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<td>Author:</td>
<td>Catherine Hartmann</td>
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Meetings attended

1. **EPHA PCMs**
   June, July, September, October, November
   Regular policy and actions updates of what is happening for and in health sector at the European level.

2. **EPHA General Assembly and annual conference**
   3-4 September, Residence Palace
   I attended the GA where the standard subjects were presented: annual financial report, elections of Board, approval of new members, etc. This year, EPHA is celebrating its 20th anniversary, and on this occasion, held a big conference. The general theme was: “Brave New World: Inclusive Growth and Well-Being or Vested Interests and Lost Generations?”. Discussed revolved around health inequalities, investing in health, the impact of the crisis on health systems (positive and negative), the role of the EU to support public health, healthcare workforce shortages (poignant intervention from Romanian deputy minister of health) and the importance of disease prevention. Press release available [here](#).

3. **EPHA seminar of healthcare professionals**
   6 November, at EPHA
   **Subject: Action plan on health workforce**
   This meeting was an opportunity to meet with DG SANCO Katya Neubauer (Deputy Head of Unit, Healthcare systems) and other speakers and hear what the EU can and will do to address health workforce issues. All speakers explained that this subject is part of 3 directorate general portfolio: Health, Employment, Internal Market and that the EU has no legal competence in health workforce policy and the Union is limited to supporting national efforts through: exchange best practice and development of European networks, mapping issues and existing solutions, and improving European data on the health workforce.

   Main items discussed at the seminar were projects and programme implemented by the European Commission to address planning and forecasting, ethical recruitment & retention, skills mix, emerging health professions and other areas.

   In April 2012, the European Commission set up an Action Plan to work on 4 pillars:
   - Improve workforce planning
   - Anticipate skills needs
   - Recruitment and retention
   - International ethical recruitment

   **Improve workforce planning:**
   Three year EU joint action on workforce forecasting and planning creates a European platform of Member States and professional organisations that will undertake mapping education and training capacities of health professionals in cooperation with OECD.
Anticipate skill needs: looking at the specific case of nurses – but EFN director, who was in the room said that the nurses are not entirely happy with the project (there are no such things as “healthcare assistants” for instance).

Recruitment and retention: here, the exchange of best practices was highlighted, looking at successful stories from other countries.

I asked Katja Neubauer how the Commission was planning on following through the recommendations that will conclude the Action Plan, when the projects are completed: how it would make sure that Member States follow ethical guidelines when recruiting HC staff, since the EU does not have the competence to action on this level and freedom of establishment is the rule in the EU. She replied that at the end, of course the Member States were free to do what they wish in terms of organization of their health systems, and recruitment of staff, but that by establishing strong links with national health agencies/decision makers, the EC was hoping that they would take the right decisions. She highlighted that herself and colleagues spend the time travelling Europe to assist Member States is developing adequate health workforce recruitment/training/retention strategies. The work of DG SANCO in this field is very much tied to that of DG MARKT (internal market, freedom of movements, in charge of Directive 39/2005/EC on the automatic recognition of qualifications).

Before the meeting, there was some time for networking and I took this opportunity to explain what AEMH does to several people, including 2 DG SANCO representatives.

13 November, European Parliament

This meeting, organised by the European Institute for Health (EIH, a relatively new think tank) was about how to address long term care but all the subjects touched upon that I heard (I left before the end, as the electricity was not functioning properly in the room that day: no light and very little sound) were not something unknown, the challenges presented were: aging population, importance of chronic diseases, the need for change of health systems and for aging people to stay active, the European Innovation Partnership on Active and Healthy Aging, the role of technology to support patients – but no potential solutions, apart from the latter were presented- it was not a fruitful meeting.

5. European Antibiotic Awareness Day (EAAD)
15 November, Press Club, Brussels

All representatives of the key players in this field were present, both public authorities – DG SANCO, WHO Europe and ECDC – and stakeholders: the nurses, doctors, pharmacists, dentists, and public health representatives in general; all listened to progress made in the WHO European region in raising awareness about the appropriate use of antibiotics and in combating antibiotic resistance, created by over and inadequate use of antibiotics. The Commission briefly presented the overall result of a Eurobarometer published by the EC on the day of the event which reveals a decrease in antibiotic use in humans since 2009 and growing public awareness that antibiotics do not kill viruses. However, this positive news is overshadowed by data released in parallel by the European Centre for Disease Prevention and Control (ECDC) showing a marked increase in Europe of multi-drug resistant Gram-negative bacteria resistant to the carbapenems – last-line antibiotics used to treat healthcare associated infections. The Commission is therefore stepping up the fight against antimicrobial resistance (AMR) through the funding of 15 new research projects and harmonised rules on the collection of data on AMR linked to animals and food. The Commission will continue supporting awareness campaigns too, in the aim to highlight that it is everybody’s role to fight over and mis-use of antibiotics.
It was highlighted that there are very few new antibiotics developed, as this is a not a profitable sector for the pharmaceutical industry, and the antibiotic resistance a very important threat for the coming years.

Lastly, the lack of data was mentioned as a challenge too, in particular for eastern European countries, as no actions can be implemented without knowing the scale of the issue.

**Communications with EU health authorities**

In September, I shared with all key DG SANCO representatives, the 2 positions the AEMH adopted at its May general assembly meeting. See print screen below:

I am addressing some of AEMH’s points of view in my personal twitter account: @PH_AdvocateEU and addressing some of these tweets to Commission’s officials (who are on twitter). For instance, I have established a good dialogue with Sylvain Giraud, Head of Unit for Strategy and International, at DG SANCO “health system and products” unit.

I would like to set up a meeting with the Head of Unit, of DG SANCO healthcare systems department (D2, Nathalie Chaze, she is French) to introduce AEMH, a meeting that could be attended by AEMH President, or another Board member and myself. This could be a good opportunity to highlight the issues important to AEMH and put forward potential solutions, as presented by AEMH members.

**Miscellaneous**

I voted on behalf of AEMH on EPHA’s membership application and to approve 2014’s budget.

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