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Third EU Health Programme 2014-2020

Health and
Consumers



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THE CHALLENGES

- increasingly challenging demographic context threatening the sustainability of health systems
- fragile economic recovery limiting the resources available for investment in healthcare
- increase of health inequalities between/within Member States
- increase in chronic diseases prevalence
- pandemics and emerging cross-border health threats
- rapid development of health technologies

→ **Regulation 282/2014/EU for the third Health Programme** (*OJ L 86, Vol. 57 of 21 March 2014*)

http://ec.europa.eu/health/programme/policy/index_en.htm

- **Following the Commission's proposal of November 2011**
- **7 years, proposed budget of € 449.39 million**
- **Other Programmes for health are:**
 - **Horizon 2020,**
 - **Structural and Investment funds**



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EU Health actions and Programmes

AIDS
Prevention &
communicable
diseases

Injuries
prevention

Drug
prevention

Health
Monitoring
Cancer

Rare diseases

Pollution
related
diseases

Health
Promotion,
Information,
Education &
training

1998 - 2002



- **Community action in the field of health 2003-2007**

EUR 312 million



- **2nd Community action in the field of health 2008-2013**

EUR 321,5 million



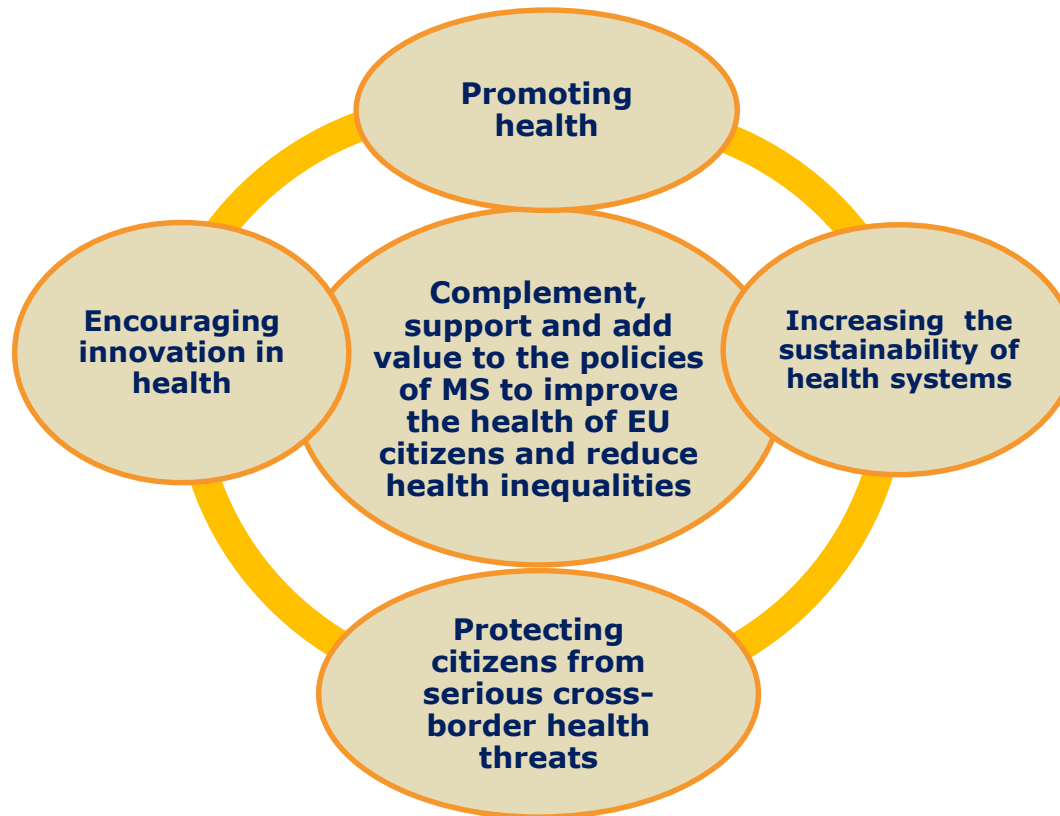
- **3rd Union action in the field of health 2014-2020**

EUR 449,4 million



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The scope of the Programme





The 3rd Health Programme is aligned with

*The **Europe 2020** Strategy for intelligent, sustainable and inclusive growth*

*The **EU Health Strategy " Together for Health"** and its shared principles and objectives*

***Taking forward work already started** in the current Health Programme 2008-2013,*

***Supporting EU health legislation** including legislation on medicinal products and medical devices*



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The future Programme: a tool for investing in health(*)

for spending smarter
but not necessarily
more in sustainable
health systems

for investing in
people's health,
particularly through
health-promotion
programmes

for investing in health
coverage as a way of
reducing inequalities
and tackling social
exclusion

(*) Investing in health – Commission staff working document – published in February 2013 as part of the Social Investment Package for growth and cohesion.



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The objectives

1) Promote health, prevent disease 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 Union citizens

Address in particular the key risk factors with a focus on the Union added value.

Coherent approaches integrated into MS preparedness plans

Innovative tools and mechanisms in health and health prevention

Increase access to medical expertise and information for specific conditions



1) Promoting health, preventing diseases and fostering supportive environments for healthy lifestyles

- Cost-effective promotion and prevention measures for addressing **tobacco, alcohol, unhealthy dietary habits, physical inactivity**
- action in **reducing drug-related health damage, including information and prevention.**
- **Chronic diseases** including **cancer**; good practices for prevention, early detection and management, including self-management
- **HIV/AIDS, TB and hepatitis; up-take of good practices for cost-effective prevention, diagnosis, treatment and care**
- **Legislation on tobacco products** advertisement and marketing
- **Health information** and knowledge system



2) Protecting citizens from serious cross-border health threats

- **Legislation** in the fields of communicable diseases and other health threats (**Health Security Initiative**)
- Improve **risk assessment** by providing additional capacities for **scientific expertise and map existing assessments**
- Support **capacity building**, cooperation with neighbouring countries, preparedness planning, non-binding approaches on vaccination, joint procurement
- Health information and knowledge



3) Contributing to innovative, efficient and sustainable health systems

- **Health Technology Assessment**
- **Up-take of health innovation and e-health solutions**
- **Health workforce** forecasting and planning (number, scope of practice, skills), mobility/migration of health professionals
- Mechanism for **pooled expertise and good practices** assisting Member States in their health systems reforms
- Health in an ageing society, including European Innovation Partnership on **Active and Healthy Ageing**
- **Legislation** in the field of **medical devices, medicinal products** and **cross-border healthcare**
- **Health information** and knowledge system including **Scientific Committees**



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4) Facilitating access to better and safer healthcare for EU citizens

- **European Reference Networks** (on the basis of criteria to be set under Directive 2011/24/EU)
- **Rare diseases** (networks, databases and registries)
- **Patient safety and quality of healthcare** including the prevention and control of **healthcare-associated infections**
- **Antimicrobial resistance**
- **Legislation** in the field of **tissues and cells, blood, organs, medical devices, medicinal products, and patients' rights in cross-border healthcare**
- **Health information** and knowledge system



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The implementation

Annual Work Programmes

The Commission implements the Programme by establishing annual work programmes on the basis of which calls for proposals and call for tenders are organised every year.

http://ec.europa.eu/health/programme/policy/index_en.htm

Programme Committee Members

The Commission is assisted by a committee for establishing the annual Work Plans and monitor the Programme implementation.

National Focal Points

Member states designate National Focal Points for the promotion of the Programme and the dissemination of the Programme results and the identification of impacts generated

The contact details of NFP could be found on the CHAFEA website

http://ec.europa.eu/eahc/health/national_focal_points.html

Consumers, Health and Food Executive Agency (CHAFEA)

The Agency is entrusted by the Commission to manage the Health Programme and it works closely with us. <http://ec.europa.eu/eahc/about/about.html>



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Interventions/**Financial mechanisms**

- **Actions with MS competent authorities (*joint actions*)**
(invited procedure for direct awarding)
- **Projects (call for proposals → grants)**
- **Work of NGOs and Networks (call → operating grants)**
- **Cooperation with International Organisations (direct grants)**
- **Studies, evaluations, IT services, etc (public procurement)**

Financial provisions

60% is the maximum co-financing rate for all types of grants, and in some rare cases of **exceptional utility** this may be raised **up to 80%**

Public procurement is of course covered **100%**.



Beneficiaries (recipients of funding)

- **Legally established organisations**
- **Public authorities, public (or non-public sector) sector bodies** (research and health institutions, universities and higher education establishments)
- **Non-governmental bodies**
- **International organisations**
- **Private companies** (through public procurement)

Specific eligibility criteria will be presented by the Chafea



Participation of third countries

The Programme is open on a cost basis, to the participation of third countries, in particular of:

- (a) **acceding countries, candidate countries and potential candidates** benefiting from a pre-accession strategy, in accordance with the general principles and general terms and conditions for their participation in Union programmes established in the respective Framework Agreements, Association Council Decisions or similar Agreements;
- (b) **EFTA/EEA countries** in accordance with the conditions established in the EEA Agreement;
- (c) **neighbouring countries** and the countries to which the European **Neighbourhood Policy (ENP) applies** in accordance with the conditions laid down by a relevant bilateral or multilateral agreement;
- (d) **other countries** in accordance with the conditions laid down by a **relevant bilateral or multilateral agreement.**

EU added value: a key concept

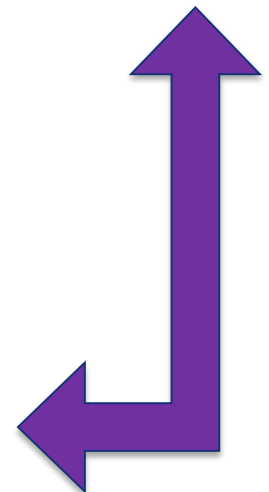
- **Implementing EU legislation** and ensuring that the legislation implemented is correct
- **Economies of scale** with the aim of saving money and providing citizens with better service
- **Promotion of best practice in all participating Member States** in order for EU citizens to benefit from the state of the art best practices
- **Benchmarking for decision making** requiring a strong commitment to use results with the aim of facilitating evidence based decision making
- **Focus on cross border threats** in order to reduce risks and mitigate their consequences
- **Free movement of persons** with the aim of ensuring high quality Public Health across Member States
- **Networking as an important tool for disseminating results** to all Member States including non participants

Monitoring and Evaluation

- **monitor the implementation of the actions** under the Programme in the light of its objectives and indicators, including available information on the amount of climate-related expenditure.
- **report thereon to the Programme committee** and shall keep the **European Parliament and the Council** informed
- **evaluate at mid-term** by end June 2017
- **evaluate ex-post the long-term impact and the sustainability of effects** with a view to feeding into a decision on the possible renewal, modification or suspension of a subsequent programme.
- **make the results of actions publicly available** and **ensure that they are widely disseminated** in order to contribute to improving health in the Union.

Conclusions

- **Objectives** more focused and tangible (SMART)
- Limited number of **actions** prioritised on **EU added value criteria** (23 thematic priorities – Annex I of Programme Regulation)
- Same type of beneficiaries as in the past two Health Programmes
- Same type of interventions but **attention to the new procedures**
- **Progress indicators** to monitor the objectives and the impact
- Annual Work Plans based on **long-term policy planning**
- **Better dissemination** and communication of results
- **Simplification** of administrative and financial procedures





More info

on the SANCO website

**for Health Programmes including the Commission
proposal for the new Programme**

**[http://ec.europa.eu/health/programme/policy/index_en.
htm](http://ec.europa.eu/health/programme/policy/index_en.htm)**

on the CHAFEA Database

for the results of previous Health Programmes

<http://ec.europa.eu/eahc/projects/database.html>



Thank you!