



Ministero della Salute

EGHI's ad hoc groups: which way forward

**New scenario on health information based on
HIREP-ERIC progress and INFACT Joint Action launch**

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Luxembourg, December 6., 2017

29-30.5.2013: The EGHI discussed the possibility of establishing a European Research Infrastructure Consortium (ERIC) on Health Information. See Non-paper on "Health Information System European Research Infrastructure Consortium" – HIS ERIC - which aims to describe elements of a possible long-term health information and knowledge system.

22-23.1.2014: The Ad-hoc Core working group on a potential ERIC on health information presented their deliberations in the document 'A potential ERIC on Health - Scoping paper for considerations of EU Member States and EEA/EFTA countries in the Expert Group on Health Information

26-27.11. 2014: The EGHI reviewed the formal requirements of setting up a European Research Infrastructure Consortium (ERIC) and agreed to organise an extra-ordinary EGHI meeting to discuss further the possibility to launch an ERIC on Health Information.

28-29.1.2015: In an extra-ordinary EGHI meeting, it was agreed to set up a Task Force to steer the BRIDGE-Health project in its work to inter-link existing health information initiatives, and advise preparations for a potential ERIC on Health Information.

19.5.2015: The EGHI discussed plans for a 'State of Health in the European Union' cycle whose key objective would be to provide updated health information and analysis on the health status of the EU citizens based on the European Core Health Indicators (ECHI) as well as other key health indicators. The EGHI participants welcomed the initiative.



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public Health
Health information and scientific committees

SANTE/C2/ 13 July 2015

**TASK FORCE ON THE FUTURE OF THE BRIDGE-HEALTH PROJECT AND
PREPARING A POSSIBLE PROPOSAL FOR SETTING-UP A EUROPEAN
RESEARCH INFRASTRUCTURE CONSORTIUM ON HEALTH INFORMATION
LUXEMBOURG 20 MAY, 2015**

DRAFT WORKING METHODS OF THE TASK FORCE

The purpose of the working methods will be to define the way the Task Force should function in order to provide the deliverables as stated in the Mandate. The Task Force will be launched 20 May 2015 once the chair is elected. In line with the two core tasks of the Task Force, to guide the consultations and discussions on the scope, tasks and activities as well as governance structure of a possible future ERIC on Health Information, or alternative solutions and to improve the inter-linking of existing projects on health information at the EU level with the aim of integrating them into a future research infrastructure as a sustainable framework in the field, the Task Force will exist until the end of the BRIDGE-Health Project (December 2017).

COUNTRIES VOLUNTEERING FOR THE TASK FORCE

Malta (Chair)

Belgium (BRIDGE Coordinator)

Czech Republic

Finland

Italy

Netherlands

Norway

Portugal

(France)

(Germany)

20.5.2015: First meeting of the BRIDGE Health Task Force. Besides agreeing on the working methods, the Task Force asked the BRIDGE Health Project to produce a first outline of a concept paper on a sustainable mechanism for Health Information in the EU, also including a possible European Research Infrastructure Consortium as a tool.

13 November 2015: Second meeting of the BRIDGE Health Task Force. The Task Force discussed a number of possible options to set up a sustainable mechanism for health information in the EU. It was agreed that by the next meeting, the BRIDGE Health Project would explore further an ERIC as one of the options. Separately, it was agreed to set up a Drafting Group to consider the possible governance structure of an ERIC.

11.5.2016: The EGHI meeting focussed on the development of the European Research Infrastructure Consortium (ERIC) on Health Information, and reviewed the preliminary draft concept paper for better coordinating EU health information activities, as presented by the BRIDGE Health Project. The EGHI noted the need for sustainability and good coordination in initiatives related to health information in the EU, and agreed that an ERIC would be a potential tool to achieve these goals and to facilitate coordination between activities by the Commission as well as International Organisations such as the OECD and WHO. Those Member States who volunteered to draft the ERIC application documents called for more countries to join the initiative, emphasising that broad ownership is imperative to enable the ERIC to serve the common interests of EU Member States.

12.5.2016: Third meeting of the BRIDGE Health Task Force. The group agreed that the aim of an ERIC should be to reduce the workload on Member States regarding the development of health indicators and the collection of health data through facilitating collaboration between countries and other international organisations and developing indicators where needed.

TASK FORCE: Main deliverables

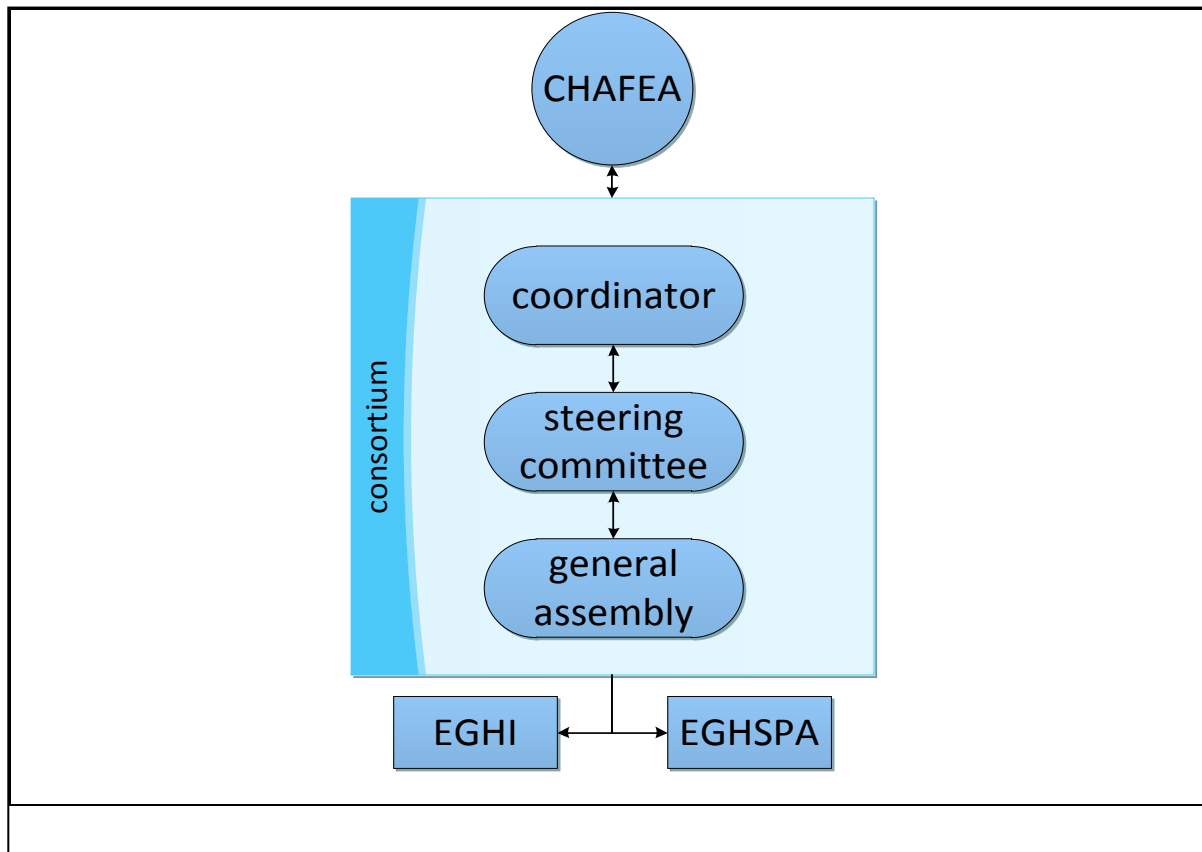
ERIC Technical and Scientific Description

Statutes

Fee Distribution (Mock-up exercise)

INFACT: Role of EGHI and MS

External Advisory Board (EAB): The external advisory board consists of the members of the Expert Group on Health Information (EGHI) together with the members of the Expert Group on Health System Performance Analysis (EGHSPA). The EAB interacts with the JA at least 3 times during the project period (during a joint meeting)



WP4: Integration in National Policies and Sustainability

(Sustainability of an EU health information system supporting country knowledge and capacities, health research and policy-making)

Objectives

To develop a sustainability plan and a follow-up method to ensure JA on Health Information outcomes, activities and best practices to be integrated in National, Regional and EU-international policies.

Specific objectives:

1.To involve MS and EU departments and international institutions (WHO/OECD) in development and progress of the JA (goals/main outcomes).

2.To support MS to integrate main activities and deliverables of this JA into national/regional policies.

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4.To support with MS and international institutions the potential adoption of new identified best practices in line with Health Evidence Network (HEN) in current health management/decision making.

5.To provide MS key elements to discuss infrastructures to provide long-term sustainability to this JA (close collaboration with WP7)

WP4: Integration in National Policies and Sustainability

(Sustainability of an EU health information system supporting country knowledge and capacities, health research and policy-making)

Description of Work

Task 4.1. Support sustainability and integration of JA health information activities in MS/AC through an Assembly of Members (AoM) (Lead: ISCIII).

1. *Operational Procedure AoM: Organisation of AoM meetings with **high governmental representatives (Ministries of Health (MH) and Ministries of Research (MR)) of all MS participating in JA.***

- Terms of reference of the AoM

o To give feedback/policy guidance.

o To foster dialogues/proposals for long-term projection of JA activities and identifying national nodes (close collaboration with WP7).

- To analyse structural alternatives for long term JA activities. **All MS, EC/DGSANTE, WHO-Europe, EUROSTAT, OECD and IANPHI will participate in AoM. MS will provide 2 representatives (MH/MR).**

- 2. Reports (AoM assessments) AoM will meet (M18 and M32) to discuss JA progress, outcomes, analyse structural alternatives for long term activities, legal/data protection context, evidence based policy recommendations and Sustainability Plan.

WP7: Proof of concept of sustainable structure on health information

Description of Work

Task 7.3. Development of the governance structures of a sustainable health information system (Lead: WIV-ISP)

1. Development of the Technical and Scientific description of HIREP-ERIC and defining statutes of HIREP-ERIC. **This is done in direct interaction with the specific task force within EGHl (DG Sante).** This includes

a.....

b. The development of the memorandum of understanding (MoU) of MS regarding the set-up of the HIREP-ERIC. The MoU is supported by a consensus on a policy paper on the HIREP-ERIC, prepared and submitted for decision making to the MS to join the ERIC-HIREP. The AoM (see 4.1), **the Expert Group on Health Information and on Health System Performance analysis will be involved in commenting and improving the draft version of this document.**

2. Promotion of the HIREP-ERIC through presentation of the business plan and roadmap of the HIREP-ERIC directly **in the MS through country visits with bilateral meeting with Ministries of Health and of Research representatives** and through the set-up of meetings mimicking the Assembly of Members

TASK FORCE/DRAFTING GROUP :

Open issues

- **ERIC application : early submission, late submission (close to JA conclusion) ?**
- **Potential duplication of roles by MS Government representatives in JA with EGHI members ?**
- **«Political» points tbd inside JA bodies or EGHI ?**



Thanks for your attention!

