

# **COUNCIL OF** THE EUROPEAN UNION

Brussels, 7 March 2012

7311/12

**SAN 47** 

#### **OUTCOME OF PROCEEDINGS**

from:	General Secretariat of the Council
to:	Delegations
Subject	Working Party on Public Health at Senior Level of 8 February 2012

#### 1. **INTRODUCTION**

The eighth meeting of the Working Party on Public Health at Senior Level (hereinafter referred to as the "Working Party") held since the adoption of the Council Conclusions on the Implementation of the EU Health Strategy was chaired by Mr. Svend Særkjær, Deputy Permanent Secretary, Ministry of Health, Copenhagen, Denmark.

The provisional agenda for the meeting<sup>2</sup> was adopted without changes and consisted of four items:

- Reflection process Innovative approaches for chronic diseases in public health and 1. healthcare systems;
- 2. The role of the EU in international health fora;
- 3. Reflection process - Towards modern, responsive and sustainable health systems;
- The EU Health Strategy<sup>3</sup>. 4.

7311/12 LE, JS/asz DG I

doc. 16139/08

doc. 1121/12

Commission's White Paper "Together for Health, a Strategic Approach for the EU 2008-2013" (doc. 14689/07)

# 2. REFLECTION PROCESS: INNOVATIVE APPROACHES FOR <u>CHRONIC</u> <u>DISEASES</u> IN PUBLIC HEALTH AND HEALTHCARE SYSTEMS

The <u>Chair</u> introduced this item by recalling that it represented a follow-up to the Working Party's meeting on 10 October 2011 when it was decided that the Commission would consult the Member States to identify areas to be taken forward in the reflection process. The Commission focused this consultation on the health promotion and the prevention of chronic diseases, i.e. the first area envisaged in paragraph 9 of the Council conclusions "Innovative approaches for chronic diseases in public health and healthcare systems" adopted by the Council (EPSCO) on 1 December 2010. A questionnaire had been sent to MS, to which all Member States replied.

The Director General of DG SANCO Mrs. Testori-Coggi introduced the Commission's paper<sup>5</sup> that summarized replies by Member States. The Commission has already mechanisms to work with MS and stakeholders on nutrition and physical activity (EU Platform on Diet, Physical Activity and Health), alcohol related harm (EU Alcohol and Health Forum) and tobacco (existing tobacco legislation).

Concerning areas where Member States have indicated that EU level action is or would be beneficial, the Director General mentioned:

- emphasis on health determinants and risk factors,
- more targeted actions on certain risk factors and diseases,
- better cooperation and the exchange of good practices,
- better implementation of existing instruments,
- better use of modern technology and innovation.

As a next step, the Commission proposes to establish a small "drafting" group to prepare a report with recommendations on health promotion and chronic disease prevention for endorsement at the next meeting of the Working Party.

<sup>5</sup> doc. 5273/11 SAN 3

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7311/12 LE, JS/asz 2 DG I **EN** 

<sup>&</sup>lt;sup>4</sup> OJ C 74, 8.3.2011, p. 3.

The Secretary General of the European Union Health Policy Forum, Ms Monika Kosinska, briefly presented the contribution of the EU Health Policy Forum to the reflection process on chronic diseases<sup>6</sup>.

Delegations considered the Commission's paper useful and supported the creation of a drafting group. However, many considered that its mandate, the organisation and time limits should be well established. It was also considered useful to examine existing instruments and actions in the field of chronic diseases in order to enhance them and avoid duplication of efforts, in particular as regards the WHO. As the dissemination of the results of research and of best practices (based on scientific evidence) was important, new tools for dissemination should be found (Internet, data bases, schools).

#### The Chair concluded that:

- there was a general interest among Member States to continue common work on chronic diseases:
- the existing EU mechanisms shall be used and their work should feed into the reflection process;
- any overlap and duplication of work shall be avoided both within the EU and in respect to WHO:
- best practice sharing should be reinforced; there is a value added in more work at EUlevel on best practice sharing;
- there was an agreement on the establishment of a "drafting group" led by the Commission and with the participation of the current (PL/DK/CY) and the future (IE/LT/EL) Trio Presidencies. The "drafting group" shall submit a report to the Working Party's meeting in October 2012 under Cypriot Presidency. It should focus on two main elements:
  - o health promotion and disease prevention with innovative methods and use of social media;
  - o chronic disease management and good practices exchange with the use of modern IT technologies, e.g. via Internet platform.

7311/12 LE, JS/asz

EU Health Policy Forum contribution has been send to delegations separately. It is available on: http://www.epha.org/IMG/pdf/EU HPF Answer to Consult on CDs Jan12.pdf

The Member States will be given an opportunity to comment on the draft report before it is submitted to the Working Party for discussion in October 2012 through written consultation.

#### 3. THE ROLE OF THE EU IN INTERNATIONAL HEALTH FORA

The <u>Chair</u> introduced a note from the Presidency<sup>7</sup> on this item of the agenda containing four topics for discussion.

Programmes and priority setting will be discussed by WHO Member States at the meeting on 27-28 February in Geneva. The discussion will continue before the annual World Health Assembly. Ideally, possible strategic objectives for the WHO reform should be agreed at the EU level before the World Health Assembly. The Commission supported the Presidency's approach. It considered that the EU coordination in Geneva was working well before and during the Executive Board meeting and that Estonia as a current member of the Executive Board has well represented the EU's view.

<u>Delegations</u> agreed that the WPPHSL should discuss strategic issues related to the WHO (see the calendar of events in doc. 5275/12) and expressed readiness to actively take part in discussions on WHO priorities setting. A few delegations stressed the need to avoid duplication with coordination taking place in Geneva.

2) Rolling calendar of international events in the field of health

The Working Party agreed to the above calendar (doc. 5275/12) as a planning tool for
EU discussions and coordination.

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7311/12 LE, JS/asz DG I EN

<sup>&</sup>lt;sup>7</sup> doc. 5274/12 SAN 4

3) Representation of EU Member States in WHO governing bodies at global and regional level

The <u>Presidency</u> proposed to increase sharing of information on EU MS candidatures for WHO governing bodies with a view to a more coordinated approach and mutual support. The <u>Commission</u> found that the representation of the EU Member States in WHO at global level is not sufficient and the EU should aim to obtain half of the seats allocated to the European region in the WHO Executive Board (i.e. 4 out of 8 seats). From May 2012, only two seats will be occupied by the EU MS: Belgium (2012-2015) and Lithuania (2012-2015). Sweden announced that it would propose a candidate for one seat for the period 2013-2016 to be elected at the 62nd Regional Committee meeting in September 2012 in Malta.

Concerning the Standing Committee of the EURO Regional Committee, the EU representation is adequate (7 out of 12 members).

The <u>Chair</u> concluded that there was an agreement on the exchange of information on EU candidacies for WHO governing bodies at global and regional level.

4) WHO EURO - Health 2020 and cooperation with the WHO Regional Office for Europe

The new policy document "Health 2020" should be adopted at the 62nd Regional Committee meeting in September 2012 in Malta. The WHO Regional Office for Europe is conducting written consultations on a revised version of Health 2020 as well as on the draft European action plan on strengthening public health capacities and services. The deadline for written comments is expected to be set for the end of March 2012. Furthermore, a third meeting of the European Health Policy Forum of High-Level Government Officials will take place in Brussels on 19-20 April 2012.

A short exchange of views took place, pointing out that consultations among EU MS on Health 2020 are useful, without, however, leading to common EU position at this stage. There could be further consultations during the European Health Policy Forum in Brussels on 19-20 April 2012.

7311/12 LE, JS/asz EN

The Chair concluded that increased exchange of information among EU MS on matters related to WHO EURO would be useful. .

The Presidency would put Health 2020 on the agenda of a meeting of the Council Working Party on Public Health (March 6, 2012) for an exchange of views.

The <u>Commission</u> informed about its cooperation with the WHO Regional Office for Europe based on the Joint Declaration<sup>8</sup>.

#### 4. REFLECTION PROCESS: TOWARDS MODERN, RESPONSIVE AND SUSTAINABLE HEALTH SYSTEMS

The Chair recalled that at the last Working Party's meeting it was agreed to create smaller sub-groups of interested Member States on each of four themes identified in paragraph 22, third indent of the Council conclusions<sup>9</sup>. Given the short time since the creation of subgroups, no substantial outcome had been expected. Nevertheless, the 'coordinators' gave a brief information about the first discussions within sub-groups.

# Sub-group 1 (Coordinator: European Commission)

The first meeting took place on 1 February 2012. The MS were asked to give input with the objective of a better presentation of health in the framework of the Europe 2020 Strategy and in the process of the European Semester. The main focus of this sub-group will be on the presentation of health in National Reform Programmes. The Commission intends to submit 4 papers:

- a) on budget reform of health systems,
- b) healthy workforce,
- c) poverty reduction,
- d) long-term input of WPPHSL to the European semester.

7311/12 LE, JS/asz DG I

Joint declaration between the European Commission and WHO Regional Office in Europe (EUR/RC60/12 Add.1)

http://www.euro.who.int/ data/assets/pdf file/0011/121601/RC60 edoc12add1.pdf

Council conclusions "Towards modern, responsive and sustainable health systems" adopted by the Council (EPSCO) on 6 June 2011; OJ C 202, 8.7.2011, p. 10

Further, the Commission plans to present assessments on the uptake/presentation of health in the 2012 and 2013 European Semesters.

A follow-up meeting will take place in September 2012 to discuss progress made with the 4 papers as well as a draft assessment of the uptake/presentation of health in the 2012 European Semester.

# <u>Sub-group 2</u> (Coordinator: Hungary)

The first meeting will take place in March 2012. A work plan has been prepared and was recently presented to the members of the group. Following deliverables have been proposed: (a) sharing and analysing of experience and good practices, (b) identifying success factors for effective investments and health sector financing, (c) developing a toolbox for Member States on the use of Structural Funds for health systems or other sectors with a positive impact on health. MS were asked to provide their input for the work plan and objectives before the end of February 2012. Two or three sub-group meetings are foreseen, together with videoconferences or other means of communication as needed. A report with recommendations will be submitted at the next Working Party meeting in October 2012. Any agreed results may then be useful for the next structural funds cycle 2014-2020.

#### Sub-group 3 (Coordinator: Poland)

The first meeting took place on 12 January 2012 and discussed (a) possible split into two new subgroups, (b) possible outputs and (c) working methods. The coordinator made a proposal to split the subgroup into two new subgroups - one on Cost-effective use of medicines (Coordinator: Netherlands) and the second on Integrated care models and better hospital management (Coordinator: Poland).

Discussions with the WHO Office in Copenhagen have taken place in order to include its work. The work of the European Observatory on Health Systems and Policies and the OECD analysis of healthcare systems will also be incorporated. The findings of this mapping process will be presented to the next Working Party.

7311/12 LE, JS/asz 7.
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### <u>Sub-group 4</u> (Coordinator: Sweden)

The first meeting took place on 1 February 2012. There are already many publications and studies related to the theme on measuring and monitoring the effectiveness of health investments done by the EU, WHO and OECD (Eurostat, European Observatory) which will be taken into account. A work plan has been drafted and it focuses on three issues:

- Improving data collection to build a common methodology and terminology;
- Visibility: efforts in reporting data;
- Comparative study: national comparisons are not well used today and could be broader. There are areas of high costs or volumes that should be examined.

A second meeting will be held in April 2012 to decide on the final work plan and deadlines and the priority for the different areas. In September 2012 a first report will be ready for approval and presentation at the next Working Party meeting.

## The Chair concluded that:

- The Working Party decided to divide the sub-group 3 into two separate sub-groups:
  - o on Cost-effective use of medicins (Coordinator: Netherlands),
  - on *Integrated care models and better hospital management* (Coordinator: Poland),

members of sub-group 3 were invited to inform the Council Secretariat in which of the two sub-group(s) they would like to participate;

- the sub-groups are now ready to start their work and some of them are already in progress;
- all coordinators shall present by the end of August 2012 a written status report (including timeframe, milestones and expected results) to be discussed at the next Working Party's meeting in October 2012;
- possible input to the December 2012 Council (EPSCO) should be considered by CY
   Presidency;
- the end of 2013 was mentioned as a target date for finalising the work.

#### 5. THE EU HEALTH STRATEGY

The <u>Commission</u> made an update on recent activities. There have not been many new developments since the last meeting in October 2011. The Commission also informed about the state of affairs of Joint Actions co-financed from the Public Health Programme in 2008-2012.

In reply to the question about the new EU Health Strategy, the Commission said that the issue had been discussed internally. The Commission believed that the principles of the present strategy are still valid and it was considering an extension of the present strategy after 2014.

#### 6. OTHER BUSINESS

#### 6.1. - Information from the Commission on P.I.P. implants

The <u>Commission</u> informed that the proposal for revision of medical devices legislation will be delayed by approximately 2 months as the Commission has been carrying out a "stress-test" of the current legislative framework in view of the PIP case. The proposal should be submitted to the EP and the Council in the first half of 2012. At the same time, the current legislation has to be better implemented in a "Joint Plan for Immediate Action". Therefore, Commissioner Dalli invited all Member States to provide suggestions in that respect. Any agreed measures can then be adopted via comitology procedure, for which medical devices legislation provides for, but has not been used until now.

The <u>Chair announced</u> that the Commission's plans in regard to a "Joint Plan for Immediate Action" would be put on the agenda of the meeting of the Council Working Party on Pharmaceuticals and Medical Devices on 28 February 2012.

### 6.2. - Information from the French delegation on standardisation

<u>FR</u> draw the attention of the Working Party to the current proposal for a Regulation on European Standardisation<sup>10</sup> discussed in the WP on Technical Harmonisation (Standardisation) and its relationship to health. Some of the provisions of this proposal set standards in the area of health, on which many Member States have expressed reservations, as health matters are in principle a national competence. The delegates have been invited to discuss the matter at national level with those dealing with standardisation.

6.3. - Information from the Presidency on the informal ministerial meeting in Denmark
The <u>Chair</u> informed that the informal meeting of ministers of health will be held on 23 and 24
April 2012 in Horsens, Denmark. The agenda will focus on creating more innovation and growth in the health sector under the heading "Smart Health – Better Lives". The other main topic on the agenda will be chronic diseases patient empowerment.

#### 8. **NEXT MEETING**

The next meeting will be held on 3 October 2012 under Cyprus Presidency.

doc. 6076/12

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