

EU Health Policy Platform

Working Methods

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WORKING METHODS

This nature of this document is to inform individuals on the provisional working methods for the pilot phase of the IT Health Policy Platform. As such, it might be revised and adapted according to the changing environment in the Platform. The European Commission reserves the right to update these working methods as deemed necessary and without prior notice.

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Pg. 01 Background

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Background

The mandate of the EU Health Policy Forum ended in December 2013¹. In the meantime, the Commission adopted a new approach for systematic large scale public consultations (including health stakeholders) for all Commission policy or regulatory initiatives. DG Health and Food Safety (SANTE) therefore reviewed the Forum concept with a view to better reflect the priorities of the Commission in its dialogue with the stakeholders.

The new format of the EU Health Policy Forum is conceived to increase the sharing of ideas and good practices between public health stakeholders in the EU.

The EU Health Policy Forum, therefore, evolved from a consultative body to a communication channel between the Commission and health stakeholders that will be named the **EU Health Policy Platform.**

¹ The EU Health Policy Forum evolves from a consultative group to a multilateral communication channel between EC and its health stakeholders, by creating a collaborative interactive platform. It is no longer focused on consultation as the European Commission has put in place an official procedure making large consultations with stakeholders compulsory. In turn, the EU Health Policy Platform focuses on creating a space for permanent dialogue on health issues amongst all possible health stakeholders and with the European Commission. With this new objective and the fact that there is no fixed membership any longer, the group ceases to exist as an expert group and loses its consultative feature, thus being deleted from the Registry of Expert Groups of the European Commission.

Objectives and Structure

Objectives

The EU Health Policy Platform aims to:

- Provide a framework for a dialogue between the Commission and stakeholders;
- Facilitate targeted discussions between the Commission services and stakeholders;
- Ensure transparency in the health policy dialogue;
- Contribute to building knowledge and expertise on public health issues;
- Support dissemination of information on DG SANTE projects (i.e. co-funded Health Programme projects, including Joint Actions);
- Identify, share and encourage replication of good practices related to health policy;
- Gather and circulate research outcomes and ease the availability of results and outcomes to interested stakeholders;
- Provide information on other policy areas related to health following the "Health in All Policies" approach.

Structure

EU Health Policy Platform operates through the following two axes:

- IT Platform to enable online discussion and collaboration;
- Face-to-face meetings to host targeted thematic discussions.

EU Health Policy IT Platform

Users

The IT Platform is a collaborative tool to ease the communication between the Commission services and health stakeholders. It is aimed to be inclusive and to reflect geographical and sectors' diversity of the participants. The working language is English. More languages may be considered at a later stage.

There are 3 kinds of users in the EU Health Policy Platform:

- The European Commission staff;
- Members of already established EU Expert and Stakeholder Groups of DG Health and Food Safety;
- Any health stakeholders meeting the EU Health Policy Platform criteria.
 They must:
 - 1. Represent an organisation with an operative email;
 - 2. Be a European, national, regional or local entity, registered legally in at least in one of the 28 EU Member States, Iceland or Norway or in any other country participating in the funding of the 3rd Health Programme;
 - 3. Be registered in the EU Transparency Registry and must directly and exclusively represent their own interests (meaning consultancies and law firms may not participate on behalf of clients);
 - 4. Respect the guiding principles with regard to transparency, present in the annex;
 - 5. Be one of the following entities:
 - Public health non-governmental organisations;
 - Organisations representing patients,;
 - Organisations representing health professionals;
 - Health service providers;
 - Health insurance bodies:

- Research organisations, universities and academic institutions;
- Business organisations or associations with a clear commitment to health promotion; protection or prevention of diseases in Europe.
- 6. Have a direct interest in health related fields or their main activity is related to public health.

Registration

To register on the EU Health Policy (Forum) IT Platform, users have to create an account in the European Commission Authentication System (ECAS). To create this account, please click here.

Please, be aware that only a personalised email address related to your organisation is authorised by the European Commission Authentication System (ECAS) for the purpose of registering an organisation in the EU Health Policy (Forum) IT Platform e.g.: firstname.lastname@organisation.xx or f.lastname@NGO_name.xx (or other possible combinations).

To ensure transparency, usernames on the EU Health Policy Platform are created automatically including name of the person and the organisation for which the user works. Multiple individuals from a particular organisation may take part in the IT Platform. This enables the organisation to be present in whichever networks they choose to join with various representatives.

Following the application, DG SANTE moderators verify compliance of the applicants according to the criteria, and grant access to the IT Platform.

Structure

The IT Platform consists of a public webpage and three sections:

- The public webpage, containing general information on the EU Health Policy Platform - allows the public at large to access information made available.
- 2. **The Agora network** is an open discussion area accessible to all stakeholders who registered in the IT Platform.

In this network, the moderator facilitates the sharing of the following content:

- Cross sectorial communication: information related to DG SANTE or stakeholders' initiatives that are public and relevant are disseminated on the Agora network and in the stakeholders and expert groups networks (and vice-versa);
- Promotion of open consultations: DG SANTE highlights consultations to seek stakeholders views on specific health issues and encourages them to give their input to the policy dialogue via the official channels for consultations;
- Gathering of information for reports: DG SANTE invites stakeholders to voice their views and other relevant information linked to the sharing of empirical data, studies carried out or best practices;
- Identification of emerging health issues: DG SANTE seeks stakeholders' opinions on emerging health issues or priorities;
- Stakeholders' participation in conferences: through the Agora network, information on public health events and conferences is promoted by and for all the stakeholders registered;
- Health in All Policies information: the Agora network provides the opportunity to gather information on other policy areas related to health that can be of interest for the public health community.
- 3. **Thematic Networks** are networks accessible to stakeholders to discuss thematic issues (e.g. children and youth health).

Thematic networks can take two different formats:

- An open thematic network to discuss specific issues of interest, open to all stakeholders;
- A restricted thematic network where only few stakeholders can participate according to the issue discussed.

Any Platform user can propose the establishment of a new thematic network. DG SANTE considers this request on the basis of a description of the topic to be discussed, which outlines the purpose and the expected outcomes.

The IT platform starts with a limited number of thematic networks (i.e. three networks). These networks are open for a limited amount of time (i.e. 3 months), with one stakeholder voluntarily taking the lead in the conversations of each thematic network ("the network leader"). For example, if there is a network on children and youth health, DG SANTE would expect an organisation, dealing primarily with the health of children and young people to lead the conversation. DG SANTE ultimately decides on the leading role of an organisation in a thematic network on the basis of the relevance of this organisation to the topic discussed. DG SANTE shares information that could be relevant for the conversation.

To avoid potential repetitive discussions, the leaders decide when it is time to wrap up the conversation and identify with the members of the network the conclusions that are reached. The leader must produce a short statement with the concluding views of the network on this issue by the end of its lifespan. To be considered final, the statement must be peer-reviewed by 5 users and endorsed by minimum 50% of users on the IT Platform. If the endorsement threshold is not reached, the thematic discussion may be re-opened and more time will be given to reach acceptable and satisfactory conclusions for the users of the IT Platform.

The document is posted on the public page of the EU Health Policy Platform. DG SANTE may help by disseminating its results on its social media accounts platforms (e.g. Twitter, Facebook) depending on the public interest with the aim of sharing knowledge. The document will always be independent from the views of the Commission.

4. EU Expert and Stakeholder Groups network(s) are networks only accessible for members of existing DG SANTE's EU Experts and Stakeholder groups. The networks aim to prepare meetings and ensure discussion continuity between meetings.

A pilot phase would run during the first 6 months of the project with the following already established groups:

- High Level Group on Nutrition and Physical Activity;
- EU Platform for action on Diet, Physical Activity and Health;
- European Alcohol and Health Forum;
- Committee on National Alcohol Policy and Action;
- Expert Group on Social Determinants of Health and Health Inequalities;
- Expert Group on Mental Health and Well-being;
- Expert Group on Cancer Control;
- HIV/AIDS Think Tank and;
- HIV/AIDS Civil Society Forum.

In the near future more networks are expected to join the IT Platform.

The responsible units in DG SANTE ensure the moderation of their EU Expert and Stakeholder Groups network(s). The network(s) facilitate(s) sharing of working documents and agenda drafting for face-to-face meetings. The relevant unit is also in charge of sharing the group's public information with the rest of the users of the IT platform (see above "cross-sectional communication").

Finally, this IT Platform is complemented with meetings to bring about more specific and targeted discussions. The IT Platform also ensures a sound preparation of the meetings and continuation of discussion in-between meetings of the EU Health Policy Platform.

Functionalities

The following actions are available for the users of the IT platform:

- Post news, updates or opinions on a health issues, with documents, pictures or links;
- Work collaboratively between stakeholders to produce joint statements;
- Start a discussions;,
- Create events;
- Create opinion polls;
- Upload or download documents to and from the library;
- Promote and share publications, documents or events;
- Report misbehaviour to the moderator.

Outcome and Dissemination

DG SANTE reports on the conclusions from the different discussions of the IT Platform annually, as well as monitors the activity and follows up on the produced.



EU Health Policy Platform Meetings

Frequency

DG SANTE organises face-to-face meetings to host targeted thematic discussions among users of the virtual Platform, including:

- Regular bi-annual meetings;
- Biennial EU Health Policy Conference.

Agenda

DG SANTE puts forward proposals for the agenda, taking into consideration the suggestions of Platform users. To that end, the users of the IT Platform may express their views on preferred topics and suggest other topics. To avoid duplication of work, the meetings should not address topics already touched upon by other stakeholder groups and preference is given to topics of a general or cross-cutting nature. DG SANTE establishes the final agenda.

Depending on the agenda, DG SANTE may offer co-ordination of a part of the meeting to identified participating stakeholders.

Participants

Due to logistical constrains, DG SANTE selects participants among users of the IT Platform who submit a request for participation in the meeting. This request consists of an online application. When evaluating the applications, DG SANTE takes into account the involvement of the user in the IT Platform, as well as their experience and commitments to the topic(s) of discussion, assessing their quality and relevance.

How does it work?

Stakeholders have to fill an online application which appears as a tab in the IT Platform before the meeting. Following the evaluation of the requests, selected participants are formally invited to the space dedicated for the preparation of the meeting.

Only participants to the meeting are able to write posts and make comments in the dedicated online space for the meeting. All IT Platform users are able to see which stakeholders attend the meetings.

Outcome and Dissemination

Face-to-face meetings are web-streamed. The web-link is available online to all registered users of the IT Platform.

After each meeting, a summary of the technical debate bringing the conclusions is prepared. Such summary document is shared on the Agora network of the EU Health Policy Platform, and also in the public webpage.

Depending on the interest for the general public, this document can also be shared on other DG SANTE websites and social media platforms. The document will always be completely independent from the views of the Commission. It is, finally, circulated to the relevant units in DG SANTE.

Guiding Principles with Regards to Transparency

Conflict of Interest

The organisation should democratically endorse its own rules applying to partnerships, sponsorships and scientific expertise. The rules shall also detail how conflicts of interest are handled. A statement setting out the rules shall be available under request. It should comply with the objectives and mission of the organisation and shall comprise transparency criteria.

Objectives/Mission

The organisation should define its missions and objectives clearly and should make them publicly available. These missions and objectives shall then be democratically endorsed by the body representing the membership of the organisation (e.g. General Assembly).

Legal personality

The organisation should be a legal registered body or an existing "association de fait" in one of the Member States of the European Union (EU), Iceland or Norway or in any other country participating in the funding of the 3rd Health Programme. This provision needs to take into account the statutory diversity of organisations, in particular those of umbrella networks.

The documents establishing the legal personality should outline in a precise manner the objectives, criteria for membership and organisational structure, and should be made publicly available.

Membership

If applicable, the full list of members should be accurate, publicly available and updated regularly.

Governance

The organisation should have a board or similar body representing its membership. The role of this body should be clearly defined and endorsed by the General Assembly. Names and activities of its members should be made publicly available. Their relationship with public or private stakeholders must also be clearly stated.

In the case of "association de fait", similar democratic structures and processes must be demonstrated.

Accountability and consultation modalities

Statements and opinions of the organisation should reflect the views and opinions of its members. Democratic, clear, regular and transparent consultation procedures with members should be in place and defined by internal rules endorsed democratically by the General Assembly or the members themselves.

These consultation procedures should ensure that an effective dialogue takes place between the membership, executive governing bodies and secretariat, and should ensure that the membership supports the views brought forward by the organisation.

Financial Information

Information about finances, sources, and accounts should be made public for whoever wants to consult it.

Accounts – The organisation should publish its annual account at least six months after the review by the General Assembly.

Sources of funding - The organisation should disclose its sources of both private and public funding by providing the name of the public and private funders, as well as the purpose of the funding.

Financial contribution in terms of sums received and percentage of the organisation budget shall also be precised. However, very small sums (e.g. 0.01% of the total organisation's revenue) do not need to be detailed.

Activities

The organisation should publish an annual report on the activities undertaken, as well as the general lines of activities. As a general rule, information on the activities of the organisation should be publicly available, accurate and updated on a regular basis. This information should specify the main institutional targets of the activities and any relationships with public and private partners.

Evaluation and Organisational Support

Evaluation

The functioning of the new working methods of the EU Health Policy Platform is evaluated first after the pilot phase. At the end of its second year, the IT Platform is also evaluated to see if the objectives were met and to assess the interest of the public health stakeholders and the relevance of the concept for the public health community.

Organisational Support

DG SANTE provides the secretariat of the EU Health Policy Platform. It coordinates the Commission's input and participation in the Platform and facilities the communication within the Commission and disseminates the information internally. These activities are supported by a specific allocation of funds under the 3rd Health Programme.

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