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Public health

Health promotion, disease prevention, financial instruments

Meeting Minutes

Meeting of the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases

Virtual meeting, 5 February 2021

Introduction and adoption of agenda

On 5 February 2021, the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases held a virtual meeting, chaired by DG SANTE. The representatives of 25 Member States, Norway and Iceland attended the meeting together with a number of Commission services, and agencies¹.

Europe's Beating Cancer Plan and Horizon Europe's Mission on Cancer

Participants were informed that the Europe's Beating Cancer Plan was adopted on 3 February 2021 with a dedicated budget of 4 billion Euro, reflecting strong commitment to address cancer prevention and care and incorporating valuable contributions from Member States and citizens. The ten flagships and 32 actions were outlined briefly. The Europe's Beating Cancer Plan will be funded through several EU instruments such as the EU4Health Programme (1.25 billion Euro funding for the entire duration of the programme), Horizon Europe Framework Programme, the Digital Europe Programme, Regional and Cohesion funds, as well as the Technical Support Instrument and the Recovery and Resilience Facility. The Commission informed participants of the progress of the Mission on Cancer and the next steps scheduled for 2021.

Participants were then informed about the Strategic Agenda for Medical Ionising Radiation Applications (SAMIRA) Action Plan², which is part of DG Energy's contribution to the Europe's Beating Cancer Plan.

The mandate of the future SGPP joint sub-group on cancer related to the implementation of the Europe's Beating Cancer Plan and the Cancer Mission was discussed with Member

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 (CONNECT), Eurostat (ESTAT), Economic and Financial Affairs (ECFIN), Trade (TRADE), Education, Youth, Sport and Culture (EAC), as well as the Joint Research Centre (JRC) and representatives from a number of EU decentralised and executive agencies such as European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), European Investment Bank (EIB), Consumers, Health, Agriculture and Food Executive Agency (Chafea), and European Agency for Safety & Health at Work (EU-OSHA).

² [Medical uses of radiation | Energy \(europa.eu\)](#)

States, with a focus on the profiles of potential members and on governance structures. It was stressed that this was all without prejudice to the formal mechanisms that exist, such as programme committees or discussions in Council. There followed fruitful discussion between participants on (1) the complexity of the governance between different groups. The Commission will draft a short document summarising their possible roles and interlinks, with a view to supporting the implementation of the Cancer Plan (and especially as regards the future sub-group on cancer); and (2) the need for ensuring implementation in synergy with Member States, which will be addressed at the upcoming joint meeting of the SGPP and the Shadow Programme Committee of Horizon Europe in early March.

DISCUSSION

The Chair gave the floor to Member States and institutions to present their feedback.

Belgium congratulated the Commission on this milestone and especially for the reinforced vision on public health and One Health. They asked if further actions were foreseen with citizens, for example via the Mission on Cancer. DG RTD replied that for the implementation of the Missions, a suite of activities would be foreseen to engage with citizens. DG SANTE added that all Missions have explicitly engaged with citizens, e.g. through town hall meetings in each Member State. Regarding the Europe's Beating Cancer Plan, citizens were consulted and over 2000 written replies were received. The adoption of the Europe's Beating Cancer Plan is seen as a beginning point, with a political focus on public health using all policy and financial instruments. Member States will be at the centre of the initiative, with the support of the Commission, and benefitting from consultative mechanisms with stakeholder groups (including citizens).

The **European Agency for Safety and Health at Work** expressed their interest in the SAMIRA Action Plan and added that they are undertaking a large survey³ on carcinogens at work.

France welcomed the initiatives, which offer integration at the European level by linking all the relevant programmes and activities, building on a decade of collaborative work in Europe. It builds on a community of action and proposes an integrated vision that focused on the whole person, during and after cancer, including the back-to-work issues. The expected positive health impact will likely expand beyond the cancer field alone.

DG EAC added that the HealthyLifeStyle4All will be a continuation of the Tartu Call for the Healthy Lifestyle, and that over 15.6 million people participated across Europe in the 2020 European Week of Sport⁴.

Croatia offered their congratulations and shared information on their national cancer control plan ("National Strategic Framework Against Cancer")⁵, which is in line with Europe's Beating Cancer Plan.

The **European Monitoring Centre for Drugs and Drug Addiction** offered congratulations on the progress, especially given the current pandemic.

Italy offered their congratulations and opined that this should be viewed as the start in terms of actions to be undertaken by Member States, as each defined action has different feasibility, for example changes in legislation. DG SANTE concurred and stressed the need to work together and to be transparent.

³ [Roadmap - Roadmap on Carcinogens](#)

⁴ [European Week of Sport | Sport \(europa.eu\)](#)

⁵ https://narodne-novine.nn.hr/clanci/sluzbeni/2020_12_141_2728.html

Germany, supported by **Italy**, asked about the overall governance structure and connections to the Mission on Cancer at technical and strategic levels. DG SANTE explained that the strategic intention is transparency and a common synergised approach to implementation, and also ensuring communication and reducing the burden on Member States. This will be done without prejudice of the official (existing or upcoming) official programme committees of Horizon Europe, EU4Health, etc., that will be in charge of the direct implementation of the budget. A one-page summary will be prepared indicating roles and responsibilities; this will also be an agenda topic at the upcoming joint meeting between the Shadow Programme Committee of Horizon Europe and the SGPP.

Germany then asked about the financing of the Europe's Beating Cancer Plan and its origin given that the EU4Health Programme was not yet finalised and that, however, the rules on the budget in the EU4Health Programme indicated that only an amount smaller than 1.25 billion EURO (cf. COM fact sheet on the Europe's Beating Cancer Plan) could be attributed to the fight against cancer. DG SANTE identified potential sources of funds for the defined flagships and actions, such as the EU4Health Programme, Horizon Europe programme, the Digital Europe Programme, Regional and Cohesion funds, as well as the Technical Support Instrument and the Recovery and Resilience Facility. It was added that it is not just about financial instruments, but includes the implementation of legislative instruments, for example SAMIRA, and stressed that decisions will be taken in the normal way, i.e. via established governance channels.

Norway offered their congratulations on the impressive and ambitious Cancer Plan, which links with national priorities, including improving the quality of registries and pathways; early detection, treatment and care; and personalised medicine. They expressed their support for the SGPP sub-group on cancer, citing the importance of maximising the synergies between the two flagship initiatives and exploiting the common resources.

Belgium asked if there would still be a workshop to discuss the mandate of the subgroup. DG SANTE responded by outlining the meetings, which have already taken place, and the need to start as soon as possible. **Spain** expressed their support for the sub-group but asked for an overview in order to avoid redundancy. It was confirmed that the draft mandate will be further revised in light of MS comments, and then confirmed at the upcoming joint meeting. **Denmark** asked about the intended frequency of meetings; this will be as often as required, likely at least twice a year. **Denmark**, echoed by **Austria, Finland, Spain** and **Sweden**, asked for a plan of the overall governance structure, in advance of the upcoming joint meeting in order to be able to have inter-ministerial discussions in advance; this will be provided.

Austria asked about the formal nomination process; DG SANTE replied that Member States will be invited to nominate via the permanent representation. **Croatia** asked the number of formal representatives per Member State; DG SANTE specified one from the national research ministry and one from the national health ministry, although more may take part if the meeting is virtual. **Austria, Italy** and **Spain** requested a combination of physical and virtual meetings due to the difficulty in finding one person with expertise in all topics. DG SANTE expressed the intention of identifying topics well in advance of meetings in order to have the correct experts participating. DG SANTE stressed the importance of clarity of governance across the different policy areas, coupled with the importance of Member State involvement in governance.

Czechia asked if there was planned collaboration between the Mission on Cancer and the Organisation of European Cancer Institutes, which has a very well developed system for implementing quality in medical and preventive care in oncology. DG RTD explained that

this was under preparation and that the Members of the Cancer Mission Board consult with them.

EU4Health Programme

DG SANTE then presented the draft regulation for the EU4Health Programme (2021-2027), for which a political agreement has been reached but which is still for adoption. Member States congratulated the Commission and welcomed the higher budget for health, at 5.1 billion Euro, which will provide opportunities for work between Member States with a higher impact for health. The SGPP will contribute to the governance of the EU4Health Programme advising the Commission on public health and on preparation of the transfer of best practice and existing research results, supporting effective implementation at both the EU and national level; participants were asked to provide reflections on its strategic priorities. It was confirmed that the EU4Health Steering Group, under the legal framework of the EU4Health Programme, would be responsible for preparing the work plans. The SGPP will be essential in providing advice to the Commission on the areas of its expertise, namely on public health.

DISCUSSION

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

Belgium commented that if joint projects were foreseen, they should be improved over previous iterations to make them more attractive, with a lower administrative burden, and with fewer difficulties in finding cofunding. DG SANTE responded that joint projects should define their objective well, and that thanks to their bigger budget, there were options for more substantive collaborative actions. The administrative burden would be proportionally lower, but financial control was still required.

Germany, referring to the circulated One-pager on the subject, commented on governance and the difference between the roles and tasks of the SGPP and the Steering Committee for the EU4Health Programme and stated that it was Germany's assumption that the tasks attributed to the SGPP in the One-pager would eventually be taken over by the EU4Health Steering Committee; **Denmark** echoed the comment and asked which committees would be replaced. DG SANTE explained that the SGPP is a Commission's body that is based on the strong involvement of Member States.

Spain commented on the tight schedule after formal adoption and before the definition of the work plan. DG SANTE described that a short-lived Shadow Committee will be created to anticipate the creation of the formal committee.

Norway asked for an annual breakdown of the budget for 2021-2027; an approximate split was provided in 2018 prices.

AOB and Next Steps

The Health priorities of the Portuguese Presidency of the Council of the European Union were presented to participants.

DG SANTE then provided an update on the developments from the SGPP sub-group on proton therapy, which has the objective of examining the state of play of the evidence on clinical applications and availability of proton therapy in the EU. Member States had provided feedback on the conclusions. It is noted that there is interest in strengthening the links between financial support and cooperation in the collection of evidence and research of proton therapy. DG SANTE, DG RTD and the European Investment Bank are at present discussing ways on how to bring these issues forward and concretely on how to support the development of scientific evidence in the area of proton therapy.

The meeting was concluded by thanking participants for their valuable and enriching input.