

ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX **EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS** EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE **EUROPESE VERENIGING VAN STAFARTSEN** DEN EUROPÆISKE OVERLÆGEFORENING ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΔΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI **DEN EUROPEISKE OVERLEGEFORENING** ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES **EUROPEISKA ÖVERLÄKARFÖRENINGEN** EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV **EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV** EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE

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## 2011 DG SANCO management plan

DG SANCO has released its 2011 Management Plan. The plan highlights the role of public health as a key driver for competitiveness and growth in an ageing Europe, and as a cornerstone for economic success. It argues that a healthy population means more productivity, more time at work, more employed people, more older people at work and less demand on healthcare. It also highlights the supportive role of EU health policy in the economic recovery and in helping Member States address current challenges.

One of the strategic priorities of the DG is to demonstrate the EU value from sufficient future funding for programmes under the multiannual financial framework for 2014 and beyond. The plan states that the DG will use the currently available financial resources efficiently and effectively. Special attention will be given to avoid national budgetary pressures undermining enforcement at national and local level, and thus the potential benefits. The Commission's actions under the strategy are mainly financed by the second programme for Union Action in the field of Health, 2008 – 2013. They address all three objectives of the strategy.

## First objective: To foster good health in an ageing Europe:

A key proponent to prosperity and wellbeing is keeping people healthy for longer. The management plan cites a study claiming that 10% fewer deaths at working age as a result of cardiovascular diseases would bring about a 1% increase in GDP per capita. Due to the ageing population, solutions to overcome the projected dependency ratio (number of retired people depending on active people) of 1 to 2 by 2050 need to be found. For this reason, the Commission aims to focus on health promotion throughout the life course – youth, the working population, and older people - with the goal of promoting health at all ages. Part of this strategy will also include the European Innovation Partnership on Active and Healthy Ageing that will be formally launched at the beginning of 2011.

Another priority to meet this goal will be continuing work on health determinants. Many chronic diseases, such as cancer and diabetes, are linked to unhealthy lifestyles that people lead. Work on health determinants and health promotion thus prevents disease while contributing to active and healthy ageing. In 2011, the European Commission will continue to support activities on a number of key health determinants: social determinants and health inequalities; nutrition and physical activity; and alcohol and tobacco. The anti-tobacco campaign, aimed at young people, will be continued under the Public Health programme. A revision of the Tobacco Products Directive is also ongoing.

In 2011, work on diseases will focus on cancer and rare diseases. Cancer is the second biggest cause of death of men and women. The aim of the Commission as set out in its Communication 8 on Action Against Cancer is to reduce cancer incidence by 15% by 2020. In 2011 and beyond, the Commission will contribute to the goal of patient safety through a stream-lined system for the monitoring of adverse reactions to medicinal products and by empowering patients to report themselves adverse drug reactions. Negotiations with the co-legislators will continue in 2011 as regards legal proposals on information to patients on medicinal products, aimed at ensuring the availability of objective and good quality information on medicines.

## Second objective: To protect citizens from health threats:

In 2011, the Commission's actions will be continued and take into consideration the lessons learnt from the H1N1 pandemic. For other serious cross-border health threats, the Commission will examine an initiative for building EU capacity to respond. Work will be taken forward on the joint procurement of pandemic vaccines, as requested by the Council. In addition, more effort will be made to respond to the growing threat caused by antimicrobial resistance, and a report will be produced on the implementation in Member States of the Council Recommendation on hospital-acquired infections. International cooperation in preparing for and reacting to serious cross-border health threats will be continued through the Commission membership of the Global Health Security Initiative.

The implementation of the 2nd HIV/AIDS strategy adopted in 2009 will be continued with a focus on prevention strategies for HIV and co-infections. In the field of organ donation and transplantation, the Commission will assist Member States in setting quality and safety standards for human organs intended for transplantation and by proposing an Action Plan to meet the challenges of organ donation and transplantation in the EU.

For medicinal products, the European Commission Communication on "Safe, Innovative and Accessible Medicines: a Renewed Vision for the Pharmaceutical Sector" highlights its agenda in the pharmaceutical sector, addressing the opportunities and challenges of globalisation, including the response to global health threats such as pandemics and counterfeit medicines. In addition the work on the recast of the medical device directives will continue with the aim of adopting a legislative proposal in 2012.

## Third objective: To support dynamic health systems and new technologies:

The management plan highlights the financial pressure and challenges facing health systems in Europe. The Commission works with Member States in facilitating information exchange and indicators that can provide them with the expertise to make the right choices on how to plan and deliver quality healthcare services. Cross-border healthcare is one of the areas taken into account in the Europe 2020 strategy. New health technologies will also be a part of making cross-border healthcare a success. These new technologies have patients' and citizens' interests at heart. Through risk assessment and scientific research, Health Technology Assessment can also assist national authorities to identify the most effective health interventions. Also in 2011, a revision of the Clinical Trials Directive is foreseen. Work on a proposal for the Healthy Workforce will also continue.

The full DG SANCO management plan is available here