Health care and care to the elderly: supporting national strategies for ensure a high level of social protection

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The committee adopted the own-initiative report drawn up by Karin JÖNS (PES, D) in response to the Commission report. MEPs welcomed the start of cooperation by the Member States in the field of health care and long-term care and endorsed the three main principles, namely, access for all regardless of income or wealth, high quality and financial sustainability. They called for the open method of coordination to be applied in this area and for the Member States to lay down, by early 2006, common objectives and indicators which take more account of the importance of prevention and health promotion, which, they said, should be accorded the same attention as treatment and rehabilitation. In this connection, they stressed that, to achieve financial sustainability, Member States should fully explore the enormous cost-cutting potential of preventive strategies rather than simply making cutbacks in their healthcare services. They also pointed to the risk that achieving financial sustainability would be overvalued with regard to the costs of accessibility and quality. The report called for a European Charter of Patients' Rights which would guarantee inter alia the right to comprehensible, factual and appropriate information and advice from the doctor, the right to documentation on treatment and the right for patients to inspect it, and the right to make a complaint. MEPs expressed concern about the growing shortage of well-trained doctors, medical and care staff and urged the Member States to make deliberate efforts to improve the quality of the work, make these professions more attractive and remove the present staffing bottlenecks. There was also a need to encourage the training and further training of volunteers, as well as those already qualified and working in this sector. The report called on the Member States, in the event of long waiting lists and when treatment cannot be provided on their national territory in good time, to cooperate so as to provide jointly a high level of health and social care for all EU citizens. The Commission was urged to carry out a general review of patient mobility, i.e. patients crossing from one Member State to another to seek treatment, and examine how to strengthen the legal certainty of patients as to their rights in this area. MEPs also warned against a purely individual approach to patient mobility and the provision of health care across borders such as was now being adopted in the Commission's proposals for an internal market in services. They called on the Commission to make broader and more balanced proposals in order to protect national health systems against an erosion of the social character of health care systems and the solidarity on which they are based. Lastly, the report expressed concern at the substantial differences existing between the present and future Member States in terms of the health of their populations and access to health care and long-term care. It called for the new Member States to be supported in their efforts to improve this sector with the aid of the health action programme and other appropriate instruments.