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HOPE response to the European Commission's consultation “Health in Europe: A Strategic Approach - Discussion Document for a Health Strategy”

HOPE, the European Hospital and Healthcare Federation, welcomes the Commission's initiative to consult stakeholders on the discussion document for a European Health Strategy “*Health in Europe: a strategic approach*”. This document reflects the debate initiated by the reflection process “*Enabling good health for all*”, launched by Commissioner Byrne.

HOPE has already produced elements within several EU related spheres, such as the high-level process, but also studies and projects on the field. The following elements synthesize the results attained through this work and give brief additional comments.

Enabling Good Health for All was a message well received in hospitals and healthcare services. Through different networks at the European, national, regional and local levels, hospitals and healthcare services, aware of the fact that curative care is not the only way to health, are engaged in activities crossing boundaries. Some of those are well known: Health Promoting Hospitals, Smoke free hospitals, Migrant Friendly Hospitals; some others are less known but as efficient in promoting good health. Conclusions of those activities clearly show that rather than being opposed, treating ill health and promoting good health should be viewed as complementary.

This new step of a European Strategy will be important in defining clear objectives at the European level within the framework of the European treaties.

Putting Health at the Centre of EU Policy Making was a key concept in previous consultation. It is of particular importance to keep this perspective, as well as giving more coherence and at least transparency in all EU actions relating directly or not to health, which is far from being the case today.

How to prioritise between and within all these areas to focus on those which add real value at the EU level?

It is indeed necessary to make priorities. Outcome indicators and impact studies on potential outcomes could be used as it has been certainly done to differentiate *Core Issues* from *Health in all Policies* and *Global issues*. This structure in three circles is however taking the risk of giving less priority to global issues when they are in most cases those with the most EU-added value. Indispensable Action at EU is certainly *Health in all Policies*.



At the same time, priorities cannot also be separated from resources. Human and financial ability to implement the strategy have to be taken into account in making priorities.

What should we realistically aim to achieve in practice in these areas of work? Having clear, understandable, transparent and accepted indicators of outcomes (achievements) for the different actions is in itself a major work. Health Impact Assessment and the on-going work on health system impact assessment should aim now at being understandable and concrete for all, citizens and professional. A solid EU-wide knowledge base is needed; HOPE has been an advocate of this for years and has some experiences of its own. However, we are first lacking comparable definitions. The use of concept such as centre of reference is a good example of the risk to use it before defining it.

To ensure that “progress is made and that objectives are met” it is of course necessary to identify indicators and milestones. This is an elementary component of any strategy. And the question should not be what measures or indicators could show real short-term change, within the early years of the Strategy but how to be sure that the indicators are realistic and attainable. There is nothing worse than dissatisfaction.

How do we ensure that the Strategy adds value to actions at Member State level? Again, this should be in the definition of the goals and indicators of each action. The Open Method of Coordination seems an adequate way for most of the *Core Issues* listed.

How could methods for involving stakeholders be improved? How can we create innovative partnerships with stakeholders? The ongoing discussion on social services of general interest should be an opportunity to find ways of communication between different actors dealing with health and social determinants, between social and healthcare. There are mechanisms missing to reduce borders between sectors at EU level. Mechanisms should be built on the example of existing platforms: generalist like the European Health Policy Forum or specialised like the EU Platform for Mental Health.

HOPE along with other stakeholders is committed to be a partner in the implementation and the monitoring of the Health Strategy.