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SAN 34
SOC 45

OUTCOME OF PROCEEDINGS

From: General Secretariat of the Council
To: Delegations
Subject: Working Party on Public Health at Senior Level on 2 February 2016

INTRODUCTION

The 16th meeting of the Working Party on Public Health at Senior Level (WPPHSL) held since the adoption of the Council Conclusions on the Implementation of the EU Health Strategy was chaired by Mr Herbert Barnard, Director of International Affairs at the Netherlands Ministry of Health, Welfare and Sport.

1. ADOPTION OF THE AGENDA

The provisional agenda was adopted¹ with the addition of two 'Any other business' items that were dealt with in the course of the meeting:

- Germany (supported by Italy) requested information on the Joint Action on Patient Safety and the Quality of Care (item taken under point 2.1);
- The UK requested information on the activities of the Commission related to preparedness in the EU concerning the Zika virus (item taken under item 4).

¹ CM 5137/1/15

The Finnish delegation expressed disappointment that an information point on the state of play of negotiations relating to health aspects of the Transatlantic Trade and Investment Partnership (TTIP) was not on the agenda of the meeting.

2. COOPERATION ON HEALTH SYSTEMS

2.1 Progress reports on cooperation towards effective, accessible and resilient health systems

The Director-General of DG SANTE, Mr Xavier Prats Monné, outlined his vision of cooperation between the Commission and the WPPHSL based on the principle of subsidiarity, transparency and trust.

Subsequently, the Commission informed the WPPHSL about the new developments in the EU agenda on health systems based on three pillars - strengthening effectiveness, increasing accessibility and improving resilience - as set out in the Commission's Communication on effective, accessible and resilient health systems².

The Finnish delegation called for the establishment of an expert group on oral health at EU level as well as a Joint Action on oral health in 2017. The Commission argued that oral health questions can be discussed at regular meetings of Chief Dental Officers and, although it is important, oral health is neither amongst the Commission's main priorities, nor it is planned for a joint action.

The WPPHSL took note of the information from the Commission.

In relation to the Joint Action on Patient Safety and the Quality of Care (AOB point), Germany inquired into the establishment of a permanent framework for EU collaboration on patient safety and quality of care as requested by the Council in its conclusion³ adopted on 1 December 2014. Several delegations stressed their support for establishing such a network. The Commission replied that it would launch a feasibility study in 2016 and called upon the Member States to define better what would be the EU added value and objectives of the proposed cooperation on patient safety and what concrete policy deliverables the network should focus on.

² 8997/14 (COM(2014)215)

³ Council Conclusions on patient safety and quality of care, including the prevention and control of healthcare-associated infections and antimicrobial resistance (2014/C 438/05), point 29(h)

2.2 Health systems performance assessment (HSPA): Report by the HSPA Expert group on quality of care

The Chair of an Expert group on Health Systems Performance Assessment (HSPA), Ms Olivia Wiggzell, presented a draft report⁴. She recalled that the work on HSPA started in the context of the reflection process initiated in 2011 by the Council Conclusions on modern, responsive and sustainable health systems⁵. Subsequently, the WPPHSL agreed the terms of reference for the expert group on 15 July 2014⁶, which then became operational in late 2014. In line with its objectives, the Expert Group identified the assessment of quality of care as a priority for 2015 and an assessment of the performance of integrated care systems as the priority for 2016. The report shall be finalised by May 2015.

Delegations appreciated the draft report as a useful and comprehensive tool. They praised the work of an expert group and its chair. There was unanimous recognition of the following:

- the respect of the subsidiarity principle in conducting the work under HSPA;
- the HSPA process shall not lead to any 'ranking' of Member States or the establishment of any kind of 'benchmarking';
- the work should take into account and be complementary to the other organisations, in particular the OECD and the WHO.

It was suggested that the conclusions of the final report should be brought to the attention of the Ministers of Health in a comprehensive manner. The short summary of the report and its conclusion would be helpful for its future dissemination.

The Chair concluded that WPPHSL noted the draft report and invited delegations to send comments to the Chair of the Expert group, if they so wished, as soon as possible.

⁴ 5314/16

⁵ OJ C 202, 08.7.2011, p. 10

⁶ 12945/14

2.3 Cooperation with the Social Protection Committee under the European semester process: contribution of the Working Party on Public Health at Senior Level to the EPSCO Council Conclusions on the Annual Growth Survey (AGS)

The Chair welcomed Mr Alexis Rickenbach, Vice-Chair of the Social Protection Committee (SPC). Mr Rickenbach presented a positive assessment of the cooperation between the SPC and WPPHSL within the European Semester.

The WPPHSL endorsed its contribution to the draft Council Conclusions on the 2016 Annual Growth Survey (AGS) on the basis of the text proposed by the Presidency⁷ with a modification suggested by Belgium (underlined) as follows:

'Reforms in health care, which are under responsibility of the Member States, should focus on ensuring sustainable and cost-effective health services, without compromising universal and equitable access, quality and safety and with an increasing emphasis on prevention.'

The text has been communicated to the SPC and will be included in the draft Council Conclusions on the 2016 AGS, which will be submitted via the Working Party on Social Questions for adoption by the Council (EPSCO) on 7 March 2016.

A large number of delegations intervened on the broader issue of the representation of health in the European Semester. Further consideration of how to ensure greater involvement of health ministries in the process is required, as health is discussed within different fora without the involvement of the health sector, for example the draft 2016 Joint EPC-EC Report.

In relation to the Joint Assessment Framework (JAF) on Health developed by the SPC many delegations stated that the assessment of the Member States' health systems should be based on the work of the Expert group on HSPA rather than on the JAF on Health used by SPC.

⁷ 5315/16

2.4. Innovation for the benefit of patients

Mr. Van Raaij, Director of Pharmaceutical Policy at the Netherlands Ministry of Health, Welfare and Sport, reported on the informal meeting of directors responsible for pharmaceutical policy from EU Member States organised by the Netherlands on 11 December 2015. The Dutch Presidency wishes to continue discussions on the topics raised in the Council Conclusions on innovation for the benefit of patients adopted on 1 December 2014⁸. Based on the informal directors' meeting in December and bilateral discussions, the Netherlands Presidency plans to continue a debate at the following meetings:

17-18 February	Heads of Medicines Agencies: focus on AMR and timely access to innovative medicines for the patient
1-2 March	Expert meeting: Adaptive Pathways
23-24 March	Competent Authorities on Pricing and Reimbursement
17 April	Informal meeting of EU Health Ministers

The WPPHSL took note of the information provided by the Presidency.

3. ANTIMICROBIAL RESISTANCE (AMR)

The issue of antimicrobial resistance is one of the priorities of the Netherlands Presidency in the field of public health. The main objectives of the Presidency are:

- the drawing up of national AMR action plans and a new EU action plan;
- the creation of a strong EU One Health Network on AMR;
- the prudent use of antimicrobials in both humans and animals in the interest of public health;
- a commitment to action outside the EU;
- support for research and innovation.

A Ministerial-level conference will take place on 9-10 February 2016 in Amsterdam, gathering the ministers responsible for public health and agriculture. On the basis of the findings of the conference, the Presidency will submit draft Council Conclusions on AMR that will be discussed jointly by the health and veterinary experts and adopted by the Council.

⁸ OJ C 438, 6.12.2014, p.12

Another important area of EU action is the preparation of the 2016 UN General Assembly, at which the EU will aim for the adoption of a political declaration supported by heads of states and governments, representing a strong political endorsement of the Global Action Plan on AMR. The WPPHSL took note of the information provided by the Presidency.

4. THE EU HEALTH STRATEGY: UPDATE ON ACTIVITIES AND DEVELOPMENTS

The Commission, as requested by the UK delegation, informed delegations about the state of preparedness concerning the outbreak of the Zika virus⁹. While the risk of transmission of the Zika virus in the EU is still extremely low, the Commission is actively supporting the Member States' response.

The Health Security Committee (HSC) had discussed this issue in mid-January 2016, and is closely monitoring the situation. At the request of the Commission, the European Center for Disease Prevention and Control (ECDC) issued a risk assessment report, which was updated on 22 January. The HSC issued information to travelers and advice for health professionals. Notification has been received via the EU Early Warning and Response System of the appearance of the Zika virus in some Member States' overseas territories in the Caribbean region. Under Horizon 2020, a EUR 40 million call for research on vaccine development, for malaria and neglected infectious diseases including the Zika virus, has been issued. A further EUR 10 million for research infrastructure will contribute to the control of vector-borne diseases and could combat the mosquitos that spread Zika, as well as a number of other prevalent diseases. The EU is also co-funding research on the prevention of infectious diseases in Latin America and the Caribbean under the ERANET programme.

The Commission reported on the main developments under the EU Health Strategy, namely:

- Chronic Diseases: a high-level stakeholder conference 'Towards better prevention and management of chronic diseases' will be organised on 21 April 2016 in Brussels to discuss new approaches to the management and prevention of chronic diseases;

⁹ http://ec.europa.eu/health/zika/index_en.htm

- Added Sugars Reduction: a planned 10 % reduction in added sugars in processed food by 2020 (compared to 2015) to be achieved through actions by Member States and commitments made by the relevant industry (Nutrition Platform); a Conference on Product Improvement organised by the Dutch Presidency will take place in Amsterdam on 22-23 February 2016;
- Tobacco Products Directive: the transposition deadline is 20 May 2016; the Commission adopted four implementing acts in 2015, it will adopt a further four in 2016, and two in 2017; ECJ rulings on TPD are expected in April 2016.
The Conference of the Parties (CoP7) to the WHO Framework Convention on Tobacco Control (FCTC) will take place in India (New Delhi) in November 2016.
- Vaccination: given a challenging situation in the field of preparedness, and as a follow up to the 2014 Council Conclusions on vaccination as an effective tool of public health¹⁰, a Working Group on vaccination will be created under the Health Security Committee.

The WPPHSL took note of the information provided by the Commission.

5. THE EU'S ROLE IN INTERNATIONAL HEALTH FORA

The WPPHSL took note of the information provided by the Presidency in document 5317/16.

6. ANY OTHER BUSINESS

Two points referred to in point 1 were discussed under points 2.1 and 4 of the agenda respectively.

In addition, the Belgian delegation reported on the closing Plenary Assembly and Stakeholder forum of the EU Joint Action on Health Workforce Planning and Forecasting that will take place on 3-4 May 2016 in Belgium (exact venue tbc).

¹⁰ see: OJ C 438, 6.12.2014, p. 3.