



## NOTE OF THE MEETING

### STEERING GROUP ON HEALTH PROMOTION, DISEASE PREVENTION AND MANAGEMENT OF NON-COMMUNICABLE DISEASES 11 APRIL 2018, BRUSSELS

#### Welcome and Introduction

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

The participants were nominated representatives of 27 Member States, as well as of Norway and Iceland. In addition, colleagues from different Commission services, Chafea, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and the European Investment Bank attended the meeting as well.

The Chair welcomed the participants informing about an inter service meeting on the Steering Group held on 21 March 2018. As a result of the discussions two new promising work areas under the Steering Group were put on the agenda of this Steering Group meeting, including the issue of proton therapy centres in the EU and the screening of implementable research results.

The Chairman also informed that the European Commission launched the 2018 EU Health Award for Non-Governmental Organisations (NGOs) on the occasion of World Health Day on 7 April. This year the aim is to reward NGOs that contribute to the fight against tobacco, especially by stopping young people from taking up smoking and using other forms of tobacco<sup>1</sup>.

#### Presentation by the forthcoming EU Presidencies

The Austrian representative introduced the thematic focus for the Austrian Presidency (July to December 2018) which will be on "Transforming food systems – adding value for better health in Europe". She stressed that it is important to move from a „silo-approach“ to a collaborative and systemic approach, and to identify the co-benefits for health and other sectors as well as to improve the policy coherence across sectors towards an integrated food policy. She announced a Presidency conference on this issue

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<sup>1</sup> [https://ec.europa.eu/health/ngo\\_award/home\\_en](https://ec.europa.eu/health/ngo_award/home_en)

which will take place on 22-23 November 2018 in Vienna where a „commitment to act“ should be signed by Ministers of different sectors involved in the governance of the food system as an important outcome of the Austrian Presidency in the area of health.

The Romanian representative (January to June 2019) informed that their priorities in the area of health would be eHealth and, integrated cancer and cardio-vascular disease prevention and control.

The Finnish representative (July to December 2019) informed that the priorities have not been fully decided, but the theme would be "economy of wellbeing". Economic as well as health and wellbeing policies (including mental health, especially at work, and the vision of a "Tobacco Free Europe") will be addressed and the EU Social Pillar promoted. There would be no specific public health agenda, as it will be included in the social agenda, but non-communicable diseases will be a priority.

### Implementation of best practices selected in 2017

The Chair introduced this topic by informing that the best practice on Orphacodes was included in the annual work plan for 2018 of the Health Programme and a call for proposals is currently open<sup>2</sup>. As regards the implementation of the selected best practice on European Code Against Cancer, SANTE has asked the new Joint Action on Cancer "iPAAC" to integrate it in its work.

The two best practices chosen for the 2018 work programme of the Health Programme are the Swedish best practice "physical activity on prescription" (approx. € 1.3 million EU contribution available) and the Italian "CARDIO 50 programme" on cardio-vascular risk screening (approx. € 1 million EU contribution available). The Swedish and the Italian representatives presented the two initiatives to the group. the Chairman informed that DG SANTE had organised a workshop with a number of countries who had signalled an interest to implement these best practices on 8 February 2018 in Luxemburg<sup>3</sup>.

The following discussion focused on the type of call, its timing, the activities which would be eligible for co-funding, the sustainability of the actions after the co-funding from the Health Programme will end, the type of participants, the options for participating if similar actions are already ongoing and finally, on sharing experiences. In relation to some of the discussion points, DG SANTE clarified the following points:

- There will be a call for proposals for projects (managed by Chafea), which is likely to be published on the "participant portal" at the end of April/beginning of May. It should close in September 2018 and the actions would start in 2019.
- Contrary to a joint action, no nomination process will take place; participants can be from local (e.g. city, health care centre), regional and/or national level.

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<sup>2</sup> [https://ec.europa.eu/health/non\\_communicable\\_diseases/events/ev\\_20180208\\_en](https://ec.europa.eu/health/non_communicable_diseases/events/ev_20180208_en)

<sup>3</sup> [https://ec.europa.eu/health/non\\_communicable\\_diseases/events/ev\\_20180208\\_en](https://ec.europa.eu/health/non_communicable_diseases/events/ev_20180208_en)

- Member States/countries participating in the 3<sup>rd</sup> Health Programme must apply as a consortium, and single countries cannot apply.
- The EU contribution for funding should be shared between the consortium members.
- In conceiving the project, the consortium members should take the status of each participant into account, which will probably lead to joint activities and also bilateral activities.
- Member States that have not participated in the workshop on 8 February 2018 but are interested to participate can still do so.
- The projects will in principle be led by the practice owners (Veneto Region and probably the Swedish Public Health Agency)
- The eligible activities will be detailed in the call, but can include staff exchanges, twinning, joint workshops, translation of tools, etc.

The Structural Reform Support Service (SRSS) gave an up-date on the activities to provide support to the implementation of EU colorectal cancer screening guidelines in Italy, Slovakia and Romania, which were started through the Steering Group last year.

#### 2018 round of selecting best practices: nutrition and physical activity

Members of the Steering Group had identified nutrition and physical activity as their main priority for implementation in 2019. The Chairman thanked the Joint Research Centre (JRC) for hosting the marketplace on 12 best practices in these fields on 15-16 March 2018. The selected best practices have been assessed in the joint actions on Nutrition and Physical Activity and on chronic diseases and also include a DG RTD funded project.

The JRC representative reported from the marketplace workshop that 54 persons from 22 Member States participated and the reaction was overwhelmingly positive.

The Steering Group echoed the positive impression presented by JRC. Some countries also reported on the best practices they had chosen for implementation. The Chair concluded by saying that the Steering Group members would receive an online questionnaire listing the best practices presented in Ispra with the task to select the three (3) top priorities (1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup>).

#### Multi-sectoral collaboration: European Investment Bank's (EIB) initiative on proton therapy

The Chair noted that the point on proton therapy centres in the EU had been introduced in the next agenda at the request by the EIB. The background for this action is that in recent years the EIB has been approached with financing requests for proton therapy centres for cancer treatments. This has started a discussion about the needs for innovative particle therapy centres in Europe in general, and the specific challenges of such centres in the context of EIB project appraisals. DG SANTE prepared, together with the EIB, a draft mandate for a possible subgroup of the Steering Group on proton therapy centres.

After the presentation DG SANTE stressed that the Steering Group is a high level group allowing it to address horizontal issues such as availability of tools or methods related to

management of non-communicable diseases. This cross-cutting action is essential as expert groups on cancer, rare diseases, and other specific topics, were purposely streamlined into this more encompassing advice structure.

The Chair agreed that the subject matter is complex, and therefore there is a need to pool experiences and expertise from different fields. Participation in a proton therapy sub group will be voluntary. Each country could send several participants to adequately cover both the technical and health policy aspects of proton therapy. Any outcomes of such sub group will be of use both to the EIB and to Member States or other investors.

The Chair informed that relevant colleagues working with the Health Technology Assessment as well as the European Reference Network will be invited to work in this initiative, together with other relevant Commission services such as DG ENER, the JRC and DG RTD. He concluded that there was a consensus in the Steering Group to set-up the sub-group, and that the members could send any comments they wish on the initiative by 15 May 2018.

#### Future work of the SGPP: Development and implementation of agreed policies and research results

This agenda point started with a presentation by a French representative regarding ORPHANET. ORPHANET<sup>4</sup> is an IT tool supporting rare disease policies. It is currently funded by the Health Programme but for the future there is a need to plan a more sustainable basis for its maintenance and further development.

A representative of France presented ORPHANET's history and activities as well the financing, its added value in terms of contribution to European policies and actions on rare diseases. He described the challenges and proposed four possible future scenarios. He announced that France will develop the scenarios further in a short paper which would be shared with the Steering Group members for comments and suggestions.

The Chair confirmed that DG SANTE will circulate the paper from France together with an electronic questionnaire by the end of May 2018, expecting Member States to reply by the end of July 2018. DG SANTE will be summarizing the results of the questionnaire to support further discussion on Orphanet's future.

The next item under this agenda point concerned the proposal by the Commission to screen research projects co-funded under FP7 and H2020 against a set of basic criteria<sup>5</sup> to identify research results with a potential to be implemented with a high likelihood of having a positive impact on health. The Chair explained that the aim of such screening would be twofold. Firstly, to identify useful research results that could be used by the Member States in improving public health, and secondly, to create a direct policy link

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<sup>4</sup> <http://www.orpha.net/consor/cgi-bin/index.php>

<sup>5</sup> The draft criteria had been shared with participants in the preparations for the meeting.

between public health research and practical innovation in the health systems of the Member States.

A representative of DG RTD introduced the concept of implementation research, differentiating it from clinical research. He stressed the key factors for successful implementation and presented the "Feel4Diabetes"<sup>6</sup> as a concrete example of an implementation research project, currently co-funded by H2020.

Several countries welcomed this initiative and suggested that the criteria should include e.g. applicability, political relevance and the impact on social inequalities and exploring the use of the criteria approved by the Steering Group as far as possible. However, DG SANTE also explained that research projects are different from best practice selection and this is why a new set of criteria is being considered.

It was also suggested that research on implementation of EU (health) legislation should be supported. DG RTD referred to the "EUREST-PLUS"<sup>7</sup> project, which is accompanying the implementation of the Tobacco Product Directive, and a practical example of how research supports implementation of EU health legislation.

The Chair concluded the discussion announcing that members can send written comments on this issue until the end of April 2018 and that the discussion would be continued in the next meeting, based on a refined set of criteria.

#### Formalisation of the SGPP and the future rules of procedure

The Chair introduced this topic emphasizing that in 2016 DG SANTE started a new approach to non-communicable diseases, of which the Steering Group has become a central element. Consequently, the Commission decided to revise the expert group system ensuring that the Steering Group will have a more formal role in the EU level health decision making.

DG SANTE presented the ongoing process of formalizing the Steering Group as an Expert Group of the European Commission. The Chair clarified that for communicable diseases there is the Health Security Committee and the European Centre for Disease Control and there are other groups e.g. on tobacco or health technology assessment. The scope of the Steering Group is non-communicable diseases with a focus on implementation. He concluded by saying that the Commission decision to set-up this group was expected soon and that the Group would then adopt its rules of procedure.

#### Conclusions

The Chair thanked the members of Steering Group on Promotion and Prevention for their

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<sup>6</sup> <http://feel4diabetes-study.eu/>

<sup>7</sup> <https://eurestplus.eu/>

active participation and invited them to the next meeting which is planned for 6 November 2018 in Luxemburg.

### Commissioner Andriukaitis' address to the Steering Group

Commissioner Andriukaitis addressed the Steering Group. He stressed that the Steering Group as a horizontal platform will be instrumental to ensure concrete action as effective health promotion and disease prevention measures require strong political will.<sup>8</sup>

Member States welcomed the address by the Commissioner thanking him for his commitment and strong engagement in improving public health in the EU.

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<sup>8</sup> [https://ec.europa.eu/commission/commissioners/2014-2019/andriukaitis/announcements/steering-group-health-promotion-disease-prevention-and-management-non-communicable-diseases-brussels\\_en](https://ec.europa.eu/commission/commissioners/2014-2019/andriukaitis/announcements/steering-group-health-promotion-disease-prevention-and-management-non-communicable-diseases-brussels_en)