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At the CPME Executive Committee, Brussels, 26 January 2007, CPME adopted the following document "**Answer to the Health Policy Forum questionnaire on the EU health strategy**" (CPME 2007/017 EN)

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## **CPME ANSWER to the Health Policy Forum questionnaire on the EU health strategy, 12/02/07**

CPME appreciates the consultation process that is feeding into the EU health strategy. As put forward in the EHPF document and according to answers to the 2004 consultation, it is made clear that the Strategy will focus on three elements: core issues which need to be addressed in order to protect and improve health in Europe, health in all policies, and global issues.

CPME can fully support this approach and would also like to reconfirm its policy that high quality health care in the EU must be a right for every citizen and available to them on equal and fair conditions.

Within this context Patient Safety is of vital importance and must be at the centre of the reflection process when promoting good health for all.

CPME strongly promotes Patient Safety and wants to underline once again the importance of the [Luxembourg Declaration on Patient Safety](#)<sup>1</sup> which was the result of the Patient Safety Conference held on 4 & 5 April 2005 in Luxembourg, under the auspices of the Luxembourg EU Presidency and the European Commission. CPME is actively promoting this Declaration at all levels of the EU decision making processes.

European cooperation on Patient Safety is needed to improve patient care for people all over the EU, whether they seek care nationally or in other Member States. Ensuring Patient Safety will help increasing the overall quality of healthcare. Patient Safety is a responsibility of all health stakeholders and CPME sees a strong added value in having the EU committing itself.

The CPME favours the establishment of a European Platform for Patient Safety in order to be able to tackle the issues in an transparent and efficient way.

The CPME stresses the important role Continuing Professional Development (CPD) plays in improving patient safety. Besides being an ethical imperative of every healthcare professional, CPD is also a prerequisite for enhancing the quality of health care.

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<sup>1</sup> The European Conference "Patient Safety" was held on 4 & 5 April 2005 in Luxembourg, under the auspices of the Luxembourg EU Presidency and the European Commission and was organised in collaboration with several European organisations. (see <http://www.cpme.eu>)



This is clearly underlined in the [Consensus Statement “Continuing Professional Development: improving healthcare quality, ensuring patient safety”](#), adopted on 14 December 2006 at the European Conference “CPD-Improving healthcare”<sup>2</sup>.

CPME is convinced the EU can provide a clear added value in enhancing a solid, coherent and equitable framework for quality care. The integration of the health dimension into all EU policies and the anticipation of all the impacts of new measures on health is a needed and it shows the added value of the EU where health is concerned.

CPME would like to underline the following other points :

- There is a shared responsibility for public health
- the disease patterns in Europe concern all member states (MS): cardiovascular diseases, diabetes, cancer, infectious diseases and among them not least TB and HIV/AIDS, obesity and substance abuse including tobacco, alcohol and drugs.
- the inequalities in access and deliverance of (public) health must be erased
- “health generates wealth”. Prevention as well as care should be seen as good investments also from an economic point of view
- Vital prerequisites for health are good and reliable information available to the public and an increasing knowledge among the citizens on health issues and education on how to access trustworthy information

CPME agrees that the impact of an aging population and the problems which may result should be thoroughly considered and addressed. Any credible health-strategy must take full account of the changing demography of the European population. Furthermore, it is most important to realise that public health and in particular improvements in public health cannot be brought about without social, behavioural, educational and environmental changes as well i.e. changes in lifestyles.

The need for adequate health and health care statistics on the EU level is blatant; health needs to be put at the centre of all EU policies also because it is a driver of economic development.

In order for health issues to have the important role they should have it is also necessary to strengthen the role and activities of DG SANCO. All policies that have any consequences for health should be also reviewed by DG SANCO which must get the right and responsibility to influence. This implies also increased allocation of resources (human and financial).

The CPME believes that the EU has a crucial role in influencing international policies so that health remains a key priority in both the developed and developing world.

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<sup>2</sup> The European Conference « CPD-Improving healthcare » was held on 14 December 2006 in Luxembourg, under the auspices of the Finnish EU Presidency and the European Commission, and was organised in collaboration with several European organisations. (see <http://www.cpme.eu>)



There is a need for more co-operation between the EU and WHO, NGOs and the professional organisations in order to be able to make full use of the knowledge and competencies at EU level.

Possible methods to improve cooperation at all levels:

- Broaden the use of EU programmes and structural funds and make the application for them more user friendly
- Systematically and actively involve stakeholders (“civil society”) in:
  - pre-consultation processes
  - EU entities like platforms, networks, committees, WG’s etc
  - EU web sites (especially the EU health portal)
- More co-operation EU/MS/NGOs and the professional organisations
- Exchange of best practices
- Exchange of statistical data
- Make the High Level Group on Health Services and Medical Care permanent and have professional organisations like CPME represented at the Plenary meeting.

The European Health Policy Forum and the Open Health Policy Forum are good instruments in this process that could however further be improved.

Both in the short and long term perspective, the EU should strive to strike the right balance between promoting prevention and supporting equal access to high quality care for for all EU citizens.

Examples:

With regard to mobility of patients:

- increase awareness of the rights of citizens;
- Stimulate information regarding patient mobility. This information should not be reduced to the different rules applicable for getting health care abroad but should also cover issues such as pre and post treatment, prices, the complaints/procedures; e-health (health cards, health portal, health records) and data on mobility

With regard to mobility of healthcare professionals:

- The system of gathering accurate and comparable data about the mobility of health professionals should be (further) developed;
- Information should be collected and distributed regarding recruitment/ demography/ education and professional development/working conditions

For different issues different tools could be used and the best one needs to be chosen each time.

Therefore the CPME does not favour one specific tool but prefers different tools for different issues.

For example legislation could be appropriate when looking at areas that involve tobacco, alcohol and food.



Also non legislative instruments such as the Open Method of Coordination is a very good tool that could be used for monitoring and exchange of best practices, for a close look at data collected and criteria used, provided all relevant stakeholders are involved.

The format as chosen for the EU Platform on Diet, Physical Activity and Health seems to be a good tool to set milestones.

**The EU needs to play an active role in health and healthcare as the added value of the EU is obvious.**

**CPME is willing to be an active partner.**