



**COUNCIL OF
THE EUROPEAN UNION**

Brussels, 28 November 2013

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SAN 462

NOTE

from: General Secretariat of the Council
to: Permanent Representative Committee (Part I)/Council
Subject: **Employment, Social Policy, Health and Consumer Affairs** Council meeting on
9 and 10 December 2013

Draft Council conclusions on the "Reflection process on modern, responsive and sustainable health systems"

- *Adoption*

(Public debate in accordance with Article 8(2) of the Council's Rules of Procedure [proposed by the Presidency])

1. The Working Party on Public Health discussed and agreed the draft Council conclusions as set out in the Annex.
2. COREPER is invited to confirm the Working Party's agreement and submit the draft conclusions for adoption by the Council (EPSCO) at its meeting on 10 December 2013.
3. The Council is invited to adopt the draft conclusions and forward them for publication in the Official Journal.

THE COUNCIL OF THE EUROPEAN UNION:

1. RECALLS that under Article 168 of the Treaty on the Functioning of the European Union, a high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities; as well as Union action is to complement national policies and be directed towards improving public health; it is also to encourage cooperation between the Member States in the field of public health and, if necessary, lend support to their action, and fully respect the responsibilities of the Member States for the organisation and delivery of health services and medical care;
2. RECALLS that the Council in its conclusions on modern, responsive and sustainable health systems, adopted on 6 June 2011, invited the Member States and the Commission to initiate a reflection process under the auspices of the Working Party on Public Health at Senior Level aiming to identify effective ways of investing in health, so as to pursue modern, responsive and sustainable health systems;
3. RECALLS the commitment to achieve the Europe 2020 objectives of smart, sustainable and inclusive growth including the coordination of national efforts through the yearly cycle of economic policy coordination, the European Semester;
4. RECALLS that the challenges, objectives and principles identified in the White Paper “Together for Health: A Strategic Approach for the EU” adopted by the Commission on 23 October 2007 and confirmed by Council Conclusions of 5-6 December 2007 remain valid and contribute to the achievement of Europe 2020 target;

5. RECALLS Council Conclusions “Towards social investment for growth and cohesion” of 20-21 June 2013¹, Council Conclusions on the Annual Growth Survey and the Joint Employment Report in the Context of the European Semester of 28 February 2013² and the endorsement of the SPC Report on social policy reforms for growth and cohesion in the context of the Evaluation of the 2013 European Semester in employment and social policies of 15 October 2013³;
6. TAKES NOTE OF the progress achieved in the reflection process, in terms of including health in other policies in the frame of the implementation of the Europe 2020 Strategy, identification of themes for possible closer cooperation among Member States, exchange of best practices and progress towards more coordinated EU-level cooperation in order to support Member States, where appropriate, in their efforts to ensure that their health systems meet future challenges;
7. WELCOMES the on-going work on the reflection process on the five defined objectives:
 - enhancing the adequate representation of health in the framework of the Europe 2020 Strategy and in the process of the European Semester;
 - defining success factors for the effective use of Structural Funds for health investments;
 - cost effective use of medicines;
 - integrated care models and better hospital management;
 - measuring and monitoring the effectiveness of health investments.

CONSIDERING THAT:

- (a) over the course of the first three European Semesters, the role of health issues has been consistently reinforced and the tone and context of references to health systems reforms have evolved, with the twin aim of ensuring equal and universal access to high quality healthcare as well as funding based on solidarity principle and a more efficient use of public resources now explicitly included as a policy aim in the Commission's Annual Growth Survey for 2013;

¹ 11487/13
² 6936/13
³ 13958/1/ REV1

- (b) people's health, in addition to being of a value in itself, can have a positive influence on economic outcomes such as labour supply and productivity, human capital, and overall public spending and therefore plays a key role in achieving Europe 2020 objectives and within the European Semester;
- (c) Member States should therefore tackle social and health risks throughout people's lives, taking particular account of the benefits of early disease prevention and health promotion as well as care, ensuring universal access to high quality healthcare services, and modernising health care systems to improve their cost-effectiveness, accessibility and sustainability;
- (d) cost effective and efficient health spending is a productive and growth-friendly type of expenditure and investing in health should be acknowledged as a contribution to economic growth and social cohesion;
- (e) Member States face common challenges due to an ageing population, the burden of chronic diseases, challenges related to communicable diseases changing population needs, health inequalities increasing patient expectations and growing costs of health care as well as diminishing resources available to Member States' health systems due to the current economic situation;
- (f) the enhanced economic policy coordination may necessitate stronger co-ordination at EU level in the field of health, while respecting Article 168 of the Treaty on the Functioning of the European Union;
- (g) health promotion and disease prevention are key factors for the long-term sustainability of health systems as well as for increasing healthy life years;
- (h) policy-making and decision-making processes should be, as far as possible, evidence-based and supported by adequate health information systems;
- (i) health investments financed, inter alia, through Structural and Investment Funds can be an important factor of health systems sustainability, however the full potential for better use of Structural and Investment Funds for health investments by the Member States in the period 2014-2020 remains to be achieved;
- (j) integrated care models are perceived as important, innovative and promising ways to improve the quality and efficiency of health systems and therefore improve their sustainability;

- (k) the EU's role in the field of health system performance assessment (HSPA) in coordination and cooperation with other international organisations, in particular the OECD and the WHO can further be intensified, while aligning with the existing systems;
- (l) the Member States need to sustain the provision of their population with affordable, innovative, effective and safe pharmaceuticals and medical devices while safeguarding the financial sustainability of health systems.

WELCOMES:

- (a) the results of the reflection process under the auspices of the Working Party on Public Health at Senior Level aiming to identify effective ways of investing in health, so as to pursue modern, responsive and sustainable health systems;
- (b) the results of the reflection process on innovative approaches for chronic diseases in public health and healthcare systems;
- (c) the approach outlined in the Commission Staff Working Document on "Investing in Health" adopted as part of the Commission Communication „Towards social investment for growth and cohesion" as ("Social Investment Package") adopted on 18 February 2013⁴ emphasising that health is a value in itself as well as a precondition for economic prosperity and social cohesion;
- (d) the progress made by the European Innovation Partnership on Active and Healthy Ageing in the implementation of its strategic plan, as well as the strengthening of regional cooperation initiated by the selection of reference sites;
- (e) further development and consolidation, while avoiding duplication of work, of a health monitoring and information system at EU level based on the European Core Health Indicators (ECHI) and existing health monitoring and reporting systems developed as a result of a cooperation between Member States supported by the Programmes of Community Action in the field of Health;

⁴ 6380/13 ADD 7

INVITES THE MEMBER STATES TO:

- (a) assess, as appropriate, the possible impacts of health system reforms as presented in National Reform Programmes, including direct and indirect effects on health, population poverty, employment rates, productivity and competitiveness;
- (b) ensure appropriate coordination between the relevant Council formations (e.g. EPSCO, ECOFIN etc.) dealing with the different aspects of health in the framework of the Europe 2020 Strategy and European Semester in order to improve the quality of the policy dialogue and to increase the added value of EU discussions on health policies which are facing challenges going beyond the mere fiscal sustainability;
- (c) continue the dialogue aimed at improving the effective use of European Structural and Investment Funds (ESIF) for health investments and to exchange good practices on planning, implementation, monitoring and problem solving in the period 2014-2020 on the basis of the outcomes of the reflection process on that theme, and in particular the Toolbox for the effective use of ESIF for health investments;
- (d) establish and develop, on voluntary basis, national policies and programmes on integrated forms of care and reshape fragmented delivery of health and social services by :
 - making the integrated care a priority in their health policies and programmes at national, regional and local levels;
 - supporting the development of processes and tools, with a special emphasis on the use of information and communication technology and financial instruments;
 - encouraging the health professionals organisations to have an active role in integrated care;
 - promoting the training of healthcare workers on integrated care;

- empowering and informing patients through involvement of patient organisations in the development of policies and programmes on integrated care at all appropriate levels;
 - developing and promoting research and innovations on integrated care;
- (e) use health system performance assessment (HSPA) for policymaking, accountability and transparency;
- (f) consider development of the repository of good practices that can provide an illustration for successful modernisation of health and care systems and help to scale-up the best solutions, taking into account the work of the European Innovation Partnership on Active and Healthy Ageing;
- (g) request the Working Party on Public Health at Senior Level:
- to steer the activities under sections IV and V, as covered by its competences, using existing fora, as appropriate;
 - to develop and adopt methods to strengthen its capacities.

INVITES THE COMMISSION AND THE MEMBER STATES TO:

- (a) continue the reflexions on the adequate representation of health in the framework of the Europe 2020 Strategy in order to ensure that this strategic issue will be included also during future exercises of the European Semester, subject to the forthcoming evaluation of this process;
- (b) ensure the necessary co-ordination at national and EU level in order to adequately represent the health sector in the process of the European Semester, and to streamline the on-going healthcare assessments at EU level, in particular through strengthened coordination and cooperation with the Social Protection Committee and the Economic Policy Committee, and by examining and establishing a working relationship between the Working Party on Public Health at Senior Level and the Social Protection Committee;
- (c) continue the monitoring exercise for the uptake of the health theme in the European Semester process, also by exchanging information with Member States about national developments, and to translate the concept of "access to good quality healthcare " into operational assessment criteria, inter alia for the purposes of thematic summaries on Health Systems;
- (d) continue reflection, on a voluntary basis, on aspects that may have an impact on availability, accessibility, prices, costs, patient safety and innovation of pharmaceuticals and medical devices and, where relevant, on systems that facilitate access, while fully respecting areas of Member States' competence;
- (e) share knowledge, experience and best practice on:
 - integrated care programmes, structures and policies, including reporting and learning systems, with a view to addressing the cost;
 - effectiveness of integrated care interventions and solutions at the healthcare setting level and evaluation of their transferability;

- (f) improve the coordination on Health systems performance assessment at EU level by:
- streamlining the debate on the theoretical HSPA framework and identifying useful methodologies and tools to support policy maker in taking decisions;
 - defining criteria for selecting priority areas for HSPA at EU level and improving the availability and quality of relevant data and information;
- (g) cooperate with a view to establishing a sustainable and integrated EU health information system, built on what has been already achieved through different groups and projects, such as ECHI-ECHIm projects, exploring in particular the potential of a comprehensive European health information research infrastructure consortium as a tool;
- (h) improve EU level coordination and develop concrete EU action towards reducing the burden of chronic diseases, including by: identifying and disseminating good practice using the “Joint Action addressing chronic diseases and promoting healthy ageing across the life cycle”, promoting modern and effective early prevention and management of chronic diseases as well as investments in health promotion and disease prevention, addressing multi-morbidity aligning the research agenda to public health needs, using insights from behavioural science and other disciplines, aligning with other international processes and cooperating with international organisations;
- (i) cooperate with a view to evaluate EU initiatives related to patient empowerment, and put forward ideas for policy actions towards creating favourable conditions and developing guidance for patient empowerment;

INVITES THE COMMISSION TO:

- (a) support exchanges of best practices and mutual learning among Member States on the effective and broader use of European Structural and Investment Funds for health investments;
 - (b) support integrated care projects, with a special emphasis on patient empowerments and management and prevention of chronic diseases;
 - (c) support Member States with using health system performance assessment (HSPA);
 - (d) present the evaluation of the concept and approach of European Innovation Partnership on Active and Healthy Ageing in the first semester 2014, and report twice yearly on the state of play of European Innovation Partnership on Active and Healthy Ageing, the progress made to date and next steps.
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