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Mid-term evaluation of the Third Health Programme (2014-2020)

Fields marked with * are mandatory.

INTRODUCTION

The EU ensures that human health is protected as part of all its policies, and to work with its Member States to improve public health, prevent human illness and eliminate sources of danger to physical and mental health. However, the EU Member States have the primary responsibility for formulating and implementing health policy and delivering healthcare services. The EU's competence only extends to supporting, coordinating or supplementing actions of the Member States.

One of the main ways in which the EU supports, coordinates and supplements actions by the Member States is the third programme for the Union's action in the field of health (2014-2020) (hereinafter: "3HP"). The 3HP provides financial support for actions to address a number of important health-related challenges facing European citizens, governments and health systems. The 3HP supports action across the EU from public authorities, research and health institutions, NGOs, international organisations and − in certain cases − private companies. The total budget for the seven years of its duration is €449.4 million. The 3HP addresses major health challenges facing MS from risk factors (such as use of tobacco and harmful use of alcohol) to chronic and rare diseases, responding to cross border health threats (e.g. Ebola and Zika viruses) as well as ensuring innovation in public health to name just a few areas. For more information on the 3HP, please visit the websites of DG SANTE or CHAFEA.

This consultation is an opportunity for any interested parties to express their views and opinions on the 3HP. It is a part of the ongoing mid-term evaluation of the 3HP. The consultation covers:

- The objectives and priorities of the 3HP, and the extent to which these are appropriate and in line with health needs in the EU
- The way the 3HP is implemented, and the extent to which this is effective and efficient
- The overall added value and usefulness of the 3HP

The results of the public consultation will be used together with other evidence to inform the mid-term evaluation of the 3HP. The European Commission will publish a Staff Working Document, including a summary of the results of the consultation, in the second half of 2017.

* Privacy Statement

Before completing the form, please read carefully the <u>privacy statement to conform to European data</u> <u>protection regulations</u>.

I have read and accept the terms and conditions related to this meeting

In case you wish to contact the Unit responsible for the event, please send an email to: <u>SANTE-HEALTH-PROGRAMME@ec.europa.eu</u>

I. KNOWLEDGE OF AND EXPERIENCE WITH THE 3HP

1.1. How would you describe the extent of your knowledge of:

	Detailed, in-depth knowledge	Some knowledge	Only very basic knowledge	No knowledge at all
*EU health policy?	•	•	•	0
*The 3HP?	•	0	0	0

*1.2. Are you working on health issues that are closely related to (any of) the ones supported I	by
the Health Programme?	

(0)	Yes
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*1.3. Are you aware of any activities that were funded by the 3HP that are relevant to your work?

Y	es
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O No

O No

1.4. Have you ever consulted, used, or participated in any of the results, services or products	S
stemming from activities supported by previous Health Programmes? Please tick the follow	ving
examples, as appropriate:	

The Commission encourages dissemination of Health Programme outputs and results, however linking to the following external websites from this webpage should not be taken as an endorsement of any kind by the European Commission.

	The European Code Against Cancer
	European screening guidelines on Breast cancer
	European screening guidelines on Colorectal cancer
	European screening guidelines on Cervical cancer
	The Orphanet database and recommendations for rare diseases
	The Eudamed database for medical devices (only accessible to Member State authorities)
	The Euripid database for the pricing of medicines
1	Materials on health technology assessment
V	Training packages, e.g. on <u>cancer screening</u> , <u>migrants' and refugees' health</u> , capacity building in the preparation and response against health threats in \underline{air} and \underline{sea} travel
V	Best practices for tackling health inequalities
V	Best practices for the diagnosis and treatment of <u>HIV/AIDS</u> , tuberculosis and <u>hepatitis</u>
V	Scientific Opinions from the <u>Independent Scientific Committees</u>
V	Advice from the Expert Panel for investing in health
	Information campaigns (e.g. <u>Ex-smokers are unstoppable</u>)
V	Reports (e.g. <u>Health at a Glance Europe</u> , The Economics of prevention, Country Health Reports, EU Health Report, different Reports on the monitoring of health strategies on nutrition, alcohol etc.)
V	Comparable health data (e.g. <u>ECHI indicators</u>)
	Others
Others	, please explain
	,
* 1.5. k	Have you or the organisation / institution you represent ever applied for funding from the
	and/or its predecessors?

Yes, I/we have applied for funding from the 3HP

Don't know

No, I/we have never applied for funding from the 3HP

1.6. If you have never applied for funding from the 3HP, please tell us why (tick all that apply)
The opportunities and activities are not relevant for me and/or my organisation
Lack of information on opportunities
Lack of information on how to apply
The co-funding rates are not attractive enough
Excessive administrative burden
Lack of language skills
Lack of partners in other European countries
Other, please specify
Other (please specify)

1.7. The 3HP is supporting cooperation at EU level between relevant health organisations, national health authorities, academia and non-governmental bodies. To what extent do you agree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
*The cooperation is essential and should be maintained	•	•	•	•	•	•
*The 3HP should be expanded to include other health areas	•	•	•	•	•	•
*In practice, the 3HP's results (at least at this mid- term stage) are not visible and the cooperation should be abandoned	©	©	©	•	•	0

* 1.8. In your opinion, what do you consider to be the main way(s) in which the 3HP is contributing (or could contribute) to addressing health-related challenges?

More projects funded on the organisation of care and in particular at community level where most of the care requests are addressed.

1.9. What are the main aspects (if any) that need to be changed or improved in your opinion?

Less clinical, disease orientation and instead more goal orientation focussed on achieving a maximum individual health potential

II. THE 3HP OBJECTIVES AND PRIORITIES

The 3HP aims to address a number of important health-related challenges facing EU citizens, governments and health systems. To do this, it pursues a series of objectives and thematic priorities, please see the <u>factsheet</u> about the 3HP for more information.

2.1. Do you think the EU should provide funding for actions in order to...?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
*promote health, prevent diseases, and foster supportive environments for healthy lifestyles	•	0	©	•	•	•
*protect citizens from serious cross- border health threats (Zika and Ebola outbreaks)	•	•	•	•	•	•
*contribute to innovative, efficient and sustainable health systems	•	0	©	•	•	0
*facilitate access to better and safer healthcare for EU citizens	•	•	©	•	•	•
*contribute to addressing health inequalities and the promotion of equity and solidarity	•	©	©	©	©	•

2.2. To what extent do you agree with the following statements about the 3HP?

	Strongly	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
*The 3HP's objectives and priorities are clear and easy to understand	•	•	•	•	•	•
*The 3HP's objectives and priorities are in line with the main health needs in Europe and are appropriate for addressing the key issues and challenges	©	©	•	©	•	•
*The objectives and priorities of the 3HP are consistent with health policy objectives in my country	©	©	©	•	•	•
*The more explicit consideration of economic resources and constraints in the objectives of the 3HP (compared with its predecessors) is appropriate	©	©	©	•	•	•

*The objectives and priorities of the 3HP are consistent with wider EU policy objectives, including the Europe 2020 strategy	•	•	•	•	•	•
*Overall, the way the 3HP's objectives and priorities have been defined facilitates more focused action than under its predecessors	©	•	•	•	•	•

2.3. If you have any concerns about the relevance and coherence of the 3HP and its objectives, please briefly summarise them here.

- -The European Code Against Cancer
- -European screening guidelines on Breast cancer
- -European screening guidelines on Colorectal cancer
- -European screening guidelines on Cervical cancer
- -The Orphanet database and recommendations for rare diseases
- -cancer screening, capacity building in the preparation and response against health threats in air and sea travel
- -Best practices for the diagnosis and treatment of ${\tt HIV/AIDS}\xspace,$ tuberculosis and hepatitis

8 programs with a specific single disease orientation whereas we know that nowadays the older, frail, low SES citizen is having the highest difficulties to get the appropriate care in Europe; more programmes on social determinants, mutli-morbidity, etc should be developed to make the 3HP more effective

2.4. The 3HP contains 23 thematic priorities, gathered under four specific objectives:

- 1. Promote health, prevent diseases, and foster supportive environments for healthy lifestyles
- 2. Protect citizens from serious cross-border health threats
- 3. Contribute to innovative, efficient and sustainable health systems
- 4. Facilitate access to better and safer healthcare for EU citizens

Please select up to five priorities that you consider to be the most important, and up to five that you consider to be not relevant.

	Most important	Not relevant
1.1. Risk factors such as use of tobacco and passive smoking, harmful use of alcohol, unhealthy dietary habits and physical inactivity	•	0
1.2. Drugs-related health damage, including information and prevention	•	0
1.3. HIV/AIDS, tuberculosis and hepatitis	0	•
1.4. Chronic diseases including cancer, age-related diseases and neurodegenerative diseases	0	•
1.5. Tobacco legislation	•	0
1.6. Health information and knowledge system to contribute to evidence-based decision-making	•	0
2.1. Additional capacities of scientific expertise for risk assessment	•	0
2.2. Capacity-building against health threats in Member States, including, where appropriate, cooperation with neighbouring countries	•	0
2.3. Implementation of EU legislation on communicable diseases and other health threats, including those caused by biological and chemical incidents, environment and climate change	•	0
2.4. Health information and knowledge system to contribute to evidence-based decision-making	•	0
3.1. Health Technology Assessment	•	0
3.2. Innovation and e-health	0	•
3.3. Health workforce forecasting and planning	•	0
3.4. Setting up a mechanism for pooling expertise at EU level	•	0

3.5. European Innovation Partnership on Active and Healthy Ageing	0	•
3.6. Implementation of EU legislation in the field of medical devices, medicinal products and cross-border healthcare	0	•
3.7. Health information and knowledge system including support to the Scientific Committees set up in accordance with Commission Decision 2008/721/EC	•	0
4.1. European Reference Networks	0	•
4.2. Rare diseases	0	•
4.3. Patient safety and quality of healthcare	•	0
4.4. Measures to prevent antimicrobial resistance and control healthcare-associated infections	•	0
4.5. Implementation of EU legislation in the fields of tissues and cells, blood, organs	0	•
4.6. Health information and knowledge system to contribute to evidence-based decision-making	•	0

2.5. If there are any other important thematic priorities you believe the 3HP should support in the future, or amendments to the existing priorities, please list them here.

- -Health systems development with a focus on Community Oriented Primary Care
- -Multi-morbidity with a focus on low SES citizens
- -Social determinants of health
- -Overconsumption of medicinal products including Quaternary Prevention
- -Re-viewing the negative effects of market systems in Health Care, in particular for vulnerable populations $\,$
- -Reducing the unnecessary use of specialists and hospital care
- -Interprofessional Collaboration (IpC) including Interprofessional Education (IpE)

III. IMPLEMENTATION

The 3HP has a total budget of €449.4 million (2014-2020), which is used to support:

- Cooperation projects at EU level (via project grants)
- Actions jointly undertaken by Member State health authorities
- The functioning of non-governmental bodies (via operating grants)
- Cooperation with international organisations (via direct grants)
- Studies and other service contracts to cover specific needs related to the support of EU health policies

The 3HP is implemented on the basis of Annual Work Programmes developed by the European Commission in consultation with representatives of the countries that participate in the 3HP (via the Programme Committee). An executive agency (CHAFEA) is responsible for implementing the Programme; its tasks include issuing calls and evaluating proposals, disbursing payments, monitoring actions and disseminating the results. National Focal Points in Member States promote opportunities arising through the Programme. An infographic showing the different roles can be found here.

3.1. To what extent do you agree with the following statements about the implementation of the 3HP?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
*The types of funding mechanisms used by the 3HP are appropriate to achieve the objectives of the programme	©	•	©	•	•	©

*The prioritised actions in the Annual Work Programme permit the optimal involvement of health actors and stakeholders' groups by making appropriate use of the different funding mechanisms				•		•
*The 3HP includes appropriate measures to involve all Member States, including those with lower incomes	©	•	©	•	©	©
*The more explicit consideration of economic resources and constraints in the objectives of the 3HP (compared with its predecessors) is appropriate	©	©	•	©	©	©
*The level of financial support that the 3HP offers is appropriate to address its objectives	©	•	©	©	©	0

- 3.2. If you have any (additional) concerns about the 3HP and the way in which it is implemented, please briefly summarise them here and provide us with an indication of which area(s) they correspond to (tick all that apply):
 - Eligibility / funding arrangements
 - Application process
 - Administrative burden
 - Dissemination of results
 - Other (please specify)

Other (please specify)

Small exisiting, bottom-up developed networks do have little chance to get funding of the 3HP. The opposite, on topics where already networks exist, new projects are started to create such networks without involving the existing networks. e.g.: Cancer and Primary Care Research International Network (Ca-PRI) versus CANCON

3.3 To what extent do you agree with the following statement about the level of awareness of the 3HP?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
*The results of actions funded by the 3HP are sufficiently disseminated and promoted to those who might be able to make use of them		•	•		•	©

3.4. Do you have other specific views that could not be expressed in the context of your replies to the above questions?

Teh operating grants have now settled for a number of years, not providing any chance to new networks to apply for funding.

The bigger networks with more capacity to develop proposals did have more chances to be awarded.

Other funding streams with small amounts and with less complex application and administration processes should be developed

IDENTIFICATION OF RESPONDENT

	indicate whether you are responding to this consultation as an individual or on behalf of the following types of organisations / institutions?
In	ndividual / private person
P	ublic authority (national, regional or local)
In	nternational organisation
A	cademic / research organisation
V Pı	rofessional association or trade union
V N	on-governmental organisation
Pı	rivate company
O	ther, please specify

^ Plea	se state your country of residence/establishment
0	Austria
0	Belgium
	Bulgaria
	Croatia
	Cyprus
	Czech Republic
	Denmark
	Estonia
	Finland
	France
	Germany
	Greece
	Hungary
	Ireland
	Italy
	Latvia
	Lithuania
	Luxembourg
	Malta
•	Netherlands
	Poland
	Portugal
	Romania
	Slovak Republic
	Slovenia
	Spain
0	Sweden
0	United Kingdom
	Other
	sent in comments in a language other than English, please indicate in which language you
have	replied.

*Market of the fell control to the control of the fell to control to the control of the control
*Which of the following best describes the field in which you or the organisation or institution you are representing are mainly active?
W Health / public health policy making and planning
✓ Provision of healthcare services
Health professional(s)
✓ Health research / education
✓ Patients and health service users
Other, please specify
—
* First name
Diederik
* Last name
Aarendonk
* Job title
Coordinator
Your organisation's name (where relevant)
European Forum for Primary Care
The number of members your organisation represents (where relevant)
100 institutional members from Academic, Policy, Professional & Users perspective

Countries where your organisation is present (where relevant)

> 30 countries in Europe (EU and non-EU)

*If replying on behalf of an organisation or institutions, is your organisation or institution
registered in the EU Transparency Register?

- Yes
- O No
- Not applicable

If yes please indicate your Register ID number

181778123351-61

If you are responding on behalf of an organisation or institution, please register in the <u>Transparency Register</u>. If your organisation/institution responds without being registered, the Commission will consider its input as that of an individual and will publish it as such.

- * Please indicate your preference for the publication of your response on the Commission's website:
 - I consent to publication of all information in my contribution, including my personal data
 - I do not consent to the publication of my personal data as it would harm my legitimate interests. My contribution may be published in an anonymous form
 - I prefer to keep my contribution confidential. (it will not be published, but will be used when analysing the results of the consultation)

(Please note that regardless of the option chosen, your contribution may be subject to a request for access to documents under <u>Regulation 1049/2001 on public access to European Parliament, Council and Commission documents</u>. In this case the request will be assessed against the conditions set out in the Regulation and in accordance with applicable data protection rules.)

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- I don't agree, please keep my contribution as specified under the abovementioned terms, but only for internal use in the Commission

Useful links

<u>Factsheet on the Third Health Programme (http://ec.europa.eu/health/programme/docs/factsheet_healthprogramme2014_2020_en.pdf)</u>

Regulation (EU) No 282/2014 on the establishment of a third Programme for the Union's action in the field of hea (2014-2020) (http://data.europa.eu/eli/reg/2014/282/oj)

Summaries of the Annual Work Programmes for 2014 (http://ec.europa.eu/health/programme/docs/wp2014_annex_summary_en.pdf)

Summaries of the Annual Work Programmes for 2015 (http://ec.europa.eu/health/programme/docs/wp2015_summary_en.pdf)

Summaries of the Annual Work Programmes for 2016 (http://ec.europa.eu/health/programme/docs/wp2016_summary_en.pdf)

Ex-post evaluation of the 2nd Health Programme 2008-2013 (http://ec.europa.eu/health/programme/policy/2008-2013/evaluation en.htm)

Contact

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