

# Health Online Service Provision Index (HOSPI) NETWORK

## HOSPI NETWORK PURPOSE

One effective way to improve health service provision is to have and regularly assess an online portal. A well-functioning portal can make a hospital more attractive, efficient and effective regarding patients' needs. The **United Nations University Operating Unit on Policy-Driven Electronic Governance (UNU-EGOV)**, has designed, maintains and applies the Health Online Service Provision Index (HOSPI) methodology to assess hospital portals. There is an increasing interest to apply HOSPI methodology in various countries worldwide. To achieve this purpose, UNU-EGOV invites interested institutions, which have self-sustained resources and capacities to support the process, to partner and apply HOSPI methodology within a single country, by signing a Memorandum of Understanding (MOU). It is our expectation that more partners will utilize the HOSPI methodology, be part of the HOSPI network, and contribute to online health sector service improvement.

The application of HOSPI methodology to the multiple hospitals' portals in a country contributes to:

- Develop a comprehensive and substantive **understanding** of each hospital's portal and aggregately of the overall country's health sector online status;
- **Identify possible gaps** that could be addressed by the hospital management team;
- Support government officials and researchers to develop policy **recommendations** and practical **initiatives** that will enable the country to improve the health sector status;
- **Improve HOSPI methodology** based on partners' feedback;
- Enhance the e-Health **research** area;
- Collect and make available a significant amount of open e-Health assessment **data**;
- Establish and expand the local e-Health assessment **network**.



## HOSPI NETWORK PARTNERSHIP

UNU-EGOV stands ready to support the entire process, from the establishment of the partnership, the HOSPI methodology application in the country, to the co-organization of events and monitoring of impact. Where suitable, UNU-EGOV will publish the results of a national assessment in collaboration with the partner.

To express your interest in applying HOSPI, please contact UNU-EGOV:  
**egov@unu.edu**

For more information, please visit:

**HSWAI**





## HOSPI CRITERIA

HOSPI comprises **164 indicators** relating to **four criteria**: Content, Services, Community Interaction and Technology Features.



• **Content (C1)** — This criterion evaluates the presence of information relevant to the user. It evaluates the quality, availability, relevance, completeness and concise representation of specific information that it is expected to be provided in a hospital website. Content criterion includes five indicators: Health institution information available on the website (C1.i1), Quality Metrics (C1.i2), Organisational Structure and Medical Information (C1.i3), Patient Information (C1.i4), and Research and/or Teaching (C1.i5).



• **Services (C2)** — This criterion considers how the growth of consumerism and the proliferation of Internet accessible sources of health-related information have modified the traditional roles of provider and patient. The trend towards providing personalized electronic services can bring many benefits to both hospital and patients. Personalized content can be provided during interactions with all users and this might improve loyalty to a particular hospital. This criterion includes electronic healthcare scheduling, prescription request, automation of hospital's back-office procedures, forms availability on the website, electronic completion of administrative transactions and online appointments. Services criterion is assessed in three indicators: Administration Procedures (C2.i1), Appointments (C2.i2), and Patient Care (C2.i3).



• **Community Interaction (C3)** — This criterion describes the interaction between hospital, patients, and online communities on the web. Online communities often involve members to provide content to the website and contribute in some way. Examples of such involvement include forums, complaints forms, interaction with the media and hospital's marketing activities. Hospital sites can host patient support groups, interact with community organisations and become a portal for physician organisations and private medical offices. Community Interaction criterion includes three indicators: Participation (C3.i1), Media (C3.i2), and Advertising/Marketing (C3.i3).



• **Technology Features (C4)** — This criterion encompasses mainly technical items related to easy navigation, website quality, visual appeal, functionality, and reliability. The Technology Features criterion is related to how the content and services are assembled and made available on a website. Technology Features criterion includes five indicators: Navigability (C4.i1), Accessibility (C4.i2), Usability/Readability (C4.i3), Credibility (C4.i4), and Privacy/Security (C4.i5).

## HOSPI Application Process

The application of HOSPI includes 4 phases (Figure 1)

**Figure 1:** HOSPI application phases and tasks

