Basic information

1998/2086(COS) COS - Procedure on a strategy paper (historic)	Procedure completed
Future of public health policy **Subject** 4.20 Public health	

Key players

European Parliament

Committee responsible	Rapporteur	Appointed
ENVI Environment, Public Health and Consumer Protection	NEEDLE Clive John (PSE)	02/06/1998

Council of the European Union

Council configuration	Meetings	Date
Environment	2086	1998-04-30
Culture	2139	1998-11-26
Health	2131	1998-11-12

Key events

Date	Event	Reference	Summary
15/04/1998	Non-legislative basic document published	COM(1998)0230	Summary
30/04/1998	Debate in Council		
02/07/1998	Committee referral announced in Parliament		
12/11/1998	Debate in Council		
26/11/1998	Resolution/conclusions adopted by Council		
18/02/1999	Vote in committee		Summary
18/02/1999	Committee report tabled for plenary	A4-0082/1999	
09/03/1999	Debate in Parliament		
10/03/1999	End of procedure in Parliament		
21/06/1999	Final act published in Official Journal		

Technical information

Procedure reference	1998/2086(COS)

Procedure type	COS - Procedure on a strategy paper (historic)
Procedure subtype	Commission strategy paper
Legal basis	Rules of Procedure EP 148
Stage reached in procedure	Procedure completed
Committee dossier	ENVI/4/10014

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Committee report tabled for plenary, single reading		A4-0082/1999 OJ C 175 21.06.1999, p. 0004	18/02/1999	
Text adopted by Parliament, single reading		T4-0170/1999 OJ C 175 21.06.1999, p. 0099-0135	10/03/1999	Summary

European Commission

Document type	Reference	Date	Summary
Non-legislative basic document	COM(1998)0230	15/04/1998	Summary

Other institutions and bodies

Institution/body	Document type	Reference	Date	Summary
EESC	Economic and Social Committee: opinion, report	CES1120/1998 OJ C 407 28.12.1998, p. 0196	09/09/1998	
CofR	Committee of the Regions: opinion	CDR0156/1998 OJ C 051 22.02.1999, p. 0053	18/11/1998	

Future of public health policy

1998/2086(COS) - 15/04/1998 - Non-legislative basic document

PURPOSE: to present a possible plan for the development of public health policy in the European Community. CONTENT: This communication first considers a number of developments in health status and health systems in the Community, as well as principles and pre-requisites of public health action at Community level. These considerations lead to the conclusion that, although the principles and underlying philosophy of the 1993 communication on the framework for action in the field of public health remain valid, priorities, structures and methods are all in need of fundamental review and reformulation. The communication outlines a possible new Community public health policy, based upon three strands of action: 1) improving information for the development of public health: building on the current programme on health monitoring, the Commission proposes the development of a structured and comprehensive Community system for collecting, analysing and disseminating information on health status (trends and patterns of demography, morbidity and mortality, and of major health determinants, inequalities in health, socio-economic factors) and health systems (the impact of trends in health status on health systems, developments in health systems and their costs and financing, the role of the health sector as a productive factor in society and priorities in health). The aim of this system would be to promote and bring together activities in the Member States in these fields and pool expertise via appropriate networks. The outputs of the system would be linked to the development and implementation of Member States' policy; 2) reacting rapidly to threats to health: this involves the creation of coordination mechanisms at Community level for the surveillance, early warning of and rapid reaction to outbreaks of certain diseases. These mechanisms could help Member States to control outbreaks and deal appropriately with sanitary health hazards. Actions to be undertaken would include surveillance, swift analysis and investigation of specific problems or issues, including site visits, if appropriate. The subject matter of this strand of action could be extended beyond communicable and rare diseases to cover health requirements on food safety issues, phytosanitary and veterinary matters, zoonoses, blood and organ safety, environmental

hazards, risks to health from chemical substances and poisoning and adverse effects of medicinal products and devices; 3) tackling health determinants through health promotion and disease prevention: this will give consideration to the following: covering conditions which are increasingly affecting the ageing population, notably Alzheimer's and other mental disorders, increasing work on nutrition and obesity and cardiovascular diseases, reducing drugs-related health damage, focussing more on the health of specific population groups, assuring access to health information and health advice for Community citizens moving to other Member States and adapting to the specific problems of accession countries. The Commission intends to come forward with concrete proposals on the new policy once the Treaty of Amsterdam has been ratified. There are two possible ways to formalise the newpolicy: - either to adopt a single "framework instrument" providing for the subsequent adoption of separate ones for each strand. This would involve the creation of a single financial envelope and two layers of decision-making and administrative structures; - or to adopt a separate legal instrument for each strand with no overall instrument which would need an implicit consensus on the funds to be allocated to each. The Commission considers that there should be scope for the introduction of binding provisions governing, for example, the collection of data, once the networks and other structures envisaged are fully in place. Under the new Article 152 of the Amsterdam Treaty, the Community could also adopt binding instruments on harmonisation. In the meantime, the Commission hopes that the ideas presented in this Communication will stimulate a broad debate.

Future of public health policy

1998/2086(COS) - 10/03/1999 - Text adopted by Parliament, single reading

The Parliament adopted its resolution on the Commission's communication which was drafted by Mr. Clive NEEDLE (PES, UK). It calls for a positive interpretation by Council and Commission of the provisions of the Treaty of Amsterdam pertaining to public health, particularly Art. 152, bearing in mind the status of health protection in the context of the EC Treaty and the principle of subsidiarity, which provides a good basis for sustainable development of the Community role as a partner in the protection and improvement of the health of EU citizens while recognising the responsibilities of Member States for the organisation and delivery of health services and medical care. It urges the Commission to publish detailed proposals as a matter of urgency once the Treaty is ratified, which set out a realistic number of measures achievable within the five year timescale of the framework within the three following strands: (a) improving information for the development of public health; (b) reacting rapidly to threats to health; (c) tackling health determinants through health promotion and disease prevention. It calls on the Commission to do further work on the impact of food on health, as this is one of the main factors affecting health in the EU, and to participate in efforts by Member States and others to improve public information policy in this area. It calls for the core of the EU's efforts in public health to be the integration of health across all other policy areas and the integration of health impact assessment into health-determining areas of EU policy, with particular priority given to research, agriculture and food, transport, and socio-economic policies. It also calls for a prime objective of Community action to be focused on fostering equality in health across the EU, to strengthen the regional approach regarding health, to seek greater coherence with socio-economic policies and programmes and urges the identification and introduction of targeted Health Priority Areas on evidence-based criteria in clear co-operation with Member States, regional authorities and NGOs and operating within the framework provisions. It calls for the Commission and Council to maximize freedom of information regarding best practice, epidemiology, services, networks, risks and opportunities, as well as to maximise public, professional and legislative awareness of the work and value-added of the Community role in health protection and improvement. It calls on the Commission to establish a framework for a dialogue between all stakeholders on how to manage jointly the fast pace of change. It calls for greater co-operation and communication between the EU institutions and international health-related organisations. Anticipating the publication of a Commission communication relating to health and enlargement, it expresses concern that the health status in most candidate countries is lower than EU Member States and that some threats to health are increasing.