The EU standardisation system

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Article 9

Cooperation with research facilities

The Commission’s research facilities shall contribute to the preparation of the annual Union work programme for European standardisation referred to in Article 8 and provide European standardisation organisations with scientific input, in their areas of expertise, to ensure that European standards take into account economic competitiveness and societal needs such as environmental sustainability and safety and security concerns.
EU share of world trade in services (2007)
The standardization of health services is rejected, except for the standardization of medical devices or quality management systems.

Evaluation:
The standardization of health services is rejected, except for the standardization of medical devices or quality management systems. The standardization of health services lacks market relevance and added value. It is in the public interest that the quality and performance of the healing professions be self-regulated and guaranteed by the relevant professional organizations. These ensure that quality requirements, ethical requirements, professional rules, treatment methods and quality assurance be defined and implemented with the necessary expertise. Standardization is neither a necessary nor a suitable instrument for ensuring or improving the quality of such services. Rather, it tends to create legal uncertainty and considerable friction with national professional and liability legislation, and lastly with the health-related political mandates of the European Union. Aside from that, services in such an individualized relationship with the patient cannot be standardized, since the patient is not a standardizable object, but normally a full partner in the performance of the health service. Standardizing health services cannot take adequate account of their special aspects, especially the expertise and social competence needed and their importance for the individual.
IAEA PACT

Programme of Action for Cancer Therapy