# Mandate of the Steering Group on Promotion and Prevention

## **Purpose**

The purpose of the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases<sup>1</sup> (the short title is the Steering Group on Promotion and Prevention) is to provide strategic advice to the Commission and a forum for consultation among Member States on the strategic planning of health promotion as well as prevention and management of non-communicable diseases. The Steering Group on Promotion and Prevention will support the Commission in liaising with the senior level working party on public health and informing the informal health council as appropriate.

### Tasks and role

The Steering Group on Promotion and Prevention will have three main areas of work to support tackling non-communicable diseases including mental conditions and rare diseases and meeting the WHO/UN 2025 global voluntary targets on non-communicable diseases and the Sustainable Development Goals:

## 1: Support for the implementation of policies

- Supporting DG SANTE in identifying best practices<sup>2</sup> to be implemented for increased EU added value, particularly in the areas of EU policy priorities
  - Agreeing criteria as a basis on selecting best practices related to health promotion, prevention and management of non-communicable diseases
  - Selecting best practices on health promotion, disease prevention and management of non-communicable diseases for implementation
- Supporting DG SANTE in coordination with the Expert Group on Health Information on possible indicators to promote the monitoring of the implementation of best practices and contribute to (the State of Health process) health country knowledge;
- Supporting national level implementation of best practices

### 2: Coordination of sector specific expert groups on public health

Steering and providing guidance to sector specific expert groups<sup>3</sup>

Providing feedback on the use of results from pertinent previous projects and joint actions which can be used as an input for the evaluation of the impact of the 3rd Health Programme.

### 3: Improving multi-sectorial collaboration

<sup>1</sup> Management in this context does not include treatments such as drug therapies.

<sup>2</sup> The term best practice is used for ease of reference. However, this term does not exclude good practices.

<sup>3</sup> These expert groups include groups such as the Expert Group on Cancer Control, the Expert Group on Rare Diseases, the Expert Group on Mental Health, the Expert Group on Dementia, the Expert Group on Social Determinants and Health Inequalities, the High Level Group on Nutrition and Physical Activity and the Committee on National Alcohol Policy and Action.

The Steering Group on Promotion and Prevention will improve collaboration with non-health sectors which have a link or impact on non-communicable disease policies. This could include working with other sectors to identify and implement best practices.

# **Membership**

The Group will consist of one appointed representative and his/her alternate of each EU Member State and the EEA countries. The member should represent his/her Member State and be able to take positions concerning the tasks mentioned above in particular in the areas of: health promotion, including nutrition and physical activity and reduction of alcohol-related harm; disease prevention including screening, and; management of non-communicable diseases including cancer, mental health and rare diseases.

## **Meetings**

The Deputy Director-General for Health or the Director for Public health, country knowledge and crisis management will chair the meetings. DG SANTE – Unit on Health Programme and Non-communicable Diseases will provide the Secretariat for the Group.

There will be two annual meetings. If the chair and the majority of the members consider additional meetings of the Group to be necessary, these will be organised exceptionally in addition to the regular meetings. Meetings should be organised as far as possible in connection with major conferences or informal councils.

Working documents of the meeting should be sent by the secretariat no later than 15 working days before the meeting. A summary note of the meeting will be sent to the participants of the meeting no later than 10 working days after the meeting for comments and approval.

The final approved minutes of the meetings and the list of participants will be published after each meeting on the Commission website. Each participant has the right to decline orally or in writing before or during the meeting to have his/her name to be published on the website.

#### Areas of work 2017-2020

### In 2017

- 1. Approval of the mandate of the Group
- 2. Adoption of the criteria to select best practices
- 3. Selection of best practices to be implemented by the Member States on a voluntary basis with financial support from the 3<sup>rd</sup> Health Programme, including input to the 2018 annual work programme
- 4. Guidance to sector specific expert groups priorities for 2017- 2018
- 5. Discussion of the priority areas to be included in a possible call for best practices

### In 2018-2019

- 1. Selection of best practices to be implemented by the Member States on a voluntary basis with financial support from the 3<sup>rd</sup> Health Programme, including input to the 2019/2020 annual work programmes, and potentially other funding programmes.
- 2. Guidance to sector specific expert groups priorities for 2019-2020.

### In 2020

- 1. Review of implemented best practices and their improvement, where needed.
- 2. Requests to the Commission expert groups for guidelines, recommendations and activities based on the evaluation and experiences of using best practices.
- 3. Provision of information for the final evaluation of the 3<sup>rd</sup> Health Programme on the uptake of best practices as an important indicator of the 3<sup>rd</sup> Health Programme.