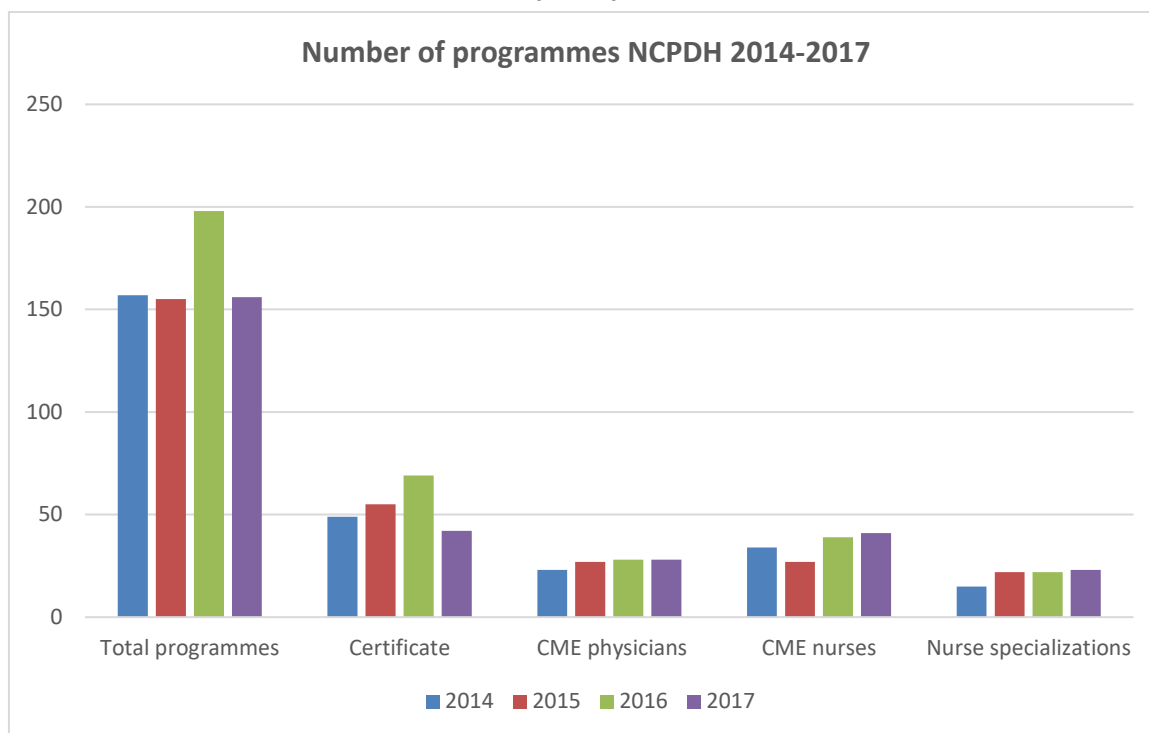


Figure 3. Evolution of number of participants in training programmes organized by the NCPDH during 2014-2017, per each programme

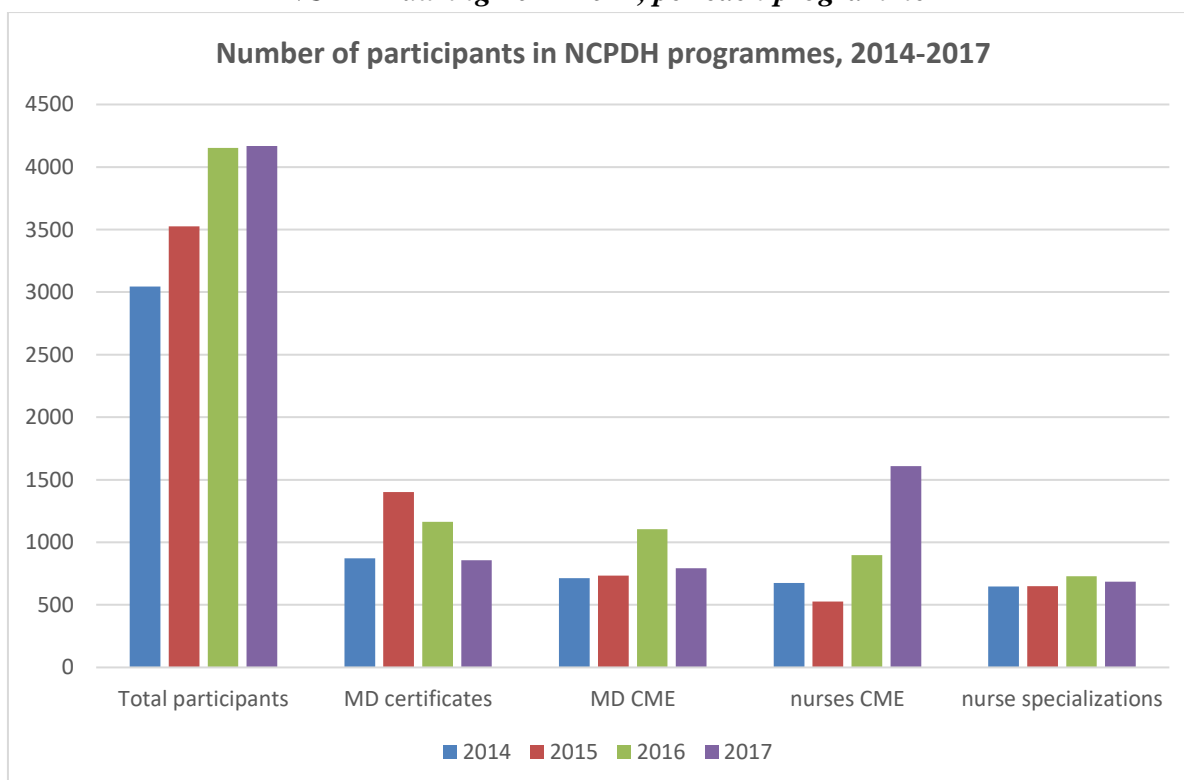
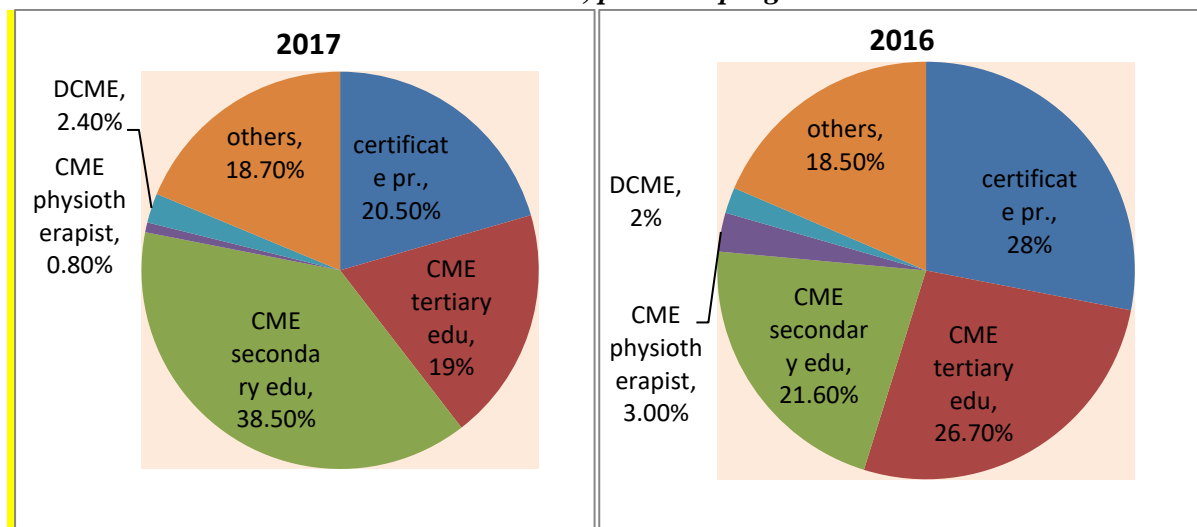


Figure 4. Distribution of participants in training programmes organized by NCPDH in 2017 and 2016, per each program



In 2017, the National Center for Professional Development in Health acted for diversification of their current programmes of training and development professional, as well as for initiation of new ones, in accordance with the training needs as identified. Therefore, NCPDH specialists have participated in the elaboration of legislative framework regarding the training dedicated to nurses, *MoH Order no. 942 / August 25, 2017 - approval of norms for organizing and providing specialization training for vocational reconversion, as well as developing professional skills for general nurses and midwives*, regulating the extension of specialization for nurses in other 19 specialties (pediatrics, palliative care, psychiatry, dental medicine, community medical assistance, neonatology, anesthesiology and intensive care, pneumophtisiology, anatomical pathology, operating room, geriatrics and gerontology, diabetes, oncology, nephrology/ hemodialysis and peritoneal dialysis, cardiology, gastroenterology, radiotherapy, CT/ MR operator, pharmaceutical laboratory), besides the five already existing (radiology and medical imaging, laboratory, nutrition and dietetics, hydro physiotherapy, hygiene and public health). NCPDH has also coordinated the development of these programmes, which are to be started and implemented in 2018. Most advanced specialization programs are: dental medicine, pneumophtisiology, nephrology/ hemodialysis and peritoneal dialysis, CT/ MR operator, cardiology, and palliative care.

NCPDH has participated in preparation of training programmes regulated by the Government Decision *no. 741 / October 24, 2016 - approval of technical and health norms regarding funeral services, inhumation, incineration, transport, disinterment and reinterment of human bodies, cemeteries, human crematories, as well as professional criteria to be met by the providers of funeral services and the level of guarantee fund*, and in elaboration of the Ministry of Health Order for course curriculum and methodology of programme organization, based on Government Decision no. 741/2016, a document being in process of approval.

New training programmes, introduced in 2017, are those for distance continuous medical education (e-learning). Thus, four programmes conceptually developed in 2016 (*Introduction in dynamic evolution system in homeopathy; Prevention and management of malpractice cases; Earn time and trust in relationship with your patient; and Core principles of Indian traditional medicine – Ayurveda*). More three programmes have been developed in 2017: *Dynamic evolution System in homeopathy - video course; How you can change the future*

– *role of health professionals in preparation for conception and pregnancy*; and *Role of health professionals in development of child delivery*; out of these, the first one has already been provided.

Two new operational procedures – regarding e-learning programmes and specialization programmes for nurses (new ones) have been initiated, and concurrently, the operational procedures regarding other five training programmes have been reviewed in 2017, in order to improve the quality of training programmes organized by NCPDH.

II. Developing our scientific research activity and improving the capitalization of our scientific research results

Scientific research is a core characteristic of NSPHMPDB, next to training. Based on scientific results and data, NSPHMPDB provides consultancy and technical assistance in public health and health services management, to decision makers at central level (the Ministry of Health, the National Social Health Insurance Fund, etc.), and also to other institutions within the health system (local authorities, hospitals, NGOs, etc.). Another way for capitalization of research results is to publish scientific articles and to communicate them within national and international scientific events.

Main objectives of NSPHMPDB Development Strategy 2016-2020, in terms of de research activities and capitalization of results, are the following:

- Selecting research themes in concordance with the current needs of the Romanian health system, with priorities identified at European level, and with NSPHMPDB expertise;
- Continuing the research in hospital services management, through new studies of topical interest, using NSPHMPDB professional expertise and experience, and according to the needs expressed by the main stakeholders (MoH, NSHIF, NAQMH, hospitals);
- Training needs assessment in the field of public health and health management, and conducting impact studies that underlie future training programmes;
- Proper dissemination and capitalization of results of NSPHMPDB studies and research projects;
- Improving research methodologies, protocols and procedures related to scientific research activities within NSPHMPDB.

In 2017, at NSPHMPDB level there were three running projects financed through the European Commission programmes.

Two projects are running within the third EU Public Health Program (2014-2020) of the Directorate-General for Health and Food Safety (DG SANTE), administered by the European

Commission, with support of the Consumers, Health, Agriculture and Food Executive Agency (CHAFEA):

- EUnetHTA JA3 2016-2020, “European Network for HTA - Joint Action 3”;
- ADVANTAGE 2016-2019, “Managing Frailty. A comprehensive approach to promote a disability-free advanced age in Europe: the ADVANTAGE initiative“.

Another project is running within the 7th Framework Program for Technological Research and Development (FP7) of the Directorate-General for Research and Innovation (DG RTD):

- CEPHOS-LINK 2014-2017, “Comparative Effectiveness Research on Psychiatric Hospitalization by Record Linkage of large Administrative data Sets”.

In 2017, NSPHMPDB has also participated in initiation of other two projects:

- one project is approved for financing within the third EU Public Health Program (2014-2020) of the Directorate-General for Health and Food Safety (DG SANTE), administered by the European Commission with support of the Consumers, Health, Agriculture and Food Executive Agency (CHAFEA) – “Joint Action on Health Inequalities” (JA-HI).
- another project is approved for financing within the Human Capital Operational Programme 2014-2020, Priority Axis 4 – Improving competency level of professionals in health sector – “National modular Programme for improving the professional level of medical personnel working on the system of national defense, public order and national safety” (108196).

“European Network for HTA - Joint Action 3” (EUnetHTA JA3)

Financing source: European Commission - DG SANTE and own sources.

Project duration: four years (2016-2020).

Partners: EUnetHTA JA 3 Project is carried out by a Consortium of 79 partners from 29 countries, and coordinated by the National Health Care Institute of Netherlands.

Network website: <http://www.eunetha.eu/>

Purpose of the project is to implement a sustainable model of scientific technical and cooperation in health technology assessment at European level.

Strategic Objectives of the EUnetHTA JA3 are:

- Improving the process of implementation of the HTA tools through an international collaborative approach in HTA;
- Strengthening and improving collaborations within the EuNetHTA network, leading to a better understanding (by the EC and EU Member States) of the methods for establishing a stable HTA structure at the European Union level;
- Developing a general strategy including principles and proposals for implementing a sustainable collaboration at European level, in accordance with the provisions of the article 15 from “The Directive for cross-border healthcare”;
- Creating an efficient collaboration framework in the field of rapid health technology assessment;
- Homogenizing/standardizing the HTA reports utilized for decisions regarding the reimbursement of health services and elaboration of clinical practice guidelines.

Expected results:

Current initiative continues the previous projects EUnetHTA JA1 and EUnetHTA JA2. This third phase is based on the previous joints, finalized into a series of tools necessary for transnational collaboration between the members of the HTA network, resulting in HTA reports produced.

The main expected result is definition and implementation of a permanent sustainable network for collaboration in health technology assessment in Europe. Additional results will be the following:

- Producing at least 50 HTA reports per year;
- Improving the quality of the HTA reports, adaptation and utilization at national level of the collaborative reports;
- Improving the health decision making and health policy making in the Member States based on information disseminated, in order to protect the citizens against those unsafe and ineffective health technologies, and finally improving the health status of population.

Within this project, NSPHMPDB participates in 4 working groups:

WP4 – Joint production of HTA reports through international collaboration;

WP5 – Life-cycle approach to improve the evidence generation;

WP6 – Quality management assurance, scientific guidelines and tools;

WP7 – National implementation and impact evaluation.

In 2017, NSPHMPDB has been involved in many professional activities, some of them finalized while others still running. Activities finalized in 2017:

- Participation of four NSPHMPDB experts (see Annex no. 2), as coauthors, in elaboration of Rapid Assessment Report “Antibacterial-coated Sutures Versus Non-Antibacterial-Coated Sutures for the Prevention of Abdominal, Superficial and Deep Incisional, Surgical Site Infection (SSI)” – published in April 2017;
- Participation of the NSPHMPDB, as coauthor, in elaboration of the document “Quality Management training concept paper” (WP6);
- Revision of the guide “Critical appraisal of economic evaluation” (WP 6);
- Revision of two standard operational procedures (SOP-Standard Operational Procedures), within WP6: “Medical editing of draft assessment report”, and “External review of 2nd draft project by external experts and patients”;
- Review documents elaborated by other partners within the work packages WP5 and WP7;
- Participation in five direct meetings organized within the work packages WP1, WP4, WP6, WP5, and WP7;
- Participation in eight meetings organized by electronic communication systems within the work packages WP4, WP5, WP6, and WP7;
- Participation for EUnetHTA in the Round Table for Europe organized within the ISPOR Annual European Congress (International Society for Pharmacoeconomics and Outcomes Research), where the following issues have been discussed: the new



regulations regarding the medical devices, using information from atypical data sources found in current medical practice in health technology assessment, and establishing priorities in health technology assessment.



Activities initiated during the year 2017, to be further finalized:

- Participation in quality de author, in collaboration with other working group partners of WP4, in writing a paper with recommendations regarding the identification, selection and prioritization of health technologies to be assessed “Horizon Scanning: Recommendations for a Topic selection, Identification and Prioritization”;
- Review of three standard operational procedures (SOP-Standard Operational Procedures), within WP6: “Call for collaboration and formation of assessment team”, “Risk of bias assessment of clinical studies”, and “Queries to authors”.

“Managing Frailty. A comprehensive approach to promote a disability-free advanced age in Europe: the ADVANTAGE initiative” (ADVANTAGE)

Financing source: the European Commission - DG SANTE, and own sources.

Project duration: 3 years (2016-2019).

Partners: Project ADVANTAGE is represented by a consortium of 35 partners, coordinated by the “Fundacion para la Investigacion Biomedica del Hospital Universitario de Getafe” of Spain.

Website: <http://www.advantageja.eu/>

The purpose of the project is to achieve a common understanding of the condition and term “frailty”, to be further utilized in all the EU Member States. This should become the basis of a joint management at both individual level, and at of the elderly, persons fragile or at risk for developing frailty. Identifying basic components of frailty a its proper management should promote the need for changing the organization and implementation of health care services and social services, in order to provide patterns of care; existing results at national level will allow Member States to deal with this challenge within a joint framework.



Project Objectives:

The Project will brief the current “frailty” management at both individual level, and in general population, will collect information about developing programmes for approaching “frailty” in elderly, and will finally propose, as main outcome, a common European framework to tackle “frailty”. This outcome will include a road map setting the stages to be covered on short, medium, and long term. This road map will propose measurements/ evaluations for implementation of health and social services (in order to meet the current unsatisfied needs, bigger in people at risk of “frailty”), and also, by using the same approach, will collect/identify existing deficiencies of knowledge in this subject matter.

Specific Objectives of the Project ADVANTAGE:

- Standardize assessment of “frailty” at individual level (definition, diagnosis);
- Identify clinical aspects, evaluate comorbidities;
- Identify prevalence in population;
- Identify pathway and transitional stages of “frailty”;
- Explore strategies, obstacles, and opportunities;
- Review the individual data management;
- Elaborate clinical practice guidelines for prevention and clinical management;
- Identify and disseminate the examples of good practice;
- Analyze the impact of individual models of care;
- Transfer information and practices;
- Analyze the integration of medical and social services;
- Analyze the costs and benefits.

Expected results:

- Finding a common definition of the term “frailty”;
- Standardized diagnosis;
- Identifying the prevalence of frailty in population;
- Drawing the pathway of “frail” patients and define transitional stages of “frailty”;
- Identifying strategies, obstacles and opportunities;
- Elaborating clinical practice guidelines for prevention and clinical management;
- Dissemination of good practice examples;
- Results of the analysis of integrated medical and social services;
- Results of the analysis of costs and benefits.

NSPHMPDB participates within this project in 4 working groups:
 WP2 – communication, awareness / acknowledgement and dissemination;
 WP4 – understanding the phenomenon at individual level;
 WP5 – understanding the phenomenon at the population level;
 WP7 – models of care for preventing or slowing “frailty”, in order to make the elderly living better lives.

The following project activities were performed in 2017 with the contribution of NSPHMPD:

- Initial project meeting for establishing roles and activities specific for each partner institution within the joint action and finalizing the project Activity Plan;
- Participation in project meetings organized through electronic communication systems within WP4, WP5, WP7;
- Participation in the organization of the local/regional meetings with the *stakeholders* for the purpose of project dissemination and increase awareness of decision makers regarding the importance of “frailty”, within WP2;
- Participation in elaboration of systematic literature reviews on the following themes: defining the concept of “frailty”, relationship between chronic diseases (such as diabetes mellitus, cardiac failure) and “frailty”;
- Revision of documents elaborated by other partners within the work packages WP4, WP5, and WP7: the “State of The Art” Report on “frailty” prevention and management, and the annual reports elaborated within the work packages;
- Participation in writing 4 abstracts for disseminating in scientific articles within WP5, and other 2 abstracts within WP7.



“Comparative Effectiveness Research on Psychiatric Hospitalization by Record Linkage of large Administrative data Sets” (CEPHOS-LINK)

Financing source: European Commission - FP7 and own sources.

Project period: 3 years (2014 – 2017).

Partners: Consortium of seven partners from six European countries (Finland, Austria, Romania, Norway, Italy, Slovenia), under the coordination of the National Institute for Health and Welfare, Finland.

The purpose of the project is to reduce hospital readmissions and support the continuity of care post-discharge for the psychiatric patients.

General Objective of the project is to compare different types of health services in terms of differences registered between results of hospital readmissions in adults discharged with psychiatric diagnostics, and identify patient-related factors, medical service or health system, which may influence the models of rehospitalization. It will be achieved through the comparative analysis of data related to daily practice from six European countries, thus

improving the level of knowledge and elaborating tools for supporting decision-making in mental health.

Specific Objectives:

- Comparing within an observational study the results of rehospitalization in patients discharged with main or secondary psychiatric diagnostic, in terms of their treatment in two different hospitals, from six European countries:
 - treatment of patients in a psychiatry hospital / ward;
 - treatment of patients in a non-psychiatric hospital / ward, and identification of specific factors at patient, medical service and system level, related to hospital readmissions, in a 18-months-period.
- Comparing results in patients discharged with main or secondary psychiatric diagnostic from a psychiatry hospital / ward in six European countries, having two different types of interventions post-discharge:
 - post-discharge registration of patients by an ambulatory psychiatric service;
 - absence of specialized medical care, and identifying its influence and of other factors related to readmission, within a 18-months-period.
- Develop a set of tools for achieving descriptive studies in mental health in and between the European countries, in order to improve the evaluation of the mental health services in Europe.
- Elaborate recommendations, clinical practice guidelines and a set of tools for mental health decision-makers, in order to improve the understanding of factors influencing the hospital readmission of psychiatric patients.

Project closing conference took place in Helsinki, on March 23-24, 2017.

Results of this project have been disseminated through many publications and papers presented at international conferences. Publications presented have consisted in literature systematic reviews, and also papers of comparative analysis of data on mental health services from countries participating in the project. Our DRG hospital database (DRG_National) has been used for primary research within this project.

One comparison was made for the rate of hospital readmission within 30 days of discharge – a performance indicator of the health system. In Romania, rate of psychiatric hospital readmission for a cohort of patients discharged in 2013 and observed during one year, was 41%, representing the highest percentage among the countries involved in the project, registering values between 22% and 34%. Within CEPHOS-LINK Project, a literature review has highlighted post-discharge factors of influence over psychiatric hospital readmission. The role of continuity of post-discharge care and contact with a specialist in ambulatory in decreasing the number of readmissions within the 30-days period of hospital discharge, has especially been observed among other factors. In Romania, post-discharge monitoring is not currently included in the list of health services quality indicators,



as opposed to other countries where 7 or 30 days post-discharge monitoring accounts for performance indicators of the health system.

Within the project methods data analysis and data interconnection models have been elaborated, as well as one conceptual model for exploring data regarding psychiatric hospital readmissions, called “Decision Support System” (DSS), able to model more scenarios depending on the readmission rates and associated costs. System has three components: country characteristics, health system characteristics, and care services characteristics, each of them holding one set of variables. After entering the variables, the system will calculate the hospital readmission rate and their correspondent cost in Euro (adjusted with the purchasing-parity-power), at three levels: highest, medium and lowest cost.

Projects initiated in 2017

NSPHMPDB has been authorized by the Ministry of Health, in 2017, to participate in the Joint Action on Health Inequities, to be developed within the third Health Program financed by the European Commission. NSPHMPDB has become partner and participated in the elaboration of three project proposals sent for financing in European Funds within the Operational Programme Human Capital 2014-2020, Priority Axis 4 (OPHC). After the technical and financial evaluation, two proposals have been rejected, while one proposal has been admitted.

“Joint Action on Health Inequalities” (JA-HI)

Financing source: European Commission - DG SANTE and own sources.

Project duration: 3 years (2018-2021).

Partners: Project is directed by a consortium consisting in 25 partners, coordinated by the National Health Institute in Italy (Istituto Superiore di Sanita). Other 24 institutions from EU Member States participate as affiliates or collaborators. Within this project, NSPHMPDB is associated with the National Institute for Mother-and-Child Health "Alessandrescu - Rusescu" Bucharest – as affiliated institution.

The purpose of this project is to improve the health status and well-being of the EU citizens and to attain a higher equity in terms of final results with lifelong impact on the health of all groups of society by a strong focus on socio-economic determinants of health, as well as on inequalities related to the life style.

Specific Objectives:

- Providing a clear policy-framework, including a list of actions and recommendations for implementation at national, regional and local level;
- Developing more effective policies at national, regional and local level, and improving their monitoring, governance, implementation and evaluation;
- Implementing “good practices” and facilitate experience exchange between EU Member States, in order to acquire new knowledge and practices;
- Identifying success factors, barriers and challenges, as well as ways of overcoming them.

Project activities will be achieved within 9 work packages:

WP 1 - Management actions;

WP 2 - Dissemination results;

WP 3 - Evaluation actions;

WP 4 - National policy integration and project sustainability;

WP 5 - Monitoring activities;
WP 6 - Healthy environment;
WP 7 - Migration and health;
WP 8 - Improving the access to health services and related social services;
WP 9 - Health and equity in all policies – Governance.

Expected results:

- An action framework for reducing health inequities in the EU and Member States;
- Evaluations and recommendations at national level about reducing inequities among EU Member States;
- Report of lessons learned from case studies regarding actions of fighting against inequalities and actions for counteracting challenges related to health inequalities – reports on each WP, and one final report;
- Final results of this project will be translated into materials useful for policy makers and stakeholders, such as: policy synthesis, graphic information, video materials, and materials for communicating EU evidences at local level.

Proposal is in negotiations with the Consumers, Health, Agriculture and Food Executive Agency (CHAFEA), and presumptive date of start is the end of the month March.

“National modular Programme for improving the professional level of medical personnel working in the national system of defense, public order and security” (code SMIS108196)

Financing source: Operational Programme Human Capital 2014-2020, Priority Axis 4 - Social inclusion and fight poverty, Specific Objective 4.8 – „Improvement of competence of health care professionals”, and own sources.

Project duration: 30 months (26.02.2018-25.08.2020).

Partners: Project is carried out by the Emergency Hospital "Prof. Dr. Dimitrie Gerota" of the Ministry of Internal Affairs (MIA), in collaboration with the Central Military University Emergency Hospital „Dr. Carol Davila”, Clinic Emergency Hospital „Prof. Dr. Agrippa Ionescu” (UM 0521), and the National School of Public health, Management and Professional Development. Project also has other five associated partners: Medical Department of MAI, the Ministry of National Defense, Medical Department of the National Agency of Penitentiaries, Medical Center of the Security and Protection Service, Medical Center of the Special Communication Service.

Purpose of the project is to increase the quality of medical care in medical facilities from the public order and defense system, by providing a unitary training program implemented at national level, leading to the improvement of the professional level of skills and competency in the target group.

Specific Objectives of the project:

1. Improving the professional skills on major non-communicable diseases (NCD) of 1300 medical staff from all the country regions involved in priority health programmes in the field of public order, security and defense, through modular courses.
2. Improving the professional skills on major non-communicable diseases of 60 medical staff from all the country regions involved in priority health programmes in the field of public order, security and defense, through exchanging experience/ exchanging good practices in Europe, especially in similar military hospitals.

Role of NSPHMPDB within this project consists in:

- Composing the educational packages on the format suitable for adult education principles (course participant manual, trainer manual);
- Accrediting the CME programmes for nurses and requesting credits from the ROGNMPN (making the accreditation files);
- Accrediting the CME programmes for physicians and requesting credits from the RCPH (making the accreditation files);
- Elaborating an e-learning module for nurses / physicians;
- Certificating nurses and physicians who took their degrees on CME programmes.

Expected results:

1. 1300 persons benefiting from training and/or exchanging good practices, out of whom: 1170 persons coming from less-developed regions, and 130 persons coming from developed regions.
2. 1300 persons who improved their qualification level, out of whom: 1170 persons coming from less-developed regions, and 130 persons from developed regions.
3. 60 persons benefiting from exchanging of good practices.

The Project has been admitted after technical and financial evaluation, and it is in the prestart phase.

Most of our research activity and especially utilization of research results in projects of consultancy and technical assistance are based on hospital patient data collected by NSPHMPDB through *the Center of Research and Evaluation of Health Services*. CREHS receive reports of all Romanian hospitals in contract with the National Social Health Insurance Fund (NSHIF), and administer the DRG_National data basis. According to the legislative provisions, NSPHMPDB collect and validate patient data for all hospital discharges, evaluate the activity and performance of health care providers, quality of medical services, monitor quality standards of data collected, and propose methodologies for calculating the hospital reimbursement tariffs. CREHS experts study and elaborate proposals for developing the current patient classification system, and cost calculation methodologies, participate in elaboration of methods for adjusting the reimbursement of hospitals, criteria for evaluating the management performance and tools for their comparative evaluation.

In 2017, both application for data collection DRG_National, as well as applications for data import and data processing, have been updated, by integrating the changes entailed by the legislative provisions in force.

Within the contract of signed with the NSHIF, quarterly analysis regarding the clinical activity of hospitals, aiming at identification of those issues impacting the hospital reimbursement, i.e.:

- Identify the first 50 hospitals reporting the highest proportion of expensive DRGs, of the total hospital discharges reported and validated;
- Identify the hospital reporting and coding errors which flag problems impacting the reimbursement;
- Identify the first 10 surgical procedures generating the highest differences in patient classification, in terms of DRG weighted cases.

Six reports on certain aspects of hospital activity have also been elaborated, as following:

- Proportion of patients admitted as „emergency”, per hospitals and hospital wards;
- The most frequent 20 types of hospital cases and services reported in day-care;
- The Case-mix Index (CMI) achieved per hospital, in relation to their CMI value published within the National Framework Contract Norms (achieved within the previous year);
- Variation of the Case-mix Index achieved per hospital ward, in relation to the national average calculated for that specialty (for example general surgery);
- Evolution of hospital cases readmitted in 48 hours period for the same pathology, within the same type of hospital care;
- Medical procedures and laboratory medical tests worked for hospital day-care, per types of services.

Technical assistance has been provided to the National Social Health Insurance Fund in 2017 by participating in working group for elaboration of the National Framework Contract Norms 2018, as well as technical assistance and methodological support for the purpose of accurate reporting, provided to 170 hospitals per month on average, by phone (150 calls/month on average), by e-mail (30 e-mail messages/month on average), and 10 letters received on average by fax and direct visits at NSPHMPDB. Technical assistance and methodological support have also been provided to the specialists of the General Department for Monitoring and Control (GDMC) of the NSHIF and of the county health insurance funds (DHIF) to enable skilled controls regarding the quality of clinical coding in hospitals. A number of 30 employees of GDMC and DHIF have been trained on this subject matter.

One study based on a questionnaire sent to the hospital staff, has indicated an increased interest for training in clinical coding. Therefore, 61% of the hospitals would send to this training less than 5 persons, 22% would send between 6 - 10 persons, 11% between 11 - 20 persons, while 6% hospitals would send even 20 up to 50 persons to be trained on clinical coding. In terms of Clinical Coding Standards, the needs for training include on the first place coding of diagnostics of the following systems: Respiratory System, Digestive System, Circulatory System, and Genital-urinary System; and the coding of procedures corresponding to the following chapters: Digestive System, medical imaging services, Urinary System, and Respiratory System. Results of this study will be taken into consideration in elaboration of our DRG training programmes.

DRG_National data basis has been used on the elaboration of two scientific papers regarding the sizing of regional hospitals and estimate the health system efficiency, being published in the NSPHMPDB journal (see Annex 1), as well as of other two scientific papers presented in the National Conference of Pharmaco-economics and Health Management organized in Târgu Mureş (see Annex 2). By the exploitation of the DRG data base, and on basis of professional knowledge and expertise in public health of our personnel, NSPHMPDB provided consultancy and technical assistance for central and local authorities:

- supporting financial and economic analysis performed by the experts of the European Investment Bank, employed by the Ministry of Health, to elaborate technical documentation necessary for financing application from non-reimbursable structural funds, of the construction of three regional emergency hospitals in Cluj, Iaşi and Craiova;
- participating in various working groups organized by the Ministry of Health: “Implementation of standardized cost accounting system within a subgroup of hospitals for updating the reimbursement system”, “Implementing outpatient specialized medical care”,

“Voluntary health insurance system implementation and development”, “Rehabilitation/modernization/ enlargement/ endowment of the ambulatory infrastructure, including the ones resulting from reorganization/ rationalization of the small hospitals”, “Rehabilitation/modernization/ enlargement/ endowment of infrastructure of the emergency care units”, “Annual adjustment of maximal prices of human use drugs”, ”Health Technology Assessment”;

- Participation in two actions organized by Control Department of the Ministry of Health at the Clinical Institute of Urology and Kidney Transplant Cluj, and the City Emergency Hospital Târgu Cărbunești;
- Technical assistance provided to specialty commissions of the Ministry of Health in order to update therapeutic protocols (within the Dermatovenerology Commission) and negotiate cost-volume contract for certain treatments (Oncology Commission);
- Consultancy provided to the National Institute of Statistics in order to complete the statistics of hospitalized morbidity as requested by the OECD, Eurostat, and WHO since 2015;
- Consultancy for Bacău City Hall regarding the complementary operation of Municipal Hospital Bacău and County Emergency Hospital Bacău;
- Participating in the Commission for Evaluation of the activity of managers of the public hospitals under the authority of Vâlcea County Council.

DRG data basis is also used for analysis requested by third parties based on contracts or collaboration conventions. The following analysis reports have been carried out during the year 2017:

- Proportion of the patients discharged and readmitted in another hospital for the same type of pathology, within a 48 hours period after discharge, calculated on the basis of data reported by the ELYTIS HOSPITAL HOPE in 2016;
- Consultancy for calculating certain indicators on the basis of data reported by the Romanian hospitals regarding their admissions and day care, during 2015 and 2016;
- Consultancy for calculating certain indicators on the basis of data reported by the Romanian hospitals in 2015: number of patients and number of episodes of care, their costs theoretically reimbursed, and hospital deceases per age groups;
- Analysis of hospital data collected in DRG system related to five categories of diseases attributable to smoking, as selected by the beneficiary, period April 1st, 2013 – April 1st, 2017;
- Analysis of hospital data collected in DRG system related to the number of cases with liver pathology discharged between the years 2006-2016;
- Analysis of hospital data collected in DRG system related to the number of cases discharged in total din hospitals din Cluj, Braşov and Bucharest, and particularly from their wards of General Surgery, Neurosurgery, Obstetrics-Gynecology, and Orthopedics;
- Analysis of hospital cases reported to NSPHMPDB by Cluj public and private healthcare providers for their patients residing in Cluj city and neighboring villages Chinteni, Apahida, Feleacu, Ciurila, Tureni, Floreşti and Baciui, during the period 2007-2016;
- Analysis of number of laparoscopic surgical cases and the number of open-surgery cases, during the period 2007-2016;
- Consultancy regarding analysis of cases reported in the DRG_National data basis (continuous hospital admissions), with the diagnostic of infectious gastroenteritis, during the period 2006-2015.

Results of the research and studies performed by the NSPHMPDB are disseminated mainly by articles published in our journal or in other scientific journals, as well as by participating in scientific events. Scientific activity achieved by the NSPHMPDB in 2017 have been disseminated through:

- 43 published articles, out of which 32 articles in journals indexed in ISI (see Annex 1);
- participation as co-author, in collaboration with other European institutions, in writing a rapid assessment effectiveness report, by using HTA@Core Model on-line, on the subject “Antibacterial-coated sutures versus non-antibacterial-coated sutures for the prevention of abdominal, superficial and deep incisional, surgical site infection (SSI)”, elaborated within the EUnetHTA Project;
- 8 scientific communications in international conferences, and other 4 communications in national conferences (see Annex 2).

NSPHMPDB experts have also achieved 18 protocol reviews or systematic literature reviews, within the JBI network, receiving public recognition from the editors of Joanna Briggs Institute journal (Annex 3).

In order to continuously improve the quality of activities carried out within the Center of Research and Evaluation of Health Services, 18 operational procedures for research have been reviewed and updated in 2017, including the procedures for maintenance and exploitation of DRG_National database, and the ones related to dissemination of research results. Two new procedures related to consultancy services offered to the hospitals or to other entities, have been elaborated.

III. Strengthening the institutional capacity for scientific research and development of the NSPHMPDB

Continuous strengthening of the NSPHMPDB capacity of research and development is one of the three main institutional development directions taken into consideration for the period 2016-2020, and also a condition for reaching the main objectives set for training and research. On one hand, developing new skills and knowledge in order to be able to offer new services and to participate in projects and studies in new areas, and on the other hand, training on subject matters insufficiently covered by the existing personnel, so that to avoid the risk of not being able to provide a service within the context of increased demand or decreased resources available. It is also important to maintain partnership relationships with other institutions at national and European level, as well as with network members where NSPHMPDB is affiliated, in order to increase opportunities of participation in elaboration and implementation of new studies/ projects/ research grants.

Objectives of NSPHMPDB development strategy for period 2016-2020, for strengthening the institutional capacity of research and development, are the following:

- Professionally train and develop the specialized personnel, in order to enlarge their excellence areas and to improve their performance in training and research in public health and health management;
- Continue networking with experts and reference organizations in public health and health management education and research, at national and European/ international level;
- Provide technical endowments necessary for the processes of modern training, and primary and secondary research;
- Improve the visibility of NSPHMPDB training - research - development activities, including through our institutional websites.

21 employees of NSPHMPDB have benefited of professional training in 2017. Out of them, 13 specialists have attended training programmes in fields with a perceived or intended increase of activity volume, or there is a need for more persons having skills and knowledge on a certain area. Out of them:

- 10 persons have participated in the training programme for hospital evaluators, in order to increase the number of lecturers involved in this programme, as well as the level of expertise in quality of hospital services, thus increasing the capacity of NSPHMPDB to access research & development projects in this field;
- one person attended “Comprehensive systematic review training programme”, organized within our the collaboration with the Joanna Briggs Institute;
- one person has been trained in „Microsoft SQL Server 2014 database administration”;
- one person has attended five courses in electronic documentation for accomplishing systematic literature reviews.

Besides course participation, other methods of professional development for personnel were: training at the working place and participation in national and international conferences and scientific events. Thus, five new employees au benefited from methodological guidance



from expert colleagues and direct supervisors, in order to facilitate their integration at working place and to get necessary knowledge and skills. In 2017 five participations in international conferences and scientific events (besides working meetings within the projects and meetings within professional networks in which where NSPHMPDB is affiliated), and 8 participations in national scientific events, have been attained.

NSPHMPDB is a member of main European associations aiming at public health and health management improvement, facilitating exchange of experience and collaboration in research and training, so that to develop and implement policies leading to an improved health status of the population and diminishing inequities. These organizations are:

- ASPHER - Association of Schools of Public Health in the European Region;
- EUPHA - European Public Health Association;
- EHMA - European Health Management Association.

In 2017, NSPHMPDB have participated in the Annual Deans' and Directors' Retreat (of the Public Health Schools in Europe), organized by École des Hautes Études en Santé Publique, in Rennes, France, in the period of May 31st – June 3rd. Role of the public health schools in consolidating local community health and in approaching current global challenges, especially related to migration, professional development of public health workforce. Given the experience in previous projects on human rights for patient care, NSPHMPDB have been co-opted in the new working group created within ASPHER on the subject "Public Health Law".

NSPHMPDB have also participated in the annual meeting of the EUPHA Executive Council, held within the 10th Public Health European Conference on „Sustaining resilient and Healthy Communities”, organized in Stockholm, Sweden, during November 1-4.



NSPHMPDB have participated in EUPHA Conference with four accepted papers of systematic literature review: „Post-Traumatic Stress Disorder in adolescents – factors explaining resilience and risk”, “Impact of dermatological disorders on health, carrier and quality of life”, “Community care in mental health patients”, and “Predictors of Return to Work in Spinal Cord Injury”.

NSPHMPDB is also member in European international networks built on specific areas: scientific counseling in health, health technology assessment, evidence-based medicine, clinical practice guidelines, aiming at exchange professional experience and enlarge institutional framework.

- EUSANH - European Science Advisory Network for Health – set-up as a consequence of one research project financed by the European Commission through the Framework

Programme 7th of the Directorate-General for Research and Innovation (DG RTD), with NSPHMPDB participation);

- EUnetHTA - European network for Health Technology Assessment;
- JBI - Joanna Briggs Institute (international research & development network within the Faculty of Health and Medical Sciences, of Adelaide Medical School, South Australia, where NSPHMPDB is an affiliated center, offering training courses in systematic review, and performing protocol or literature systematic reviews – see Annex 3);
- GIN - Guidelines International Network.



Besides the collaborations within projects and networks in which NSPHMPDB is a partner, in 2017 punctual collaborations or discussed future collaborations have been accomplished with the following institutions: European Observatory for Health Systems and Policies, National Authority for Quality Management in Health, National Institute of Public Health, National Institute of Statistics

in Romania, Business Administration and Faculty of Geography – within the University of Bucharest, the Romanian College of Physicians, Romanian Order of General Nurses, Midwives and Superior Nurses, Institute de Public Policies, Medical School of the Varna University.

In order to cover technical endowments necessary for modern training processes and primary & secondary research, NSPHMPDB have signed partnerships with 9 hospitals in Bucharest for practical training of our course attendants. Four of these (with Clinical Emergency Hospital “Bagdasar Arseni”, Clinic Hospital of Infectious Diseases “V. Babeş”, Oncology Institute of Bucharest, and National Institute for Mother-and-Child Health “Alessandrescu-Rusescu”) have been signed in 2017. Licenses for two SPSS users have been renewed, for research purposes.

Information about NSPHMPDB training and research are presented on the institutional websites <http://www.snspms.ro/>, <https://www.perfmed.ro/>, and <http://www.drg.ro/>. Results of research, news in public health and health management, regarding Romanian health system, as well as news regarding other health systems, are also presented in our journal Management in Health, published by NSPHMPDB.

The journal *Management in Health* (<http://www.managementinhealth.com>) is a quarterly bilingual scientific publication, providing specialized information in general management and health management. Since 2010, journal “Management in Health” succeeded



to enter in category B+ of journals, with score recognition by the National Council of Scientific Research din High education and intercedes continue in order to maintain the journal within this category, and further to fulfill the conditions necessary for the upper category. The journal is indexed in five international data basis as following: Google Scholar, Index Copernicus, DOAJ (Directory of Open Access Journals), SCOPUS and Elsevier, and it is in process of evaluation for scoring by ISI Thompson. Our journal is also credited by the Romanian College of Physicians, with 5 points.

Registration process of the journal “Management in Health” in the data basis PubMed of NCBI (the National Center for Biotechnology Information) has begun in 2017.

The 4 volumes published in 2017 include 29 original articles and four interviews; six of the articles were written by authors or co-authors working as specialists in NSPHMPDB, while 11 of articles were written by authors from abroad. The interviews are addressed to the following personalities in public health and health management – from Romania: Professor Dumitru LUPULEASA – President of the Romanian College of Pharmacists, Assistant Professor Marian BURCEA, MD, PhD – President of the National Social Health Insurance Fund; and from abroad: Wim GOETTSCHE – President of the EUnetHTA Executive Council, Director of the European Network for Health Technology ASSESSMENT (EUnetHTA), Prof. Hendry ANNE – from the National Clinical Lead for Integrated Care, Scotland.

Annex 1

Publications during 2017

No.	Paper title	Authors	Journal	ISI/SSCI Impact factor	Other categories CNCISIS / BDI
Printed scientific articles					
1	Estimating treatment coverage for people with substance use disorders: An analysis of data from the World Mental Health Surveys.	Degenhardt, L., Glantz, M., Evans-Lacko, S., Sadikova, E., Sampson, N., Thornicroft, G., Aguilar-Gaxiola, S., Al-Hamazawi, A., Alonso, J., Andrade, L.H., Bruffaerts, R., Bunting, B., Bromet, E.J., Caldas de Almeida, J.M., de Girolamo, G., Florescu, S. , Gureje, O., Haro, J.M., Huang, Y., Karam, A., Karam, E.G., Kiejna, A., Lee, S., Lepine, J.P., Levinson, D., Medina-Mora, M.E., Nakamura, Y., Navarro-Mateu, F., Pennell, B.E., Posada-Villa, J., Scott, K., Stein, D.J., ten Have, M., Torres, Y., Zarkov, Z., Chatterji, S., Kessler, R.C. on behalf of the World Health Organization's Mental Health Surveys collaborators.	<i>World Psychiatry</i> , 2017, Oct;16(3):299-307. doi: 10.1002/wps.20457. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28941090	26.561	
2	Association between psychotic experiences and subsequent suicidal thoughts and behaviours: A cross-national analysis from the World Health Organization World Mental Health Surveys.	Bromet, E.J., Nock, M.K., Saha, S., Lim, C.W.W., Aguilar-Gaxiola, S., Al-Hamzawi, A., Alonso, J., Borges, G., Bruffaerts, R., Degenhardt, L., de Girolamo, G., de Jonge, P., Florescu, S. , Gureje, O., Haro, J.M., He, Y., Hu, C., Karam, E.G., Kovess-Masfety, V., Lee, S., Lepine, J.P., Mneimneh, Z., Navarro-Mateu, F., Ojagbemi, A., Posada-Villa, J., Sampson, N., Scott, K.M., Stagnaro, J.C., Viana, M.C., Xavier, M., Kessler, R.C., McGrath, J.J.	<i>JAMA Psychiatry</i> . 2017 Nov 1;74(11):1136-1144. doi: 10.1001/jamapsychiatry.2017.2647. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28854302	15.307	
3	Cross-Sectional Comparison of the Epidemiology of DSM-5 Generalized Anxiety Disorder Across the Globe.	Ruscio, A.M., Hallion, L.S., Lim, C.C.W., Aguilar-Gaxiola, S., Al-Hamzawi, A., Alonso, J., Andrade, L.H., Borges, G., Bromet, E.J., Bunting, B., Caldas de Almeida, J.C., Demyttenaere, K., Florescu, S. , de Girolamo, G., Gureje, O., Haro, J.M., He, Y., Hinkov, H., Hu, C., de Jonge, P., Karam, E., Lee, S.,	<i>JAMA Psychiatry</i> , 2017 May 1;74(5):465-475. doi: 10.1001/jamapsychiatry.2017.0056. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28297020	15.307	

		Lepine, J.P., Levinson, D., Mneimneh, Z., Navarro-Mateu, F., Posada-Villa, J., Slade, T., Stein, D.J., Torres, Y., Uda, H., Wojtyniak, B., Kessler, R.C., Chatterji, S., Scott, K., the World Health Organization World Mental Health Survey Collaborators.			
4	The cross-national epidemiology of social anxiety disorder: Data from the World Mental Health Survey Initiative.	Stein, D.J., Lim, C.C.W., Roest, A.M., de Jonge, P., Aguilar-Gaxiola, S., Al-Hamzawi, A., Alonso, J., Benjet, C., Bromet, E.J., Bruffaerts, R., de Girolamo, G., Florescu, S. , Gureje, O., Haro, J.M., Harris, M. G., He, Y., Hinkov, H., Horiguchi, I., Hu, C., Karam, A., Karam, E.G., Lee, S., Leacutepine, J.P., Navarro-Mateu, F., Pennell, B.E., Piazza, M., Posada-Villa, J., ten Have, M., Torres, Y., Viana, M.C., Wojtyniak, B., Xavier, M., Kessler, R.C., Scott, K.	<i>BMC Medicine</i> , 2017, 15(1), 143. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28756776	7.901	
5	The association between psychotic experiences and disability: Results from the WHO World Mental Health Surveys.	Navarro-Mateu, F., Alonso, J., Lim, C.C.W., Saha, S., Aguilar-Gaxiola, S., Al-Hamzawi, A., Andrade, L.H., Bromet, E.J., Bruffaerts, R., Chatterji, S., Degenhardt, L., de Girolamo, G., de Jonge, P., Fayyad, J., Florescu, S. , Gureje, O., Haro, J.M., Hu, C., Karam, E.G., Kovess-Masfety, V., Lee, S., Medina-Mora, M.E., Ojagbemi, A., Pennell, B.E., Piazza, M., Posada-Villa, J., Scott, K. M., Stagnaro, J.C., Xavier, M., Kendler, K.S., Kessler, R.C., McGrath, J.J., on behalf of the WHO World Mental Health Survey Collaborators.	<i>Acta Psychiatrica Scandinavica</i> , 2017, 136(1), 74-84. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28542726	6.79	
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41	Overview of post-discharge predictors for	Sfetcu, R., Musat, S., Haaramo, P., Ciutan, M.,	<i>BMC Psychiatry</i> (2017) Jun	2.576	

	psychiatric re-hospitalizations. A systematic review of the literature	Scintee, S.G., Vlădescu, C., Walbeck, C., Katschnig, H.	24;17(1):227. doi: 10.1186/s12888-017-1386-z. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28646857		
42	Development of Health Technology Assessment in Romania	Scintee, S.G., Ciutan, M.	<i>Int J Technol Assess Health Care.</i> 2017 Jan;33(3):371-375. doi: 10.1017/S0266462317000095. Epub 2017 Apr 24. PubMed Abstract: https://www.ncbi.nlm.nih.gov/pubmed/28436346	0.912	
43	Motivating hospital personnel for excellence in a rough environment	N. Copca, C. Mihăescu-Pinția	<i>Proceedings of the 11 The International Conference on Business Excellence</i> DE GRUYTER OPEN DOI: 10.1515/picbe-2017-0040, pp. 368-380, ISSN 2558-9652 https://www.degruyter.com/downloadpdf/j/picbe.2017.11.issue-1/picbe-2017-0040/picbe-2017-0040.pdf		BDI

Papers / books/ book chapters/ reports

No.	Paper / chapter report title	Authors	Editor/ Coordinator	Publisher / website
1	Antibacterial-coated sutures versus non-antibacterial-coated sutures for the prevention of abdominal, superficial and deep incisional, surgical site infection (SSI) Rapid assessment of other technologies using the HTA Core Model® for Rapid Relative Effectiveness Assessment	Authors: Agency for Quality and Accreditation in Health Care and Social Welfare, Croatia: Mirjana Huic, Romana Tandara Hacek, Darija Ercevic, Renata Grenkovic, Tina Poklepovic Pericic, Ana Utrobicic, Marta Civljak, Livia Puljak Co-authors: National School of Public Health, Management and Professional Development, Romania: Silvia Gabriela Scintee, Marius Ciutan, Cristian Vlădescu, Carmen Sasu Dedicated Reviewers: State Institute for Drug Control, Czech Republic: Jana Mazelova, Milan Vocelka, Lenka Vostalová	EUnetHTA Joint Action 3 WP4 Project ID: WP4-ACB-CA-2 Aprilie 2017	http://www.eunetha.eu/sites/default/files/WP4-ACB-CA2_Antibacterial-coated%20sutures%20for%20the%20prevention%20of%20abdominal%20SSI_0.pdf

		<p>National Institute of Pharmacy and Nutrition, Hungary: Dorottya Dudas, Jacinta Juhasz, Szilard Nagy, Gabor Kovacs State Health Care Accreditation Agency, Lithuania: Vitalija Mazgele Swiss Network for Health Technology Assessment, Switzerland: Heike Raatz Institute for Quality and Efficiency in Health Care, Germany: Stefan Sauerland External experts: Ivana Marekovic, University Hospital Centre Zagreb, Reference Center for Hospital Infection – Croatian Ministry of Health, Croatia Stephan Kriwanek, Department for Surgery, Donauspital Vienna and Member of the Austrian Surgical Association, Austria Manufacturer: Ethicon, Johnson & Johnson Company Int. Medical editor: Rogor Editing, Zagreb, Croatia</p>		
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Annex 2

Papers presented in 2017 Presentations at international scientific events

No.	Paper Title	Authors	Scientific event	Organizer	Date and place
1	PTSD in adolescents – factors explaining resilience and risk - a systematic review	S. Florescu, M. Galaon, D.G. Popovici, C. Mihăescu-Pinția, M. Teodorescu, I.L. Firuleasa, V.M. Moldovan, S.G. Scintee, C. Vlădescu	10 th European Public Health Conference „Sustaining resilient and healthy communities” Poster walk: The health of adolescents and young adults	EUPHA	November 1-4, 2017 Stockholm, Sweden
2	Impact of dermatological disorders on health status, career, and quality of life - a systematic review	D.G. Popovici, I.L. Firuleasa, C. Mihăescu-Pinția, M. Teodorescu, M.V. Moldovan, M. Galaon, S.G. Scintee, C. Vlădescu, S. Florescu	10 th European Public Health Conference „Sustaining resilient and healthy communities” Poster display: Chronic Diseases	EUPHA	November 1-4, 2017 Stockholm, Sweden
3	Community care in mental health patients - a systematic review	I.L. Firuleasa, D.G. Popovici, V.M. Moldovan, C. Mihăescu Pinția, M. Teodorescu, M. Galaon, S.G. Scintee, C. Vlădescu, S. Florescu	10 th European Public Health Conference „Sustaining resilient and healthy communities” Poster display: Mental health	EUPHA	November 1-4, 2017 Stockholm, Sweden
4	Predictors of return to work in spinal cord injury - a systematic review	C. Mihăescu-Pinția, S. Florescu, I.L. Firuleasa, D.G. Popovici, M. Galaon, M.V. Moldovan, S.G. Scintee, C. Vlădescu, M. Teodorescu	10 th European Public Health Conference „Sustaining resilient and healthy communities” Poster display: Chronic Diseases	EUPHA	November 1-4, 2017 Stockholm, Sweden
5	Closure of 67 hospitals: an apparently policy failure that proved to be an effective policy	Silvia Gabriela Scintee, Cristian Vlădescu, Anna Sagan, Cristina Hernandez-Quevedo	The Health Systems and Policy Monitor annual meeting	European Observatory on Health Systems and Policies	October 12-13, 2017 Vienna
6	Mental health service users' experiences of re-hospitalization. A focus-group study in six European countries.	Marian Ādnanes, Line Melby, Johanna Cresswell-Smith, Valeria Donisi, Raluca Sfetcu, Christa Strassmayr	12 th ENMESH Conference ”Conceptualizing, measuring and influencing context in mental health care: from the individual to society”	European Network for Mental Health Service Evaluation ENMESH	October 5-7, 2017, Groningen, the Netherlands
7	Emerging methodologies: the	Alexa McArthur, Zoe Jordan, Jitka	Global Evidence Summit	Cochrane, The Guidelines	September 14, 2017

	use of text and opinion in systematic reviews	Klugarova, Hu Yan, Silvia Florescu , Adam Cooper		International Network, The Campbell Collaboration, The International Society for Evidence-based Health Care, The Joanna Briggs Institute	Cape Town, Australia
8	Motivating hospital personnel for excellence in a rough environment	Narcis Copca, Constanta Mihaescu-Pintia	The 11 th International Conference on Business Excellence, „Strategy, Complexity and Energy in changing times”	The Bucharest University of Economic Studies, Faculty of Business Administration in Foreign Languages, Society for Business Excellence	March 30-31, 2017 Bucharest

Presentations at national scientific events

No.	Paper title	Authors	Event	Organizers	Date and place
1	Stormy history of projects for hospital costs measurement in Romania and improvement of reimbursement system	Cristian Vlădescu	National Conference of Pharmacoconomics and Health Management, IV Edition	ISPOR Romania, Romanian Society of Pharmacoconomics, Târgu Mureş Medical University, Sapiientia University	October 12-14, 2017 Poiana Braşov
2	Hospital services reporting and control	Adina Geană	National Conference of Pharmacoconomics and Health Management, IV Edition	ISPOR Romania, Romanian Society of Pharmacoconomics, Târgu Mureş Medical University, Sapiientia University	October 12-14, 2017 Poiana Braşov
3	Institutional and human resources currently available for elderly with mental disorders	Cosmin Lungu, Lavinia Panait , Adriana Mihai	16 th National Congress of Psychiatry with international participation, on the subject: Romanian Psychiatry and contemporary societal needs	Romanian Association of Psychiatry and Psychotherapy	October 12-15, 2017 Sinaia
4	Brief parallelism between obstetrical practices and treatment of gynecological disorders found on the territory of Romanian Principalities, and the ones in Western Europe, during XVII-XVIII Centuries	Ingrid-Laura Firuleasa , Silvia Florescu	XLVI National Reunion for History of Medicine and Pharmacy & VII National Symposium Hippocratic	National Society for the History of Medicine, National Society for History of Pharmacy, National Society of Physician Writers and Publicists	June 22-24, 2017 Bucharest
5	Aspects of reproductive health in Hippocratic works	Ingrid-Laura Firuleasa	XLVI National Reunion for History of Medicine and Pharmacy & VII National Symposium Hippocratic	National Society for the History of Medicine, National Society for History of Pharmacy, National Society of Physician Writers and Publicists	June 22-24, 2017 Bucharest

Annex 3

Systematic Review Protocols and literature systematic reviews achieved by NSPHMPDB experts within the collaboration with JBI in 2017

No.	Evaluator*	Paper reviewed (title and code)	Paper type	Date reviewer agreed	Date review submitted
1	Mihnea Dosius	Prevention of venous thromboembolism in post-operative abdominal patients	Implementation Report	12.04.2017	12.20.2017
2	Florescu Silvia	Prevalence of mental disorders in Sub-Saharan Africa: a systematic review protocol for the JBI Database of Systematic Reviews and Implementation Reports. JBISRIR-2017-003626	Systematic Review Protocol	10.17.2017	10.30.2017
3	Firuleasa Ingrid Laura	Management of Full Thickness Rotator Cuff Tears in the Elderly: A Systematic Review Protocol. JBISRIR-2017-003596	Systematic Review Protocol	09. 11.2017	09. 28.2017
4	Constantinescu Vasilica	Experiences of adult cancer patients receiving counseling from nurses: a qualitative systematic review. JBISRIR-2017-003606	Systematic Review	09. 24.2017	10. 16.2017
5	Dosius Mihnea	The effectiveness and safety of pharmacological sedation for aggressive or agitated adult patients presenting in a pre-hospital emergency situation: a systematic review protocol. JBISRIR-2017-003574	Systematic Review Protocol	09. 04.2017	09. 15.2017
6	Florescu Silvia	Effectiveness of Cognitive Behavioral Therapy for Mental Illness: An Umbrella Review Protocol for the JBI Database of Systematic Reviews and Implementation Reports. JBISRIR-2017-003530	Systematic Review Protocol	07. 13.2017	07. 27.2017
7	Mihăescu-Pinția Constanța	Community-based interventions to address harmful alcohol and drug use in Indigenous populations in Australia, New Zealand and Canada: a systematic review protocol for the JBI Database of Systematic Reviews and Implementation Reports. JBISRIR-2017-003504	Systematic Review Protocol	06. 15.2017	06. 30.2017
8	Lupan Anca Cristina	The effectiveness of stellate ganglion blockade on refractory ventricular arrhythmias for the JBI Database of Systematic Reviews and Implementation Reports. JBISRIR-2017-003491	Systematic Review	06. 08.2017	06. 22.2017

9	Firuleasa Ingrid Laura	Systematic assessment for rehabilitation of patients diagnosed with dementia - a scoping review protocol. JBISRR-2017-003469	Systematic Review Protocol	05. 17.2017	06. 07.2017
10	Ciutan Marius	Examining stigma experienced by transgender individuals when accessing health care: a qualitative systematic review protocol. JBISRR-2017-003438	Systematic Review Protocol	05. 03.2017	05. 24.2017
11	Constantinescu Vasilica	Non-surgical intrapartum practices for the prevention of severe perineal trauma: a systematic review. JBISRR-2016-003342	Systematic Review	04. 20.2017	05. 10.2017
12	Popovici Daniela Georgeta	Effectiveness of garlic in controlling blood glucose in Type 2 diabetes mellitus: A comprehensive systematic review for the JBI Database of Systematic Reviews and Implementation Reports. JBISRR-2017-003394	Systematic Review	03. 14.2017	03. 28.2017
13	Mihăescu Pinția Constanța	Factors influencing participation in faecal occult blood testing to screen for colorectal cancer in Australia: A scoping review protocol for the JBI Database of Systematic Reviews and Implementation Reports. JBISRR-2017-003392	Systematic Review Protocol	03. 15.2017	03. 29.2017
14	Firuleasa Ingrid Laura	Vocational rehabilitation for emergency services personnel: a scoping review protocol. JBISRR-2017-003379	Systematic Review	03. 07.2017	03. 29.2017
15	Ciutan Marius	Effectiveness of collaboration between emergency department and intensive care unit teams on mortality rates of patients presenting with critical illness: A quantitative systematic review for the JBI Database of Systematic Reviews and Implementation Reports. JBISRR-2017-003365	Systematic Review	02. 27.2017	03. 20.2017
16	Dosius Mihnea	Enteral Nutrition of the Adult Intensive Care Unit (ICU) Patient with a Cuffed Endotracheal Tube in the Preoperative Period: A Scoping Review Protocol for the JBI Database of Systematic Reviews and Implementation Reports. JBISRR-2017-003356	Systematic Review Protocol	02. 14.2017	02. 27.2017
17	Silvia Florescu	Effects of Mindfulness-based Interventions on Rumination among Adults with Depression: a systematic review of quantitative evidence for the JBI Database of Systematic	Systematic Review	02. 02.2017	02. 16.2017

		Reviews and Implementation Reports. JBISRIR-2016-003333			
18	Popovici Daniela Georgeta	Rifampicin chemoprophylaxis to prevent leprosy: a systematic review of quantitative and qualitative evidence for the JBI Database of Systematic Reviews and Implementation Reports. JBISRIR-2016-003301	Systematic Review	01. 17.2017	01. 31.2017

*List of evaluators contributing to reviews of the papers published by the Joanna Briggs Institute, in no. 1-12 of volume 15 of JBI Database of Systematic Reviews and Implementation Reports journal, is available at: https://journals.lww.com/jbisrir/Fulltext/2017/12000/Thank_you.17.aspx