

EUROPEAN COUNTRIES CONSULTATION:

Anchoring EUCCC Certification
in National Realities

WP5 – Inclusion, Certification and
Adherence to EUCCC Certification

HUNGARY COUNTRY PROFILE



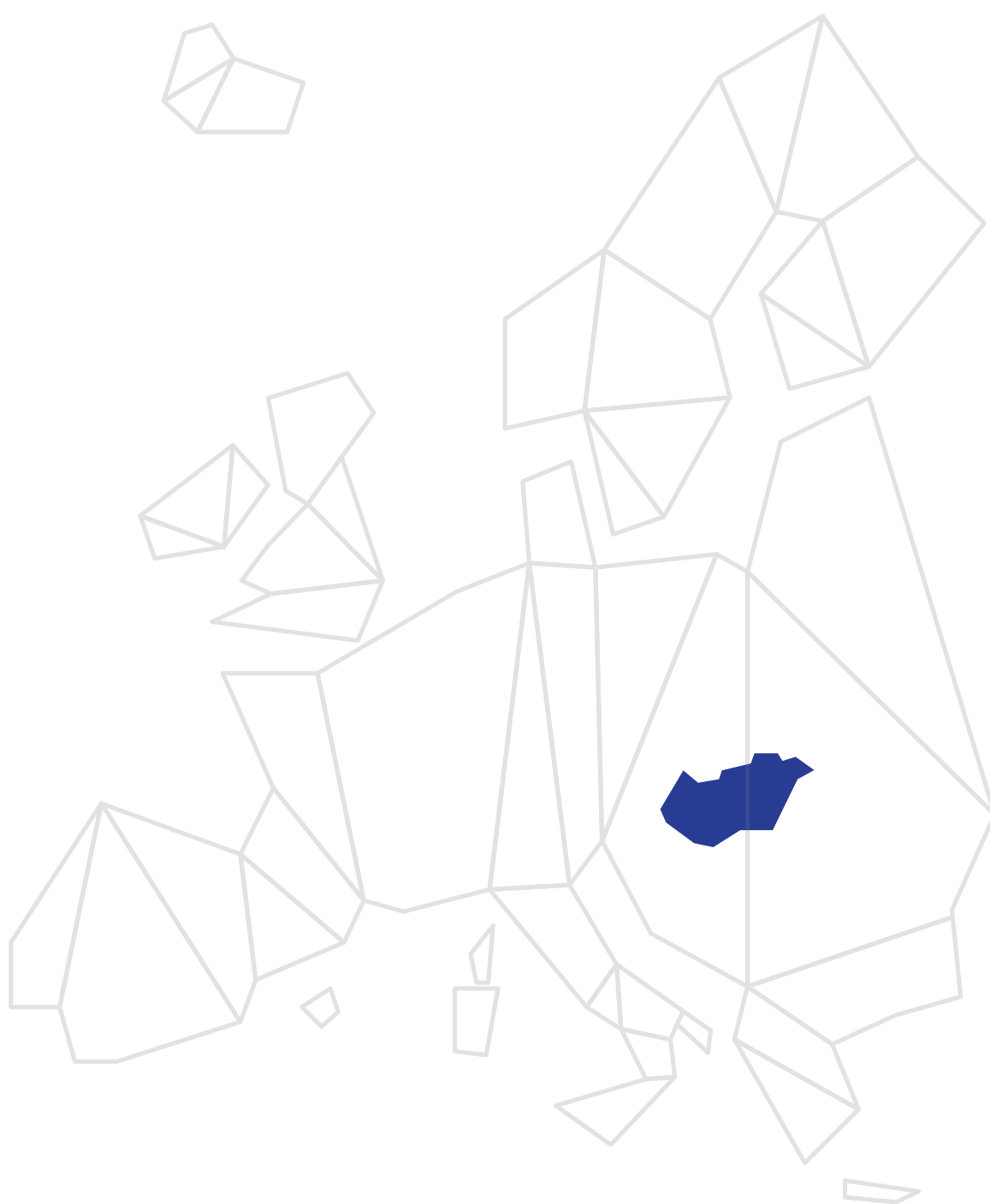
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THE EUROPEAN COMPREHENSIVE CANCER CENTRE NETWORK



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Context: existing certification systems and organization of cancer care

At the regulatory level in Hungary, the law (Act CLIV of 1997 on Health) prescribes for healthcare providers to operate internal quality control systems. Most of the institutions implement the ISO 9001 standard to meet this requirement. This is further supported by Decree 60/2003 (X.20.) ESzCsM, amended as of July 1, 2012, which defines the minimum requirements for service provision, also ensuring the safety and quality of services.

In the treatment of cancer patients, the comprehensiveness and the high risk associated with care makes the adaptation of quality management systems particularly justified. These systems ensure legal compliance, contribute to enhancing patient safety, standardisation of diagnostic and therapeutic processes, and continuous quality improvements.

Besides the often-applied general quality control frameworks (ISO 9001), to date, some healthcare-specific frameworks also appeared (EN 15224) in the practice of healthcare providers. These standards include the definition of general quality requirements, and their benchmarking of performance, control, assessment, improvement and documentation; however, these do not include in a mandatory fashion any system of basic conditions relevant to the practice of professional activities¹. In oncology care, due to the long and complex treatment process of cancer patients, these systems hold special importance as they help enhance patient safety, improve process transparency, and standardise multidisciplinary collaboration.

Therefore, the ISO framework is the primary one, but it is often complemented by a system of standards defining professional quality requirements as well (in Hungary, the Hungarian Standards for Healthcare (MEES) is such a system)². The MEES standards were developed by an expert group under the direction of the Ministry of Health based on the JCI system. Although an accreditation body was not initially established, the National Accreditation Authority recognised the importance of a sector-specific regulation. As a result, with the involvement of independent certification organizations MEES is officially accepted as a certification standard. There are currently two accredited organizations in Hungary, which carry out certifications (MSZT, the Hungarian Standards Institution, SGS Hungária Kft.). The MEES certification of the National Oncology Institute is carried out by SGS (a professional and market leader in this field³). A new, improved version release of MEES (MEES 2.1) is expected in the near future. Although certification under the 'Hungarian Standards for Healthcare' (MEES) is not mandatory, several healthcare institutions in Hungary adopt it as a complementary quality assurance tool.

EU funded projects towards certification were initiated in 2010

To supplement the ISO 9001 and Hungarian Health Care Standards (MEES), certifications already used in the Hungarian healthcare system, and to follow the trend of European countries, the plan to introduce an accreditation programme was considered in the 2000s. A decade later, in December 2012, the 2-year European Union (EU)-funded Social Renewal Operating Programme (TÁMOP) 6.2.5.A-12/1-2012-0001 project was initiated to create the foundations of a voluntary Hungarian accreditation programme for healthcare. The name of the programme was the Accreditation of Healthcare Providers for Safe Patient Care (BELLA), accreditation standards and the assessment method for inpatient and outpatient institutions and public pharmacies were created by the end of the project within the center of patient safety.

The next project, TÁMOP-6.2.5/B-13/1-2014-0001, included multiple interventions to improve the quality of Hungarian healthcare, and one of these interventions was to prepare medical institutions to join the BELLA accreditation programme. In the course of the preparatory project lasted from October 2014 to November 2015, 30 hospitals and 15 outpatient institutions participated voluntarily in it, also guaranteeing that after the project ended, they would apply for the BELLA accreditation⁴. The full implementation of the accreditation system was not ultimately carried out due to structural changes in the healthcare system that have occurred in the meantime.

The accreditation of human diagnostic laboratories will become mandatory in the future based on the legal authorization of the National Accreditation Authority, according to ISO 15189 and/or ISO/IEC 17025 standards; however, currently it operates on a voluntary basis.

This step will significantly strengthen the quality assurance of laboratory testing, the reliability of measurement results, and their international comparability. From oncology perspective, it is particularly important, as diagnosis, therapeutic decisions, and the monitoring of treatment effectiveness largely rely on laboratory tests.

Organization of cancer care

Over the past 20 years, the structure of the Hungarian oncology care system has developed, ensuring centralised care: a network of 4 regional and 19 county oncology centers has been built around the National Institute of Oncology⁵. Oncology care is structured based on levels of care so called progressivity levels. Centers treating cancer patients are assigned different levels based on the type of diagnostics and treatment they are able to offer. Furthermore, healthcare providers have a legally defined regional care responsibility to ensure access to healthcare services for the population in the catchment area. While access to cancer care is organised by territorial basis according to the progressivity levels, the National Institute of Oncology receives patients from anywhere across Hungary. The progressivity levels are organised as follows:

- **Level I:** Local cancer units in district or city hospitals, focusing on prevention, screening, early detection, referral, rehabilitation and palliative care.
- **Level II:** Oncology departments in county hospitals, capable of providing comprehensive care for high-prevalence cancers, including diagnosis, treatment and chronic care. In collaboration with cancer centers at higher level of progressivity and other specialised institutions, they ensure that complex services are provided for certain tumour types and oncological treatment.
- **Level III/a:** Regional Cancer Centers (Debrecen, Pécs, Szeged, Szombathely), which provide multidisciplinary, complex oncology care, including rare tumours.
- **Level III/b:** The National Institute of Oncology (OOI) in Budapest, acting as the national Comprehensive Cancer Center. OOI provides diagnosis, treatment, research, and education across all cancer types, including rare cancers. It also hosts the National Cancer Registry and leads methodological and policy development. Importantly, it has been OECI-accredited as a Comprehensive Cancer Center since 2008, with the most recent certification renewed in 2024 (valid until 2029)—the first center in Central and Eastern Europe to do so. In 2014, OOI and the four regional cancer centers signed an MoU to form the Hungarian Oncology Network. However, the network remains loosely structured, with referral pathways and formal coordination mechanisms still under development.

Identified barriers against the implementation of EUCCC certification in Hungary

- Legal barriers impeding the university hospitals (three of the four regional cancer centers) to receive EU funding
- The law (Act CLIV of 1997 on Health) prescribes for healthcare providers to operate internal quality control systems, but currently there is no legal obligation to conduct external audits

Identified enablers towards the implementation of EUCCC certification in Hungary

- Good level of political support for the project: the Hungarian government covered the 20% co-funding of cost related to EUnetCCC JA with a special grant awarded to OOI

Conditions for successful EUCCC certification implementation in Hungary

- While cancer care is well organised in Hungary, the most challenging remains to get patients from the small local units to the regional hospitals
- In 2014, the four regional centers (Debrecen, Pécs, Szeged and Szombathely) and OOI as leader signed an MoU to organise cancer care in a network, the Hungarian Oncology Network, but it is currently a loosely organised network since the pathways remain to be established. The certification of these regional centers could be another step forward for Hungary.

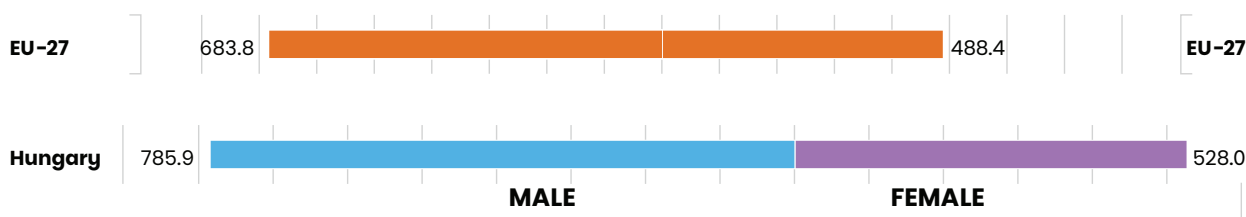
Number of DKH-certified CCCs: 1

Number of EUCCC pilot centers: 0

Epidemiology: incidence and mortality

Incidence rate:

Estimated incidence, both sexes, all sites but non-melanoma skin, 2022 (per 100 000 population)

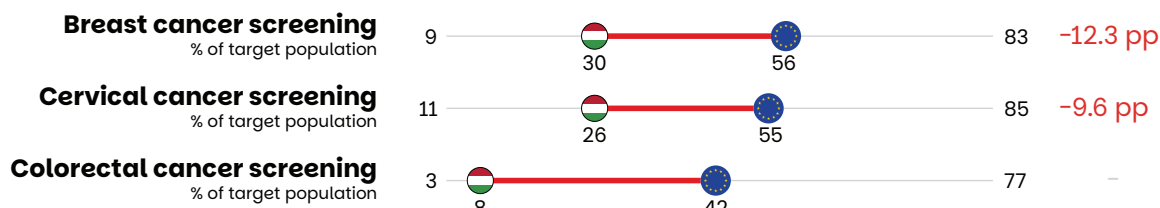


Mortality rate:

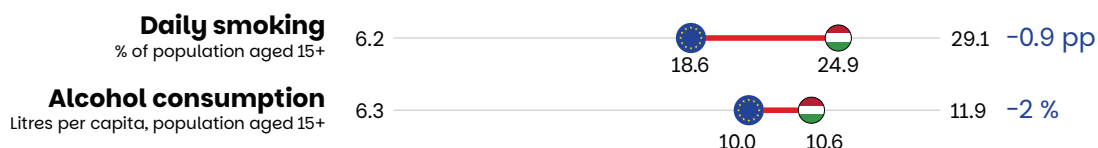
Cancer mortality
ASMR per 100 000 population



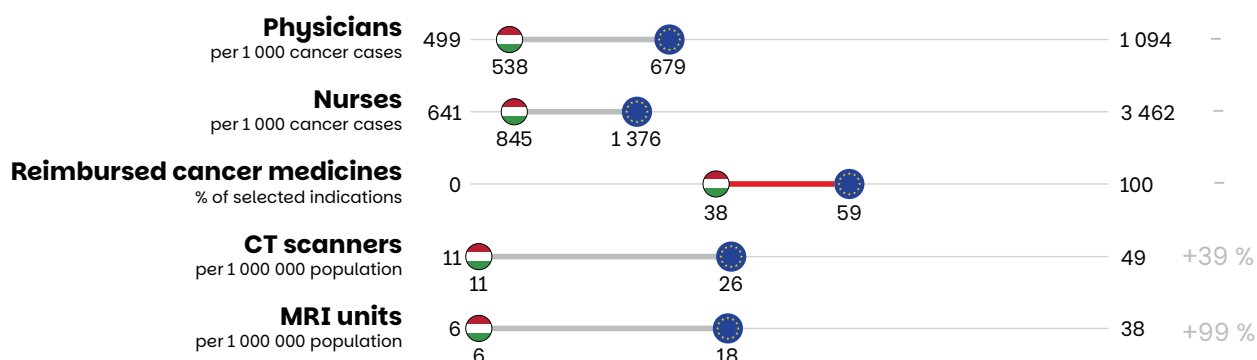
Screening performance



Risk factors



Human resources and infrastructure



NUMBER OF CLINICAL TRIALS: 497

Endnotes

1. <https://www.patientsrights.hu/quality-assurance-of-healthcare-services-quality-control-systems.html>
2. Association between the application of ISO 9001:2008 alone or in combination with health-specific standards and quality-related activities in Hungarian hospitals - PubMed
3. <https://www.nah.gov.hu/hu/szervezet/sgs-hungaria-kft2/>
4. Investigation of the conditions affecting the joining of Hungarian hospitals to an accreditation programme: a cross-sectional study - PMC
5. https://www.oecd.org/en/publications/eu-country-cancer-profile-hungary-2025_344b5f49-en.html



**For more information,
please contact:**

eunetcccwp5@has-sante.fr