



EUROPEAN COMMISSION
DIRECTORATE-GENERAL RESEARCH AND INNOVATION
Directorate E – People

DIRECTORATE-GENERAL HEALTH AND FOOD SAFETY
Directorate C – Public Health

Meeting Minutes

Joint Meeting

Shadow Health Configuration of the Horizon Europe Programme Committee and Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases

4 March 2021

Introduction and adoption of agenda

On 4 March 2021, the Shadow Health Configuration of the Horizon Europe Programme Committee and the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases held a virtual meeting, jointly chaired by the Director for “People”, DG RTD, and the Director for Public Health, DG SANTE. The co-chairs stressed the need for seamless integration of health policy action and R&I particularly in the area of cancer, which is a key concern for Europe’s citizens. The representatives of 25 Member States, Norway and Iceland attended the meeting together with a number of Commission services and agencies¹.

State of Play on Europe’s Beating Cancer Plan and Horizon Europe’s Mission on Cancer

After introductory remarks by Deputy Directors-General of DG RTD and DG SANTE, participants were informed that the Europe’s Beating Cancer Plan had been adopted on 3 February and received generally positive views. The Plan had been presented at the last meeting of the Steering Group on Promotion and Prevention, then to the Council Working Party on Pharmaceuticals and Medical Devices, as well as to the sub-group on cancer of the strategic configuration of the Shadow Programme Committee. It will further be discussed at the forthcoming Health Council meeting on 16 March. Stakeholders had been

¹ Directorates-General represented included Health and Food Safety (SANTE), Energy (ENER), Employment, Social Affairs and Inclusion (EMPL), Environment (ENV), Research and Innovation (RTD), Agriculture and Rural Development (AGRI), Communications Networks, Content and Technology (CNECT), Eurostat (ESTAT), Economic and Financial Affairs (ECFIN), as well as the Joint Research Centre (JRC) and representatives from a number of EU decentralised and executive agencies such as European Investment Bank (EIB), Consumers, Health, Agriculture and Food Executive Agency (Chafea), and European Agency for Safety & Health at Work (EU-OSHA).

also informed on it during a webinar organised through the EU's Health Policy Platform on 12 February.

Participants focused then on the implementation of Europe's Beating Cancer Plan and the Horizon Europe Mission on Cancer. Both initiatives have common objectives and have been developed in close alignment as the Mission on Cancer will underpin the Cancer Plan's proposed initiatives by identifying directions for R&I, supporting evidence-based policies, and promoting the uptake of the results of research and innovation.

Discussion turned to the proposed new sub-group on cancer under the Steering Group on Promotion and Prevention, which will be a joint group of experts from national health and research ministries to support synergetic and effective implementation of actions and policies across the European Union. The sub-group reflects an innovative approach within the Commission as it will be the only group where health and research authorities will discuss side by side relevant issues on cancer, including the coordination needs. It is planned for the sub-group to discuss different types of joint work, from choosing priority areas for identifying best practice, to considering recommendations for instance on cancer screening and debating new policy actions.

Under DG SANTE's Health Policy Platform, a Stakeholder Contact Group will bring together, relevant stakeholders such as patient groups, health professional's organisations, civil society representatives, as well as industry. It is envisaged that the group will consist of a plenary and a number of thematic sub-groups, which will engage on specific topics and actions proposed in the Cancer Plan and the Mission on Cancer.

The governance model of the Cancer Plan and Mission on Cancer was discussed, including the mandate for the temporary sub-group on cancer, which details the terms of reference for its activities. The SGPP advises Commission on Health Promotion and Disease Prevention and through its sub-group on cancer the implementation of the Europe's Beating Cancer Plan and the Mission on Cancer. The sub-group will also advise the Commission on the monitoring process of the implementation.

To further clarify, the implementation organigram was presented, including groups with an advisory role, among those the new sub-group; these have no decision-making power but will keep the SGPP, the health configuration of Horizon Europe Programme Committee and the Horizon Europe Strategic Committee informed. Those committees in charge of comitology examine and adopt the work plans for EU4Health and Horizon Europe programmes. The clear division of tasks and competences between the groups and committees was explained.

In parallel, the EU4Health Steering Group, as established by the EU4Health Regulation, is consulted by the Commission on the priorities and strategic orientations of the annual work programme. The Commission will draw on the SGPP's advice – as well as other inputs – in preparing its strategic orientations and priorities for the EU4Health annual work programmes. The SGPP and the EU4Health Steering Group are thus separate entities with distinct roles.

DISCUSSION

The Chair gave the floor to Member States to present their opinions.

Germany thanked the Commission for the presentation which had clarified many issues on governance. They suggested changing the text within the mandate of subgroup, and after discussion and support from others, to: "*The sub-group will also advise the Commission on the monitoring process of the implementation of the Cancer Plan and the Mission on Cancer*". Germany then commented on the explicit role of Member States in implementation and its instruments, for example the roadmap, progress indicators and tools like a cancer inequalities registry, in order to exploit synergies. DG SANTE agreed with the approach and explained that all items identified in the Europe's Beating Cancer

Plan would be discussed with the sub-group. The roadmap would be published with approximately forty actions and an identification of timelines and responsibilities; this would be discussed with the sub-group on cancer, involving Member States from the start. **The Netherlands** then reiterated the question that all actions proposed in the Europe's Beating Cancer Plan would be discussed in the sub-group, to which they were replied in the affirmative; all actions will be discussed with Member States.

France, recognising the challenge of global governance, suggested forming temporary ad-hoc topic-specific sub-groups to address specific issues, citing screening as an example. DG SANTE agreed on the need to include different experts on specific topics, such as inequalities. The formation of temporary specific groups could be discussed in the sub-group.

Spain, supported by **Portugal**, stated their support for the creation of a sub-group for coordination and asked that if the mandate would include the follow up of implementation, then it could be necessary to consider the strategic involvement of the Horizon Europe Programme Committee. DG RTD referred back to the organigram, where strategic configuration was explicitly included and stressed that comitology was respected. DG SANTE added that a firewall exists between the SGPP and comitology in order not to prejudice the comitology committees, as the intention is to help with the implementation through early involvement of Member States, and not to pre-fix the spending programmes.

Ireland noted that, according to the draft mandate, it was planned for the sub-group to meet either physically or virtually twice per year, which does not seem adequate given the tasks involved. It was explained that *at least* two meetings per year are foreseen, and that per the rules of procedure, the sub-group can decide how many meetings are needed at the first kick-off meeting.

Denmark suggested a change in the governance document to facilitate a flow of information: *The Commission will facilitate the flow of information between the SGPP sub-group on cancer, the SGPP itself and the relevant comitology committees, including the EU4Health Programme Committee, the Health Configuration of the Horizon Europe Programme Committee, and the Horizon Europe Strategic Programme Committee. This will be done by circulating the group's meeting agendas ahead of meetings and by giving the relevant committees – including the EU4Health steering group – access to a repository where all documents (e.g. agendas, minutes, reports) related to the work of the sub-group can be accessed.* This proposed text was agreed by **Portugal, Spain, France** and **Norway**, as well as the Commission.

Denmark requested a central repository collating relevant information accessible by the different committees for both transparency and rapid access. DG SANTE agreed and documents will be shared, such as the agendas, the minutes, and working documents.

Denmark then asked about opportunities for exchange of ideas with other committees and continued access to the Mission Board. DG RTD explained that both the Chair and the Vice-Chair of the Mission Board will be invited as observers to the sub-group, and that either the Commission or Member States can invite the Chair or Vice-Chair from the Strategic Group or the Health Programme Committee on an ad hoc basis.

Germany asked if the cancer implementation group was synonymous with the new sub-group, and if so, suggested a reference in the mandate. This footnote was duly added: *The implementation group on the Cancer Plan and Mission on Cancer is an internal Commission group. The Commission will ensure that discussions will be provided to the sub-group.*

Ireland, supported by **Malta**, requested one roadmap for both the Europe's Beating Cancer Plan and the Mission on Cancer, using the intricacies of screening as an example. It was explained that although this makes sense, it is not currently possible, as, for

example, the Mission on Cancer is still working on its specific implementation plan. However, the several Mission recommendations were incorporated within the Europe's Beating Cancer Plan; there is essentially one strategic common direction on cancer. **Germany** asked both when the Roadmap would be published and when Member States would be able to discuss the implementation, for example progress indicators. DG SANTE explained that the roadmap is already in draft form, and that following internal discussions, this draft will be discussed with the new sub-group before being published more widely. Both **Malta** and the European Agency for Safety & Health at Work suggested including the words 'implementation and monitoring' in the title of the sub-group.

Spain asked for clarity on the ad hoc groups and additional experts; it was explained that the rules of procedure enable such temporary groups to be formed, for example on screening. The same horizontal rules for the SGPP apply for the sub-group. This sub-group is a Member States group to enable free discussion and then further in-depth discussion between Member States. Invitations to nominate members and alternate members will be issued through the secretariat.

The European Agency for Safety & Health at Work asked for clarification on their role in the future sub-group. DG SANTE explained that it is foreseen to include European agencies in the Commission implementation group, but that this cancer sub-group is for Member States. Should agencies be needed, they will be invited; in addition, there are stakeholder groups.

Based on the fruitful discussions that took place and on the very broad support that was received, the mandate of the sub-group was approved with the revisions mentioned during the meeting. It was stressed that the sub-group will be of key importance for the mutual support of the Mission on Cancer and the Cancer Plan by timely inclusion of input from national health and research authorities.

Next steps for the SGPP sub-group on cancer

The tentative agenda for the first meeting of the sub-group on cancer was proposed, with an update on the two initiatives followed by three thematic presentations. It was suggested to include further presentations on monitoring and the cancer inequalities register, as well as an update on the work to date of the Member State sub-group on implementation of the Cancer Mission.

The Member States will be asked to nominate official representatives from both the health and research authorities to the sub-group (one expert and one alternate per Member State).

Portugal and **Poland** asked about the nomination process: an email will be sent to SGPP members, with a copy to health attachés. It is then for Member States to decide on nominations. The same process will be applied by DG RTD for the Shadow Health Configuration of the Programme Committee. In supporting the initiative to create the sub-group on cancer, Poland also suggested to have the possibility to invite cancer experts representing each Member States, therefore enabling the coordination of the National Cancer Strategies with all other cancer strategies initiated and ongoing in EU. It also proposed to build effective communication between EU initiatives and Member States, covering coordinators, IT platforms, repositories, etc. **France** asked about the timing of the establishment of the stakeholders group; all of the groups are to be established in parallel, with requests for nominations next week. **Spain** asked for the number of nominations: per Member State, one formal member and one alternate member from both health and research ministry. It was also explained that webinars have a limit of 199 attendees; currently it is for Member States to decide attendance according to the topic, without limitations on participation numbers per Member State. A hybrid approach was suggested, for example a physical meeting followed by a virtual follow up. DG RTD opined that large groups adversely affect the quality of discussions, both DG RTD and DG SANTE

will come up with a suggestion in order to make it as manageable as possible. **Germany, Sweden** and **Denmark** asked about sharing documents. DG SANTE replied that under the Health Policy Platform, there is a possibility to set up a specific space where documents could be shared in a library; the Commission would share with committees and Member States would share nationally. The sub-group planned to have its first meeting on 16 April, and two other meetings are likely to be organised before the summer break. It was agreed that the logistical and administrative arrangements for the sub-group will be on the agenda, as well as possibly the roadmap of the Europe's Beating Cancer Plan.

Conclusions and Next Steps

Participants were informed that the open call for Best Practices on the prevention of Non-Communicable Diseases and related risk factors had been prolonged by two weeks, until 14 March; practice proposal should be submitted via the Best Practice Portal².

The meeting was concluded by thanking participants from the health and research ministries for their valuable and enriching input.

² <https://webgate.ec.europa.eu/dyna/bp-portal/>