Public health: Community action programme 1997-2001 on health monitoring

1995/0238(COD) - 16/10/1995 - Legislative proposal

1) OBJECTIVE To establish statistical tools relating to disease prevention and health protection so as to facilitate the planning, monitoring and assessment of Community programmes and activities. 2) CONTENTS 1. Particularly since the entry into force of the Treaty on European Union, the Community has been called upon to play an increasingly important role in the field of public health. 2. For its contribution to have maximum effect in terms of quality, the Community must have at its disposal quantitative measurement criteria and a system for assessing the development of health and health determinants and the impact on health of policies, programmes and measures implemented at both national and Community level. 3. The health monitoring system envisaged should be based on indicators already available at European level (WHO, OECD, etc.) and avoid duplication of work. 4. Annex A shows the different domains selected by the Commission for which indicators should be established. 5. Community indicators would be of two types: * core indicators essential for the purposes of Community measures in the field of public health; * background indicators relating to other Community policies indirectly linked with public health. These indicators will have to be assessed and updated constantly in order to ensure that they meet the current needs of the Community and Member States. 6. A precise methodology needs to be followed to ensure that the data from the Member States are comparable, i.e. the same definitions and a similar quality level must be used. There are three possible solutions: * creation of data dictionaries to establish equivalence between data defined in different ways; * conversion of national data to Community network definitions according to a common set of rules; * harmonisation of the definition and methods of collecting national health data. 7. Data needed for the core indicators should be collected on a regular basis (in most cases annually) and processed and transmitted rapidly in order to ensure availability of the most recent data possible. 8. The Community health monitoring system should take the form of a network of distributed databases. Apart from its technical advantages (flexible, less costly compared with traditional collection methods, no duplication, minimal administrative structure, compatibility in terms of multilingualism), this solution makes it possible to work as close as possible to information sources. This network could be based on the infrastructure currently being developed under the IDA programme. 9. For maximum usefulness, the information collected will have to be the subject of a variety of regular and coordinated analysis operations. 10. The Commission believes that the development of a Community health monitoring system covering three strands of action (the establishing of Community health indicators, the development of a Community-wide network for data collection and dissemination, and the creation of adequate analysis capacity) should be initiated by means of a five-year Community action programme. 11. The programme will be assessed in two reports, including a mid-term report. Source : European Commission - Info92 - 02/96