

HPH Conference 2026

Testing and Adapting the Health Promoting Hospitals & Health Services Standards Self-assessment Tool in France

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Background



The French HPH network

- 35 members
- Funding from the National Public Health Agency
- Support from the coordination center



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The 2020 Standards include 5 overarching Standards:

Demonstrating organizational commitment for HPH

Ensuring access to the service

Enhancing people-centered health care and user involvement

Creating a healthy workplace and a safe setting

Promoting health in the wider community

Standard 2

2. Ensuring access to the service

Objective:
The organization implements measures to ensure availability, accessibility, and acceptability of its facilities.

2.1. Substandards: Entitlement and availability

211. Our organization has a procedure to assess and to provide support for people where eligibility or lack of resources (insurance or economic) compromises human rights.
Measurable elements: The organization provides evidence of assessment procedures is available and relevant staff is trained on its utilization.

| Not implemented | Fully implemented | | | | | | | | | | Not applicable |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

212. Our organization informs all patients about their rights and our health promotion policies.
Measurable elements: A patient rights statement is easily accessible, available in key languages of the community, and in multiple mediums.

| Not implemented | Fully implemented | | | | | | | | | | Not applicable |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Self-Assessment Tool for implementing the 2020 Standards for Health Promoting Hospitals and Health Services

This document presents self-assessment forms which operationalize the 2020 Standards for Health Promoting Hospitals and Health Services and provide concrete measurable elements against which performance can be measured. This tool should be used by healthcare organizations to assess their level of performance in relation to established standards and to implement measures for continuous improvement. This process enables management to identify areas of good practice and those where there is a need for improvement.

How to use this tool
Standards 1 - 5 and their respective substandards can be found on their own tabs. For each standard statement, measurable elements are listed, which one can use to measure its level of implementation. The level of implementation should be recorded using the sliding scale under each standard statement and can be rated on a scale from "not implemented" = 1 to "fully implemented" = 10. Please check "does not apply" for all statements that are not relevant in your institution.

Results
The results of the self-assessment are presented both in a complete overview of results ("Overview" tab) and in radar charts for each standard and each substandard. You may navigate to specific radar charts diagrams directly from the "Visuals" tab. Please note, it may take a few minutes for radar charts to update.

Standard 1: Demonstrating organizational commitment for HPH

Substandard 1.1: Leadership

1.1.1. Our organization implements the HPH vision as part of its overall organizational strategy.
Organizational strategy documents explicitly showcase the connections to the HPH vision.

Not implemented Fully implemented Value: 1

1.1.2. The actions of our organization's leadership team mirror the aims of the HPH vision.
Annual work and action plans mirror aims of the HPH vision.

Not implemented Fully implemented Value: 3

1.1.3. Our organization fosters a culture of health orientation and improvement.
Organizational vision, mission, and vision statements reflect a commitment to health orientation and improvement.

Not implemented Fully implemented Value: 5

Identified need to assess local strategy and to evaluate progress

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Testing and Adapting the Health Promoting Hospitals & Health Services Standards Self-assessment Tool in France

The 2020 Standards include 5 overarching Standards:

1. Demonstrating organizational commitment for HPH
2. Ensuring access to the service
3. Enhancing people-centered health care and user involvement
4. Creating a healthy workplace and a healthy community setting
5. Promoting health in the wider community



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Goals



- **Main objective:** Strengthen the commitment of healthcare services to health promotion



- **Specific objectives:**
 - Validation of a self-assessment tool in French,
 - Development of a guide to help use the use of the self-assessment tool,
 - Proposal for a certification process for healthcare services.

Method

Before

- Literal translation of HPH documents into French



Standard 2

Assurer l'accès aux services

Objectif :
Le Lieu de santé met en place des mesures pour assurer la disponibilité, l'accessibilité et l'acceptabilité de ses installations.

Sous-standard 1: Droit et disponibilité

2.1. Notre Lieu de santé a établi une procédure pour évaluer les situations dans lesquelles l'inégalité ou le manque de ressources (absence de couverture médicale ou ressources économiques insuffisantes) mettent en péril les droits de l'Homme et pour proposer une aide dans de telles situations.

2.1.2. Notre Lieu de santé informe les bénéficiaires de soins sur leurs droits et sur nos politiques de promotion de la santé.

Sous-standard 2: Information et accessibilité

2.2.1. Les informations de localisation, d'accueil et de contact du Lieu de santé sont facilement trouvable via les moteurs de recherche Internet.

2.2.2. Le site Internet de notre Lieu de santé est facile d'utilisation, même pour les personnes avec un faible niveau de littératie numérique, et est disponible dans plusieurs langues choisies selon les caractéristiques de la population environnante.

2.2.3. Notre Lieu de santé développe des outils écrits et des panneaux de signalisation adaptés aux niveaux de littératie, aux langues et aux capacités cognitives des différents groupes de bénéficiaires de soins.

2.2.4. Notre Lieu de santé développe des programmes de sensibilisation à l'attention des publics marginalisés ou défavorisés.

Résultats

Les résultats de l'auto-évaluation sont présentés à la fois dans une vue d'ensemble des résultats (onglet "vue d'ensemble") et dans des diagrammes en radar pour chaque norme et chaque sous-norme. Vous pouvez accéder à des diagrammes radar spécifiques directement à partir de l'onglet "visuels". Veuillez noter que la mise à jour des diagrammes radar peut prendre quelques minutes.

Standard 1 : Démontrer l'engagement du Lieu de santé dans la démarche LSPS|HPH

Sous-standard 1.1 : Gouvernance

1.1.1. Notre Lieu de santé applique la politique LSPS|HPH comme partie intégrante de son orientation stratégique.

Les documents sur l'orientation stratégique du Lieu de santé mettent explicitement en évidence les liens avec la politique LSPS|HPH.

Non applicable Pas du tout mis en œuvre Complètement mis en œuvre Note : 9

1.1.2. Les actions menées par l'équipe de direction de notre Lieu de santé relient les objectifs de la stratégie LSPS|HPH.

Les plans annuels de travail et d'action reflètent les objectifs de la stratégie LSPS|HPH.

Non applicable Pas du tout mis en œuvre Complètement mis en œuvre Note : 3

1.1.3. Notre Lieu de santé adopte une démarche orientée vers la santé et l'amélioration continue.

Les déclarations relatives à la vision, à la mission et aux valeurs du Lieu de santé reflètent un engagement en faveur de la santé et de l'amélioration continue.

Non applicable Pas du tout mis en œuvre Complètement mis en œuvre Note : 1

Standards 2020 pour des Lieux de santé promoteurs de santé

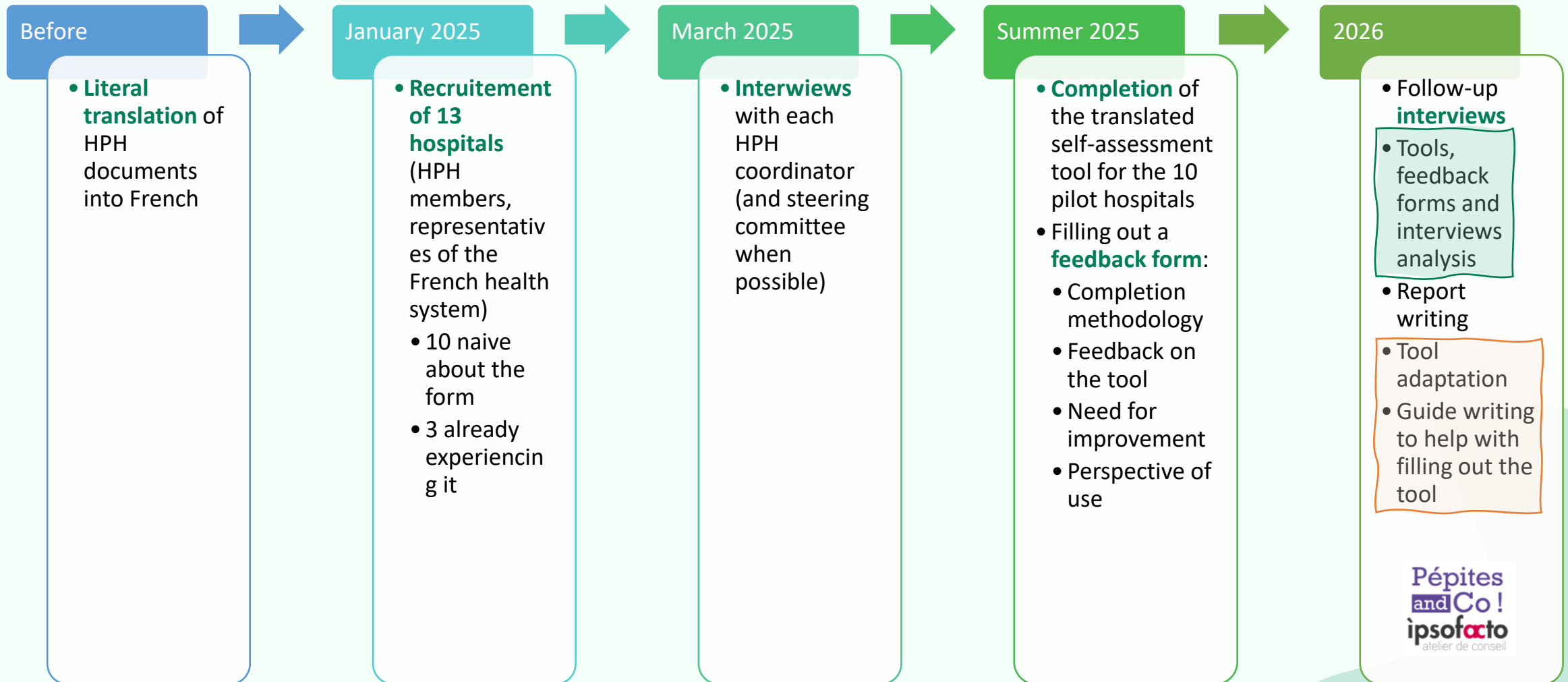
de des formulaires d'auto-évaluation qui opérationnalisent les standards de santé promoteurs de santé et fournissent des éléments concrets et ont d'évaluer les performances. Cet outil est à disposition des Lieux de santé ou de performance par rapport aux standards établis et pour mettre en l'amélioration continue. Ce processus permet à la direction d'identifier les les des actions sont déjà prises et ceux où des axes de progression peuvent outil ?

Leurs sous-standards, peuvent être retrouvés dans leurs onglets un des items des standards, des éléments concrets et mesurables sont le mesurer le niveau de mise en oeuvre des standards. Le niveau de mise en grâce à l'échelle disponible pour chaque item, allant de " Pas mis en Complètement mis en oeuvre = 10 ". Pour les items n'étant pas applicables à votre Lieu de santé, nous vous invitons à cocher la case " Non applicable ".

2026

- Follow-up interviews
- Tools, feedback forms and interviews analysis
- Report writing
- Tool adaptation
- Guide writing to help with filling out the tool

Method



Results

Main results regarding the self-assessment tool:

- **Useful for assessment, relevant with their needs and helpful to progress**

But:

- Not easy to use (understanding, complexity, concepts)
- Not easy to coordinate (long, rigorous, gathering many expertises)
- Not easy to find evidence to support the answers

And with a range of impacts and prospects including an important potential for mobilisation

Results

Main results regarding the self-assessment tool adaptation:

- Need to **adapt the translation** to local context, avoid repetition, explain concepts in detail, provide examples, specify the actions levels
- Real need for **guidelines** on how to fill it in and to use it
- Wish to have an **online format**, easy to use
- Strong desire for **greater clarity in the results** so that they can serve as a decision-making tool

Results



Standard 1

- 6,4/10
- Less easy to understand
- Less adapted to local context
- But perceived as necessary to progress and structure the strategy



Standard 2

- 7,0/10
- Well linked with local actions
- Difficult to understand since too wide and subjective concepts



Standard 3

- 6,9/10
- Most operational
- Often redundant
- Helpful to gather existing actions



Standard 4

- 7,4/10
- Most appropriate and easy to understand
- Well linked with the strategy of the hospital



Standard 5

- 6,8/10
- Easy to understand
- But difficult to put into actions
- Need to mobilize different stakeholders

Conclusions

1. Simplify and clarify the assessment-tool
2. Improve quality of results in order to make an action plan
3. Clarify and adapt the the implementation methodology

Thank you for your attention!

