

Public health: Community action programme 2003-2008

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The purpose of this communication is to present the conclusions of the evaluation of the implementation of the first three years of the Public Health Programme (2003-2008). The evaluation was carried out by independent experts from a consultancy company, and the key findings are presented in the report.

The overall assessment of the Public Health Programme (2003-2008) is positive. However, eighteen recommendations were issued in three areas: programme, management and projects.

Programme: the evaluation regarded the programme priorities as being complicated. Even if these priorities may have been entirely justified, they might not have reflected the actual needs of stakeholders and/or EU citizens. The Commission states that several initiatives have been launched to streamline and prioritise the Public Health Programme activities, such as mapping of the Public Health Programme (2003-2008) and multi-annual planning. These will help to establish priorities for each year of new Health Programme, i.e. the second programme of Community action in the field of health (2008-2013, identify stakeholders' needs and define specific objectives. This will give the new Health Programme a sharper definition by reducing the number of activities and making priorities more clear-cut. In addition, a broader and innovative consultation process will be pursued in an effort to define the priorities of the annual work plans, address the real needs of EU citizens and increase stakeholders' awareness of the programme. Several groups of stakeholders will be consulted to identify what for them are the relevant areas of activity.

Management: the evaluation considered that efforts should be made to develop new funding methods in order to encourage more innovative proposals. The Commission states that a wider variety of financing mechanisms are offered in the second Health Programme (2008-2013). These include:

- co-financing an action intended to achieve a programme objective (up to 60% of project costs);
- co-financing the operational costs of a non-governmental organisation or a specialised network (up to 60% of eligible costs);
- joint financing a public body or non-governmental organisation by the Community and one or more Member States (up to 50% of costs);
- joint actions with other Community programmes.

As regards project results, these will be promoted through channels tailored to the different kinds of audience, and further attention will be paid to project sustainability. At the end of project implementation, an assessment should be made of the real output produced by the beneficiary. The aim is to check to what extent the final reports reflect expectations at the beginning of the project. Programme activities will be communicated more widely than in the past. For this purpose, a comprehensive strategy has been developed. New initiatives have been promoted and others which are already in place have been expanded, such as the use of e-newsletters and the web, Info Days, further development of the national focal points network, and new health-related publications. The Commission will also increase cooperation with the WHO and OECD through direct grant agreements.

Projects: it was recommended that the application procedure for submitting projects under the call for proposals be simplified, and that projects should monitor their progress against the programme priorities. The Commission notes that the application procedure for submitting projects has already been simplified for the 2007 Call for Proposals and will be further pursued under the second Health Programme (2008-2013). Furthermore, evaluation criteria in use for the call for proposals were revised in 2007. The award

criteria were revised with the aim of making the evaluation process more transparent and providing more guidance to applicants on expectations from projects. Beneficiaries will be invited to describe how their proposals will improve the health of European citizens, as measured by appropriate indicators, including the Healthy Life Years indicator, and how they will reduce health inequalities in and between EU Member States and regions.