



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY
Public health, country knowledge, crisis management
Health programme and chronic diseases

Luxembourg, 4 Dec. 2018

NOTE OF THE MEETING

EXTRAORDINARY MEETING STEERING GROUP ON HEALTH PROMOTION, DISEASE PREVENTION AND MANAGEMENT OF NON-COMMUNICABLE DISEASES 28 SEPTEMBER 2018, LUXEMBURG

Welcome and Introduction

The meeting was chaired by the Deputy Director-General of DG Health and Food Safety (DG SANTE).

The participants were the nominated representatives of 23 Member States, as well as of Norway and Iceland. Colleagues from DG RTD, DG CNECT, DG EMPL, DG ENER, SRSS, JRC, ESTAT and the European Investment Bank (EIB) also attended.

The Chair welcomed the participants and highlighted the two key objectives of the meeting: firstly to inform about the current actions under the Horizon 2020 research programme and the Structural Reform Support Programme, and secondly to provide an outlook to the future planning for Horizon Europe, the Reform Support Programme and the European Social Fund +. All these programmes offer great potential to advance health objectives at regional, national and European level. The same holds for the projects supported by the European Investment Bank.

The Chair reminded participants of the recent Commission Decision to formalise the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases (SGPP) as a Commission expert group. Under the SGPP the Commission continues to develop a new approach seeking cross-fertilisation and coherence between EU programmes as well as increased dialogue with EU Member States. This contributes to the overall objectives of the concept of health in all policies.

This is embodied in article 29 of the Commission proposal for the European Social Fund+: *The Commission shall consult the health authorities of the Member States in the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases or in other relevant Commission expert group or similar entities on the work plans established for the Health strand and its priorities and strategic orientations and its implementation, and also on the health policy perspective of other*

*policies and support mechanisms, thus increasing their overall coordination and added value*¹.

The SGPP also has a key role in supporting implementation. It can provide member state preferences in identifying, sharing and scaling up best public health practices/interventions, and will continue to play this role, linked to the achievement of the Sustainable development goals. The Commission is supporting this process, including via the best practice portal hosted by the Joint Research Centre and funding of the transfer and implementation of best practices and interventions using EU funding instruments.

Presentations on current and proposed EU Framework Programmes for research and innovation

The acting Director for Health, Directorate-General for Research and Innovation (DG RTD) presented the ongoing Horizon 2020 programme (2014-20) and its three priorities: excellent science, industrial leadership and societal challenges. Health, demographic change and wellbeing is one of those challenges, with a dedicated budget of nearly 7.5 billion. Other programme elements and instruments also offer opportunities to support research and capacity building that is relevant to health. The work programme for 2018–2020 includes calls on co- and multi-morbidities, screening strategies for non-communicable diseases, and mental health in the workplace. Following questions, it was pointed out that national and regional health authorities are becoming increasingly involved in helping DG RTD to set priorities. National authorities already have a key role in the priority setting of coordination and support actions.

The Director for Public Health, Country Knowledge and Crisis Management (DG SANTE) acknowledged the importance of improving linkages between health policy and research policy. The proposal for the upcoming Horizon Europe programme fosters a strong joint-up approach with a role for DG SANTE as the co-chair of the new health cluster of the new research program. Alignment between health and other major European policy goals (e.g. on social rights, digital single market, cross-border healthcare and tackling antimicrobial resistance) should help member states deliver on national objectives as well as the Sustainable Development Goals. Centering around six main areas of intervention, the proposed Horizon Europe programme will offer broader opportunities for European collaboration.

¹ See https://ec.europa.eu/commission/sites/beta-political/files/budget-may2018-european-social-fund-plus-regulation_en.pdf:

The Structural Reform Support Service: current work and opportunities for supporting the implementation of best practices

The SRSS informed participants on how the Structural Reform Support Service is a demand driven, complementary instrument that can provide technical support to Member States to help them design and deliver reforms, including in the health area. The technical support the Service offers requires no co-funding. It is available to all Member States, including to those who have not received any country specific recommendations through the Semester process (provided this is also supported by the national coordinating authority for the SRSS). Requests for support can be submitted by the national coordinating authorities annually, with a fixed deadline of 31 October.

Requests for support could also be underpinned by the State of Health country reports. The Chair pointed to the potential of the SGPP as a mechanism to discuss those reports and explore options to advance national objectives via the entire range of EU instruments and programmes, including the SRSS. In the new MFF the Commission proposed to complement the provision of technical support with budget support (via the Reform Delivery Tool), aiming at further assist Member States in their reforming efforts.

Specific opportunities for synergies between research and health programmes in the areas of NCDs, rare diseases, innovative medicines and environment and health

The Head of Unit 'Non-communicable diseases and the challenge of healthy ageing' at DG RTD provided an overview of public health and chronic diseases research actions. Within that scope, the Horizon 2020 programme seeks to include work on better understanding of disease; health promotion and disease prevention; diagnostics and therapeutics; health policy research; and implementation research. She sees ample opportunities for synergies between EU research and health programmes. Ongoing research projects with clear relevance for NCDs focus on integrated care programs for persons with multi-morbidity, and cost-effective diabetes intervention program for vulnerable families. The To-Reach project aims to develop a research agenda that will address the broad challenges in health systems and services research across countries. It brings policy, scientific and funding perspectives together and also looks at implementation and transferability of innovative solutions. Examples of new grants that DG RTD will sign this year include projects on scaling-up of evidence-based health interventions for prevention and management of hypertension and/or diabetes, new patient centred approaches for survivorship, palliative and/or end of life care, and HTA research to support evidence based health care. DG RTD also participates in the Global Alliance on Chronic Diseases. Generating expertise in implementation research and scaling up interventions in NCDs, this alliance focuses on low and middle income countries but also on the needs of vulnerable populations in high income countries.

EU funding for research on rare diseases amounts to more than one billion Euros. This includes support for some very well-established collaborations such as the E-Rare ERA-Net for Research Programmes and the new Rare Disease European Joint Programme Cofund to which Member States will contribute 30 percent of total funding. Contacts

with European Reference Networks are very good: these networks are instrumental to translating research into practice. It was noted that a recent booklet² provides insight into the wide scope of DG RTD involvement. Within the framework of the ongoing Horizon programme, DG RTD also supports capacity building, and data and information development.

In the area of personalised medicine, the Commission moved as early as 2010. Five years later, PerMed presented a Strategic Research and Innovation Agenda and in 2016 the International Consortium of Personalised Medicine (ICPerMed) was launched, involving eleven health ministries.

The Deputy Head of Unit 'Innovative tools, technologies and concepts in health research' at DG RTD presented the Innovative Medicines Initiative (IMI). The IMI mission is to facilitate open collaboration in research to advance the development of, and accelerate patient access to, personalised medicines for the health and wellbeing of all, especially in areas of unmet medical need. It is the most substantial public-private partnership on health in the world with a total budget of over 3.2 billion for IMI 2 (2014 – 2020), 1.6 billion of which is provided by the EU. A typical IMI consortium will bring partners from academia, public regulation, health service provision and patient representation together with SMEs and industry. Outcomes should be transformative for the industry as well as having a clear public value. Two examples of current IMI programmes focus on AMR and dementia.

He also explained how the EU has supported research efforts on advanced therapies, targeting the whole innovation chain. The ESPOIR project on regenerative medicine that ran from 2014-2016 was mentioned as a good example. It aimed to make human heart valve implants more tolerable in young children, thus avoiding follow-up surgery and allowing for largely normal lives. EU Support for gene and cell therapy research has consistently been supported since start of the Biomed 2 programme in 1994.

Key research activities and initiatives on environment and health were also highlighted. This is an area where as many as nine EU directorates and agencies collaborate to advance a joined up research agenda. HBM4EU, a joint European programme for monitoring and scientific assessment of human exposures to chemicals and health impacts, was mentioned as an effort that is expected to generate very policy-relevant knowledge. This programme runs from 2017-2021.

To better understand the health impact of the total environmental exposure an individual is subjected to during their lifetime, there currently is an open call for research into the human exposome. Calls that will open in October (under the Environment & Health Societal Challenge) include research on pesticides, air quality, climate health impact, well-being and health in cities, and nanotechnologies.

² Rare diseases a major unmet medical need, see <https://ec.europa.eu/research/health/pdf/rarediseases-leaflet-2018.pdf>

Following questions from the floor, the relevance of research into topics such as mental health, health and safety at work (including exposure to chemicals), the social health gradient, and climate change was mentioned. While some opportunities to address these already exist (e.g. the current Horizon call on mental health in the workplace) such suggestions and comments are very welcome. The SGPP is there also to help strengthen the research relevance to national health authorities, foster an horizontal approach between EU health and research policy, and encourage sustainability of outcomes. Stronger partnerships with the Joint Research Centre (JRC) and the European Centre for Disease Control (ECDC) are also expected to contribute to sustainability and dissemination of results to public health practice. The Head of Unit at the Joint Research Centre welcomed this initiative to work more across Commission services. The JRC already has a key role in the follow up of health programme results, for instance with regard to cancer registration and the Promotion and Prevention Knowledge Gateway.

The role of the Steering Group in the next Multiannual Financial Framework (MFF)

The Deputy Head of Unit responsible for European Social Fund + (DG EMPL) explained how it is proposed to bring five funds together under the future ESF+. The current ESF, Investing in Youth (YEI) and Support for the most Deprived (FEAD) programmes would be placed under shared management strand, the Employment and Social Innovation strand and health programme strands would continue to be under direct management. In this proposal, 413 million Euros would be reserved for the health strand. For the direct management strands, no comitology is foreseen; the health strand gives, however, a particular role to the Steering Group, as set out in Article 29 of the Commission proposal.

The Head of Unit for the Health Programme and Chronic Diseases stressed the rationale behind this proposal is to create synergies and gain efficiency. The health strand will still be there but there will be much more potential to work across silos. This new way of working will enable involvement and consultation of national health authorities at an earlier stage, more upstream when making annual work plans and also allow linkages with other programmes with great relevance to health in their countries, such as Horizon Europe and the new ESF+. It will also create more opportunities to support implementation 'pipelines' of good practices that have been identified or generated via the health and other programmes. The SGPP will have a pivotal role in this process.

The Head of the Life Sciences Division at the European Investment Bank (EIB) confirmed how the SGPP is supporting the EIB's ongoing reflections on proton therapy centres. The EIB's investment portfolio in life science and health is more than three billion. The Bank is keen to ensure investments are relevant to national policy priorities and actual implementation of good ideas and results are maximised. Dialogue with member states via the new SGPP proton therapy subgroup is expected to inform the EIB investment on these highly specialised facilities and provide necessary information for the national health authorities for their decision making process in this area.

Conclusions

The Chair thanked the members of the Steering Group on Promotion and Prevention, the Commission services and the EIB for their contributions and active participation.

Reminding participants of the new formal role of the SGPP and the consequent nomination process for new members and their alternates, he encouraged Member States that had not yet send in their nominations to do so as soon as possible. The first formal meeting of the renewed SGPP is planned for 6 November 2018 in Luxemburg.