

# Feedback from the survey sent to the Member States on 3 July

*Presentation by EUHealthSupport*

*Providing logistic and scientific support to the Steering  
Group on Health Promotion, Disease Prevention and  
Management of Non-Communicable Diseases (SGPP)  
In the context of the Single Framework Contract  
Chafea/2018/Health/03*

Monday 27 July 2020



**NIVEL**  
Research for better care

**infeurope**



National Institute for Public Health  
and the Environment  
*Ministry of Health, Welfare and Sport*



**RCSI**

UNIVERSITY  
OF MEDICINE  
AND HEALTH  
SCIENCES

# About the Support Service by EUHealthSupport to the SGPP Steering Group

*Executed in the context of the Single Framework Contract Chafea/2018/Health/03*

Consortium Lead



**NIVEL**  
Research for better care

Netherlands institute for health services research (not for profit research foundation), past lead of scientific support services to DG SANTE/SANCO, active in relevant JA's, H2020 projects. Part of WHO/Euro Health Systems Response Monitoring network on COVID-19 and part of knowledge infrastructure Dutch MoH,

Scientific co-lead



National Institute for Public Health  
and the Environment  
*Ministry of Health, Welfare and Sport*

Many EC projects & tenders: ECHI(M), EPHORT FWC, BRIDGE-HEALTH, Joint Actions (InfAct, Chrodis, HealthyGateWays, EU-JAV, iPAAC, JAHEE). Advise to WHO & OECD. At national level: Monitor Population Health & the Environment, infectious disease control (a.o. Dutch COVID-19 coordination). Coordination of national vaccination and screening programs (cancers, pre- and neonatal), Dutch Healthy Schools program etc.

Scientific partner



**RCSI**  
UNIVERSITY  
OF MEDICINE  
AND HEALTH  
SCIENCES

Independent, not for profit university of Medicine & Health Sciences, participating in many international research networks including key domains of Population Health & Health Services, Cancer, Regenerative Medicine, Neurological & Psychiatric Disorders, Surgery & Vascular Biology. Currently ranked No 1 by THE World University Rankings for socio-economic impact under UN SDG 3, Good Health & Wellbeing.

Logistic lead

**infeurope**

Service provider in communication, multimedia, intellectual property, semantic web, managed IT services, based in Luxembourg . Flagship projects include the IPR Helpdesk for EASME (Executive Agency for Small and Medium-sized Enterprises) and the Fi-compass for the European Investment Bank (EIB).

# About the Support Service by EUHealthSupport to the SGPP Steering Group

Executed in the context of the Single Framework Contract Chafea/2018/Health/03

## Types of Support to be provided for the next Steering Group Meetings

### Logistic

Providing logistic support to the Steering Group in the organisation of meetings (physical or online)

### Communications

Providing flash reports and minutes of meetings plus management of the SG at the Health Policy Platform

### Scientific

Preparing annotated agenda's, background papers (e.g. mapping priorities) and online consultations

*Example 1: GDPR and the (re-)use of health data (DG SANTE)*

*Example 2: support to the Mission on Cancer (DG RTD)*

European Commission

English EN

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Non-communicable diseases

All topics Overview Cancer Steering Group Indicators Projects

Upcoming Events

02 July 2020  
Informal Meeting of the Steering Group on Promotion and Prevention (SGPP) Live webinar

All Events

Cancer

Steering group on Promotion and Prevention

02 July 2020  
Informal Meeting of the Steering Group on Promotion and Prevention (SGPP) Live webinar

European Commission

### STEERING GROUP ON PROMOTION AND PREVENTION

#### Steering Group on Promotion and Prevention

The key aim of the Steering Group on Promotion and Prevention (hereafter "the Group") is to support the Member States in meeting the WHO/UN 2025 global voluntary targets on non-communicable diseases. Only nominated members and the alternate members of Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases can have an access to the network. [read less](#)

European Commission

### GDPR and its consequences for the use and re-use of health data and options for EU level action

Preliminary findings of a study among the EU Member States

31 May 2020

Specific Contract No SC 2019 70 01 in the context of the Single Framework Contract Chafea/2018/Health/03

NIVEL  
National Institute for Public Health and the Environment  
DG SANTE  
Directorate-General for Health and Food Safety  
DG RTD  
Directorate-General for Research and Innovation

European Commission

### CONQUERING CANCER: MISSION POSSIBLE

Interim report of the Mission Board for Cancer

Independent Expert Report

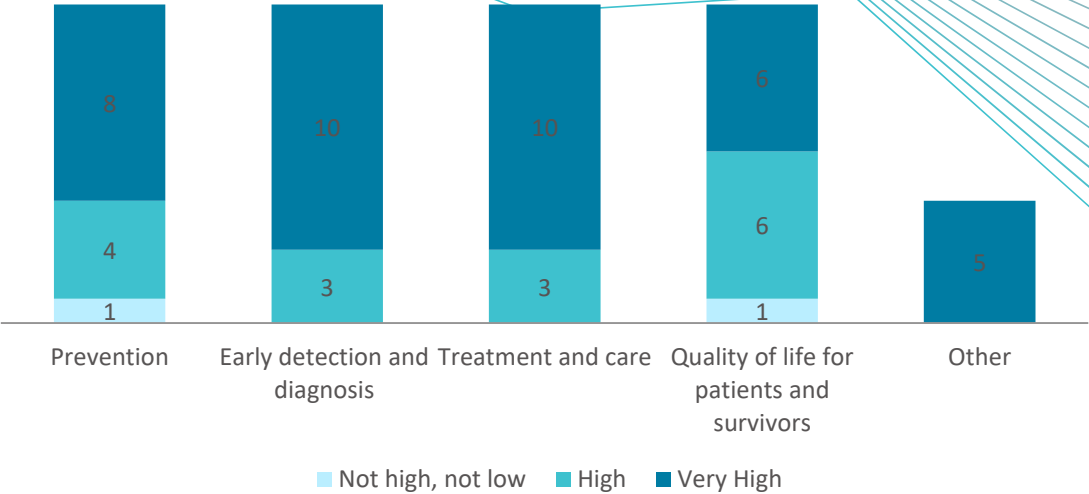


# **Preliminary findings from DG SANTE survey to MS**

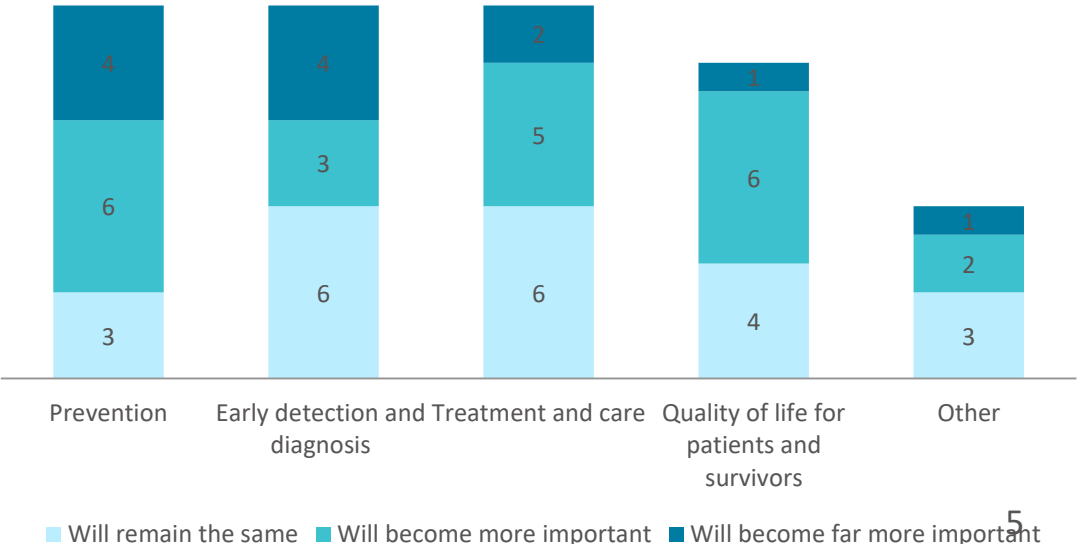
# National priorities

- Responses from 13 Member States as of 23 July 2020
- All four thematic areas are considered as (very) high priority in most countries with only minimal differences between the areas
- Priorities for prevention, followed by quality of life of patients, were reported as becoming important or far more important over next 2-5 years.

Current National Priorities



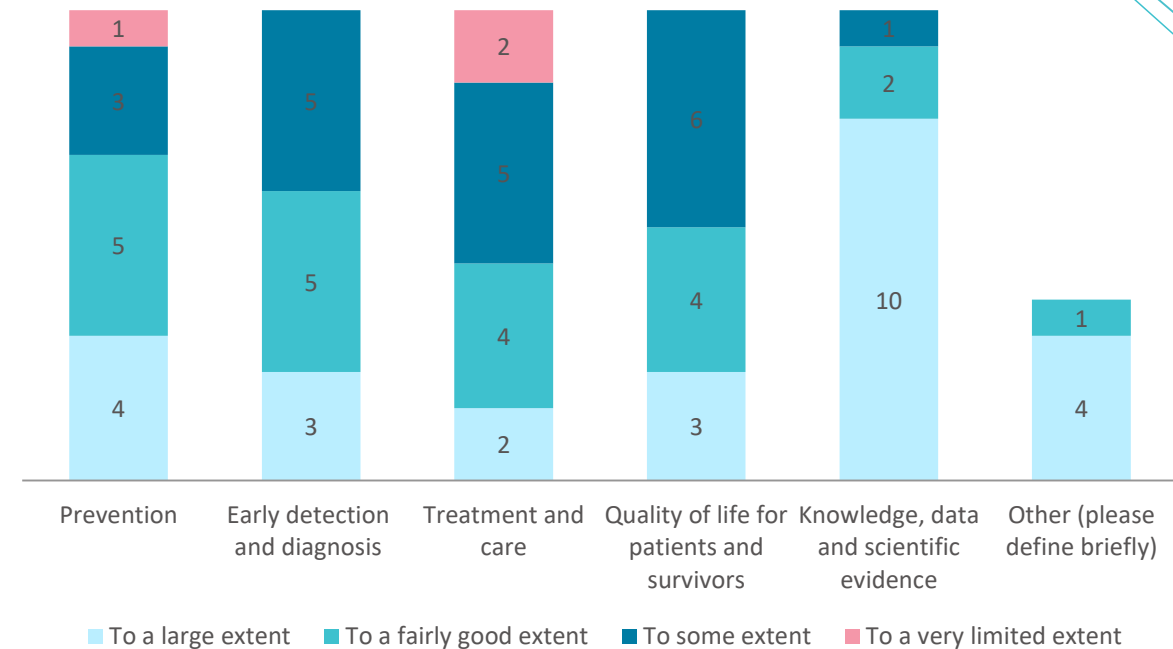
Priorities may change in the next 2-5 years



# European Dimension: actions at the EU level adding value

- All agreed on the added value in addressing actions at EU level
- Knowledge, data and scientific evidence was rated high as actions at EU level with most added value
- Areas where it was thought actions at EU level can make most difference were:
  - research/exchange of information
  - sharing knowledge and best practices

Extent that actions at EU level have most added value



# Europe's beating cancer plan

- A number of specific topics were identified for future EU involvement in the main pillars. The top 2-3 ranked highest are presented.
  - **Prevention**
    - Work on a 'generation prevention' (cross-cutting action on behavioural risk factors of young people)
    - Tobacco
    - Vaccination, such as against Human papillomaviruses and Hepatitis B
  - **Early detection and diagnosis**
    - Quality of screening and assured screening timelines
    - Screening (all elements)
  - **Treatment and care/Quality of life**
    - Care: quality assurance, certification and accreditation
    - Research
  - **Survivorship**
    - Social protection (protecting cancer survivors from financial discrimination)
    - Quality of life of survivors (e.g. long term side effects, infertility, cancer recurrence, etc)

# Cancer: Equity, impact of COVID19 and Future plans

- **Equity**

- A concern for the majority of MS both nationally and EU wide
- Ways of addressing inequalities were wide and varied and examples included:
  - Inclusion of inequality in national programmes/strategies
  - Increasing participation in screening to address those less likely to participate (i.e. vulnerable groups)
  - Improved health literacy/ PH insurance coverage

- **COVID-19 impact**

- Most indicated that COVID-19 had had some, moderate or large impact on cancer services, particularly cancer screening, diagnosis and treatment.
- Plans in development to address this included reactivating/increasing screening, treatment, vaccinations etc.

- **Europe beating cancer in the future**

- Most (85%) had a long term goal/vision for cancer at national level
- Contribution of each MS to the overall plan included: Sharing best practice and expertise, supporting implementation of the EU cancer policy, supporting availability of new medicines, etc.
- How research could contribute to cancer plans included: more evidence to support diagnosis, screening and treatment, interface with other EU frameworks and promoting networks of excellence in cancer research



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- **Equity**

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  - Inclusion of inequality in national programmes/strategies
  - Increasing participation in screening to address inequalities (e.g. home visits, mobile units)
  - Improved health literacy (e.g. patient education, community health workers)

- **COVID-19**

- Most MS have updated their cancer plans to include COVID-19 (e.g. increasing screening, treatment, vaccinations etc.)
- Plans to address inequalities (e.g. home visits, mobile units)

- **Europe in the future**

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- Contribution of each MS to the overall plan included: Sharing best practice and expertise, supporting implementation of the EU cancer policy, supporting availability of new medicines, etc.
- How research could contribute to cancer plans included: more evidence to support diagnosis, screening and treatment, interface with other EU frameworks and promoting networks of excellence in cancer research

Following these preliminary findings a more extensive analysis will take place in August & September. MS are invited to send in their additional or updated responses, if possible by 10 August 2020