



## NOTE OF THE MEETING

### STEERING GROUP ON PROMOTION AND PREVENTION

30 NOVEMBER 2016, BRUSSELS

The meeting was chaired by Mr Martin Seychell, Deputy Director-General of DG Health and Food Safety. The invited participants were EU Member States, the EEA countries and the Commission services.

Mr Seychell opened the meeting. The agenda was adopted after which Mr Seychell gave a welcome speech.

Following his speech, Mr Stefan Schreck, Head of Unit – Health Programme and Chronic Diseases presented the draft mandate of the Steering Group and the work plan for its activities. Mr Schreck described the rationale for establishing the Steering Group on Promotion and Prevention, its main objectives and the expected outcomes.

He informed that the Group will ensure the coordination of actions by groups working in numerous sectors (e.g. cancer, mental health, nutrition, and rare diseases) and to provide a platform for decision makers from national health authorities to select from best practices identified through Health Programme actions and decide on implementing these best practices with EU financial and other forms of support.

During the discussion, Member State representatives welcomed the setting up of this new group which will support the Member States in achieving the voluntary global targets of the UN/WHO on non-communicable disease by 2025 and the Sustainable Development Goals. It was also suggested that our relevant international frameworks would be considered besides the UN targets.

It was stressed that there is a huge number of tools such as best practices, guidelines, recommendations which have been developed but which are not considered as tools for policy making. There was consensus that there is an urgent need to increase the level of implementation of relevant best practices across the EU, if member states are ever to achieve the targets they have agreed at WHO and UN levels.

The Member States also asked that the mandate of the Steering Group should be to provide strategic oversight of all relevant policies to improve cross-sectorial cooperation in the EU in order to tackle chronic diseases and their determinants.

Economics of prevention and health promotion were highlighted in this regard, and it was suggested that the OECD could be consulted on the economic impacts of best

practices. Positive impacts would enhance the political willingness to adopt these best practices, and allow for better transfer of measures across the EU with necessary allowances for national and regional differences. It was also suggested by a Member State to exclude health promotion spending from the calculation of national accounts as a means to facilitate, encourage and incentivise investments in health promotion and prevention.

The Member States requested to have a mapping exercise to have an overview of the main outputs and results from relevant projects, joint actions and by the expert groups where best practices have emerged. The Secretariat will start this work as soon as possible.

Mr Guy Dargent, senior project officer from CHAFEA made a presentation on a series of actions and projects related to the development of best practices which demonstrated the different approaches taken in each project and different criteria used to identify and validate best practices.

During the discussion, which followed Mr Dargent's presentation, the issue of research gaps and in particular, the need to assess health and economic impacts of best practice implementation was raised.

Mr John Ryan, Director for Public Health, Country Knowledge and Crisis Management, presented the Commission proposal for criteria to select best practices. He described the planned EU Best Practice Resource Centre which will be an IT platform comprising best practices which have been selected on the basis of an agreed criteria.

During the discussion, representatives of the Member States asked further on the process on defining the criteria for best practices as well as the methodology to apply the criteria. In addition, the key elements of transferability and the need to ensure sustainability of any intervention were raised.

The Chair concluded the meeting by saying that comments and amendments on the draft mandate can be sent to the Secretariat by mid December 2016 after which the revised mandate will be sent for approval through the written procedure. The aim is to finalise the mandate by the end of the year.

Comments and input can be also sent on the proposal for criteria on best practices by December 2016. The aim will be to finalise the proposal for the next meeting for discussion and approval of the Steering Group. Finally, the Chair informed that the next meeting is planned for March 2017.