



**COUNCIL OF
THE EUROPEAN UNION**

Brussels, 20 November 2008

16139/08

**SAN 284
SOC 711**

INFORMATION NOTE

from: General Secretariat

to: Delegations

No. prev. doc.: 9639/08 SAN 89

Subject : Council Conclusions on the Implementation of the EU Health Strategy
- Outcome of proceedings

The Council conclusions annexed hereto were adopted at the 2876th meeting of the Council (EPSCO) on 10 June 2008.

Draft Council Conclusions on a cooperation mechanism between the Council and the Commission for the implementation of the EU Health Strategy

The Council of the European Union

1. **RECALLS** that Article 152 of the Treaty establishing the European Communities states that a high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities, that the Community shall encourage cooperation between Member States in the areas referred to in this Article, and that Member States shall, in liaison with the Commission, coordinate among themselves their policies and programmes aimed at improving public health.
2. **EMPHASISES** that though the organisation and delivery of health services and medical care are the responsibility of Member States, there are areas where cooperation at Community level can bring support and added value to the endeavours of the Member States to implement their own policies and strategic actions. It is of particular importance to analyse situations where Community policies and actions at Community level have the potential to significantly affect health determinants.
3. **REFERS** to the Council Conclusions¹ on the Commission's White Paper "Together for Health: A Strategic Approach for the EU, 2008-2013"², adopted at its meeting of 6 December 2007, and underlines the need to ensure a systematic approach and strategic cooperation between the Council and the Commission for the implementation of the EU Health Strategy.
4. **UNDERLINES** that the Commission's White Paper represents a strategic approach covering a wide range of health issues at EU level with the aim of giving health policy at EU level more focus, coherence, direction and prioritisation and thus enabling it to be more efficient and effective.

¹ Doc. 16139/07 (Presse 284)

² COM(2007) 630 final

5. **RECOGNISES** that better involvement on the part of Member States and the Council in health policy formulation at EU level is important for defining key issues and actions that would have a real added value for Member States, ensuring the overall coherence of EU policies and implementing the "health in all policies" approach. It would also give the necessary visibility and importance to health issues in the context of EU policies.
6. **CONSIDERS** that the Council and the Member States should closely cooperate with the Commission in order to achieve a strategic approach and to move the EU health agenda forward. This could be done through “strategic cooperation” between the Commission and the Council using existing Council structures.
7. **NOTES** that the above “cooperation mechanism” does not entail creating new bodies or changing existing procedures. The Working Party on Public Health convened at senior level could, after reformulating its existing working practices and activities, perform well-defined tasks and assist the Council in exercising its strategic role in addressing, defining and oversight of EU health-related issues. This would offer the possibility of working more effectively with and through existing procedures and structures, including those established by the Commission, whilst fully respecting the existing division of competences between the Commission, the Council and the Member States.
8. **UNDERLINES** that the new approach would offer an opportunity to widen the scope of the debate and discuss all health and health-related issues that have a clear European added value for Member States. The new approach would also allow for a more active role to be taken by Member States in EU health matters and EU matters that can influence health, in full compliance with the subsidiarity principle with regard to the organisation of health systems.
9. **WELCOMES** the Commission to come to the Council with well coordinated positions covering all health relevant policies.

10. **RECALLS** the Commission's commitment of 6 December 2007 to review its existing structures in the health field and to identify criteria for streamlining and rationalising these structures in terms of assessing what is needed and what is most effective, and to avoid any duplication of work³, bearing in mind that these structures also draw on the resources of the Member States.
11. **INVITES** the Commission to
- inform the Council as soon as possible on the progress made in streamlining and rationalising its existing structures;
 - prepare, on the basis of the White Paper, the background documents necessary to discuss and select the priorities and actions and present ways to take them forward. In this work it should take into account the activities envisaged under the annual work plan under the Second Programme for Community Action in the field of Health 2008-2013 and the annual work plan of the Commission;
 - actively support this strategic cooperation with appropriate technical inputs from all relevant sectors that may have health implications.
12. **ENDORSES**, in this regard the mandate given by the Committee of Permanent Representatives to the Working Party at senior level, as provided for in the annex to these conclusions.
13. **INVITES** Member States to have high level participation from capitals in the meetings of the Working Party at senior level.
14. **INVITES** the incoming Presidencies and the Commission to cooperate in preparation of the first meeting of the Working Party at senior level in accordance with its new working methods and scope, role and responsibilities.

³ The streamlining and rationalising process will normally not affect comitology committees.

**Working methods and scope, role and responsibilities of the
Working Party on Public Health at Senior Level**

1. The Working Party at senior level will:
 - a) be a forum for discussing major common strategic issues in health;
 - b) consider the issues arising for health systems and health determinants from the application of the Treaty;
 - c) contribute to a strategic vision for health and to ensuring continuity in political and strategic debates;
 - d) identify priorities, objectives and actions within the strategic framework, with the timeframe for implementation and monitoring of progress;
 - e) contribute to preparations for the Council's strategic debates and decisions, without prejudice to the responsibilities of the Committee of Permanent Representatives;
 - f) once the objectives and priorities are fixed, identify ways to take them forward, whilst fully respecting national prerogatives;

- g) invite the Commission to provide the Working Party at senior level with technical inputs, materials and documents necessary for defining priorities, objectives and actions, and for their implementation and its monitoring, such as reports on the work of existing structures in the field of health, methods and processes for strengthening intersectoral work for health, activities under the Second Programme for Community Action in the field of Health 2008-2013, including the results of different projects and syntheses of progress on the basis of reports provided by Member States;
 - h) carry out horizontal scanning of health-related activities across all sectors of Community policies on the basis of regular overviews prepared by the Commission and the Council Secretariat and, where appropriate, of inputs from Member States;
 - i) select items for more in-depth review and, as appropriate, provide suggestions on how to implement the "health in all policies" approach through strategic cooperation;
 - j) offer the opportunity for Member States to discuss, and share experiences on, EU health matters and EU matters that can influence health and to share information on national strategies on health;
 - k) periodically assess the effectiveness of working methods in place for the implementation of health strategies and policies and the "health in all policies" approach.
2. Experts from other EU institutions and international organisations may be invited to attend on an ad hoc basis for the discussion of specific items in accordance with the Council's Rules of Procedure.

3. As regards support to the meetings of the Working Party at senior level
 - the Commission should play an important role by providing technical inputs, for example impact assessments, and by proposing key issues that demand consideration, either on its own initiative or at the request of the Working Party;
 - in cooperation with the Presidency-in-office the Council Secretariat should prepare regular updates of the horizontal overview of relevant activities in different Council bodies as well as information about relevant outputs of other EU institutions, in particular the European Parliament and European Court of Justice.
4. The Member States should ensure participation at senior level from the capitals in the Working Party.
5. In order to contribute to preparations for the Council's strategic debates and decisions, the Working Party at senior level will report to the Committee of Permanent Representatives in accordance with the Council's Rules of Procedure. The Working Party at senior level will not be a parallel negotiating forum for specific proposals under discussion elsewhere in the Council. In this framework, the working methods of the Working Party at senior level may if necessary be adapted.
