



**COUNCIL OF
THE EUROPEAN UNION**

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SAN 127

OUTCOME OF PROCEEDINGS

from: General Secretariat of the Council

to: Delegations

Subject Working Party on Public Health at Senior Level on 28 May 2010

1. INTRODUCTION

On 10 June 2008, the Council adopted Conclusions on the Implementation of the EU Health Strategy¹, in which it endorsed the mandate given by the Permanent Representatives Committee to the Working Party on Public Health at Senior Level (hereinafter referred to as the "Working Party").

The fourth meeting held since the adoption of the above-mentioned Council conclusions was chaired by Mr Pablo Rivera Corte, Director-General of the Agency for the Quality of the National Health System, Ministry of Health and Social Policy of Spain.

The provisional agenda for the meeting² was adopted without changes and consisted of three items as described below.

¹ 16139/08

² 2855/1/10

2. FOLLOW-UP TO THE EU HEALTH STRATEGY

2.1. Five-year work programme of the Commission

The SANCO Director-General, Mrs Paola Testori Coggi, said that the main framework of Commission's action will be the "Europe 2020 Strategy". Of the seven flagship initiatives of the 2020 Strategy, the following four concern health policies:

- "Innovation Union";
- "A digital agenda for Europe";
- "European platform against poverty";
- "New skills for new jobs".

The main initiatives in the area of public health will be:

- Health Technology Performance Assessment;
- Global Health;
- Legislative proposals on pharmacovigilance and information for the general public on medicinal products;
- Revision of the Directive on Clinical Trials (2011);
- Revision of the existing Directives (90/385, 93/42 and 98/79) on Medical Devices (ongoing consultations, proposal 4th quarter of 2011);
- Revision of Tobacco Products Directive 2001/37 (proposal 4th quarter 2011);
- Implementation of the Directive on Organ Donation and Transplantation (agreed, to be published in the Official Journal by the end of 2010);
- Implementation of Council Recommendations on:
 - Patient Safety (OJ C 151, 3.7.2009)
 - Rare Diseases (OJ C 151, 3.7.2009)
 - Smoke-free Environments (OJ C 296, 5.12.2009)
- Health Threat Package:
 - Communication and proposal for Council Recommendation on pandemic influenza preparedness and response planning in the EU (December 2010)
 - Legislative proposal on health security (later, time not specified).

2.2. Activities of the Social Protection Committee (SPC)

The SPC Chairman, Mr Aurelio Fernandez informed the Working party about the 2010 Joint Report on Social Protection and Social Inclusion³ adopted by the Council (EPSCO) on 8 March 2010 and forwarded to the European Council on 25 and 26 March 2010, which examined social impact of the financial crises, including the widening of health inequalities within and between Member States.

The SPC submitted its contribution to the Europe 2020 Strategy⁴ to the Council (EPSCO) on 7-8 June 2010. In the future the SPC will work on the following main themes:

- Ageing (2012 Year of ageing)
- Health is wealth
- Efficiency in public spending and sustainability of pensions' systems.

The SPC Chairman highlighted the health-related aspects of the SPC's work (health inequalities, health impact of the financial crises, sustainability of healthcare systems) and called for stronger co-operation between the SPC and the Working Party. In this respect, it should be recalled that the strengthened cooperation between the SPC and the Working Party (primarily in two areas - health is the greatest wealth and healthy and dignified aging) was identified in December 2009 as one of priorities in the implementation of the EU health strategy.

2.2. Intervention of the representative of the EU Health Policy Forum

Ms Monika Kosinska, the Secretary-General of the European Public Health Alliance, briefed the Working Party on the EU Health Policy Forum's views on the implementation of EU health strategy⁵.

³ 6500/10

⁴ 9964/10

⁵ http://ec.europa.eu/health/ph_overview/health_forum/policy_forum_en.htm

3. HEALTH SYSTEMS PERFORMANCE ASSESSMENT (HSPA)

As a follow-up to the discussion in December 2009, the Commission presented an overview of its activities aimed at developing tools for the HSPA⁶. In the future, the following activities will be pursued by DG SANCO:

1. continuation of cooperation with the OECD on the healthcare quality indicators project (HCQI). The main HCQI outcome, "Health at a glance" report, could be enlarged to include all EU Member States (i.e. also those that are not members of the OECD).
2. Continuation of cooperation with WHO/EURO on implementation of Impact Assessment Guidelines.
3. Further development of European health indicators (ECHI).
4. Strengthening of the cooperation with European Observatory on Health Systems and policies on analysis of performance of European health systems. The Commission became a member of Observatory and contributed 500 000 € to its budget from the public health programme.
5. Work on cancer through the European partnership for action against cancer.

Delegations welcomed the information from the Commission as a useful clarification of ongoing work. They stressed that any duplication of the work already done by WHO/EURO and OECD should be avoided. As at the meeting in December 2009, delegations stressed that neither set of indicators was used by all EU Member States, thus making any comparison of national healthcare systems of the Member States impossible. The main focus of the debate should remain the exchange of information and best practices. Nevertheless, there was interest in following up this subject and it should be regularly brought back to the Working Party with a view to discussions in the Health Information Committee.

4. QUALITY OF HEALTHCARE

This item represents the continuation of debate held by the Working Party in December 2008 under the French Presidency. It is also important with a view to the ongoing debate on draft Directive on application of patients' rights in cross-border healthcare⁷.

⁶ 9365/10

⁷ Interinstitutional file 2008/0142 (COD)

4.1. Policy actions at the EU level

The Commission presented its reflection paper⁸ putting forward four policy options for future work in this area at the EU level.

Delegations considered that the topic of quality of healthcare was an important one. However, the discussions and activities should not lead to any comparisons of Member States' healthcare systems. Given the existing differences, any comparisons would not be productive. Instead, the main focus should be exchange of information (e.g. on national quality programmes and/or schemes) and sharing of best practices. A common understanding of healthcare quality would facilitate the sharing of best practices. The development of common standards, definitions or terminology would be useful, but it was recognized that it would be a difficult task. The Commission should stimulate and facilitate exchanges between the Member States.

From four options for further work, delegations in general supported options 1 and 2, i.e. using existing opportunities combined with the possibility of an enhanced cooperation mechanism in the form of joint action between the Member States and the Commission.

The Commission will present a proposal for joint action to be implemented in 2011. Its progress will be reported one year after its start. Depending on the developments, the Commission may submit a communication at the end of 2011.

4.2. Patient and healthcare quality

The Deputy Director for the Office of Health Planning and Quality from the Spanish Ministry of Health and Social Affairs, Dr. Concepción Colomer, presented the report on patient participation in decision-making about their health. She highlighted the key points of the report:

- a) patients can play an important role in promoting their health, and preventing and managing diseases, specifically chronic diseases;
- b) scientific evidence suggests that patient involvement can improve their health and satisfaction, the quality and safety of healthcare, and have an economic impact by reducing costs and increasing efficiency;

⁸ 9366/1/10

- c) a number of interventions have been shown to be effective in building health literacy and educating patients to play an active role in healthcare;
- d) a European approach for some of those interventions could be beneficial for the health of the European population and for healthcare systems;
- e) there are some existing examples of good practices in patient involvement in Europe.

The Presidency structured the discussion around three questions in the Presidency background note⁹.

Delegations actively discussed the subject. They agreed that patients involvement in the healthcare quality discussions and decision-making at national level was very important and represented a step to better healthcare. The Member States shared their national experiences and good practices. The incentives for patient organisations to participate, transparency, dissemination of information (e.g. use of health web portals, specialized leaflets and publications), specific legislation on patients' participation and training of health professionals have been mentioned as tools to increase patients involvement.

In conclusion, delegations expressed an interest in enhancing the exchange of information and the sharing of best practices in this field at EU level.

5. NEXT MEETING OF THE GROUP

The incoming Belgian Presidency informed that the next meeting of the Council Working Party on Public Health at Senior Level was planned for **13 October 2010**. The main topic envisaged was:

- Implementation of the EU Health Strategy (follow-up);
- Global Health (main discussion item).

⁹ 9367/10